



UNIVERSITY OF TORONTO

FACULTY OF MEDICINE

Faculty Council of the Faculty of Medicine
Minutes of the September 29, 2014 meeting
4:00 p.m.
Red Room, Donnelly Centre

Members Present: L. De Nil (Speaker), P. Poldre, A. Jakubowski, A. Buchan, S. Spadafora, M. Connell, T. Coomber, J. Hall, T. Neff, L. Manchul, I. Witterick, R. Forman, J. Rosenfield, A. Rachlis, J. Barkin, B. Horne, A. Kaplan, S. Verma, C. Whiteside, B. Papsin, C. Evans, B. Steipe, A. Emili, P. Kim, S. Belo, G. Yousef, R. Kirsch, D. Salonen, V. Taylor, P. Wilansky, L. DiProspero, D. Dawson, S. Nixon, A. Eriks-Brophy, Y. Yunusova, N. Chattergoon, R. Vanner, A. Damji, A. Deshwar, S. Feng, S. Rappolt, J. Nodwell, P. Wildgoose

Call to Order

The Speaker called the meeting to order and noted that there was a quorum. Dr. De Nil informed the members that the Faculty Council Forum would be postponed to the February 9, 2015 meeting due to unforeseen circumstances.

1 Minutes of the previous meeting of Faculty Council – May 5 , 2014

The minutes of the meeting of May 5, 2014 had been previously circulated. They were approved on a motion from S. Verma and seconded by A. Buchan. There was no business arising.

2 Report from the Speaker

The Speaker noted that this would be the final meeting of Dean Whiteside's term as Dean and wished to say a few words on behalf of Council. Prior to becoming Dean, Dean Whiteside served as a Graduate Coordinator and as the Associate Dean of Graduate and Inter-Faculty Affairs. The Dean has been an advocate for teaching excellence and has won numerous teaching awards. Dean Whiteside was a champion of the interfaculty teaching program and the BSc programs. The Dean undertook a major restructuring of the Dean's Office and has exceeded all expectations in fundraising. Dr. De Nil mentioned that, in his time as Chair of Speech-Language Pathology, meetings with Dean Whiteside were always thorough - she would always ask the difficult questions but that she was also always fair and supportive of those who were working to make things better.

2.1 Report on External Reviews

As per the Faculty Council By-Laws, the Executive Committee received and reviewed External Reviews for the Centre for Faculty Development, the Centre for Forensic Science and Medicine, the Centre for Interprofessional Education and the Terrence Donnelly Centre for Cellular and

3 Reports from the Dean's Office

3.1 Report from the Dean's Office

Dean Whiteside thanked the Speaker for the kind words and noted that she wasn't finished yet and has much more to accomplish in the coming months.

Dean Whiteside thanked everyone who participated in the recent strategy retreat, [Fulfilling our Potential](#), and noted that the report from the event is now online. The Dean indicated that the feedback received from the Faculty leaders at this event will help provide strategic direction to the Faculty.

Dean Whiteside noted that there has been agreement on a [guiding document](#) between the government and Ontario universities that will provide defined metrics that the universities will have to achieve. The Dean noted that the University of Toronto has been singled out amongst the group for its innovation.

Dear Whiteside mentioned that, while it is not within the purview of Faculty Council, the Faculty budget is related to the academic mission. Given the current economic climate, the Dean is working with all Faculty leads to focus on academic priorities.

3.2 Vice-Dean, Research & International Relations

Vice Dean Alison Buchan noted that there is a new expanded list of funding opportunities on the [Faculty of Medicine Research website](#). Dr. Buchan indicated that many of these are from smaller foundations that may not have been explored in the past. Due to the reform to the CIHR open grant competition, normal renewal will not be possible. Dr. Buchan indicated that these grants are likely smaller than what has been received from CIHR in the past but that they will help bridge the gap to the new CIHR process. Dr. Buchan indicated that CIHR received three times the expected number of applications to the foundation program including many who have never received CIHR funding. In March 2015, researchers can apply to a normal 5 year grant. There will be no open competition in September 2015. In March 2016 CIHR will switch to the new program.

3.3 Vice-Deans, Education

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

Dr. Rosenfield drew particular attention to the update of the eLearning Task Force and the ongoing SWOT and Gap Analysis. He invited members to participate by completing a brief survey over the coming weeks: <https://fluidsurveys.com/surveys/dc-N/elearning-swot-analysis/>

4 New Business

4.1 Research Committee

4.1.1 The Rehabilitation Sciences Institute

The following was moved by A. Buchan and seconded by S. Spadafora:

“THAT the proposal to establish the Graduate Department of Rehabilitation Science as an EDU:B renamed The Rehabilitation Sciences Institute be approved as submitted.”

Dr. Allan Kaplan indicated that this initiative was being brought forward by the current Chair of the Graduate Department of Rehabilitation Science which encompasses the Department of Occupational Science and Occupational Therapy and the Department of Physical Therapy. Dr. Kaplan indicated that the new EDU will have its own director rather than the current rotating Chair system which has been onerous for the Chairs of these two departments.

The motion passed.

4.1.2 The Centre for Integrative Medicine

The following was moved by A. Buchan and seconded by S. Verma:

“THAT the proposal to establish The Centre for Integrative Medicine as an EDU:C be approved as submitted.”

Dean Whiteside noted that the proposed centre represents a partnership between Medicine and Pharmacy. The Dean indicated that integrative medicine is the blending of traditional medicine with western medicine and noted that many faculty members are involved in blended practice or engaged in basic science research related to traditional medicine. The main hospital partner is the Scarborough Hospital and, though official collaborators are limited at this time, there are many interested partners. Dean Whiteside noted that a director has been hired to lead the Centre.

