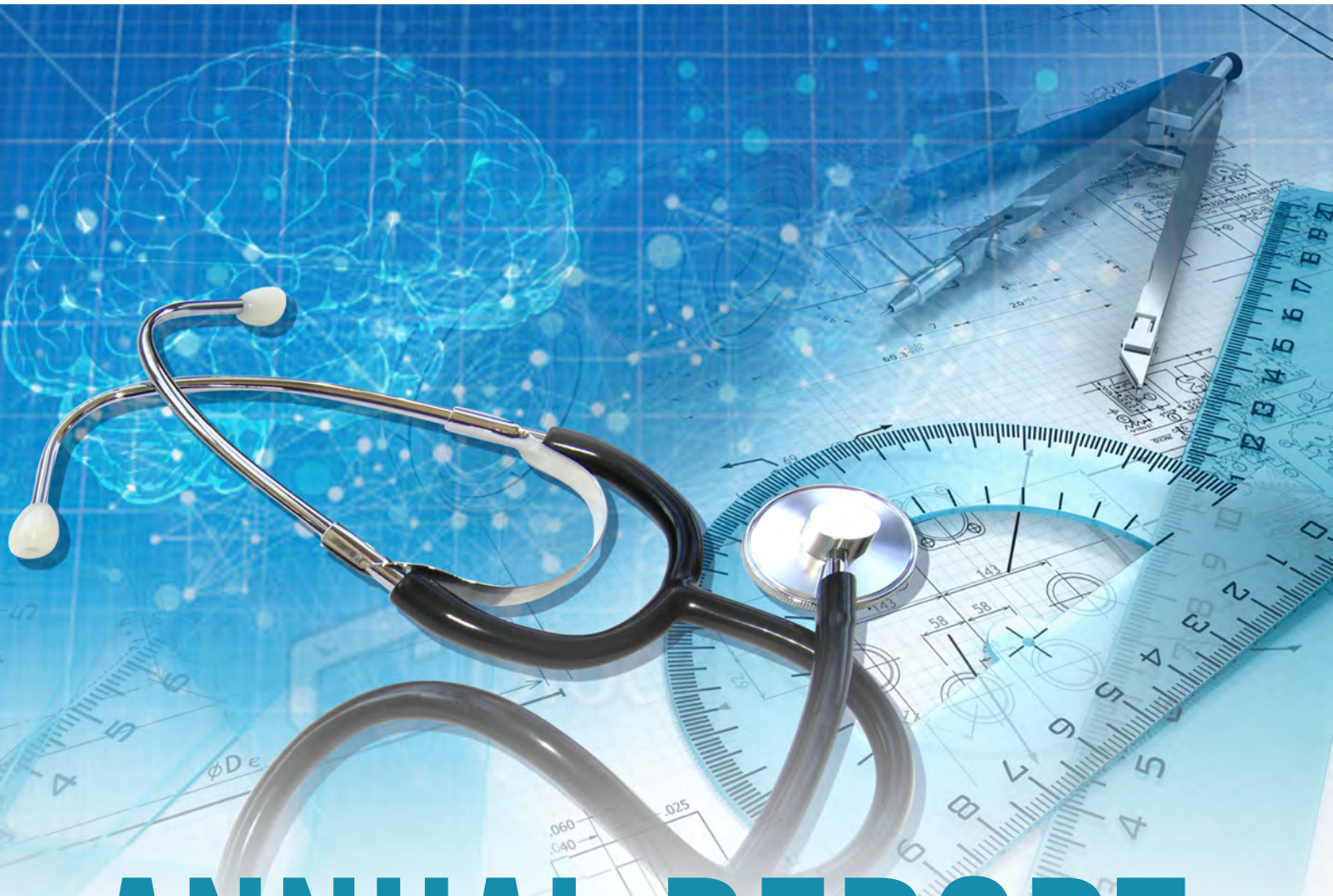




Postgraduate Medical Education
UNIVERSITY OF TORONTO



ANNUAL REPORT

JULY 1, 2014 — JUNE 30, 2015



Table of Contents

1. Messages	5	9. POWER Innovations	30
- Message from the Vice Dean		- Rotation and Education Site Evaluation Changes	
- Message from the Associate Dean, PGME [Admissions and Evaluation]		- Teacher Evaluation Score Reporting Changes	
- Message from the Director, PGME		- Rotation Scheduler Enhancements	
2. PGME Facts and Figures 2014-15	8	- On Call Stipends	
3. PGME Organizational Chart	10	- POWER Help Web Site	
4. Strategic Plan Update 2014-15	11	- Training Sessions	
5. Enrolment, Admissions and Output	13	10. Resident Wellness	31
- Enrolment		- Trainee Support	
- Quotas Allocation		- Educational Activities	
- CaRMS		- Local, National and International Partnerships for Wellness Activities	
- Fellowship Education Advisory Committee		- Board of Medical Assessors-PG	
- Visa Trainee Report		11. Leadership/Stewardship	34
- Contribution to Physician Supply		12. Global Health	35
- Affiliated Teaching Sites		13. Certificate Ceremonies	37
- Resident Exit Survey		14. Appendix A	38
- Fellowship Survey		- Affiliated Teaching Sites	
6. Workshops, Information Series	22	15. Appendix B	39
Faculty Development and eLearning		- Incoming/Outgoing Residency Program Directors	
- Information Series for Program and Hospital Administrators		16. Appendix C	40
- Residency Education Development Series		- Publications/Presentations	
- UT PGME Exchange		17. Appendix D	47
- PGCorEd		- PGME Awards	
- CIPCorEd			
7. Internal Review/Accreditation	27		
8. Assessment and Evaluation	28		
- In-Training Evaluation Reports			
- Board of Examiners – Postgraduate Programs			

Message from the Vice Dean

I am pleased to present the 2014-15 report of activities and achievements in Postgraduate Medical Education (PGME), Faculty of Medicine at the University of Toronto. This past year has been a year of innovation and progress in PGME.

As the Royal College of Physicians and Surgeons of Canada moves forward with Competency Based Education and CanMEDS 2015, some of our programs have begun mapping curriculum and consulting with their specialty committees on required changes to shift from a time-based medical education structure. Orthopedic Surgery spear-headed this initiative at the Faculty and now has a fully-implemented competency-based program.

