

PGME 2021-2022 Annual Report



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

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List of Abbreviations

Abbreviation	Definition
AHS	Alberta Health Services
AIMERS	Assessment of Internal Medicine Evaluations in Residency Study
AIMG	Alberta International Medical Graduates
CanERA	Canadian Excellence in Residency Education
CanRAC	Canadian Residency Accreditation Consortium
CaRMS	Canadian Resident Matching Service
CBD	Competence by Design
CCME	Canadian Conference on Medical Education
CFPC	College of Family Physicians of Canada
CMG	Canadian Medical Graduates
CPSA	College of Physicians & Surgeons of Alberta
CSM	Cumming School of Medicine
EDI	Equity, Diversity & Inclusion
EPA	Entrustable Professional Activities
FM	Family Medicine
ICU	Intensive Care Unit
LEaPP	The Learner Education Handover Pilot Project
MELD	Mentoring for Education Leadership Development
Non-CMG	Non-Canadian Medical Graduates
OHMES	Office of Health & Medical Education Scholarship
PARA	Professional Association of Resident Physicians of Alberta
PGME	Post Graduate Medical Education
PGY	Post Graduate Year

PPE	Personal Protective Equipment
RCPSC	Royal College of Physicians & Surgeons of Canada
RESP	Resident Education Scholars Program
SAC	Strategic Advisory Committee
SET	Simulation Educator Training
UME	Undergraduate Medical Education
U of C	University of Calgary
WISHES	Wellness Innovation Scholarship for Health Professions Education and Sciences

Postgraduate Medical Education Mission Statement

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

Highlights and New Initiatives

- The Simulation Educator Training (SET) beta course (online, asynchronous and synchronous) was successfully executed in early 2022 and ran from January 18th to March 22nd, 2022 PGME at the CSM was pleased to be the first medical institution in Canada to present this course which was offered to faculty, residents, nurses, and allied health professionals
- The University of Calgary (U of C) will undergo an external accreditation visit in the fall of 2022 which is scheduled for September 18th through September 23rd, 2022
- The Learning Site Committee was formed in September 2021 to address infrastructure and learning environment issues at multiple sites within Calgary and in regional and rural centres
- The PGME Patient Safety Council is a new initiative that was established as a forum for review of safety incidents through an educational lens
- New Ad Hoc committee on the Learner Role in Obtaining Informed Consent Committee
- New Ad Hoc committee on Rotation Vacation Requests
- New policies and operating standards approved for
 - a) Resident Selection and Interviewing
 - b) Extender Shifts
- Establishment of Patient Safety Council to review Patient Safety Learning Summaries supplied by Alberta Health Services (AHS)
- New PGME Learning Site Committee to address infrastructure and learning environment issues
- In November 2021, PGME delivered the first mentorship program and workshop (MELD- Mentoring for Education Leadership Development), leadership workshop for residents (Lead PG), Equity, Diversity & Inclusion (EDI) resources and best practices