Dr. Ian Witterick asked why the partnership in China was limited to the two universities in Hong Kong. The Dean indicated that this was just a starting point and that these two institutions have a focus on eastern medicine. There are plans to expand the partnership with other universities in China.

Dr. Witterick also inquired as to how the success of the Centre would be measured. The Dean indicated that the Centre would be part of the five year external review process, as are all Faculty of Medicine EDU-Cs.

Narayan Chattergoon asked if consideration had been given to including East Indian medicine. Dean Whiteside indicated that there was no one currently involved with that focus but that the Centre is not limited to Chinese medicine. The academic mission of the Centre does not limit its scope.

Dr. Jack Barkin inquired as to how the Centre would be funded. The Dean indicated that the two partner Faculties have provided a small amount for startup costs. There is also a three million dollar endowed Chair for the director. Fundraising will also be ongoing.

The motion passed.

5 Standing Committee Annual Reports

5.1 UME Board of Examiners

Dr. Blake Papsin praised the work of the Board and noted that they are both hardworking and innovative. Since he's taken over as Chair, the group meets more frequently than it has in the past (approximately 11 times per year) which allows the Board to react to issues earlier. This, along with better processes such as better differentiation between extra work and remediation and defining certain courses as unremediable, has made the Board more efficient. Dr. Papsin presented the Board statistics found on page 30 of these minutes. Four first year students are currently still undergoing remediation. There are a large number of students on Leaves of Absence due to better process and support. The large number of students on remediation in upper years is related to the iOSCE but most of these students remediate with no issue.

5.2 MRS Board of Examiners

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

The Medical Radiation Sciences 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 MRS Board of Examiners met 4 times in 2014 with one addition meeting scheduled for next week. The BOE has reviewed the cases of 23 students so far this year. One student was reviewed twice in 2014.

15 students were placed on remediation with 3 of these being for reasons of professionalism. 4 students were placed on remediation with probation. 3 students received modified programs without a change in academic status.

6 Adjournment

The meeting was adjourned at 5:05pm

Council of Education Vice-Deans Faculty Council Report

September 29, 2014

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Office of the Education Vice-Deans, Integrative Activities

eLearning Task Force – Update

In January 2014, the Faculty of Medicine launched an **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.

Task Force membership **continues to grow**, spanning across all of the portfolios and education units and consisting of undergraduate, postgraduate, graduate and adult learners. The Task Force includes representatives from the Ontario Institute of Studies in Education, Biomedical Communications and the University of Toronto Innovations and Partnerships office.

The eLearning Task Force is **currently conducting** a high-level SWOT and Gap Analysis within the FOM community to identify the gaps between where we are today and where we want to be over the next decade and beyond. The specific methodological steps include:

- Completing an inventory of eLearning efforts and resources across the Faculty,
- Conducting a literature review and an environmental scan of best practices in eLearning,
- Interviewing global leaders in eLearning, and
- Conducting focused interviews with learners, internal and external stakeholders.

The **Task Force's recommendations** will enable us to further position the FOM 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.

One of the core strengths of this project is how highly collaborative it is. We want to involve as many of our stakeholders as possible to make this an engaging and participatory process. In addition to gathering information (through completed surveys, data collection and analysis, and focused stakeholder interviews), we will also be sharing information throughout the process. We are currently developing a website to share our findings in real time, and a draft report is scheduled for completion by late October with a final report projected for December 2014.

At this time, we invite you to contribute to this project by sharing the unique eLearning strengths, weaknesses, opportunities and threats that you perceive within your individual portfolio. Your feedback is exceptionally valuable to this project, and we hope that you will **share your perspective** with us through a brief survey: <https://fluidsurveys.com/surveys/dc-N/elearning-swot-analysis/>

If you would like to learn more about the eLearning Task Force, please contact Lindsey Fechtig at lindsey.fechtig@utoronto.ca.

Education Achievement Celebration – Save the Date

The Education Vice-Deans are pleased to announce the date of the 2015 Education Achievement Celebration:

Tuesday May 12, 2015

5:00 pm – 7:00 PM

Great Hall, Hart House (7 Hart House Circle)

Education Development Fund – List of funded projects

We are pleased to announce the recipients of the 2014 Education Development Fund:

The Creation of a Web-based Learning Module for Indigenous Health Education

- Drs. Lisa Richardson and Jason Pennington, Department of Medicine

Exploring Continuity, Integration, Context and Curriculum during Longitudinal Integrated Clerkship (LIC) Training

- Drs. Karen Weyman and Maria Mylopoulos, Department of Family and Community Medicine

Fostering Continued Professional Development in the Workplace: TESCoP (Teaching and Education Scholarship Community of Practice)

- Drs. Debbie Kwan and Denyse Richardson, Pharmacy and Medicine

Adapting Theatre Practice to Enhance Role-playing and Communication Skills of Occupational Therapy Trainees

- Dr. Jill Steir, Occupational Science & Occupational Therapy

Developing a Lifelong Learning Curriculum to Prepare Psychiatry Residents for Continuing Professional Development

- Drs. Sanjeev Sockalingam and David Wiljer, Department of Psychiatry

The Health Advocate Role in Family Medicine and Psychiatry Residency Curricula

- Drs. Sophie Soklaridis and Carrie Bernard, Department of Family and Community Medicine and Psychiatry

Development of an Introductory eLearning Course on Clinical Research Methods and Quality Improvement for the Toronto-Addis Ababa Academic Collaboration

- Drs. Stefan and Neill Adhikari, Medicine (Anesthesia)

Resource Stewardship Workshop: Teaching Internal Medicine and Pediatric Residents to Communicate Effectively with Patients to Avoid Potential Harm from Unnecessary Diagnosis Tests