Implementation of the Gullane Task Force report recommendations on PGME support included over 15 information sessions. A year-end appreciation event for administrators was held in June and the overwhelmingly positive response from attendees ensures that this will be an annual event. We look forward to the implementation of the Task Force recommendations on Program Director and site director remuneration in the coming year.

We continue to work with our partner hospitals to integrate the learner experience and meet government requirements. The work of the Hospital University Education Committee resulted in the development of the Vulnerable Sector Screen to meet hospital credentialing requirements for 2015-16 implementation.

In June 2015, PGME held the 2nd annual Global Day on the theme *Is Global Health Possible?* with over 250 attendees. The Global Health Education Committee established a new award this year recognizing socially responsible initiatives and programs related to postgraduate medical education.

Our Wellness Office continues to assist our learners in optimizing their clinical performance and personal well-being. The increasing number of sessions and workshops offered by Dr. Susan Edwards and her team ensure that both trainees and programs strive to achieve a work-life balance.



Our leadership initiatives this year included collaboration with the Institute of Health Policy, Management and Evaluation and the Royal College of Physicians and Surgeons of Canada to develop the inaugural Toronto International Summit on Leadership Education for Physicians [TISLEP]. The goal, as recommended by the Future of Medical Education in Canada [FMEC] report, was to create guiding principles for a physician leadership curriculum and drive improvement of the healthcare system. The summit attracted 64 stakeholders from eight countries who discussed physician leadership education. These conversations will continue at TISLEP 2015 on October 20 2015 in Vancouver, a pre-ICRE event. Other leadership initiatives implemented under Dr. Anne Matlow's direction included quarterly networking opportunities for chief and senior residents held at 500 University Avenue.

While I was on administrative leave from January to June 2015, Drs. Glen Bandiera and Linda Probyn acted as excellent stewards of PGME activities, and I thank both for their hard work and support.

I returned from administrative leave July 1, 2015 and will be taking on a new role as Vice Dean Post MD Education [PGME & CPD]. I look forward to working closely with our new Dean Trevor Young in service of our learners, our teachers and most of all for the benefit of the population we collectively serve.

