



# UNIVERSITY OF TORONTO

## FACULTY OF MEDICINE

Faculty Council of the Faculty of Medicine  
Minutes of the February 9, 2015 meeting  
4:00 p.m.  
Red Room, Donnelly Centre

**Members Present:** L. De Nil (Speaker), T. Young, T. Bressmann, A. Buchan, G. Bandiera, M. Connell, T. Coomber, T. Neff, I. Witterick, R. Forman, J. Rosenfield, J. Barkin, A. Kaplan, C. Evans, D. Ballyk, G. Yousef, P. Wilansky, D. Dawson, A. Bonnyman, Y. Yunusova, N. Chattergoon, M. Tan, A. Deshwar, P. Gaidhu, C. Turenko, D. Anastakis, D. McKnight, P. Hamel, A. Cochrane, J-Y Youn, T. Jeyalingam, H. Jo, C. Y. Cheng, M. Hanson, A. Moody, S. Rappolt, G. Yousef, F. Meffe, K. Mireskandari, D. Goldstein, L. Tate

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### Call to Order

The Speaker called the meeting to order and noted that there was a quorum.

### 1 Minutes of the previous meeting of Faculty Council – September 29, 2014

The minutes of the meeting of September 29, 2014 had been previously circulated. They were approved on a motion from J. Barkin and seconded by A. Buchan. There was no business arising.

### 2 Report from the Speaker

The Speaker noted that the Spring meeting previously scheduled for April 27 has been moved to May 4. The time and location will remain the same. The President of the University will be attending this meeting to address Council and, as such, there will be no Faculty Council Forum at this meeting.

#### 2.1 Report on External Reviews

As per the Faculty Council By-Laws, the Executive Committee received and reviewed External Reviews for the Department of Nutritional Sciences and the Department of Physiology.

### 3 Reports from the Dean's Office

#### 3.1 Report from the Dean's Office

Dean Young thanked the members of Council for serving, noting the important role Council plays. He noted the wide range of membership, from students to alumni, as adding to the valuable insight of Council.

#### 3.2 Vice Dean, Research & International Relations

Dr. Alison Buchan noted the publication of the [2013-2014 Research Report](#) and encouraged members to pick up one of the copies provided. Dr. Buchan indicated that in 2015 the major area of focus will be the transition within CIHR. The Vice Dean's office is working with faculty members to write foundations grant proposals which were submitted last week. Focus now shifts to final open grant competition under the previous process. The deadline for this process is March 8, 2015. The Faculty Grant Developers are available to assist with grant proposals. There are over 3000 investigators registered across the country with an expected success rate of 15-20%. The Vice Dean's Office will also be assisting with obtaining

bridge funding required to fill the 8-18 month gap between the old and CIHR processes. Dr. Buchan indicated investigators will not get bridge funding if they do not participate in the ongoing review process. Up to date CIHR information is available on the [Faculty website](#).

### 3.3 Vice-Deans, Education

Dr. Jay Rosenfield presented the report that is included in these minutes beginning on page 5.

## 4 Faculty Council Forum

Vice Dean, Vice Dean, Graduate and Life Sciences Education, and Dr. Paul Hamel, Chair of the Faculty Council Research Committee presented the Faculty Council Forum on innovation and transformation in graduate education in the Faculty of Medicine.

## 5 New Business

### 5.1 Executive Committee

#### 5.1.1 Faculty of Medicine By-Laws

The following was moved by I. Witterick and seconded by A. Buchan:

*“THAT the proposed amendments to the Faculty of Medicine By-Laws be approved as submitted.”*

The Speaker indicated a number of the amendments being proposed are a result of decisions made by Council since the April 29, 2013 amendments to the By-Laws. These include the transfer of the Institute of Health Policy, Management and Evaluation to the Dalla Lana School of Public Health and the resulting elimination of the Community Health sector within the Faculty and the renaming of the Continuing Education and Professional Development portfolio to Continuing Professional Development. The former item requires some changes to Standing Committee memberships and the latter impacts the Continuing Education and Professional Development Committee which will be renamed the Continuing Professional Development Committee. The final item ensures a potential quorum issue on the Boards of Examiners is avoided by allowing a meeting to continue despite student members (required for quorum) being excluded from deliberations at the request of the student whose case is being discussed.

The motion passed.

### 5.2 Graduate Education Committee

#### 5.2.1 Applied Immunology

The following was moved by C. Evans and seconded by J. Barkin:

*“THAT the proposal to establish a field of study, Applied Immunology, within the MSc Immunology Degree Program be approved as submitted.”*

Dr. J.C. Zúñiga-Pflücker indicated that the new Applied Immunology field will be offered at the master's level with the existing program being renamed Fundamental Immunology and will continue to offer both master's and doctoral degrees. The new program is a response to moves within the field of immunology taking place in Europe and the US. During the consultation process, 85% of current undergraduate students in immunology expressed interest in the proposed program.

Dr. Hamel noted that the required research project is two years but with advanced standing levels students would not have to take courses until the second year despite paying tuition for two years. Dr. Zúñiga-Pflücker indicated that students with advanced standing would only be enrolled for 18 months and their research

project for the first 6 months would be a continuation of their work from the fourth year of their undergraduate program

The motion passed.

The following was moved by C. Evans and seconded by J. Barkin:

*“THAT the current field of study within the MSc Immunology Degree Program be renamed Fundamental Immunology.”*

Dr. J.C. Zúñiga-Pflücker indicated that this was a housekeeping item to distinguish the current MSc Immunology program from the new Applied Immunology MSc program.

The motion passed.

### **5.3 Education Committee**

#### **5.3.1 Major Modification - UME Preclerkship Curriculum**

The following was moved by I. Witterick and seconded by A. Buchan:

*“THAT the proposed Major Modification to the Undergraduate Medical Education Preclerkship Curriculum be approved as submitted.”*

Dr. Pier Bryden indicated that there has been pressure to update the UME Preclerkship Curriculum from a number of sources including The Association of Faculties of Medicine of Canada, the Medical Council of Canada, and the Royal College CanMEDS 2015. In addition, there have been significant advancements in technology since the last major revision of the preclerkship curriculum in 1992. All other medical schools in Canada are or have already made major preclerkship changes.