- Drs. Geetha Mukerji and Adina Weinerman, Department of Medicine and Pediatrics

Implementing a Point-of-Care Ultrasound Curriculum for CCFP-EM Residents

- Drs. Deborah Leung and Jordan Chenkin, Department of Family and Community Medicine, Division of Emergency Medicine

Developmental Evaluation of Applied Clinical Pharmacology as a New Field of Study in the Master of Science in Pharmacology Program

- Drs. Cindy Woodland and Michelle Arnot, Department of Pharmacology and Toxicology

Evaluation of Short-term Field-based Global Health Training Programs Through Trainee and Host Community Perspectives

- Dr. Sumeet Sodhi, Department of Family and Community Medicine

High-Fidelity eLearning to Support Competency-based Residency Training

- Drs. Meredith Guiliani and Caitlin Gillan, Radiation/Oncology

Undergraduate Medical Education Faculty Council Update

CaRMS – 2014 Match Results

- 94% of UofT MD students who applied to Canadian residency positions were matched in the first iteration of CaRMS (national average = 95%)
- 55% of UofT MD students who applied to Canadian residency positions were matched to UofT residency programs (national average = 13%)
- 39% of UofT MD students matched in the first iteration of CaRMS were matched to Family Medicine
- Two UofT MD students matched to residency programs in the United States
- Following the second iteration of CaRMS, 7 of 16 UofT MD students were successfully placed in residency programs

Admissions – Fall 2014 Entry

MD Program

	Fall Entry
Applicants	3463
Files Reviewed	1990
Interviews	600
Offers	336*
Acceptances	268**

*including 6 deferrals from fall 2013 entry

** including 9 deferrals for fall 2015 entry

MD/PhD Program

	Fall Entry
Applicants	116
Files Reviewed	88
Interviews	43
Offers	12*
Acceptances	9*

*including 2 current MD students

Update – Longitudinal Integrated Clerkship

At its February 10, 2014 meeting, Faculty of Medicine Faculty Council approved a proposal to introduce a voluntary **Longitudinal Integrated Clerkship (LiNC)** experience that MD students can apply to complete in place of the program's existing third-year Clerkship. Since that time, work on the project has been progressing nicely and is on schedule.

The ultimate goal is to have 50 students (approximately 20% of the class) in a LInC across all four academies on an ongoing basis, starting with the 2016-17 academic year, with the potential of further expansion in the future. A notification of curricular change has been submitted to CACMS.

Implementation of the LInC experience for the 2016-17 academic year will be informed by a LInC pilot program, which is scheduled to run over the 2014-15 and 2015-16 academic years, as follows:

- For the 2014-15 academic year, eight students from one of our four academy sites (Fitzgerald Academy) applied to complete and were accepted into the LInC pilot program. (One of the eight students subsequently decided to pursue a PhD and withdrew from the LInC pilot. The space will not be filled.)
- For the 2015-16 academic year, plans are underway to expand the LInC to some or all of the other academies (Peters-Boyd, Wightman-Berris and the Mississauga Academy of Medicine). Consultation and engagement with and within the academies and their hospital partners is ongoing.

In the spring 2014, faculty, staff and students were provided with an opportunity to vote for their favorite Longitudinal Integrated Clerkship acronym. With almost 50% of the 324 votes, LInC was chosen.

For the 2014-15 LInC pilot, individual schedules, with exam times, have been created for each of the participating students. Enhancements have been made to MedSIS to support the creation of individualized and adaptable timetables.

A critical feature of the LInC experience is that students work longitudinally with a small number of preceptors, which supports the development of a mentoring relationship with these supervisors. Owing to the novel nature of this teaching and mentoring, faculty development has been and continues to be an important priority. A faculty development event was held at St. Michael's Hospital on June 23, 2014. Further events, including sessions being held by clinical departments, are planned for the future.

The **LInC Communications Subcommittee** has been hard at work developing tools to ensure that the LInC model is recognized and understood by health care providers at the participating hospitals. Such tools include one-page information documents, stories in hospital-based newsletters, webinars, an information card that LInC students can provide to patients and health care providers, a LInC wordmark, and a lanyard that clearly identifies LInC students.

Students in the LInC will have as a focus of their clinical learning a panel of patients, which will consist of 50-75 patients who represent various developmental milestones of a person's life and reflect diversity in the population in terms of ethnicity, gender, ability and other attributes. Collaboratively, all clerkship directors devised a list of 34 required panel patients with a variety

of demographic and clinical characteristics to optimally support student learning. Early on in the clerkship year, primary preceptors will help LInC students acquire the required panel patients. Steps have been taken to ensure that adequate technology is in place such that LInC students are able to follow the patients on their panel, log their patient panel activities, and provide reflections on these activities. Information regarding LInC students' patient panels will be stored on secure servers at the participating hospitals. These information storage systems have been (and will be) developed in consultation with hospital-based privacy commissioners, and LInC students will receive extra training on the relevant hospital-based information systems.

Students in the LInC pilot will be required to complete an advocacy project in place of the academic project completed by block clerks. The goal of the project is to engage LInC students in the CanMEDS Advocacy role through scholarly work and proposed or active interventions relating to patients who they identify on their patient panel. A working group was formed to develop learning objectives, format, timelines and evaluation requirements. Dr. Philip Berger, the UME Advocacy Lead, will provide mentoring to the seven LInC students in 2014-15 regarding their projects.

A **Research Subcommittee** has been established. Drs. Karen Weyman and Maria Mylopoulos submitted an Education Development Fund application regarding the LInC, which was awarded in the amount of nearly \$20,000. Four LInC-related poster abstracts were submitted for The Muster Conference in Uluru, Australia. The topics are: students' perspective, patient panel, roadblocks and challenges, and faculty development.

