

PGME 2020-2021 Annual Report



**UNIVERSITY OF CALGARY
CUMMING SCHOOL OF MEDICINE
POSTGRADUATE MEDICAL EDUCATION**

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Postgraduate Medical Education Mission Statement

Postgraduate Medical Education (PGME) at the Cumming School of Medicine (CSM) strives to deliver an outstanding clinical experience that prepares graduating physicians for independent practice. Our mission is to offer training in a safe, inclusive environment that promotes patient-centered care and is socially accountable to the needs of individuals and health care systems both locally and nationally. This mission is advanced by a community that supports excellence in health care research, education, and innovation.

Highlights and New Initiatives

- Mock Institutional Review held on November 12th and 13th, 2020
- Mandated mid-cycle internal reviews were completed by December 2020
- Continuation of the resident exit survey
- Implementation of a PGY 1 resident feedback survey
- Implementation of a PGY 3 resident feedback survey
- Implementation of a Fellowship feedback survey
- Created PGME and program promotional videos
- Created a PGME YouTube channel
- Successful completion of 45 Program Director 360 evaluation exercises
- New Policies/Process/Procedures/Committees:
 - Roles and responsibilities document of resident ombudsperson
 - New or revised policies and operating standards approved for:
 - Role of Learners During Large Scale Public Health Emergencies
 - Appropriate Use of Social Media
 - Medical Learner Accommodations
 - Fatigue Risk Management
 - Physician Wellness
 - Safe Learning Environment
 - Faculty Assessment
 - Resident Transfer Policy
 - Policy on Leaves of Absence
 - Guidelines for Learner Involvement in Informed Consent
 - Establishment of PGME Policy Committee
 - Establishment of the PGME Learning Site Committee
 - Completion of formal PGME Governance Review
 - Establishment of Ad Hoc Committee on Medical Learner Role in Informed Consent
 - Learner Academic Support and Assessment committee
 - Anti-Racism and Anti-Discrimination Taskforce
 - Process for after hour's emergencies clarified

Overview of PGME

The mission of Postgraduate Medical Education (PGME) at the Cumming School of Medicine (CSM) is to deliver outstanding clinical training that prepares graduating physicians to provide excellent health care to Albertans.

Each program offers unique, discipline-specific educational opportunities to support the development of competencies necessary for independent practice. Achievement of these competencies is also mandated to satisfy certification requirements of the Royal College of Physicians & Surgeons of Canada (RCPSC) and the College of Family Physicians of Canada (CFPC).

The PGME office oversees 65 accredited residency training programs which take place in a variety of clinical and academic settings in Calgary and in distributed sites throughout the province. Programs range from two to eight years in length, and each has independent, defined curricula established by the relevant College.