Dr. Bryden indicated that there were a number of contemporary priorities in UME for the new curriculum. It needed to be a competency-based approach with flexibility in learning pathways (including options for combined degrees). There needed to be early clinical experiences with the integration of both basic and clinical sciences. There needed to be more active learning with fewer lectures (which are currently poorly attended). This could be enhanced with the effective use of eLearning. The new curriculum needed to teach prevention, public health, about the health care system, patient safety, and quality improvement.

Dr. Bryden indicated that the curriculum revitalization needed to recognize that the current curriculum is good but can be better. The new curriculum should be built upon the effective elements of the current curriculum.

In order to develop the proposed curriculum, there was a review key policy documents, accreditation feedback, current preclerkship content and a dialogue the Preclerkship Committee, Preclerkship Sub-Committees, UME Curriculum Committee, Academy Directors, Course Committees, Mississauga Academy of Medicine, UME Executive Committee, Medical Society, and Class Councils.

The proposed curriculum is structured horizontally and vertically. Horizontally, the curriculum runs longitudinally through the two years with TOPIC, ICE, and Portfolio/HSR with an ongoing focus on the CanMEDS Roles and specific themes. Vertically, the organizational structure will govern how content is rolled out “week-by-week” across the two years which remain 36 weeks per year over two years for a total of 72 weeks.

Dr. Bryden indicated that assessment will make use of test-enhanced learning. Low stake, frequent exams will be used to drive learning. Assessments will be matched with curricular goals and the longitudinal assessment of CanMEDS competencies. Ideally, this type of assessment will allow for the early identification of students in difficulty.

The timeline for the full implementation (phase two) is 2016-17 with a three week segment in the Structure and Function course in year 1 in 2014-15 (phase one). Phase one evaluations will guide final phase two planning during 2015-16.

The motion passed.

## **6 Standing Committee Annual Reports**

### **6.1 BScPA Board of Examiners**

Dr. Ronn Goldberg was unable to attend due to clinical commitments. The Speaker read the following report on his behalf:

The Bachelor of Science Physician Assistant Board of Examiners reviews cases of students in academic difficulty and determines the appropriate course of action, which may include promotion, remediation, failure, suspension and dismissal.

The BScPA Board of Examiners has met twice since reporting at this time last year. Additional electronic approval of grades also took place when the discussion of individual cases was not required. This is a small program with 57 students currently enrolled. The BOE reviewed the cases of 3 students since reporting last February.

2 students each failed a single course and have returned to repeat the failed courses during their current offering. 1 student failed two courses during her second attempt at the second semester of the program and was dismissed.

### **6.2 Faculty Council Appeals Committee**

Dr. Doug Templeton declined to attend in person noting that there has not been an appeal during the current reporting period. Dr. Templeton noted that there was also no appeals during the previous reporting period and the last appeal hearing took place in January of 2013. Dr. Templeton expressed gratitude to the Boards of Examiners for the excellent work that they do as the fairness inherent in their processes and decisions has directly contributed to the lack of appeals.

## **7 Adjournment**

The meeting was adjourned at 5:45pm

# Council of Education Vice-Deans Faculty Council Report

February 9, 2015

**Submitted on behalf of:**

Dr. Dimitri Anastakis, Vice-Dean, Continuing Professional Development

Dr. Glen Bandiera, Acting Vice-Dean, Postgraduate Medical Education

Dr. Allan Kaplan, Vice-Dean, Graduate and Life Sciences Education

Dr. Jay Rosenfield, Vice-Dean, Undergraduate Medical Professions Education

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# Education Vice-Deans, Integrative Activities

## 1. eLearning Task Force – Update

In 2014, the Faculty of Medicine at the University of Toronto embarked on a reflective and forward-looking exercise to explore the current state of eLearning activities and to chart a path forward to establish the Faculty as a current and future leader in medical education eLearning curricula and technology and to anticipate future technological needs.

The eLearning Task Force, co-chaired by Professors Dimitri Anastakis, Vice-Dean of Continuing Professional Development, and Jay Rosenfield, Vice-Dean of Undergraduate Medical Professions Education, was created to examine and evaluate existing eLearning resources, initiatives and opportunities in the Faculty of Medicine and to make strategic recommendations. The Task Force gathered information through surveys, data collection and analysis, and focused stakeholder interviews, and undertook an internal assessment of eLearning scholarship, resources (including financial, technological, space and human resources), curricula design and implementation, awards and grants, and future requirements.

A series of strategic recommendations have been developed as a result of this comprehensive assessment, which established a roadmap to advance the Faculty of Medicine at the University of Toronto as a global leader in eLearning across the education continuum. These recommendations cluster around four key themes: **Strategic Planning, Faculty Development and Scholarship, Funding and Infrastructure and Resources**. The Task Force’s recommendations will enable us to position the Faculty of Medicine to achieve a future state as a leader in eLearning (i.e., teaching, learning and scholarship) across the education continuum. Their findings will lay the foundation to ensure that we have the competencies and infrastructure to provide the best education for today’s and tomorrow’s learners.

The Task Force’s final report is in its final stages and preliminary working group findings will be made available via the eLearning Task Force website: <http://www.innovatingedu.ca/elearning/>. If you would like to learn more about the eLearning Task Force, please contact Lindsey Fechtig at [lindsey.fechtig@utoronto.ca](mailto:lindsey.fechtig@utoronto.ca).

## 2. Teaching and Academic Capacity in Toronto (TACT)

The TACT committee was formed earlier this year, co-chaired by Dr. Glen Bandiera and Dr. Stacey Bernstein. The purpose of TACT is to determine the optimal placement of learners for clinical experiences. TACT will analyze the results of increased enrolment and complete an environmental scan of current placements. An electronic “capacity dashboard” will be developed to continually assess capacity to achieve consistency.

## 3. Review of POWER, MedSIS and K4Y

AMBiT, a consulting company based in Vancouver, was hired to undertake a review of both MedSIS and POWER, Learner Management Systems developed by K4Y which have been in place at the Faculty of

Medicine since 2002. The review is expected to begin in January and be completed by April 2015.