Update – Preclerkship Renewal

Work is well underway on a significant renewal of the MD program's preclerkship curriculum. Consultations regarding the preclerkship renewal, including endorsement of the renewal process by the UME Executive Committee, were initiated the summer 2013 and continued over the 2013-14 academic year. A summary of the renewal process was provided in the April 2014 UME report to Faculty Council.

Full implementation of the new preclerkship curriculum model is planned for the 2016-17 academic year. Development of the new preclerkship curriculum model will be informed by two pilot projects, as follows:

- Students entering the MD program in the fall 2014 will be introduced to a three-week introductory version of the renewed preclerkship curriculum in November as part of the existing first year Structure and Function course. This **Phase 1 curricular change** is constructed around a virtual congestive heart failure case that students currently experience (via Mr. GB), which will be complemented by a COPD case during respiratory week and a hypertension case during cardiovascular week. Further integration will take place in related sessions in the first year Art and Science of Clinical Medicine (ASMC-1) and Community, Population and Public Health (CPPH) courses.

- Planning is underway for a **Phase 2 implementation** for both the first and second students during the 2015-16 academic year.

Both modules will be evaluated in collaboration with the Wilson Centre for Research in Education.

A Concept Organization Group – comprised of 13 members of the preclerkship committee – is working on **i)** identifying the overarching content framework for the curriculum and the sequencing of the concepts for the first two years, **ii)** developing learning objectives, and **iii)** identifying specific cases (including revised versions of existing PBL cases) that can be tied to the concept and curriculum.

Three other working groups – Portfolio and Assessment, Toronto Online Patient-Centered Integrated Curriculum (**TOPIC**), and Integrated Clinical Experience (**ICE**) – that align with major components of the new curriculum model have identified objectives as well as processes for achieving those objectives.

A consulting firm has been retained to provide high-level project management support. The firm has successfully supported undergraduate medical education curricular renewal projects for the UBC Faculty of Medicine and NOSM.

Next steps include presentation of a formal proposal to the Faculty Council Education Committee in October 2014 and, from there, to Faculty Council in February 2015.

Update – Academy Membership Framework

Although the Academy system was identified as a particular strength of the MD program by the accrediting bodies in their October 2012 accreditation report, there are no formal documents that describe the structure and governance of the Academies. Between April and August 2013, Sarita Verma (Deputy Dean and Associate Vice-Provost, Health Professions Education) and Jay Rosenfield (Vice-Dean, Undergraduate Medical Professions Education) led a series of consultation meetings with the Academy Directors and designated education leads of the University's nine fully-affiliated hospitals and four major community-affiliated hospitals. The focus of those meetings was the development of an Academy Membership Framework, including Academy membership type definitions (and corresponding roles and responsibilities) as well as principles and guidelines intended to inform the management and collaborative delivery of the MD program through and within the Academy system.

The designated education leads of the nine fully-affiliated hospitals and four major community-affiliated hospitals who participated in the consultation meetings confirmed that they would like to maintain the existing Academy configurations.

At an Academy Summit held on May 29, 2014, the designated education leads (or their representative) of the University's nine fully-affiliated hospitals and four major community-affiliated hospitals unanimously endorsed the Academy Membership Framework, which had been updated to reflect feedback provided during the consultation process. They also endorsed the development of an Academy Letter of Understanding template. Work on the template letter is in progress, with the goal of presenting a final draft to the TAHSN CEOs in the fall 2014.

Summer Mentorship Program – 20th Anniversary Event

The **Summer Mentorship Program (SMP)** provides high school students from under-represented populations with an opportunity to explore health sciences at the U of T over four weeks in July. It is offered to approximately 50 students each year. An event marking the 20th anniversary of the SMP was held on the evening of July 30, 2014 at the Hart House Great Hall. Over 230 people attended the 20th anniversary event, including current SMP students and alumni, parents of SMP students, founders of the program, and faculty and staff from the Faculty of Medicine and other health professions Faculties (Pharmacy, Social Work, Dentistry, Nursing, and Kinesiology). Dr. Leslie Nickell graciously hosted the event and the speakers included Dean Whiteside, Indigenous Elder Jacqui Lavalley and two SMP alumni: Erik Mandawe and Husam Abdel-Qadir. It was an auspicious occasion celebrating the program's continued success.

Governance & Leadership

- Dr. Adelle Atkinson was appointed Acting Associate Dean, Undergraduate Medicine Admissions and Student Finances, effective July 1, 2014 for a six month term while Dr. Mark Hanson is on administrative leave
- Dr. Amy Bourns was appointed as the first Faculty Lead for LGBTQ (Lesbian, Gay, Bisexual, Transgender & Queer) Health Education, effective July 2014
- Dr. Neil Sweezey was appointed Director for Comprehensive Research Experience for Medical Students (CREMS) Programs, effective September 15, 2014
- Dr. Allison Chris was appointed as Course Director for the new Community, Population and Public Health (CPPH) course, effective July 1, 2014
- Dr. Debra Katzman was appointed as Course Director for the new Health Science Research (HSR) course, effective August 1, 2014
- Dr. Heather Sampson was appointed as Course Director for the final offering of the Determinants of Community Health-2 (DOCH-2) course in the 2014-15 academic year

Physician Assistant Program

1. Move to September Start:

The BScPA program had a January start date for student entry since inception (January 2010). For 2014, a cohort began the program in January, but a second cohort also began Sept 2, 2014. Moving forward, all cohorts will start in September. This aligns the program with the Faculty of Medicine programs as well as most of the programs within the greater university. Students will also benefit by completing the program in August, well before the annual national certification examination sitting in October.