Salvatore M. Spadafora, MD, FRCPC, MHPE
Vice Dean, Postgraduate Medical Education

Message from the Associate Dean, PGME (Admissions and Evaluation)

The PGME team has again provided inspirational and comprehensive stewardship to resident and fellow education at the University of Toronto. In September 2014, I returned from a 15-month secondment (as Associate Dean, Mississauga Academy of Medicine and Medical Education Advisor to the CEO, Trillium Health Partners) to find an immense amount of activity and innovation underway in service to our strategic plan. In addition to the regular activities and supports provided to learners and Program Directors, as examples, the team oversaw: the launch of the new internal review cycle, led by new Internal Review Committee Chair Dr. Linda Probyn; implementation of new initiatives in leadership, global health, humanism, admissions and selection and rotation evaluation; the creation of the **UT PGME Exchange** repository for Program Directors; and the creation of the updated version of **PGCorEd**.

During the last quarter of 2014, I became re-acquainted with the PGME portfolios and prepared to assume a new role as acting Vice Dean from January to June 2015. Bolstered by the stellar support from our directors and physician leads, we continued to make progress on key issues, exemplified by: implementation of the recommendations from the Best Practices in Admissions and Evaluation report; participation in the overhaul of the Medical Trainee Day (MTD) reporting structure in Ontario; contribution to the KPMG review of financing of postgraduate medical education in Canada; implementation and follow-up on the work of the Task Force on funding of education lead positions at the University of Toronto (the 'Gullane' task force); and leadership of the Toronto Academic Capacity for Teaching (TACT) working group.

All of these activities are key to the sustainability and quality of our programs and are worth investing in to ensure that the PGME perspective is represented.

One great pleasure I had was the opportunity to work more closely with the senior executive team in the Faculty of Medicine, including our new Dean Trevor Young. We both had adjustments to



make as we embarked on new positions in January 2015 and I very much appreciated Dr. Young's tolerance and patience as we addressed important PGME issues including the impact of the provincial funding review on the University of Toronto, the decision of Customs and Immigration Canada to add registration and payment requirements for work visa applications related to international resident and fellow work, and reductions in residency positions announced by the Ministry of Health and Long-Term Care (MOHLTC). It was reassuring to know that there is strong depth and breadth of leadership in the Faculty to help address these tough issues.

As the academic year comes to an end, I am looking forward to assuming yet another new role, that of Associate Dean, PGME, reporting to Dr. Sal Spadafora in his new role as Vice Dean, Post-MD Education. The last year has been one of change and adaptation for me and it has been very educational to be able to take on these roles. One thing that has been constant is the myriad of interesting and complex issues that arise in medical education and the highly skilled individuals we have in the Faculty to lead the response to these challenges.

Glen Bandiera, MD, FRCPC, MED
Associate Dean, PGME
(Admissions and Evaluation)

Message from the Director, PGME

The 2014-15 academic year has been action packed with many exciting and important projects and initiatives. I am pleased to report on a sample of some of our activities.

The Best Practices in Rotation Evaluation (BPRE) working group developed a revised rotation evaluation form called the RESe (Rotation and Educational Site Evaluation) form. The form evaluates six categories, including: organization, educational design, learning supports, learning climate, educational experience and facilities, and has an overall rating question and comments section. After 27 programs piloted the form, it is now being used by all programs. Feedback about the form has been very positive regarding the utility and feasibility while providing consistency of rotation and site evaluation across programs. Completion rates and functionality of the form will be monitored and adjusted as necessary to meet the needs of our programs. We had the opportunity to present the form and the outcomes of the working group at the Canadian Conference on Medical Education (CCME) in April 2015.

Implementation of Best Practices in Application and Selection (BPAS) has continued throughout the year with ongoing education to programs and program administrators through workshops and individual meetings. We presented the workshop on File Review at the ICRE in October 2014 and will be presenting a workshop on The Interview Process in October 2015. Recognizing the ongoing need for education of the best practices and principles, we will continue the education process over the next few years and encourage sharing of useful resources and tools to improve the current processes.