The purpose and scope of this review is to:

- Review the core functions of registration and evaluation as well as important ancillary functions (including, scheduling, preceptor payment, case logs, call stipends, etc.
- Review the process and resources in place to identify new enhancements, develop business requirements, manage development, undertake testing, and ensure quality
- Conduct cost analysis in light of current technology and expected quality, reliability, and security.
- Identify future requirements based on program and curriculum change, and also identification of opportunities for system integration or co-development with other Faculties of Medicine.
- Assess the suitability of POWER and MedSIS and their related technologies to address future requirements for the Faculty of Medicine.
- Identify current gaps and future needs in IT systems for identified needs in registration, evaluation and other requirements.

#### 4. Education Development Fund

The **Education Development Fund**, funded by the Education Vice-Deans, is intended to support new and innovative projects that align with our Faculty's core values of innovation, integration and impact in education. It is a seed fund designed to encourage faculty who are newly engaged in educational scholarship to further their career development. Applicants may pursue an **Educational Innovation and Development project** or an **Education Research project**.

Please note: applicants must be a **faculty member** engaged in educational activities in basic, clinical or rehabilitation sciences in the **Faculty of Medicine**. They must also be in the early stage of their educational scholarship activities, and **cannot have served as PI on more than two** funded education development projects.

The deadline to apply to the EDF is **Friday, February 13 at 12pm noon**. This deadline is firm and late applications will not be considered.

To find out more about this fund, including eligibility requirements and application criteria, please visit the EDF webpage: <http://medicine.utoronto.ca/about-faculty-medicine/education-vice-deans-education-development-fund>

#### 5. 13th Annual Education Achievement Celebration

The Faculty of Medicine's **13th Annual Education Achievement Celebration** will be held on **Tuesday, May 12, 2015** from **5:00–7:00pm** in the **Great Hall of Hart House**. This Faculty-wide forum is held each year to celebrate, showcase and reward excellence in teaching and education, and all are welcome to



attend. To find out more about this event and last year's award recipients, please visit the 2014 EAC webpage: <http://medicine.utoronto.ca/faculty-staff/12th-annual-education-achievement-celebration>

## Undergraduate Medical Education Faculty Council Update

### 1. Governance and Leadership

Dr. Tao Wang has been appointed to the position of **Program Lead for the Shantou University Medical Student Experience (SUMSE)**, effective December 1, 2014 for a three-year term. SUMSE is a specialized program designed to provide undergraduate medical students from Shantou University Medical College (SUMC) exposure to the practice of medicine in Canada. Six students with clinical experience are chosen annually by SUMC to participate in an eight week program in Canada during May and June. In his position as program lead, Dr. Wang is responsible for designing, planning, implementing and evaluating the elective experience of Shantou University medical students at the U of T.

Dr. Jana Lazor (formerly Bajcar) has been appointed to the newly created position of **Director, UME Faculty Development**, effective January 5, 2015. For the first three months of her appointment, Dr. Lazor will be transitioning from her current position as Director of Faculty Development at the Mississauga Academy of Medicine, and will be sharing her time between MAM and UME. As director of a newly created UME Office of Faculty Development, Dr. Lazor is responsible for providing leadership in and support for faculty development across the entire UME program, including all four academies.

### 2. Enrolment

The November 1, 2014 enrollment counts for the MD program by year are:

Year 1 – 260

Year 2 – 258

Year 3 – 259

Year 4 – 258

### 3. Accreditation

Under the leadership of Dr. Martin Schreiber, Director, UME Curriculum and Senior Academic Coordinator, Accreditation, work is well underway on a follow-up accreditation status report for submission to the accrediting bodies in April 2015. Full accreditation of the MD program for the maximum allowable eight-year term was confirmed by the Committee on the Accreditation of Canadian Medical Schools (CACMS) and Liaison Committee on Medical Education (LCME) in October 2013. The purpose of our April 2015 status report is to address eight (out of 128) accreditation standards that were identified by the accrediting bodies as still requiring monitoring.

## 4. Curriculum

### **Notification of Curricular Change: LInC and Preclerkship Renewal**

Notification of curricular change regarding two significant curricular initiatives (namely, the introduction of a voluntary Longitudinal Integrated Clerkship and major modifications to the first two years of the MD program, known as Preclerkship) has been submitted to the Committee on the Accreditation of Canadian Medical Schools (CACMS). We anticipate receiving a response from CACMS in the near future.

### **Clerkship Capacity at MAM**

Over the last several months Trillium Health Partners has been working to prepare for the August 2015 start of core clerkship for year three MD students at the Mississauga Academy of Medicine (MAM).

Trillium Health Partners has undergone a thorough review to accurately assess capacity projections. This review included face-to-face dialogue with Programs Chiefs, Education Leads and Program Directors, and a robust assessment of program-specific operational capacity, space allocation and physician and clinical stakeholder engagement. We are pleased to report that based on this internal assessment, Trillium Health Partners will achieve an overall 87% capacity to take core clerks in Mississauga across the ten mandatory clinical programs for the 2015-16 year, representing 4% overall growth from 2014-15, and 13% since first year of clerkship at MAM in 2013-14. This figure also takes into account unknown variance, and therefore is the best estimate for this year. As more information becomes available in the coming months, this projected capacity may increase, allowing for more rotations at Trillium Health Partners. For planning purposes, however, the projections below should be considered firm for this year. We will ensure all students are assigned their location well in advance of August to facilitate appropriate arrangements for those rotations which Trillium Health Partners will not be able to accommodate.

The table below provides a detailed overview of the projected capacity at Trillium Health Partners by program for 2015/16:

<b>Program</b>	<b>2013-14 Capacity</b>	<b>2014-15 Capacity</b>	<b>2015-16 Capacity</b>
Anesthesiology	100%	100%	100%
Otolaryngology	100%	100%	100%
Ophthalmology	56%	56%	56%
Emergency Medicine	67%	76%	89%
General Surgery	44%	67%	100%*
Surgical Subspecialties	100%	100%	100%
Medicine	89%	100%	100%
Obstetrics & Gynecology	56%	61%	61%
Paediatrics	44%	44%	56%
Psychiatry	100%	100%	100%
Family Medicine	100%	100%	100%
<b>Total Overall</b>	<b>74%</b>	<b>83%</b>	<b>87%</b>

\*At Credit Valley Hospital, the 2 week general surgery rotation will continue to comprise 1 week general surgery and 1 week thoracic surgery, for the time being.