2. Admissions:

	Jan 2010 Entry	Jan 2011 Entry	Jan 2012 Entry	Jan 2013 Entry	Jan 2014 Entry	Sept 2014 Entry
Applicants	160	152	236	215	259	244
Files Reviewed	117	71	91	90	91	107
Interviews	64	49	59	66	66	66

3. Changes to Admissions requirements:

In response to the need to extend the applicant pool, allowing for the best students to have access to the program, and to potentially begin to increase the cohort size, the BScPA Program Admissions & Selection Committee has approved the following changes in the admission requirements:

- 1) 2.7 CGPA is now a required minimum for consideration (previously there was no requirement, although a preference of 3.0 GPA was posted)
- 2) Required health care experience is reduced to 910 hours from 1680 and broadened to include non-direct patient care as well as volunteer (within the last 5 years preferred)

4. Curricular review and changes:

The **Curriculum Working Group of the BScPA Program Restructuring and Integration Task Force** has suggested that while the curriculum content of the BScPA program is sound (as evidenced by success rate on the national competency exam as well as employment rate), efficiencies can be found to reduce student cognitive load and staff burdens. Previously, in the second year (clinical year) of the program, students also participated in academic courses throughout the year. Academic courses ran simultaneously with the clinical rotations. Academic courses have now been concentrated into dedicated weeks prior to and between clinical rotations. This allows students to increase their didactic learning prior to their first clinical

rotation and improve focus on daily preparation for clinical rotations as suggested by preceptors.

Medical Radiation Sciences Program Updates:

The newly redesigned Nuclear Medicine and Molecular Imaging (NMMIT) stream of the MRS Program launched in September 2014 with an initial cohort of 16. The main features of the redesigned NMMIT program allow students to build competency as they progress through the program and include:

- Hybrid delivery model in both asynchronous and synchronous learning environments (live, tutorial, simulation and lab work)
- Integrated program design with common content threads and competencies interwoven across courses and learning environments
- Earlier clinical experiences with three 4-day clinical placements being introduced into the 4th and 5th semesters of the program
- Case-based learning to encourage critical inquiry and problem solving abilities

An extensive evaluation plan has been drafted to assess the design and implementation of the new curriculum and the desired outcomes. The plan has been mapped to monitor and capture data over the next four years, with a long term focus for Continuous Quality Improvement.

For the academic year 2014/2015 the Radiation Therapy stream of the MRS Program will be hosting a student from Brazil enrolled in the **Ciência sem Fronteiras (CsF)** Program (formerly Science without Borders). This is the first time that a student from the CsF Program has been placed in the Faculty of Medicine.

2014/2015 MRS Program Enrollment:

Total Program Enrollment: 269

- Radiological Technology: 120
- Nuclear Medicine and Molecular Imaging Technology: 16
- Radiation Therapy: 133*

**Including the CsF student who will attend for 2 semesters only*

Postgraduate Medical Education Faculty Council Update

PGME Topics/Issues/Events	
<u>PGME Leadership & Annual Report</u>	<u>ICRE: PGME Showcase Focusing on CQI and Supporting Best Practices</u>
<u>CARMS 2015</u>	<u>Internal Review Committee and Accreditation</u>
<u>Chief Resident Leadership Workshop</u>	<u>Medical Trainee Days Project</u>
<u>Global Health</u>	<u>MERS-COV Screening</u>
<u>Graduation Events</u>	<u>PGMExchange</u>
<u>Guidelines for Educational Responsibilities in Clinical Fellowships</u>	<u>Teaching and Academic Capacity in Toronto (TACT)</u>
<u>Gullane Task Force on Best Practices in PGME Program Support</u>	<u>Toronto International Summit on Leadership Education (TISLEP)</u>

1. [PGME Leadership & 2013-14 Annual Report](#)

Dr. Sal Spadafora was appointed to Full Professor this year. He is scheduled to take his administrative leave from January to December 2015 and Dr. Glen Bandiera will serve as Acting Vice Dean during this period.

Dr. Linda Probyn will continue in the position of Director, Education in the PGME Office and Dr. Anne Matlow will continue as Academic Lead for Leadership and Strategic Initiatives.

Maureen Morris joined the PGME Office in April 2014 as Associate Director, Operations. In this capacity, Maureen will manage all activity related to trainee registration, transfers, licensing, and 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. [CARMS 2015](#)

The number of **CARMS** entry residency positions for 2015 will remain at the 2014 intake number: 417. The Quotas Allocation Committee met in the summer and some program positions were decreased and others increased based on several considerations including program capacity, physician employment opportunities, government priorities and societal need.

3. [Chief Resident Leadership Workshop](#)

On August 12, 2014, PGME held its **9th Annual Chief Resident Workshop**, with opening remarks from the Dean and Dr. Susan Lief as the keynote speaker. Participation in the event was the highest ever, with attendance topping 100. Other sessions presented were Wellness, HealthForceOntario, residents as teachers and a “Chief Resident Primer” presented by the resident’s association (PARO). A panel discussion of former and current chief residents also garnered a great deal of interest.

4. [Global Health](#)

The first annual **PGME Global Health Day** was held on Tuesday May 27th at the Li Ka Shing Knowledge Institute. Over 175 residents, fellows, and medical students participated in the information sessions with facilitators and mentors such as Colleen Flood, Kelly MacDonald, Doug Sinclair, and Raghu Venugopal. Certificates were also distributed to residents who completed the 2-year Global Health Education program. Guidelines for residents undertaking Global Health electives have been established, and Pre-Departure Training sessions scheduled for November 18, February 5, and May 26 at the PGME Boardroom.

5. [Graduation Events](#)

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.

6. [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 but 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.

7. Gullane Task Force on Best Practices in PGME Program Support

After the April 2013 Accreditation, the Dean appointed a **Task Force on Best Practices** in PGME Program Support under Dr. Patrick Gullane to review supports to residency program sustainability. The Task Force's report was released in July 2014 and includes recommendations for improved communication, greater transparency and creation of an accountability framework to resource residency programs. The PGME Office will work with all Program Directors and program assistants in 2014-15 to implement the report's recommendations.