Overview of PGME

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

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

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

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

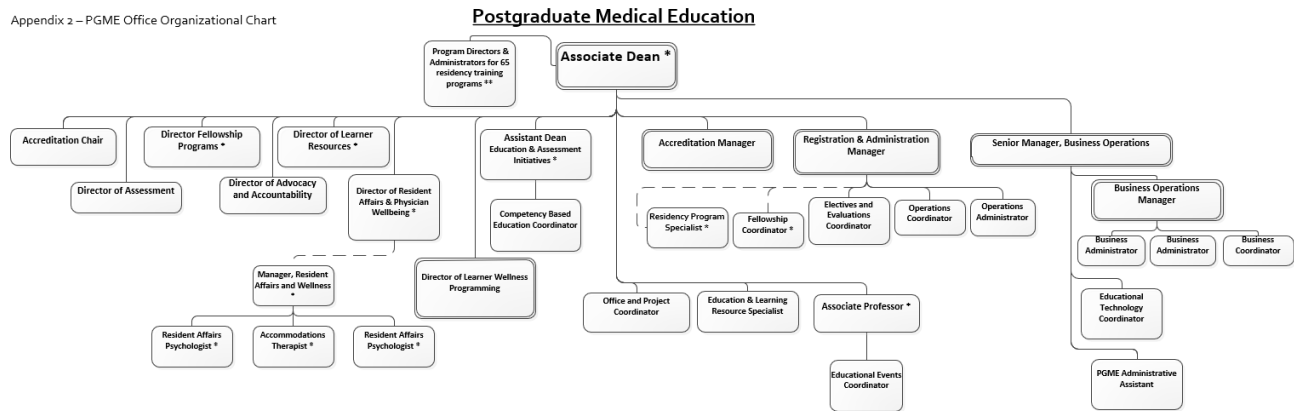
PGME Office – Organizational Chart

The PGME Office is organized into four functional areas:

- Accreditation
- Administration and Registration
- Business Operations
- Education

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

Appendix 2 – PGME Office Organizational Chart



Positions marked with an * are NOT funded through the Alberta Health Physician Education and Development Grant.
 ** Residency Training Program Directors and Administrators are funded in cooperation with AHS, APL, CCA, U of C and the PED grant.

Committees

The PGME Committee provides effective governance for the development and review of all aspects of residency education at the CSM.

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

Representation also includes the College of Physicians & Surgeons of Alberta (CPSA), Alberta Health Services (AHS), and Professional Association of Resident Physicians of Alberta (PARA).

The committee has the following subcommittees:

Subcommittees – Standing	Subcommittees – Ad Hoc	Advisory Committee
➤ Accommodations Assessment Committee	➤ PGME Learner Role in Obtaining Informed Consent Committee	➤ PGME Strategic Advisory Committee (SAC)
➤ PGME Accreditation Committee	➤ PGME Rotation Vacation Requests	
➤ PGME Allocations Committee		
➤ PGME Appeals Committee		
➤ PGME Committee for Fellowship Program Directors		
➤ Competency Based Education – Continuous Quality Improvement (CQI) Committee		
➤ PGME Learner Academic Support and Assessment Committee		
➤ PGME Patient Safety Council		
➤ PGME Policy Committee		
➤ PGME Learning Site Committee		

Resident Education Overview

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

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

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

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

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

- Medicine Hat
- Lethbridge
- Red Deer

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

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

Programs and Number of Residents in Each Program and Post Graduate Year (PGY) Level

Royal College - Number of Residents by Year and Program as at July 1 st , 2021										
Count	Program	PGY1	PGY2	PGY3	PGY4	PGY5	PGY6	PGY7	PGY8	Total
1	Anatomical Pathology	5	5	5	1	4				20
2	Anesthesiology	8	7	6	5	4				30
3	Cardiac Surgery	1	1	3	2	1				8
4	Cardiology				4	5	3			12
5	Child and Adolescent Psychiatry					3	2			5
6	Clinical Pharmacology and Toxicology						1			1
7	Clinician Investigator Program					2				2
8	Colorectal Surgery						1	1		2
9	Critical Care Medicine				1	3	2	3		9
10	Dermatology	3	3	3	4	2				15
11	Developmental Pediatrics					1				1
12	Diagnostic Radiology	5	7	5	4	7				28
13	Emergency Medicine	4	4	4	4	4				20
14	Endocrinology and Metabolism - Adult				2	4				6
15	Endocrinology and Metabolism - Pediatric				2					2
16	Gastroenterology - Adult				2	2				4
17	Gastroenterology - Pediatric				1	2				3
18	General Pathology	3	1	4	1	2				11
19	General Surgery	4	4	5	4	4				21
20	General Surgical Oncology						2	1		3
21	Geriatric Medicine				1	4				5
22	Geriatric Psychiatry					1	1			2
23	Gynecologic Oncology						3	2		5
24	Hematology				2	2				4
25	Infectious Diseases - Adult				2	2				4
26	Internal Medicine	44	35	35	2					116
27	Internal Medicine - General				8	6				14
28	Maternal Fetal Medicine						2	1		3
29	Medical Genetics and Genomics	1	2	2		2				7
30	Medical Microbiology	1	1		1					3
31	Medical Oncology				3	2				5
32	Neonatal/Perinatal Medicine					4				4
33	Nephrology - Adult					2				2
34	Nephrology - Pediatric					1				1
35	Neurology - Adult	4	3	5	3	2				17
36	Neurology - Pediatric	1	1	2	2					6
37	Neuropathology	1	1		1					3
38	Neurosurgery	2	2	3	2	4	3			16
39	Obstetrics and Gynecology	6	7	6	8	8				35
40	Ophthalmology	2	2	3	1	2				10