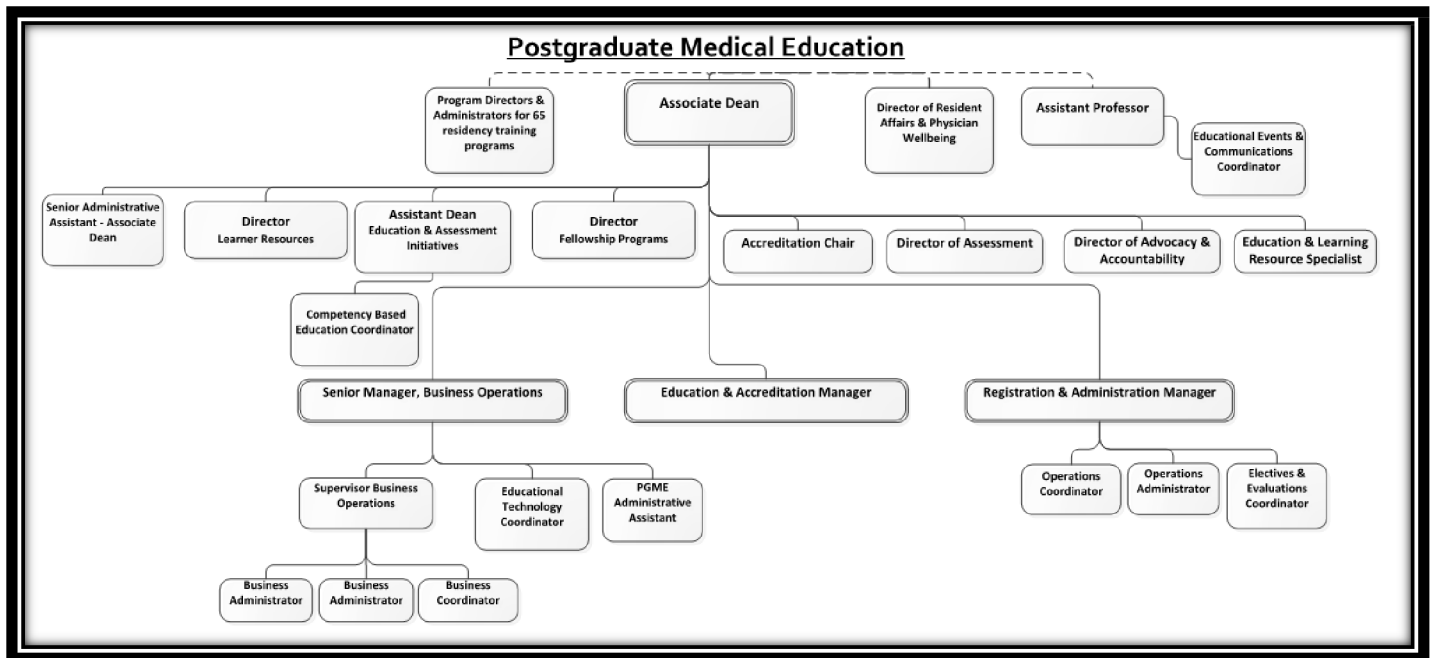
For a full list of our programs, please visit: <https://cumming.ucalgary.ca/pgme/contacts/residency-program-directory>

PGME Office – Organizational Chart

The PGME Office is organized into four functional areas:

- Accreditation
- Administration and Registration
- Business Operations
- Education

These four functional areas represent the mandated and delegated authorities provided to it by the CSM and the accrediting Colleges.



Committees

The PGME Committee provides effective governance for the development and review of all aspects of residency education at the CSM. In consultation with stakeholders, substantial changes were made to the committee Terms of Reference over the period of the grant.

The committee includes 30 permanent voting members and 13 rotating voting members. Non-voting members include an Undergraduate Medical Education (UME) Assistant Dean, included to facilitate decision-making around shared issues at the UME and PGME level.

Representation also includes the RCPSC, Alberta Health Services (AHS), and Professional Association of Resident Physicians of Alberta (PARA) continues unchanged.

The committee has the following subcommittees:

Subcommittees – Standing	Subcommittees – Ad Hoc	Advisory Committee
➤ PGME Accommodations Committee	➤ PGME Learner Role in Obtaining Informed Consent Committee	➤ PGME Strategic Advisory Committee (SAC)
➤ PGME Accreditation Committee		
➤ PGME Allocations Committee		
➤ PGME Appeals Committee		
➤ PGME Committee for Fellowship Program Directors		
➤ CBME Implementation and Continuous Improvement Committee		
➤ PGME Learner Academic Support and Assessment Committee		
➤ PGME Policy Committee		
➤ PGME Learning Site Committee		

Resident Education Overview

Alberta Health funding enables PGME to provide financial support for a variety of professional development and education resources and activities completed by residents. These initiatives substantially enhance the quality of the postgraduate learning experience. This support is not limited to, but includes:

- Funding for conferences
- Special courses
- Educational events
- Visiting speakers

U of C PGME residents train and provide essential health care services at five acute-care hospitals in Calgary:

- Calgary Foothills Hospital
- Alberta Children’s Hospital
- Rockyview General Hospital
- Peter Lougheed Centre
- South Health Campus

They are also assigned to train in community clinics, Alberta Provincial Laboratories, and in communities such as:

- Medicine Hat
- Lethbridge
- Red Deer

Distributed learning takes place in a variety of non-urban settings such as:

- Banff
- Bassano
- Bellevue
- Bow Island
- Brooks
- Camrose
- Canmore
- Cardston
- Claresholm
- Drumheller
- Fort McMurray
- Grande Prairie
- High River
- Longview
- Olds
- Okotoks
- Pincher Creek
- Ponoka
- Raymond
- Stettler
- Strathmore
- Sundre
- Taber
- Three Hills
- Whitehorse
- Yellowknife

Programs and Number of Residents in Each Program and PGY Level

Program Name:	Total # residents in program	PGY 1	PGY 2	PGY 3	PGY 4	PGY 5	PGY 6	PGY 7	PGY 8
Anatomical Pathology	20	4	4	3	4	5	-	-	-
Anesthesiology	25	5	6	5	5	4	-	-	-
Pain Medicine	1	-	-	-	-	1	-	-	-
Cardiac Surgery	6	1	2	3	1	-	1	-	-
Clinician Investigator Program	13	-	-	1	3	8	-	1	-
Dermatology	15	3	3	3	3	3	-	-	-
Diagnostic Radiology	28	6	6	4	5	7	-	-	-
Neuroradiology	1	-	-	-	-	-	-	1	-
Emergency Medicine	18	4	4	4	3	3	-	-	-
Clinical Pharmacology & Toxicology	2	-	-	-	-	1	1	-	-
Family Medicine – Calgary Program	169	78	91	-	-	-	-	-	-
Family Medicine – Rural – Medicine Hat	15	7	8	-	-	-	-	-	-
Family Medicine – Rural – Lethbridge	16	7	9	-	-	-	-	-	-
Family – Enhanced Skills:									
Family – Addiction Medicine	0	-	-	-	-	-	-	-	-
FM – Anesthesia	2	-	-	2	-	-	-	-	-
FM – Care of the Elderly	1	-	-	1	-	-	-	-	-
FM – Emergency Medicine	7	-	-	7	-	-	-	-	-
FM – Health Equity	0	-	-	-	-	-	-	-	-
FM – Maternal Newborn Care	1	-	-	1	-	-	-	-	-
FM – Palliative Care	2	-	-	2	-	-	-	-	-
FM – Sport & Exercise Medicine	1	-	-	1	-	-	-	-	-
General Pathology	9	-	3	2	2	2	-	-	-
General Surgery – Adult	28	4	5	6	5	8	-	-	-
Colorectal Surgery	2	-	-	-	-	-	1	1	-
Pediatric Surgery	3	-	-	-	-	-	1	2	-
General Surgical Oncology	4	-	-	-	-	-	1	3	-
Thoracic Surgery	1	-	-	-	-	-	1	-	-
Vascular Surgery	4	1	1	-	1	1	-	-	-

Program Name:	Total # of residents in program	PGY 1	PGY 2	PGY 3`	PGY 4	PGY 5	PGY 6	PGY 7	PGY 8
Internal Medicine	112	37	34	38	3	-	-	-	-
Cardiology – Adult	14	-	-	-	5	4	5	-	-
Critical Care Medicine - Adult	8	-	-	-	2	2	2	1	1
Endocrinology & Metabolism – Adult	5	-	-	-	1	4	-	-	-
Gastroenterology – Adult	5	-	-	-	3	2	-	-	-
General Internal Medicine	14	-	-	-	6	8	-	-	-
Geriatric Medicine	6	-	-	-	2	4	-	-	-
Hematology	4	-	-	-	2	2	-	-	-
Infectious Diseases – Adult	5	-	-	-	3	2	-	-	-
Medical Oncology	5	-	-	-	2	3	-	-	-
Nephrology – Adult	3	-	-	-	2	1	-	-	-
Palliative Medicine	2	-	-	-	1	1	-	-	-
Respirology – Adult	6	-	-	-	3	3	-	-	-
Rheumatology – Adult	6	-	-	-	3	3	-	-	-
Medical Genetics & Genomics	6	2	1	1	2	-	-	-	-
Medical Microbiology	3	1	-	1	-	-	1	-	-
Neurology - Adult	19	4	4	4	3	4	-	-	-
Neurology – Pediatric	6	1	2	2	-	1	-	-	-
Neuropathology	4	1	-	3	-	-	-	-	-
Neurosurgery	14	2	3	1	2	4	2	-	-
Obstetrics & Gynecology	31	6	6	7	7	5	-	-	-
Gynecology Oncology	9	-	-	-	-	-	6	3	-
Maternal-Fetal Medicine	3	-	-	-	-	-	-	3	-
Ophthalmology	10	2	2	2	2	2	-	-	-
Orthopaedic Surgery	20	4	5	5	2	4	-	-	-
Otolaryngology	10	2	2	1	3	1	-	-	-
Pediatrics	46	13	12	12	9	-	-	-	-
Developmental Pediatrics	3	-	-	-	1	1	1	-	-
Neonatal/Perinatal Medicine	4	-	-	-	-	4	-	-	-
Pediatric Emergency Medicine	7	-	-	-	3	2	2	-	-