This continuing growth is a testament to the ongoing collaboration between and commitment from Trillium Health Partners and our university departments and faculty.

## 5. Project Updates

### **Medical Psychiatry Alliance**

The overarching goal of the Medical Psychiatry Alliance project – which is a joint venture involving the University of Toronto, CAMH, SickKids, and Trillium Health Partners – is to improve the quality of life of both patients and their families by creating new models of clinical care for patients with concurrent medical and psychiatric illnesses. To support that goal through the training of future health professionals, UME has committed to creating two new positions to facilitate transformative curriculum change in the MD program, such as the development of enhanced longitudinal training approaches and clerkships in health care settings that integrate medical and psychiatric aspects of illness. The two new positions are:

- UME Faculty Lead for the Medical Psychiatry Alliance – Reporting to the Director of UME Curriculum and working closely with the UME/Wilson Centre Curriculum Research Scientist, the incumbent will be responsible for the design, development, implementation, and evaluation of the UME curriculum supporting the Medical Psychiatry Alliance initiative in the MD program.
- Curriculum Research Scientist – Reporting jointly to the Vice-Dean, Undergraduate Medical Professions Education and the Director of the Wilson Centre, the incumbent will be responsible for developing and leading a scholarly program of research related to curricular development in undergraduate medical education that supports integrated medical/psychiatric training, including active participation in the design/refinement of the curriculum and its evaluation as a 'living laboratory' for research.

Detailed job descriptions for both positions have been created and posted widely. The plan is to fill both positions by the end of February 2015.

Hiring committees for both positions have been confirmed. The committee for the Faculty Lead position will be Chaired by Jay Rosenfield (Vice-Dean, Undergraduate Medical Professions Education) while the committee for the Curriculum Research Scientist position will be Co-Chaired by Jay Rosenfield and Nikki Woods (Interim Director, the Wilson Centre). Both committees include senior-level representation from UME, the Wilson Centre and the MPA as well as student representatives.

### **Space Planning**

- The new MD Student Lounge in the Student Commons (former Stone Lobby) officially opened on Monday, October 20th.
- Work is well underway on our new UME Enrolment Services “Welcome Centre”, which will be located on the main floor of the Medical Sciences Building and has been designed to provide increased public access to admissions information and support. It will be home to the Offices of Admissions, Student Financial Services, and the Registrar.

## Physician Assistant Program

### **Overlapping Cohorts**

The fall of 2014 proved to be an exceptionally busy time for the BScPA Program, with three registered cohorts due to the move to a September start (previously January start): Class of 2014, in the final semester of their program; Class of 2015, in the final semester of their first year; and Class of 2016, just starting their program. We achieved a unique milestone on October 20, 2014, with all three cohorts (totaling 87 students) in evaluations at the same time. Class of 2014 in OSCE and the other two classes in supervised examinations, with proctors in 15 sites spread across Ontario. A second unique milestone occurred the week of December 8, 2014, with two cohorts in-house for Residential Block weeks.

### **Clinical Placement Process**

The BScPA Program is moving to a more transparent clinical placement process through the use of EVOS (E\*Value Optimization Scheduling). This is an algorithm that reviews each student's preferences simultaneously, with the objective of creating schedules that most closely match student preferences.

Additionally, the program is working with clinical sites with a goal to improve student experience and learning. This will be achieved by greater consistency in use of clinical sites and by the creation of learning hubs.

### **Curricular Evaluation and Reporting**

Students within the BScPA Program complete course evaluations at the end of each course. Previously, the Medical Director and the Course Director reviewed the reports, and discussions for potential change took place within the Evaluation & Assessment and Curriculum Committee meetings. This process has been formalized, and at the end of each course, Course Directors will write a report and provide a verbal report on salient points to the Curriculum Committee. The written reports will aid long-term tracking of the evolution of courses.

# Postgraduate Medical Education Faculty Council Update

## 1. PGME Governance and Leadership

Dr. Sal Spadafora began his 1-year administrative leave on January 1, 2015. Dr. Glen Bandiera is serving as Acting Vice Dean during this period. Dr. Linda Probyn is the Acting Associate Dean, Admissions and Evaluation and Dr. Anne Matlow is continuing as Academic Lead for Leadership and Strategic Initiatives.

Dr. Susan Glover Takahashi is on a secondment with the RCPSC to assist in the implementation of CanMEDS 2015. In her absence Melissa Kennedy Hynes and Laura Leigh Murgaski are Acting Co-Directors of the Research and Education Unit. Maureen Morris joined the PGME Office in April 2014 as Associate Director, Operations and is managing all activity related to trainee registration, transfers, licensing, visa operations, central program administration contact, as well as liaison with the accrediting and licensing organizations.

The PGME Annual Report for 2013-14 is posted on the PGME website at <http://www.pgme.utoronto.ca/content/reports-communications>

## 2. Enrolment – CARMS 2015

The number of CARMS entry residency positions for 2015 will remain at the 2014 intake number: 417. In September 2014, PGMEAC approved the recommendation of the Quotas Allocation Committee to make adjustments to intake including increasing the intake to Psychiatry by 5 positions and discontinuing the joint McMaster – U of T joint dermatology position as McMaster develops its own capacity to continue the program.

## 3. Accreditation

The Internal Review Committee started a new review cycle beginning in Fall 2014. Dr. Linda Probyn is Chair of the IRC and is well underway with logistical planning to prepare for the 100+ regularly scheduled internal reviews of residency programs. To date, Child and Adolescent Psychiatry and Geriatric Psychiatry received status as Accredited Programs with regular survey follow-up. The Pain Medicine Program application has been submitted and will be reviewed at the March 2015 RCPSC Accreditation meeting. Internal reviews were completed between October and November for Orthopedics, Emergency Medicine, General Surgery, Occupational Medicine and Respiriology and reviews of Urology, Forensic Psychiatry and Vascular Surgery are scheduled for the early part of 2015. In anticipation of revised educational standards, called CanMEDS 2015, the Internal Reviews will be emphasizing HR needs to support educational excellence, guiding programs in implementing the new standards, and employing best practices metrics to monitor outcomes and evaluate improvements.