41	Orthopedic Surgery	5	5	5	5	2				22
42	Otolaryngology - Head and Neck Surgery	1	2	2	3	1				9
43	Pain Medicine						1			1
44	Palliative Medicine					1				1
45	Pediatric Emergency Medicine				1	3	2			6
46	Pediatric Hematology Oncology				1					1
47	Pediatric Surgery							1		1
48	Pediatrics	14	12	14	10					50
49	Physical Medicine & Rehabilitation	2	2	3	1	3				11
50	Plastic Surgery	3	2	2	1	3				11
51	Psychiatry	10	8	6	10	4				38
52	Public Health and Preventive Medicine		2	1	1					4
53	Public Health and Preventive Medicine with Family Medicine	2		2		2				6
54	Radiation Oncology	1	2		2					5
55	Respirology - Adult				3	2				5
56	Respirology - Pediatric				1	1				2
57	Rheumatology - Adult				3	2				5
58	Thoracic Surgery							1		1
59	Vascular Surgery	1	1	1		1				4
Total										648

Family Medicine - Number of Residents by Year and Program as at July 1st, 2021					
Count	Program	PGY1	PGY2	PGY3	Total
1	Family Medicine	75	77		152
2	Family Medicine - Anesthesia			2	2
3	Family Medicine - Emergency Medicine			9	9
4	Family Medicine - Enhanced Skills - Addiction Medicine			2	2
5	Family Medicine - Enhanced Skills - Care of the Elderly			2	2
6	Family Medicine - Enhanced Skills - Health Equity: Local and Global Care			1	1
7	Family Medicine - Enhanced Skills - Maternal and Newborn Care			2	2
8	Family Medicine - Enhanced Skills - Palliative Care			3	3
9	Family Medicine - Enhanced Skills - Sport and Exercise Medicine			1	1
10	Family Medicine - Rural Alberta South - Lethbridge	7	8		15
11	Family Medicine - Rural Alberta South - Medicine Hat	7	9		16
Total		89	94	22	205

Fellowship Programs and Number of Fellows in Fellowship Programs

Count	Program	Total
1	Anatomical Pathology	3
2	Anesthesiology	5
3	Cardiology	11
4	Developmental Pediatrics	1
5	Diagnostic Radiology	15
6	Gastroenterology	9
7	General Surgery	8
8	General Surgical Oncology	2
9	Gynecologic Oncology	2
10	Hematology	2
11	Medical Genetics	3
12	Medical Oncology	12
13	Neonatal Perinatal Medicine	16
14	Neurology	20
15	Neuroradiology	4
16	Neurosurgery	6
17	Obstetrics and Gynecology	7
18	Ophthalmology	7
19	Orthopedic Surgery	22
20	Palliative Medicine	1
21	Pediatric Hematology/Oncology	2
22	Pediatric Infectious Diseases	1
23	Pediatric Nephrology	4
24	Pediatric Neurology	4
25	Pediatrics	5
26	Plastic Surgery	6
27	Psychiatry	1
28	Radiation Oncology	3
29	Respirology	4
30	Urology	6
31	Vascular Surgery	2
Total		194

Training Physicians to Meet the Health Needs of Albertans

Timelines for the Canadian Resident Matching Service (CaRMS) PGY1 match were once again revised for 2022 with the first iteration match day which transpired on April 12th, 2022, followed by the second iteration which occurred on May 12th, 2022.

Interviews continued to be held in a virtual format to avoid unnecessary travel across the country.

The U of C was very successful in the first iteration of the CaRMS match for the upcoming academic year 2022-23.