Program Name:	Total # of residents in program	PGY 1	PGY 2	PGY 3	PGY 4	PGY 5	PGY 6	PGY 7	PGY 8
Endocrinology & Metabolism – Pediatric	1	-	-	-	1	-	-	-	-
Gastroenterology – Pediatric	4	-	-	-	-	3	1	-	-
Pediatric Hematology/Oncology	3	-	-	-	-	-	3	-	-
Infectious Diseases – Pediatrics	1	-	-	-	-	1	-	-	-
Nephrology – Pediatric	1	-	-	-	-	1	-	-	-
Respirology – Pediatric	0	-	-	-	-	-	-	-	-
Physical Medicine & Rehabilitation	10	2	2	2	2	2	-	-	-
Plastic Surgery	11	3	2	1	3	2	-	-	-
Psychiatry	41	8	8	8	7	10	-	-	-
Child & Adolescent Psychiatry	4	-	-	-	-	2	2	-	-
Forensic Psychiatry	0	-	-	-	-	-	-	-	-
Geriatric Psychiatry	1	-	-	-	-	1	-	-	-
Public Health & Preventive Medicine	8	2	1	-	1	4	-	-	-
Public Health & Preventive Medicine conjoint with Family Medicine	5	1	1	1	2	-	-	-	-
Radiation Oncology	5	2	-	2	-	1	-	-	-
PGY 1 Program RGH	0	-	-	-	-	-	-	-	-
Totals:	879	213	227	135	120	137	31	15	1

Fellowship Programs and Number of Fellows in Fellowship Programs

Program Name:	Total number of fellows in program:		
Anatomical Pathology	4	Obstetrics and Gynecology	4
Anesthesiology	5	Ophthalmology	10
Cardiology	11	Orthopedic Surgery	18
Diagnostic Radiology	12	Otolaryngology – Head and Neck Surgery	1
Endocrinology and Metabolism	1	Pediatric Hematology Oncology	3
Gastroenterology	8	Pediatric Infectious Diseases	1
General Surgery	7	Pediatric Nephrology	3
General Surgical Oncology	1	Pediatric Neurology	2
Gynecologic Oncology	5	Pediatric Respiriology	2
Hematology	2	Pediatrics	3
Medical Genetics	4	Plastic Surgery	6
Medical Oncology	12	Psychiatry	2
Neonatal/Perinatal Medicine	13	Radiation Oncology	3
Nephrology	1	Respirology	6
Neurology	18	Urology	5
Neuroradiology	4	Vascular Surgery	1
Neurosurgery	7	Total:	186

Training Physicians to Meet the Health Needs of Albertans

The impact of the delay to the Undergraduate Medical Education Clerkship program due to the pandemic resulted in revised timelines for the 2021 CaRMS PGY1 match. To avoid unnecessary travel across the country, all interviews for the CaRMS matches were moved to a virtual format.

The U of C was very successful in the first iteration of the CaRMS match for the upcoming academic year 2021-22.