## 4. Research, Conferences and Workshops

### **ICRE: PGME Showcase Focusing on CQI and Supporting Best Practices**

The Royal College International Conference on Residency Education (ICRE) was held in Toronto on October 24-28, 2014. PGME presented at a special session focusing on Continuous Quality Improvement. The showcase reflected U of T PGME's evidence-based, centralized processes and educational and technical supports, which have resulted in benchmark setting across the Faculty's programs and training sites. Topics included trainee exit surveys, case logs, leadership and resource management curriculum development, best practices in rotation evaluation, admissions and selection, web-based repository for medical education resources, and expansion of global health programming. Links to the posters prepared for the session can be found here.

<http://www.pgme.utoronto.ca/content/icre-pgme-showcase>

### **Toronto International Summit on Leadership Education (TISLEP)**

On October 22, 2014, the University of Toronto with the Royal College of Physicians and Surgeons hosted a pre-ICRE summit. This inaugural summit was co-Chaired by Dr. Adalsteinn Brown (IHPME, U of T) and Dr. Fiona Moss (Editor, Postgraduate Medical Journal, England). Dr. Anne Matlow chaired the Organizing Committee for the Summit. The event brought together an international audience of thought leaders and educators to further articulate the physician leadership competencies and discuss how stakeholders can collaborate to create future physician leaders. The goal was to create guiding principles for developing a physician leadership curriculum to complement implementation of CanMEDS 2015 thereby driving improvement in patient care and of the healthcare system.

## 5. Curriculum

### **PGMExchange**

In June 2014, PGME launched PGMExchange, a central repository to collect and share learning resources within the U of T PGME community including tools for teaching, assessment, curriculum planning, and workshop development. The resources available in this web-based resource --- OSCEs, journal articles, exam questions, videos --- can be sorted by CanMEDS role, intended audience, program, format, and author and more.

### **CanMEDS 2015**

A workshop is taking place January on 23, 2015 focusing on the impact of CanMEDS 2015 for Program Directors, with a focus on Competency Based Education, milestones and the impacts on accreditation requirements. In addition, a number of Faculty Development workshops have been scheduled from January to June 2015 on issues related to the new RCPSC and CFPC competency framework.

## 6. Global Health

The first annual PGME Global Health Day was held last May 2014 – a forum for research, service and activism across disciplines. It has been decided that this will become an annual event. Global Health Certificate program graduates held first alumni dinner in December. Guidelines for residents undertaking Global Health electives have been established, and Pre-Departure Training sessions are

scheduled for November 18, February 5, and May 26. Guidelines for residents taking external electives have been implemented.

## 7. Alumni and Advancement

PGME partnered with Advancement and departments to host five graduation events for our residents and fellows in the departments of Radiation Oncology, Medicine, Obstetrics & Gynecology, Pediatrics, and Otolaryngology – Head and Neck Surgery. Celebrations included distribution of certificates and awards, reception, photographs, music, and remarks from Department Chairs. Additional graduation events are planned for 2015.

## 8. Guidelines and Best Practices

### **Guidelines for Educational Responsibilities in Clinical Fellowships**

Following a detailed development and review process, including consultation with legal counsel, the Fellowship Education Advisory Committee (FEAC) finalized [\*Guidelines for Educational Responsibilities in Clinical Fellowships\*](#). The guidelines are intended to assist programs in dealing with serious educational issues that may arise during clinical fellowship training and require immediate, sensitive and informed response when they occur. The guidelines have been announced by the Vice Dean PGME and posted on the PGME website.

## 9. KPMG Review of PGME Funding

A presentation was made to the Deans of Medicine regarding the MOHLTC review of PGME funding, undertaken by KPMG. Potential new models of funding were presented with the MOHLTC indicating that they would like to implement a recommended model beginning with the 2016-17 fiscal year. Discussions are also underway with the MOHLTC regarding updated Transfer Payment Agreements for PGME funding, including salaries and benefits for residents. The projections suggest a fixed envelope for the next 2 to 3 years.

## 10. Projects and Initiatives

### **Program Administrator Information Session Series**

In response to the Gullane Task Force on Best Practices in PGME Program Support, PGME has developed a series of information sessions on a variety of subjects and activities of interest to both Residency Program Administrators, Hospital Medical Education Administrators and other administrative staff involved in postgraduate medical education. PGME staff provides the 2-hour lunchtime sessions with registration by invitation. Recent topics include: Overview of PGME Registration; CaRMS, orientation to Adobe Professional and AVPs and PEAPs. More information can be found at this link.

<http://www.pgme.utoronto.ca/content/program-administrator-information-session-series>

### **Medical Trainee Days Project**

The Faculty has begun to submit MTD reports to the Ontario Ministry of Health for 2014-15. The project was initiated in response to changes in data collection and implementation of the 275 day cap per

learner. The new reporting structure is intended to maximize the number of eligible learner days for each hospital. Learner attendance will be based on existing registration and evaluation systems, and the Faculty will support hospitals in the co-ordination and verification of learner data for annual reporting to the Ministry. PGME and UGME are collaborating on this project.

### **Development of Vulnerable Sector Screen**

In response to the HUEC working group on Vulnerable Sector Screen, a working group has been formed to implement a VSS for all PGME trainees. A POWER/MedSIS Working Group is seeking to establish a registration requirement indicator that would enable training sites to ensure that learners have completed the required screen, with coding for full clearance, pending, further review required, or unacceptable.

### **Resource Stewardship Committee**

Dr. A. Matlow and Dr. B. Wong provided an overview of the Choosing Wisely/Resource Stewardship project, which began in August 2013. A sub-committee of PGMEAC has been formed with Terms of Reference. The goal is to promote better use of health care resources. Choosing Wisely Canada identified 5 “*don’ts*” in practice, and physician societies have come forward with more such recommendations on better resource use.

Short-term goals for the committee are to raise awareness and establish core competencies. A handout of Resource Stewardship was distributed, listing 7 competencies, and many resources listed on the second page. Dr. B. Wong and Dr. A. Matlow invited members to review the competencies and email comments to either on whether the competencies described are achievable and realistic for physicians in training. Questions posed to Program Directors are: what would be most useful to your program, can we integrate these competencies in an academic half-day, a research day, and retreat. Each department has been asked to identify a “champion” and a train-the-trainer approach would be utilized, including some “*did you know*” facts to highlight the resource issues.