8. ICRE: PGME Showcase Focusing on CQI and Supporting Best Practices

The **Royal College International Conference on Residency Education (ICRE)** will be held in Toronto October 24-28th. PGME has been invited to present at a special session focusing on Continuous Quality Improvement. The showcase will reflect UofT 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 will include 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.

9. Internal Review Committee and Accreditation

The Internal Review Committee will start a new review cycle beginning in Fall 2014. Logistical planning is underway to prepare for the 100+ regularly scheduled internal reviews of residency programs. Over the spring and summer several programs prepared follow up accreditation reports to the Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada. In Spring 2014, an application for new program status was submitted and approval received over the summer (i.e. General Internal Medicine). 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.

10. Medical Trainee Days Project

The development work for the **Medical Trainee Days (MTD)** project is almost complete and the Faculty will begin to submit MTD reports to the Ontario Ministry of Health in 2014-15. The project was initiated in response to changes in data collection and implementation of the 275 day cap per learner. A collaborative initiative of the Faculty of Medicine and its affiliated hospitals, the Ontario Ministry of Health, and the Council of Ontario Faculties of Medicine, the new structure will 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.

11. MERS-COV Screening

In May 2014, the Dean announced that the Faculty of Medicine would be screening for the MERS-CoV in our trainee community. Communications were prepared and PGME developed an on-line screening questionnaire which was shared with other Faculty offices. Newly arriving trainees from the specified geographic areas received an email and a link to the questionnaire as well as current trainees returning from those areas of the world. No trainees have been reported with the virus to date.

12. PGMExchange

In June 2014, **PGME launched PGMExchange**, a central repository to collect and share learning resources within the UofT 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.

13. 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, excellence and equity in clinical experiences.

14. Toronto International Summit on Leadership Education (TISLEP)

On October 22nd, 2014, the University of Toronto with the Royal College of Physicians and Surgeons will be hosting a **pre-ICRE summit**. This inaugural summit will be co-Chaired by Dr. Adalsteinn Brown (IHPME, U of T) and Dr. Fiona Moss (Editor, Postgraduate Medical Journal, England). The Organizing Committee for the Summit is chaired by Dr. Anne Matlow. The event will bring 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 is 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.

Continuing Professional Development Faculty Council Update

1. Continuing Professional Development

1.1. CPD Strategic Planning Retreat

The CPD Strategic Planning Retreat has been rescheduled to October 1, 2014. During the retreat we will address the CACME accreditation standard that was in partial compliance (Standard 1.1), which cited that CPD did not clearly define its target population. In addition, we will review and revise our current strategic priorities and initiatives.

1.2. CPD Awards 2012-13

The 2012-13 academic year's CE Award Winners are as follows:

Colin Woolf Award for Long Term Contributions to CE:

Dr. Paula Ravitz, Associate Professor, Department of Psychiatry, Faculty of Medicine, University of Toronto, for the breadth and depth of her contributions to CPD in a relatively short period of time: Leadership, scholarship, research, publications and program development.

Colin Woolf Award for Excellence in Course Coordination:

Princess Margaret Cancer Centre Accelerated Education Program

David Jaffray, Professor, **Pamela Catton**, Professor, and **Nicole Harnett**, Assistant Professor, Department of Radiation Oncology, Faculty of Medicine, University of Toronto, for developing a broad interprofessional curriculum in radiation oncology that looks at impact on practice as an outcome.

Colin Woolf Award for Excellence in Teaching:

Dr. Miriam Weinstein, Associate Professor, Department of Paediatrics, Faculty of Medicine, University of Toronto, for her glowing teaching evaluations from multiple course participants over several years.

David Fear Fellowship

Dr. Douglas Wooster, Professor, Department of Surgery, Division of Vascular Surgery, Faculty of Medicine, University of Toronto, to develop an electronic vascular Ultrasound curriculum.

Ivan Silver Award for Innovation in CPD:

Drs. Joel Sadavoy, Professor, **Virginia Wesson**, Assistant Professor, Department of Psychiatry, and **LJ Nelles**, PhD student/Wilson Centre Fellow, University of Toronto, for their train the trainer “CARERS” program designed to educate family members how to care for their relative Alzheimer’s disease with the ultimate goal to allow the Alzheimer’s patient to remain longer in a home environment before becoming institutionalized.

Interprofessional Team CE Award:

Dr. Michael Pollanen, Associate Professor, Department of Laboratory Medicine and Pathology, Faculty of Medicine, University of Toronto, for the interdisciplinary interprofessional program for coroners, lawyers and pathologists as well as technologists on suicide.

There were no recipients this past year for the Dave Davis Research or Fred Fallis Online Awards.

1.3 CPD Academic

The new office under leadership of **Dr. Suzan Schneeweiss** was recently established to address the academic needs of our over 500 course directors. Key support services provided include:

- a. Education consulting
- b. CPD leadership development
- c. Resources for best practices in courses design and development
- d. CPD Education Scholarship grants
- e. CPD Awards

1.4. Internally managed courses

The office of CPD works to align our educational programming with the health care needs in our community and across Ontario. We have partnered with several stakeholders to address key issues affecting patient care, quality improvement and patient safety. **Key examples include:**

- a. **Dr. Anna Banerji**, a Paediatric Infectious Disease specialist and Director of Global Health at CPD has established the first interprofessional Indigenous Health Conference which will begin a dialogue about disparities and burden of disease among indigenous people and address issues such as equity, cultural competence, stereotypes and misperceptions.