In the first iteration, PGME offered 181 entry-level positions for CMG of which 15 remained unfilled going into the second iteration:

- Twelve in Family Medicine
- Two in General Pathology
- One in Vascular Surgery

The percentage of unmatched medical school graduates across the country after the first iteration is 5.8%. Ten applicants from the CSM undergraduate medical program were unmatched after the first iteration of the PGY1 match.

The second iteration of the CaRMS match took place May 20th and all 15 remaining positions were filled. These outcomes compare very favorably with the results for many centres across Canada.

PGME offered 17 entry-level positions for AIMG trainees of which all 17 were filled in the first iteration.

Physician Retention in Alberta

The percentage of CMG physicians who completed PGME training two years ago (June 2019) and continue to be licensed with the CPSA in Alberta is 55.6%. The percentage for AIMG physicians is slightly higher at 57.1%.

The breakdown of these percentages is depicted in the following table:

	RCPSC Programs	Family Medicine Programs	All Programs
CMG	48.4 %	67.7%	55.6 %
AIMG	58.3 %	90.9%	57.1 %

Accreditation

As part of the *General Accreditation Standards for Institutions*, PGME is required to conduct mid-cycle internal reviews for its 65 residency training programs and any fellowship program which has been recognized by RCPSC as an Area of Focused Competence (AFC).

There are 3 major components:

1. Each faculty member must review extensive program documentation.
2. Attend on the review day to meet with program leadership and learners.
3. Participate in development of the review report which is drafted by the senior reviewer.

Process:

- The internal review report identifies Areas for Improvement (AFIs) and any Leading Practice Innovations (LPIs) that are unique to the program. The report is submitted to the PGME Accreditation Committee for discussion prior to release to the program.
- Each report is accompanied by a program specific letter from the Associate Dean to summarize findings and direct the program to resources that may be helpful in addressing AFIs.
- In many instances this is followed by an in-person meeting of the Associate Dean and program leadership to formulate a detailed strategy to ensure compliance with accreditation standards and enhance the educational experience for learners.

The mandated mid-cycle internal reviews began in March 2019 and were complete as of December 2020. Due to the pandemic, internal reviews were suspended from March 19, 2020 to May 21, 2020. Internal reviews resumed on May 22, 2020, but in a virtual format, taking place via video conferencing. New documentation was developed on how to successfully execute internal reviews in the new virtual world. As of December 2020, all mandated mid-cycle internal reviews have been completed.

Competence by Design (CBD)

CBD is the RCPSC version of competency-based medical education. This nationally driven restructuring of medical education focuses on an outcomes-based approach to residency training. CBD is a multi-year initiative, represents a major shift in the delivery of medical education in Canada and applies to all RCPSC residency training specialty and subspecialty programs. This new methodology is designed to ensure physicians acquire the necessary skills needed to meet evolving patient needs.

The transition to CBD requires extensive development of faculty leadership roles to implement new assessment mechanisms, curriculum updates and communication strategies. The University of Calgary is in year four of this significant initiative, which will continue to be introduced over the next several years. Initially there were seven cohorts, representing all 63 RCPSC programs at the University of Calgary, scheduled to transition to CBD. The number of cohorts has grown to eight as some programs experience delays. The RCPSC expects that all programs will have transitioned to CBD by 2024.

The CBD funding made available through AH has assisted programs in cohorts one through six with the transition process. **Funding has been used for:**

- Leadership support
- Academic advising
- Courses to enhance readiness for CBD
- Development and implementation of new assessment strategies
- Curriculum mapping
- Additional faculty development

The impact of the COVID-19 pandemic on programs that have already implemented CBD has been substantial. **A list of current challenges is summarized below:**

- Simulation sessions to target the acquisition of foundational skills or Entrustable Professional Activities (EPA) that are hard to obtain in a clinical environment have been cancelled.
- Clinics have been reduced making it difficult to achieve EPA observations.
- Decline in resident EPA observations impacts progression of training requiring rescheduling to a later stage of residency.
- Redeployment of residents to home rotation and subspecialty residents returning to specialty programs.
- Redeployment of residents to the ICU to care for increased patient volumes.
- Learning experiences being held virtually (academic half days, patient interviews, boot camps, etc.).
- Competence committees meeting virtually