# Continuing Professional Development Portfolio

## Faculty Council Update

### 1. Continuing Professional Development

#### a. CPD Academic

##### Dr. Suzan Schneeweiss, Director, CPD Academic

The academic section of the Office of Continuing Professional Development (CPD) has had a very active year. Our group has been involved in organizing the provincial 2 day Introductory IDEAS quality improvement program in Toronto. Thus far we have trained more than 120 interprofessional health care practitioners from across the metropolitan Toronto area in three separate 2 day programs (May/June, September/October and October/November). Evaluations of this program have been excellent and 2 further programs scheduled for the winter/spring of 2015 are currently at full capacity. We also led in the development and dissemination of a provincial needs assessment to shape the content and delivery of the program around the province. Our group is now involved in developing a comprehensive evaluation of this program.

We have also been engaged in two internally managed courses in conjunction with the CPSO. Our Medical Record Keeping program is offered on a monthly basis and continues to attract a wide audience from across Ontario. The Safe Opioid program was transformed to a blended style of learning with the introduction of a webinar series followed by a 1 day face-to-face program. This program ran several times over the year and has gained increased popularity attracting clinicians from across the province of Ontario.

For the second year, we were invited to present a 1.5-day intensive pre-conference Essential Skills in CPD Course (ESCPD) at the annual Association of Medical Education in Europe (AMEE) in Milan Italy in August 2015. This program was attended by 22 participants from around the world. We are the only university CPD organization invited to present a pre-conference course at this meeting, which is attended by more than 2,000 medical educators from around the world. We will be presenting a similar program for AMEE in Glasgow this summer.

We held a University of Toronto CPD retreat in Toronto on October 1, 2014 with our CPD leaders and directors as well as CPD staff. This gave us an opportunity to review our strategic plan and focus on innovations in CPD including simulation, eLearning and the standardized patient program. Lastly, Dr. Schneeweiss has also been involved in planning committee for national CPD meetings and forums including the upcoming AFMC-CPD retreat with the CCME conference in April 2015 and the Royal College Competency by Design CPD Summit in May 2015.

## **b. CPD Global and Indigenous Health**

### **Dr. Anna Banerji, Director, Global and Indigenous Health CPD**

CPD Global and Indigenous Health was very active in 2014. In November 2014, the inaugural *Indigenous Health Conference: Challenging Health Inequities* took place. This 2 day conference was the first national conference to improve cultural competency and safety for health care providers who work with Indigenous peoples. It fostered dialogue between Indigenous and non-Indigenous participants. The call for abstracts resulted in 150 submissions from all over Canada. There was also a job fair. The conference dealt with many important but critical issues for Indigenous peoples including residential schools, missing and murdered Indigenous women, and other issues that impacted the determinants of health. It profiled numerous high level Indigenous speakers including Justice Murray Sinclair of the Truth and Reconciliation Commission. The conference was sold out with 450 participants. This conference will be biennial.

In addition, there was preparation for the North American Refugee Health Conference 2015, a 3 day conference that will take place at the Metro Toronto Convention Centre from June 4-6, 2015. This conference is now the largest clinical conference in refugee health globally, and profiles world experts in refugee health, with an anticipated 600 to 1000 international participants.

## **c. CPD Operations**

### **Trevor Cuddy, Director, CPD Portfolio**

Alignment of CPD operations to support Department-based CPD activities continues to be a priority. A new partnership model of CPD shared services delivery is under development and will be piloted with the Department of Surgery.

Growing enrolment in CPD events, both domestically and internationally, will be a principle focus in the next year. We will continue to expand the branding activities initiated in 2014, and further improve the sophistication of our marketing and business intelligence support to Course Directors.

Leadership in the areas of learner big data, simulation-based CPD and eLearning will also be priorities in 2015. We will be implementing a strategy for developing capacity and expertise among Course Directors and administrative staff within each of these areas.

The reorganization that was initiated in Winter 2014 is now complete, seeing an overall reduction in the number of support staff and associated payroll costs. Looking forward to 2015, we will be seeking to gain additional efficiencies through a portfolio-wide review of administrative support and identification of opportunities for shared services.

In the period of May 1, 2014 to December 31, 2014 the CPD events team supported Course Directors in delivering a total of 82 CPD events that reached 7941 learners. The number of event registrations increased by close to 10% over the same period in 2013. The events team is seeing an increase in engagement of our marketing services and online registration and event management system.

## 2. Innovations and Education (i+e)

### Dr. Peter Azmi, Business Development Officer

The i+e office was established in February 2013. The office's mandate is to help faculty and departments develop new and sustaining revenues from education-based programs and assets. The i+e Office has recently finalized its strategic plan and business case, which will see the office achieve self-sustainability within the next 5 years. The office continues to grow its book of business with the addition of new projects related to business development, communications, marketing and reputation management.

#### **Since the last report, some recent activities and accomplishments include:**

**(1)** i+e is supporting a national program expansion of The Advanced Clinician Practitioner in Arthritis Care Program (ACPAC). i+e has secured a national trademark for the ACPAC program, an important initial step towards future licensing opportunities. i+e also developed a fellowship program which has helped ACPAC raise approximately \$80,000 in new support.

**(2)** In partnership with the Department of Pharmacology and Toxicology, i+e has produced an online eLearning portal for the department. The eLearning Portal is used to support the needs of current learners, as well as market the Online Pharmacology Course to prospective learners.

See: <http://elearning.pharmtox.ca/>

**(3)** In partnership with CPD, i+e has negotiated a license for the Events Evolved (EvE) events management system. EvE is a full service automated platform for the management of educational events and learner registration. EvE is being licensed to CoursePeer Inc., a Toronto-based learning management system (LMS) company ([www.CoursePeer.ca](http://www.CoursePeer.ca)) To further support the partnership between CPD and CoursePeer, i+e is leading a grant submission to the Ontario Centres of Excellence (OCE) for an innovation grant for a joint project valued at over \$40,000.

**(4)** i+e is working with key stakeholders in CPD, the MOHLTC as well as with clinical educators to develop a Chronic Diseases portfolio of CPD programs based on the ACPAC educational model. The "Advanced Clinician Practitioner" education model will include advanced certification as well as interprofessional education and practice.