PGME offered 184 entry-level positions for the Canadian Medical Graduate (CMG) stream of which 22 remained unfilled going into the second iteration:

- One in Anatomical Pathology
- Ten in Family Medicine
- Six in Family Medicine Rural-Medicine Hat
- One in Medical Microbiology
- One in Neurology-Pediatric
- Two in Neurology-Adult
- One in Neuropathology

The second iteration of the CaRMS match took place May 12th and 15 of the remaining 22 positions were filled.

The seven unfilled positions include:

- One in Anatomical Pathology
- Four in Family Medicine Rural-Medicine Hat
- One in Medical Microbiology
- One in Neuropathology

The percentage of unmatched medical school graduates across the country after the first iteration was 6.3%. Six applicants from the CSM undergraduate medical program were unmatched after the second iteration of the PGY1 match.

PGME offered 17 entry-level positions for Alberta International Medical Graduates (AIMG) trainees of which all 17 were filled in the first iteration.

Physician Retention in Alberta

The percentage of Canadian Medical Graduates (CMG) physicians who completed PGME training two years ago (June 2018) and continue to be geographically located in Alberta is 74.9%. The percentage for Non-CMG physicians is lower at 54.3%.

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

	RCPSC Programs	Family Medicine Programs	All Programs
CMG	71.9%	78.9%	74.9%
Non-CMG	51.7%	66.7%	54.3%
AIMG*	84.6 %	66.7%	78.9%

Accreditation

The U of C will undergo an external accreditation visit in the fall of 2022 which is scheduled for September 18th through September 23rd, 2022.

This will be the first time the university is evaluated based on the new standards developed by Canadian Residency Accreditation Consortium (CanRAC), a consortium that includes the Royal College of Physicians and Surgeons of Canada (RCPSC), College of Family Physicians of Canada (CFPC), and College des Medecins de Quebec.

The revised standards include a new emphasis on continuous quality improvement and highlight “tracer themes” such as:

- Patient safety
- Resident wellness
- Learner and faculty assessment strategies
- Infrastructure
- Human resources to support residency education

The Canadian Excellence in Residency Education (CanERA) standards emphasize the importance of a robust PGME process for review of its governance structure. After discussion at the PGME Strategic Advisory Committee, it was decided that this could best be achieved with input from external consultants.

Experts from the U of C’s School of Public Policy conducted interviews with multiple stakeholders and the data collated. The final report for the governance review, which commenced in June 2021, was presented to the SAC committee in November.

The report identified several governance opportunities:

1. The establishment of a formal “Community of Practice”
2. The development of an effective system to improve Entrustable Professional Activities (EPA) tracking capabilities

Competence by Design (CBD)

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

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

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

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

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

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

Transitioned and Transition Programs

CBD effective July 1, 2021	5th YEAR IN CBD	4th Year in CBD	3rd Year in CBD	2nd Year in CBD	Set to implement CBD effective July 1, 2022
Cardiology	Anesthesiology	Emergency Medicine	Anatomical Pathology	General Surgery	Dermatology
Child and Adolescent Psychiatry	Otolaryngology	Nephrology Adult	Cardiac Surgery	Neurology	Diagnostic Radiology
Clinical Pharmacology and Toxicology		Nephrology Pediatric	Critical Care Medicine	Orthopedic Surgery	Gynecologic Oncology
Forensic Psychiatry		Medical Oncology	Gastroenterology	Pediatric Neurology	Hematology
Geriatric Psychiatry		Surgical Foundations	General Internal Medicine	Physical Medicine and Rehabilitation	Maternal-Fetal Medicine
Neonatal/Perinatal Medicine			General Pathology	Plastic Surgery	Medical Genetics and Genomics
Pediatrics			Geriatric Medicine	Psychiatry	Neuropathology
Pediatric Hematology/Oncology			Internal Medicine		
Pediatric Surgery			Neurosurgery		
Respirology – Adult			Obstetrics and Gynecology		
Respirology – Pediatric			Pediatric Gastroenterology		
Vascular Surgery			Radiation Oncology		
			Rheumatology		

- As of July 2022, there will be 51 programs officially functioning in a CBME model.

Wellness

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

Although many of the typical events scheduled have been postponed due to the pandemic, the Office continues to use alternative means to engage with as many trainees as possible.