Transitioned and Transition Programs

CBD EFFECTIVE JULY 1, 2020	4TH YEAR IN CBD	3RD YEAR IN CBD	2ND YEAR IN CBD	SET TO IMPLEMENT CBD EFFECTIVE JULY 1, 2021
GENERAL SURGERY	Anesthesiology	Emergency Medicine	Anatomical Pathology	Cardiology
NEUROLOGY	Otolaryngology	Nephrology Adult	Cardiac Surgery	Child and Adolescent Psychiatry
ORTHOPEDIC SURGERY		Nephrology Pediatric	Critical Care Medicine	Clinical Pharmacology and Toxicology
PEDIATRIC NEUROLOGY		Medical Oncology	Gastroenterology	Forensic Psychiatry
PHYSICAL MEDICINE AND REHABILITATION		Surgical Foundations	General Internal Medicine	Geriatric Psychiatry
PLASTIC SURGERY			General Pathology	Neonatal/Perinatal Medicine
PSYCHIATRY			Geriatric Medicine	Pediatrics
			Internal Medicine	Pediatric Hematology/Oncology
			Neurosurgery	Pediatric Respiriology
			Obstetrics and Gynecology	Pediatric Surgery
			Pediatric Gastroenterology	Respirology
			Radiation Oncology	Vascular Surgery
			Rheumatology	

Wellness

The Office of Resident Affairs and Physician Wellness was established in July 2018 and is responsible for addressing the physical, psychological, and spiritual wellbeing of PGME learners. The office provides vital resources to trainees and works collaboratively with CPSA and the Physician and Family Support program (PFSP) on many issues of mutual concern.

Services include:

- On-site counselling services which provide immediate access for residents.
- The office is involved in a number of research initiatives to evaluate wellness strategies.
- Workshops and presentations by invited speakers provide an excellent opportunity to contemplate physician wellness and resiliency.
- PGME promotes a very proactive approach to wellness and is encouraging programs to consider appointing “wellness champions” to develop a program-specific curricula.

Due to the pandemic, the Office used alternative means to engage with as many trainees as possible:

- Staff held virtual weekly meetings with residents to address the many concerns related to COVID-19. With the gradual lifting of restrictions, these meetings became monthly check-ins and the Office returned to a more typical schedule.
- Weekly virtual support group for residents.
- Workshops: sleep strategies, skin care related to the use of PPE for extended periods of time, self-care, and coping and resiliency tools for resident wellness.

New Initiatives in Wellness:

- June 1, 2020, the operating standard for the Postgraduate Medical Learner Accommodation Process became effective and the associated Accommodation Assessment Committee was formed.
- A new PGME Physician Wellness App was successfully launched. The main purpose of this App is to provide PGME trainees easy access to the resources of the Office of Resident Affairs and Physician Wellness.

A number of Office initiatives still remain on hold as a result of the pandemic. These include:

- CSM Wellness Hub collaboration project
- Learner Handover project – a collaboration with UME

Research

The 2020-2021 academic year has been a busy and productive one regarding residency education research. Please also see the Wellness Innovation Scholarship for Health Professions Education and Sciences ([WISHES](#)) lab for medical learner wellness research, which includes residents.

Ongoing grants and projects in 2020/2021 include:

1. Exploring the Construct of Just Culture in Residents - Office of Health and Medical Education Scholarship, University of Calgary - \$9,990.
2. The Assessment of Internal Medicine Evaluations in Residency Study (AIMERS) - Office of Health and Medical Education Scholarship, University of Calgary - \$10,000.
3. Mapping the Landscape of Rural Resident Physician Wellness through Realist Inquiry. Distributed Learning Rural Initiative. -\$8,175.
4. A National Initiative to help ease the Transition from Medical School to Residency: The Learner Education Handover Pilot Project (LEaPP). Royal College of Physicians and Surgeons of Canada (RCPSC) Medical Education Research Grant. - \$38,250.
5. Implementing and Evaluating a Fatigue Risk Management Plan for Obstetrics and Gynecology Residents. Fatigue Risk Management Task Force, Royal College of Physicians and Surgeons of Canada. – \$20,000.