- b. CPD has successfully partnered with the College of Physicians and Surgeons of Ontario to address needs of Ontario physicians by developing **courses in Medical Record Keeping and Safe Opioid Prescribing**. CPD has also applied innovative teaching strategies with eLearning technology and flipped classroom methodology to enhance learning outcomes.
- c. **Quality improvement** has been identified by the Ontario Ministry of Health and Long-Term Care as a strategic priority to transform healthcare delivery across the province by developing capacity in quality improvement, change management and leadership. Two quality improvement programs, entitled IDEAS (Improving and Driving Excellence Across Sectors) and led by Dr. Adalsteinn Brown, were developed to address these needs; a 9-day advanced and a 2-day introductory program. Over 3 years, 360 participants will complete the 9-day advanced program providing faculty capacity to lead quality improvement projects and programs in their home communities. University of Toronto CPD led in the development of a needs assessment for the 2-day introductory program and collaborated with the 5 other medical schools in the Province of Ontario to support the design and delivery this program across the province. University of Toronto CPD is currently implementing the 2-day introductory program and over the next 2 years will train 360 participants. Collectively, these programs will ultimately reach more than 2500 clinicians and managers building our capacity and sustainability for quality improvement in the province.

2. Standardized Patient Program

2.1. Strategic Plan

We completed our **five-year strategic plan** and have begun implementing the year one priorities. The four goals are: improve operational effectiveness and efficiency, develop an academic mandate, be recognized as a leader in experiential education, and achieve fiscal stability. In 2014, the Standardized Patient Program marks their 30th year at the University of Toronto. At a gala event in November we will celebrate this achievement, and officially launch the implementation of our strategic plan.

2.2. Notable new and developing projects

We designed and implemented a licensing OSCE for the College of Denturists of Ontario. Due to this success, we will be coordinating two similar exams for them next year. We are collaborating with Holland Bloorview Kids Rehabilitation Hospital to build simulation scenarios on effective communications skills with clients and families. We are also working with the Peel

Police in training officers to interact effectively with individuals with mental health issues, and are proposing a similar program for Toronto Police Service. We're preparing for the second phase of federal and provincial funding to arrive for the Internationally Educated Health Professionals Project. Our goal for the next three years will be to add to the five open source e-learning modules that we have already created.

2.3. International simulation community

Diana Tabak was invited to co-present a **simulation and communities of practice workshop** with Walter Eppich in Poland for the SESAM Conference. She also co-presented a workshop on SP methodology with Turkish and Swiss faculty. **Nancy McNaughton** was invited to conduct a week-long faculty development course on live simulation fundamentals for the Faculty of Medicine at Kuwait University, and simulation training modules and workshops in multiple locations in Australia.

3. i+e (Innovations + Education) Office

The **i+e office** was established in February 2013. Its purpose is to offer business services support that better enable faculty to develop best-in-class educational products and services. The **i+e Office** is finalizing 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 4 new project related to business development, communications, marketing and reputation management.

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

3.1. Advanced Clinician Practitioner in Arthritis Care Program (ACPAC)

i+e is supporting a national program expansion of The Advanced Clinician Practitioner in Arthritis Care Program (ACPAC). Negotiations with educators in Alberta is underway and we anticipate a nationally expanded ACPAC program for 2015/16. ACPAC is a post licensure program designed to enhance the skills and scope of practice of allied health professionals in the management and treatment of arthritis and is funded by the Ontario Ministry of Health and Long Term Care. The Program's academic home is in CPD and financial management, administrative and business development support is provided through i+e.

3.2. CoursePeer Inc. and Eve

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).

3.3. Copyright Management

As part of a suite of business support services i+e offers, the office has developed a “turn-key” solution for Copyright Management. Through consultation with the Dean's office, the Office of Risk Management, the Office of Vice President of Research and Innovation and legal services, i+e has developed a template "**Content License Agreement**" that can be used to manage Copyright-based assets developed by faculty and staff at the FOM. The Content License Agreement represents a significant step towards the development of alternative revenue streams derived from education-based assets for departments and faculty.

Office of Graduate and Life Sciences Education Faculty Council Update

1. New Appointed Vice-Dean, Graduate and Life Sciences Education

Professor Allan Kapan has been appointed Vice-Dean, Graduate and Life Sciences Education for a five-year term effective July 1, 2014.

2. Undergraduate

Communication Strategies

- a)** Third Annual Graduate and Undergraduate Research Information Fair will be held on November 13, 2014, Medical Sciences Building. Exhibitors from our undergraduate, graduate departments, as well as hospitals, student associations, School of Graduate Studies will be attending.
- b)** Second Annual Human Biology Undergraduate Research Day (TBA)
- c)** Monthly google analytic reports for the Graduate and Life Sciences Education website.
- d)** Created a video on How to Find an Undergraduate Research Opportunity.

Data Collection

- a)** Third annual undergraduate student survey was sent to all life sciences fourth year graduating students. Preliminary 2014 data is similar to last year's survey and will be analyzed by the Life Sciences Planning Curriculum Committee.
- b)** Department/College questionnaire regarding undergraduate life sciences research was compiled by Faculty of Arts and Science. Preliminary data will be analyzed by the Life Sciences Planning Curriculum Committee.

Undergraduate Faculty Teaching Awards

The Undergraduate Faculty Teaching Awards [competition deadline will be January 30, 2015](#).

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

Plans for Graduate Recruitment

GLSE will be attending UTSC and UTM Graduate and Professional School Fair.

Life Sciences Undergraduate Research Opportunities Fund

A funding strategy was developed for undergraduate research opportunities. The [donation link](#) is located on the Faculty of Arts and Science and Graduate and Life Sciences Education website. Donations will help support the expansion of critical research opportunities for undergraduate life sciences students in their second, third and fourth years.