A PGY1 orientation was held in August 2021 to familiarize new trainees with the wellness services available through the Office. Thirty-eight residents new to the CSM attended the orientation.

Psychological counselors logged over 760 contact hours providing counselling sessions with 89 residents during this reporting period. Concurrently, the Resident Wellbeing Specialist continues to engage with trainees an average of three times per week.

As reported in 2020-2021, the operating standard for the Postgraduate Medical Learner Accommodation Process became effective June 1st, 2020, and the associated Accommodation Assessment Committee was formed. Resident Physicians are entitled to apply for modifications to the learning and work environment based on protected grounds articulated in applicable human rights' legislation. Decisions are made only after review of supporting documents and discussion by an experienced committee with expertise in this area – i.e. consultation with legal counsel and stakeholder organizations. A total of 18 requests for accommodation were reviewed during the April 1st, 2021 – March 31st, 2022 period which resulted in all 18 accommodations being granted.

Accommodation support for residents may include:

- Access services, courses, programs, or training
- Making exemptions to any regulations, policies, standards, or practices
- Making modifications to physical environments to the extent necessary to address discrimination against, or barriers, to a medical learner based on any Protected Ground (e.g., physical or mental disability)

In late August 2021, the Office appointed an Accommodations Therapist to facilitate the execution of additional supports and services that may be provided to medical learners in response to assessments and decisions developed by either the Accommodation Assessment Committee or the home program director. The position works closely with staff and a multitude of internal and external stakeholders to help appropriately manage the accommodation.

The new PGME Physician Wellness App was launched on May 25th, 2021. The app provides PGME trainees easy access to the resources of the Office and allows trainees to use their phone to easily book appointments with counsellors. It also lists resources that can be accessed immediately in cases of imminent risk of harm. To date, the app has 315 registered users.

End user testing was completed in April 2021 on the implementation of Titanium software, an electronic medical records system designed specifically for university and college counseling centres. Training sessions, originally scheduled for November and delayed due to the pandemic and were rescheduled for May 2022. Once completed, all existing paper charts will be scanned and uploaded, and Titanium will be used by all staff moving forward.

Although the CSM Wellness Hub collaboration project has been deferred, research continues on the Learner Handover project, a collaboration with UME. Data collected from 2019 and 2020 was presented at the Canadian Conference on Medical Education (CCME) in April 2022. Further engagement on this project and a manuscript outlining the challenges, opportunities, and recommendations moving forward are in progress.

Research

The 2021-2022 academic year has been a busy and productive one regarding residency education research. Please also see the Wellness Innovation Scholarship for Health Professions Education and Sciences ([WISHES](#)) lab for medical learner wellness research, which includes resident physician wellbeing and equity, diversity and inclusion research.

Ongoing grants and projects in 2021/2022 include:

1. Exploring the Construct of Just Culture in Residents - Office of Health and Medical Education Scholarship, University of Calgary - \$9,990. – *Approved by University of Calgary research ethics board and currently under review by Alberta Health Services.*
2. The Assessment of Internal Medicine Evaluations in Residency Study (AIMERS) - Office of Health and Medical Education Scholarship, University of Calgary - \$10,000. - *Manuscript under review in peer-reviewed journal.*
3. Mapping the Landscape of Rural Resident Physician Wellness through Realist Inquiry. Distributed Learning Rural Initiative. -\$8,175. – *Data collection completed.*
4. A National Initiative to help ease the Transition from Medical School to Residency: The Learner Education Handover Pilot Project (LEaPP). Royal College of Physicians and Surgeons of Canada (RCPSC) Medical Education Research Grant. - \$38,250. – *Study completed and manuscript in preparation. Results being presented at national and international conferences.*
5. Implementing and Evaluating a Fatigue Risk Management Plan for Obstetrics and Gynecology Residents. Fatigue Risk Management Task Force, Royal College of Physicians and Surgeons of Canada. – \$20,000. – *Study completed and manuscript in preparation. Results being presented at national and international conferences.*

Furthermore, the following articles were published:

1. Nickell L, Kassam A & Bandiera G. Is there a Role for a Learner Education Handover as part of the Medical Council of Canada (MCC) Assessment and Licensing Process? 2022; Canadian Medical Education Journal.
2. Lee C, Thomas M, Ejaredar M, Kassam A, Whittle SL, Tugwell P, Wells G, Pardo Pardo J & Hazelwood G. Crowd-sourcing trainees in a living systematic review provides valuable experiential learning opportunities: A mixed-methods study. 2022; Journal of Clinical Epidemiology.
3. De Groot J, Kassam A, Swystun D & Topps M. Experiential learning, emotional awareness and reflection supports education for resident professionalism. Canadian Medical Education Journal. 2022; 13(1):5-16.
4. Sinclair S, Kondejewski J, Jaggi P, Roze des Ordon AL, Kassam A, Hayden KA, Harris D, Hack TF. What works for whom in compassion training programs offered to practicing healthcare providers: a realist review. BMC Medical Education. 2021 Aug 28;21(1):455.
5. Moss, SJ, Rosgen, B. K. Geddes, A. Makuk, K. Sudershan, S. Peplinski, C. & Kassam, A. Wellness in medical education: definition and five domains for wellness among medical learners during the COVID-19 pandemic and beyond. Medical education Online. 26(1) 2021; 1917488.
6. Moss SJ, Wollny K, Amarbayan M, Lorenzetti DL, Kassam A. Interventions to improve the well-being of medical learners in Canada: a scoping review. CMAJ Open. 2021;9(3):E765-E776.

7. Moss SJ, Brown A, Kachra R, Makuk K, Sudershan S, Paget, M, & Kassam A. Exploring the impact of the COVID-19 pandemic on medical learner wellness: a needs assessment for the development of learner wellness interventions. *Canadian Medical Education Journal*. 2021 Jun 30;12(3):54-69.
8. Brown A, Kassam A, Paget M, Blades K, Mercia M, & Kachra, R. Exploring the global impact of the COVID-19 pandemic on medical education: an international cross-sectional study of medical learners. *Canadian Medical Education Journal*. 2021 Jun 30;12(3):28-43.
9. Smith S, Kassam A, Griggs L, Rizzuti F, Horton J, Brown A. Teaching mindfulness-based stress management techniques to medical learners through simulation. *Canadian Medical Education Journal*. 2021;12(1):e95-e97.

Resident Education Scholars Program (RESP)

The Resident Education Scholars Program (RESP) was developed by Office of Health & Medical Education Scholarship (OHMES) and Postgraduate Medical Education (PGME) in 2020-21 to support residents in their pursuit of scholarly work. It provides residents with a structured program, mentorship, and support in designing, conducting, and reporting on their scholarly activities during residency. Residents selected to participate develop their skills in health/medical education scholarship by either conducting educational research or developing an educational innovation.

The first part of the program focuses on foundational knowledge in practical education scholarship, and on preparing a scholarly project. The second part is dedicated to the execution of the scholarly project. While each participating residency program configures the scheduling and expectations for their residents' participation in RESP, the overall format is common to all participating residency programs. The Office of PGME provides funding up to \$3,000 for each resident project to cover related expenses as needed.

The RESP Steering Committee began meeting in 2020 to develop the overall program, and membership includes volunteers involved in various residency programs. The program launched on July 1, 2021 and there were 7 residents from Internal Medicine (2), Neurology (2), Anesthesiology (1), Pediatrics (1) and Psychiatry (1) enrolled in Year 1 of the pilot project.

An RESP Community of Scholars event was hosted on-line on June 3, 2022, to provide an opportunity for the residents to present their work to date and receive feedback from OHMES scholars. Following a preliminary evaluation of Year 1 of the pilot project, findings will be presented to the PGME Committee in July 2022 and a decision made regarding enrollment of a new cohort for 2022. Full details of the program are available on the [OHMES website](#).

Resident Surveys

Since 2013, PGME has conducted an annual Exit Survey directed at residents that are completing their residency training. This gives exiting residents the opportunity to anonymously provide a candid reflection of all aspects of their training experience. The findings of this survey create an opportunity to improve on and sustain a supportive learning environment for residency education and help facilitate a successful transition to future practice.