See: [chronicdiseases.ca](http://chronicdiseases.ca)

**(5)** In partnership with the Centre for Collaborative Drug Research (CCDR), i+e has built an online presence and memberships portal. The site is used for communications with the CCDR community and to promote activities and programs available at the CCDR.

See: <http://www.collaborativedrugresearch.ca/>

**(6)** i+e is planning a new workshop and seminar series for faculty and educators at the FOM called "Innovating Education". The Innovating Education series will introduce our educators to new eLearning technologies and partnership opportunities that can help programs find new sources of revenue and support. The first workshop in the series will be sponsored by Apple and highlights the iBook Author tool that can be used to create eLearning objects (eg. eTextbooks, manuals, etc). These eLearning objects can then be sold through the iTunes store, thereby providing new sources of support to programs and departments.

### **3. Standardized Patient Program (SPP)**

#### **Dr. Brian Simmons, Director, SPP**

In 2014 we completed our 30<sup>th</sup> year of supporting simulation-based learning at the University of Toronto. We are looking forward to a celebration of our past, present and future at an event on Thursday, February 5. The Standardized Patient Program has three major areas of focus: **(1)** teaching, learning and assessment, **(2)** national licensure examinations, **(3)** research in simulation methodology and pedagogy.

#### **Teaching, Learning and Assessment**

The Faculty of Medicine continues to be the primary client in our teaching, learning and assessment cluster, representing 78% of activity. The remainder of activity supports other health-related Faculties at U of T (13%) and community-based initiatives (9%).

The SPP is engaged in the full continuum of medical education. Of our work in the Faculty of Medicine, 70% of activities were based in undergraduate education, 12% in post graduate education, 6% in Continuing Professional Development. We also support other departments within the Faculty of Medicine, e.g. the Physician Assistant Program.

#### **Licensure**

Licensure examinations comprise another significant area of responsibility for our program, and our staff have developed considerable expertise in coordinating large multi-track clinical examinations for several licensing bodies. Clients include the Medical Council of Canada, the Canadian Alliance of Physiotherapy Regulators, the College of Denturists of Ontario, and the Pharmacy Examining Board of Canada.

#### **Research**

We continue to develop expertise in communication and conflict interactions giving invited workshops at professional conferences supported by the published works. In 2015 we look forward to our ongoing collaboration with the Wilson Centre in their research ateliers.

# Graduate and Life Sciences Education Faculty Council Update

## Undergraduate Life Sciences Education

### 1. Communication Strategies

- a) Third Annual Graduate and Undergraduate Research Information Fair was held on November 13, 2014 at the Medical Sciences Building (MSB). Exhibitors from our undergraduate, graduate departments, as well as hospitals, student associations, School of Graduate Studies were present with over 1000 students attending the event.
- b) The Second Annual Human Biology Undergraduate Research Day will be held on March 19, 2015. The goal of this event is to provide students with the opportunity to display their research as posters to their peers and to promote awareness of the different areas of research students are pursuing.
- c) Important events and notices are posted on the bulletin board by Tim Horton's in MSB.

### 2. Undergraduate Faculty Teaching Awards

The Undergraduate Faculty Teaching Awards competition deadline is January 30, 2015. Each awardee will receive a framed certificate and \$1,000 cash prize. Four awards will be adjudicated in three categories:

- Excellence in Undergraduate Teaching in Life Sciences
- Excellence in Undergraduate Laboratory Teaching in Life Sciences
- Excellence in Linking Undergraduate Teaching to Research in Life Sciences

### 3. Undergraduate Research Opportunity Program (UROP)

GLSE will oversee 136 UROP award allocations for 10 departments within the Faculty of Medicine. Support is set at \$2,400 per student. The students must be guaranteed at least an additional \$2,400 in compensation from other sources managed by the sponsoring department/centre/institute/program, and are expected to engage in full-time research for at least 12 weeks.

### 4. GLSE Undergraduate Leadership Awards

Three annual undergraduate student leadership awards in life sciences have been established to recognize promising students for their leadership and scholarship. Each awardee will receive a framed certificate and \$500 cash prize. Deadline to submit an application is March 6, 2015 and recipients will be announced on April 13, 2015.

### 5. GLSE Undergraduate Summer Research Studentship

Seven annual summer research project studentships will support our third or fourth year specialist and/or major students in our Basic Science departments and in Laboratory Medicine and Pathobiology. The award carries a value of \$4,800 each. Deadline to submit an application is March 6, 2015.

## 6. Plans for Graduate Recruitment

First Annual Interactive Graduate School Webinar will be held on March 13 and 20, 2015. GLSE invites all prospective students wishing to explore graduate studies in our interdisciplinary MSc and PhD programs. Registration is open to the first 142 students who wish to attend in person; alternatively, prospective students can attend via web-streaming. Participating graduate departments include Immunology, Laboratory Medicine and Pathobiology, Molecular Genetics, Biochemistry, Pharmacology and Toxicology, Speech-Language Pathology and the Institute for Medical Science.

## Graduate Education

### 1. Strategic Priorities: 2015-16

#### a) Development of new funding model for graduate education, including for international graduate students

#### b) Training graduate students for the new Job Market

##### i. Development of co-curricular transferable professional skills

In August 2013, the Task Force on Innovation and Transformation in Graduate Education recommended that the Faculty of Medicine “develop sustainable programs for its graduate students (including) co-curricular, transferable professional skills during their graduate program.” A small working group, chaired by Professor Joseph Ferenbok, has been tasked to identify these key skills, which can be developed using an e-learning or alternative and innovative delivery platform, establish FOM-sponsored activities for students to practice these skills prior to graduation and track graduates employment trends to determine FOM footprint within Ontario, Canada and abroad.

##### ii. New Professional Degree Programs

- Completed: New Translational Health Science Research Degree Program; Applied Immunology (MSc only)
- Currently accepting students for September 2015

##### iii. New workshop on Biosafety

Building on the success of the Integrity in Research Workshop, GLSE is designing a biosafety workshop for incoming students slated for Fall 2015. The structure is similar to the Research Integrity workshop offered in the Fall term. This initiative is in collaboration with Marc Drouin, Director of the Office of Environmental Health & Safety, and his team, along with consultation from research institutes at the hospitals that offer similar training in order to minimize overlap.