Joint Working Group on Undergraduate Tutorials

[The Joint Working Group](#) was a collaborative initiative undertaken by the University and CUPE Local 3902, Unit 1 and made recommendations designed to enhance the training provided to teaching assistants assigned to tutorials. The Provost accepted the recommendations contained in the Report and the University has committed to offer paid training the first time a teaching assistant's appointment includes facilitating tutorials in any of the four categories of tutorials defined in the Report. The categories are discussion-based sessions, skill development sessions, Q&A and exam/test/assignment review sessions, and laboratories/practical's. The Centre for Teaching Support & Innovation (CTSI) has developed a number of resources to support this initiative, and to enhance tutorial teaching for instructors and teaching assistants.

3. Graduate Education

Graduate Awards

- 25 Faculty of Medicine-wide OSOTF, Expendable and Other Endowed Awards were adjudicated in June and July 2014 with over \$538,000 available for distribution for the 2014-15 academic year.

- 201 OSOTF, Expendable and Other Endowed Awards with over \$14.8 million was distributed to 14 graduate departments, 21 clinical departments, and 7 affiliated hospitals (total 42) for distribution for the 2014-15 academic year.
- A total of \$4,388,735 University of Toronto Fellowships was distributed in June to 14 graduate departments for 2014-15 graduate students funding.
- 68 QEII-GSST (49 doctoral-stream awards and 19 clinician/surgical-scientist trainee awards) at \$15,000 each are to be distributed for the 2014-15 academic year (total \$1,020,000).
- \$440,000 Doctoral Completion Award (DCA) has been allocated to 12 graduate departments for 2014-15 academic year. The DCA is to support full-time PhD students who are beyond the funded cohort and within time-limit for the degree.
- \$276,748 will be distributed to 6 graduate departments with professional masters programs in early-Fall 2014.
- Over 50 graduate studentships, including CIHR CGS D, Vanier and other external doctoral research awards paid through ROSI to doctoral-stream students with Principal Investigators affiliated with the Faculty of Medicine.

Graduate Faculty Teaching Awards

The Graduate Faculty Teaching Award **Competition deadline will be early-December 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 \$1,000 cash prize.

Postdoctoral Fellowships

The Faculty of Medicine Postdoctoral Fellowships Review Committee adjudicated the 2014-15 Banting Postdoctoral Fellowships in early-August 2014 and forwarded 8 nominations to the University for submission to the CIHR and NSERC agencies for nation-wide review. Each Fellowship is worth \$70,000 per year for two years.

Graduate Student Information System (GradSIS)

GradSIS, a web based Student/Supervisor Agreement Form with a mechanism for doctoral-stream students, the supervisors and 13 graduate departments to submit and formally agree upon a student's graduate funding. In our continued effort to make GradSIS easier to use, GLSE invested over \$15,000 in functional changes, in place for 2014-15.

Office of Integrated Medical Education Faculty Council Update

The **OIME** continues to function at full speed and the clinical preceptor payments are proceeding within the allocated \$6 million /annum MOHLTC budget. We do not anticipate any issues with the IME programs at this time. All major projects including the Learner Affairs projects that support orientation, badges and pagers are proceeding well. The **TACT project (Teaching and Academic Capacity in Toronto Review)** is making early progress in scanning the environment and developing a tool for the ongoing assessment of teaching capacity across all our sites.

Acknowledging the significant increasing number of community-based teachers to the learning of medical students and residents at the University of Toronto, the Faculty of Medicine (through the Office of Integrated Medical Education) created three awards to recognize excellence in community-based teaching. Launched during the fall of 2012, the awards carry a cash value of \$1,000 each and are presented at the Faculty of Medicine's Annual Education Achievement Celebration. The awards are open to MDs who are clinical teachers of medical students or residents within the University of Toronto's Faculty of Medicine, and who teach and practice primarily in the community environment, including the U of T's Community Affiliates or community-based office/clinic. In 2014, we received an outstanding forty-nine nominations. Subsequently, forty-five nominees submitted complete nomination packages. A wide range of clinical specialties and community-based hospitals were represented through these stellar nominees. The committee intended to provide three awards in 2014, but a total of four awards and four special commendations were given across the three awards categories.

Please join us in congratulating the 2014 recipients of these awards listed in our OIME newsletter:

<http://www.oime.utoronto.ca/Assets/Root+Digital+Assets/Newsletters/current.pdf?method=1>

This year the **OIME will co-host a summit on Interprofessional Education in collaboration** with the TAHSN Education Committee, the Council of Health Sciences Education Subcommittee, the Center for Interprofessional Education and the Canadian Interprofessional Health Leadership Collaborative. To be held on December 2 2014, this event will bring together high level academic across the affiliated sites, health sciences and in the province to deliberate interprofessional education and its links to practice.

OIME has recently undergone **administrative changes**. Wendy Kubasik, who served as Manager for the OIME for 3 years departed the role early in August 2014 to take on a new adventure and exciting career opportunity at McMaster University. The search for the new Manager is underway. Dr Sarita Verma, Deputy Dean will have oversight of the OIME in the interim.

**BOARD OF EXAMINERS UNDERGRADUATE MEDICAL PROGRAM
FACULTY COUNCIL REPORT
ACADEMIC YEAR 2013-2014**

**SUMMARY OF ACADEMIC STANDING
DOCTOR OF MEDICINE PROGRAM**

Academic Year	# of Students	# of Cases Before the BOE	# Completing Formal Remediation*	# Successfully Remediated	# Required to Repeat**	# Promoted	OTHER
ONE	259	14	9	2	3	256	1 LOA
TWO	261	6	4	1	1	259	2 LOA 1 WD
THREE	262	49	30	18	1	257	9 LOA
FOUR	249	40	21***	19		246	3 LOA 1 WD

*Remediation for academic and/or professionalism

** Repeat Year or Specific Course(s)

*** Remediation for the iOSCE is completed during 4th Year