In order to gain a better understanding of current issues in residency training, two new Learner Feedback Surveys have been implemented ahead of the Exit Survey. Over the course of January 2021 to the end of June 2021, we conducted our first PGY1 and PGY3 resident surveys.

PGY 1 Survey

- In the first ever PGY1 Survey in 2021, there were 104 respondents, for a 49.3% response rate.

PGY 3 Survey

- In the first ever PGY3 Survey in 2021, there were 76 respondents, for a 65% response rate.

Exit Survey

- In the most recent resident exit survey for 2021, there were 124 respondents out of approximately 265 exiting residents, indicating a response rate of 46.8%.

Educational Workshops and Events

PGME offered a number of educational workshops for residents and fellows in 2021-2022:

Patient Safety and Quality Improvement - Part I & II	X2
Your Essential Skills Toolkit: Communication, Conflict Management and Physician Wellness	X2
Physician Financial Management	X1
Health Research Methods: How to Plan a Study Part I & II	X2
Advanced Biostatistics – 4 consecutive weeks	X1
Transition to Practice Webinar Part I & I	X1
Critical Appraisal	X2
Let's Talk Social Media and News Reporters	X1
Medical Ethics	X3
RDocs Resiliency Resident Module	X1
Career Management: The Next Step In Your Career	X2
Residents as Teachers Toolkit	X3
RDocs Resiliency Leadership Module	X1
Medical Legal	X2
Introduction to Biostatistics – 4 consecutive weeks	X1
From Surviving to Thriving: Fatigue Risk Management in Residency	X1
Money Management & Billing Mechanics for New Graduates	X1

Faculty Development Workshops:

RDocs Resiliency Leadership Module	X1
From Surviving to Thriving: Fatigue Risk Management in Residency	X1
Empowering All Learners - PGME Accommodations Talk	X1
Mentoring For Education Leadership Development MELD	X1
Let's Talk Social Media and News Reporters	X1
SET Course (Simulation Education Training)	X1
R2C2 Evidence-Informed Facilitated Feedback Workshop	X1

Challenges

The COVID-19 pandemic continues to present unique and unprecedented challenges for medical education. These include the:

- Urgent need to address major changes in the delivery of clinical services
- Transition to supervision of trainees in the delivery of virtual care
- Ability to deliver required educational experiences in the midst of this very changed environment

Challenges over the past year have included:

- Redeployment of resident physicians from usual rotations to areas of high clinical need such as Critical Care Units and Medical Teaching Units
- Disruption of many training opportunities such as those in ambulatory care settings where virtual consultations are not always conducive to inclusion of learners and the postponement of elective surgeries which has impacted trainees in surgical specialties – just two of many examples
- Loss of elective experiences and recall of residents from rotations in universities across Canada
- Onboarding of PGY1 trainees for July 2020, 2021, and 2022 – in person orientation was converted to virtual format and usual 8-12 week program boot camps were all reconfigured
- Delay of externship of 2021 cohort of FM AIMG residents
- CaRMS application and interview processes converted to using virtual interviews, shortened timelines and a changed schedule to adapt to delayed start of clerkship
- Resident safety – ensuring that all trainees are adequately prepared in the appropriate use (donning and doffing) of personal protective equipment (PPE)
- Resident wellness related to stress and anxiety due to the pandemic as well as the issues above that impact trainees

The ongoing concern regarding unmatched medical students continues to be a national challenge.

Locally, PGME at the CSM acts to create a number of additional PGY1 entry seats to minimize the number of unmatched candidates. After the first iteration of the 2022 PGY1 match, 22 positions were unfilled. The second iteration of the CaRMS match took place May 12th, 2022 and 15 of the remaining 22 positions were filled.

Report Contributions

1. University of Calgary, Cumming School of Medicine, Postgraduate Medical Education 2021-2022 Year-End Narrative Report
2. Office of Health & Medical Education Scholarship 2021-2022 Annual Report - Resident Education Scholars Program (RESP), Gretchen Greer

Where to Find Us



UNIVERSITY OF
CALGARY

CUMMING SCHOOL OF MEDICINE Postgraduate Medical Education

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

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

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

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