#### c) Development and implementation of a centralized coordinated recruitment strategy

GLSE has established a taskforce to explore the feasibility of a coordinated strategy within FOM to keep students from accepting offers of admission at other universities.

#### d) Fundraising initiatives to support graduate education through Enhanced Student Awards

## 2. Graduate Faculty Teaching Awards

### a) The Graduate Faculty Teaching Award Competition

The deadline was on December 5, 2014. Six awards will be adjudicated in three categories:

- Early Career Excellence in Graduate Teaching & Mentorship
- Continuing Graduate Teaching & Mentorship
- Sustained Excellence in Graduate Teaching & Mentorship

*Each awardee will receive a framed certificate and a \$1,000 cash prize.*

### b) Centralized Entrance Scholarships

In the spirit of transparency and fairness, for the first time, the Graduate Chairs unanimously agreed that the Office of the Vice Dean, Graduate and Life Sciences Education (GLSE) will offer Merit based Entrance Scholarships (MES) valued at \$2,000 to a limited number of the most highly rated MSc and PhD successful applicants. This scholarship is restricted to individuals who have been offered admissions to at least one of the nine graduate departments participating in the Harmonized Stipend Agreement and must be approved by the Office of Graduate and Life Sciences Education. Also serving as a centralized recruitment strategy, each student receiving this scholarship will to retain the full amount over and above his/her total stipend. As a result, no other “admissions” or “recruitment” incentive funds may be offered by individual graduate departments. Inaugural recipients will be granted the Merit Entrance Scholarships for September 2015 admissions.

### c) Queen Elizabeth II Graduate Scholarships in Science and Technology (QEII-GSST)

To better align QEII-GSST deadlines with the School of Graduate Studies, the following changes has been made starting 2015-16 award year:

- student application deadline has been moved up two months earlier (i.e., March 31, 2015)
- students no longer apply with hardcopy applications and must now submit an OGS application using the U of T School of Graduate Studies centralized online OGS application
- departmental QEII-GSST nominations are due to GLSE two months earlier (e.g., end of May 2015)

### d) Transfer of the Institute of Health Policy, Management and Evaluation (IHPME) funds to Dalla Lana School of Public Health (DLSPH)

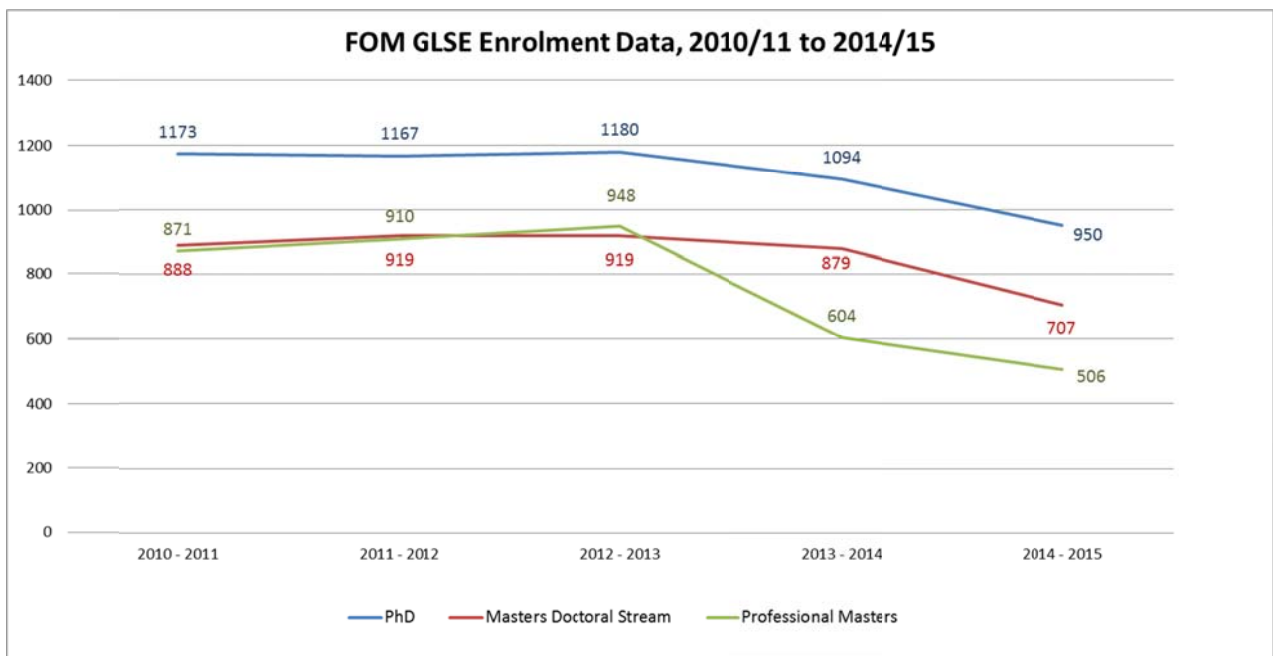
Effective July 1, 2014, IHPME transferred from the Faculty of Medicine to its new home faculty, DLSPH. GLSE and IHPME agreed that 2014-15 is a transition year for financial arrangements, such as the transfer of funds.

### 3. Enrolment Fall 2015

As of November 1, 2014, 2,163 students were enrolled in a graduate degree program in the Faculty of Medicine. Please note that these numbers do not include Winter 2015 enrolment.

Comparatively, 2014 – 15 enrolment seems to be in line with enrolment trends for the last 5 years. The sudden drop in enrolment starting 2013 – 2014 is due to the departure of the Dalla Lana School of Public Health (MPH, MSc, MHSc and PhD programs) as of July 1, 2013 and the Institute of Health Policy, Management and Evaluation (MSc, MHSc, MHI and PhD programs) as of July 1, 2014. Below is the 5 year enrolment data for graduate programs at the Faculty of Medicine.

**Table 1.**



### 4. Other

The Rehabilitation Science Institute (RSI) was officially established on January 1, 2015. The search for the inaugural Director is underway; Professor Helene Polatajko will be serving as Interim Director.