Furthermore, the following articles were published:

1. Brown A, Lafreniere K, Nidumolu A, Freedman D, Mancuso M, Hecker K, Kassam A. A realist synthesis of quality improvement curricula in undergraduate and postgraduate medical education: what works, for whom, and in what contexts? *BMJ Quality & Safety*. 2021;30:337-352.
2. Bharwani A, Swystun D, Paolucci EO, Ball CG, Mack LA, Kassam A. Assessing leadership in junior resident physicians: using a new multisource feedback tool to measure Learning by Evaluation from All-inclusive 360 Degree Engagement of Residents (LEADER). *BMJ Leader*. 2020 Dec 6.
3. Thomas M, Lorenzetti D, Kassam A. Formalizing the Informal: Lessons Learned from a Competency-Based Mentorship Program for Residents in Psychiatry. *Academic Psychiatry*. 2020 Oct 20:1-5.
4. Kassam A, Nickell L, Pethrick H, Mountjoy M, Topps M, Lorenzetti DL. Facilitating Learner-Centered Transition to Residency: A Scoping Review of Programs Aimed at Intrinsic Competencies. *Teaching and Learning in Medicine*. 2020 Sep 17:1-1.
5. Brown A, Atchison K, Hecker K, Kassam A. A Tale of Four Programs: How Residents Learn About Quality Improvement during Postgraduate Medical Education at the University of Calgary. *Teaching and Learning in Medicine*. 2020 Nov 9:1-7.

Resident Education Scholars Program (RESP) – Pilot Project

Most residents in Canada are expected to complete some kind of scholarly project during their training. While many opt for clinical or biomedical areas of inquiry, a number each year pursue projects that explore education and training issues in medicine.

These individuals have until now operated largely independently of the scholar base in Calgary, unlike those in clinical and biomedical disciplines. It has been established through consultation and survey data that there is an unmet need for support and orientation for these projects/residents to make the most of their educational and scholarly potential.

The Resident Education Scholars Program (RESP) will address the relative isolation of education scholar residents by providing them with a structured program, mentorship, and support in designing, conducting, and reporting on their scholarly activities during residency

RESP is a joint undertaking between **Postgraduate Medical Education (PGME)** and the **Office of Health & Medical Education Scholarship (OHMES)**.

A pilot project will be trialed from 1 July 2021 – 30 June 2023 based on the RESP Terms of Reference

RESP Goals:

1. To support and advance Cumming School of Medicine (CSM) resident interest and expertise in educational scholarship.
2. To leverage resident education scholarship to effect useful and effective QI/QA changes in education programming.
3. To build the scholarly capacity in education scholarship in the Cumming School of Medicine.

Planned Outcomes:

Participant Outcomes:

- Acquire knowledge and skills relevant to the pursuit of health/medical educational scholarship
- Complete a research or innovation project related to health/medical education
- Develop a program of research or innovation to benefit their career path in health/medical education
- Become a mentor to future RESP participants

Cumming School of Medicine Outcomes:

- Advancement of education scholarship in the CSM through the addition of new scholars
- Improved education programs in the CSM through learner-generated research and innovation
- Expanded mentorship community that includes new education scholars

Resident Exit Survey

PGME conducts an annual exit survey of all completing residents. The findings of this survey create an opportunity to improve on and sustain a supportive learning environment for residency education and help facilitate a successful transition to future practice.

In the most recent resident exit survey for 2020, there were 139 respondents out of approximately 267 exiting residents, indicating a response rate of 52% (*not all participants answered every question, averages are based on how many people answered each question*).

Educational Workshops and Events

PGME offered a number of educational workshops for residents and fellows in 2020-2021:

Feedback, The Essential Skill	X4
Residents As Teachers	X5
Introduction to Biostatistics	X1 – 4 consecutive weeks
Physician Financial Management	X2
Your Essential Skills Toolkit: Communication, Conflict Management and Physician Wellness	X2
Medical Legal	X2
Career Management: The Next Step In Your Career	X2
Let's Talk Social Media and New Reporters	X2
Advanced Biostatistics	X1 – 4 consecutive weeks
Critical Appraisal	X1
Practice Management	X1 – 2 consecutive weeks
Ethics	X2
Career Management for Residents: The Next Step in Your Career	X2
RDocs Resiliency Training - Resident Module	X1
RDocs Resiliency Training - Leadership Module	X1
Patient Safety and Quality Improvement -	X1 – 2 consecutive weeks
Money Management & Billing Mechanics for New Graduates	X2
Greg's Wings Orientation	X4

Faculty Development Workshops:

Mentoring for Education Leadership Development
R2C2 – CBD
BE-SMART - CBD
RDocs Resiliency Training - Leadership Module
Let's Talk Social Media and New Reporters
Accommodations: Empowering all Learners

Covid Response

The COVID-19 pandemic presented unique and unprecedented challenges for medical education over the past year. The routine work of PGME offices was pre-empted by the urgent need to address major changes in the delivery of clinical services, the abrupt transition to virtual care, and the ability to deliver required educational experiences in the midst of this very changed environment.

<u>Challenges over the past year have included:</u>	<u>Response to the challenges included:</u>
<ul style="list-style-type: none"> • Redeployment of resident physicians from usual rotations to areas of high clinical need such as Critical Care Units and Medical Teaching Units. • Urgent arrangements for emergency registration with CPSA for senior trainees who needed to transition to Most Responsible Physician role. • Impact of postponement of all certification exams (RCPSC, CFPC and Medical Council of Canada (MCC) Part II) with subsequent requirement to work with medical regulatory authorities to prepare for provisional licensing for graduating physicians. • Loss and disruption of many training opportunities such as those in ambulatory care settings where virtual consultations are not always conducive to inclusion of learners and the postponement of elective surgeries which has impacted trainees in surgical specialties – just two of many examples. • Loss of elective experiences and recall of residents from rotations in universities across Canada. • Onboarding of PGY1 trainees for July 2020 and 2021 – in person orientation was converted to virtual format and usual 8-12 week program boot camps were all reconfigured. • Delay of externship of 2020 cohort of AIMG residents. • CaRMS application and interview processes converted to using virtual interviews, shortened timelines and a changed schedule to adapt to delayed start of clerkship. • Disruption to scheduled internal reviews that are vital to a process of continuing quality improvement and provide important feedback in the lead-up to on-site survey which has also been deferred from spring 2022 to fall 2022. • Six programs scheduled to implement CBD curriculum in July 2020 were delayed until July 2021. • Resident safety – ensuring that all trainees are adequately prepared in the appropriate use (donning and doffing) of PPE. • Postponement of advanced courses in trauma and life support (ATLS/ACLS) typically required by training programs and AHS. • Resident wellness related to stress and anxiety due to the pandemic as well as the issues above that impact trainees. 	<ul style="list-style-type: none"> • Innovative strategies were developed to onboard the new cohort of PGY1 trainees in July 2020. The online format for the orientation was successfully implemented under an extremely tight deadline and has laid the groundwork for the upcoming orientation of PGY1s in July 2021. • Residency training programs have restructured program specific orientations and boot camps to comply with physical distancing guidelines. Many new policies and operating standards have been developed to determine criteria for program completion in the context of disrupted training experiences and with respect to resident safety. • Training sessions on the proper use of PPE have been introduced and are mandatory for all trainees.

Where to Find Us



UNIVERSITY OF
CALGARY

CUMMING SCHOOL OF MEDICINE Postgraduate Medical Education

Location: Postgraduate Medical Education Room G02 (Ground Floor) Heritage Medical Research Building
3330 Hospital Drive NW, Calgary, AB T2N 4N1

PGME Website: <https://cumming.ucalgary.ca/pgme>

PGME YouTube Channel: <https://www.youtube.com/channel/UChdb0tipwHbrzwwxB0VnHEQ>

Twitter: Dr. Aleks Mineyko for conversations and tips on Learning Resources @aleksmineyko