The Internal Review Committee (IRC) is well underway with the current accreditation cycle. We have a wonderful committee composed of a combination of experienced faculty and residents, as well as new recruits who have quickly learned the process and procedures of the committee. We are extremely active reviewing internal review reports for programs requiring follow-up from the 2013 Royal College Survey, those requiring off-cycle mandatory reviews and we



have started the routine regular internal reviews. Many faculty and residents are involved in doing the individual reviews and provide our committee with the necessary documentation to make the IRC effective and efficient. I would like to thank everyone for their time and dedication helping us ensure that our training programs are meeting the Royal College and Family Medicine Standards of Accreditation.

Other important events include the Chief Resident Leadership Workshop and the New Program Directors Workshop. We are continually working to educate and share information with various groups involved in Postgraduate Medical Education.

I look forward to another exciting and productive year in the PGME office.

Linda Probyn, MD, FRCPC
Director, Postgraduate Medical Education

PGME Facts and Figures 2014-2015



Enrolment

1,418 Fellows

2,054 Residents

996 International Visa Trainees from **74** countries

839 Elective Trainees from other medical schools in **1,018** rotations



Resources/Development

75 Programs

27 Affiliated Teaching Sites

5,000 Faculty Members

Over **30** internal workshops for faculty, residents and administrators, including a

20-session PGME Information Series with attendance totaling over **520**

183 residents and fellows sought support services at the Wellness Office for a total of

681 individual sessions



Physician Workforce

49% of new specialists and **35%** of new Family Physicians who entered practice in Ontario did their residency at U of T



Quality Assurance

86% of residents rated their training experience positively on annual exit survey

36 Board of Examiners Cases [residents in difficulty]

25 Internal/External program reviews

100% of 417 PGY1 residency positions matched in CaRMS



Award Winners

- 2** Resident Teaching
- 3** Social Responsibility
- 4** Resident Leadership
- 6** Faculty Excellence/Advocacy
- 11** Clinician Graduate Scholarships [\$137,014]
- 34** Research Awards [\$232,095]



Website

Total Website Users: **89,200**
Total Sessions (interactions with the PGME website): **160,990**
Total Page views: **350,199**
Total # of User Countries: **183**



Communications

Twitter: 1703 followers, 3681 tweets

YouTube: 28 videos, 9095 views

Facebook: 1072 page likes

Top 3 Tweets:

1. #Residents Help Drive Quality Improvement #MedEd #QI <http://t.co/m9iiSzDGXK> [Oct. 2014]
2. Graded Autonomy in Medical Education - Managing Things That Go Bump in the Night #MedEd <http://t.co/g3rVDfmP7E> [Oct. 2014]
3. "Rewarding & challenging": #EmergMed #residents' experiences caring for patients who are homeless #MedEd #sdoh <http://t.co/7hoDoga2Dm> [Oct. 2014]



Scholarly Activity

- 12** Paper Presentations at Conferences
- 14** Posters
- 15** Workshops
- 17** Peer-reviewed Publications

PGME Organizational Chart



Note: Dr. Spadafora was on administrative leave from January 1 to June 30, 2015. Dr. Bandiera was Acting Vice Dean and Dr. Probyn was Acting Associate Dean for this period.

Strategic Plan Update 2014-2015

Strategic Direction #1: Strengthen each learner's experience across the medical education continuum

Priorities and action items included:

- Administered the 10th year of the Resident Exit survey
- Continued to enhance the new Case Logging system in POWER with mobile device functionality
- Piloted and streamlined the new Rotation and Educational Site Evaluation (RESe) form based on user needs
- Launched the online POWER Help website to provide assistance to learners, faculty and administrators with evaluation and case logging in POWER
- Undertook an external review of POWER to ensure it meets future user needs
- Launched and leading the review of the CaRMS Pediatric Subspecialty Match
- Launched the Global Health resources website for residents and faculty (<http://gh.pgme.utoronto.ca>)
- Established a Quarterly Chief Resident Leadership Forum to network and engage chief residents
- Worked with UME on the HUEC Learner Environment Working Group to improve the training experience

Strategic Direction #2: Support and develop local, national and international leadership in evidence-based curricular innovation

Priorities and action items included:

- Developed 5-year reports of evaluation completion metrics and mean Teacher Evaluation (TE) and Resident Evaluation (RE) scores by teaching site for Program Directors
- Continued offering of the Global Health Education Initiative, a 2-year certificate program for medical residents with 130 alumni to date
- Co-hosted the Toronto International Summit on Leadership Education for Physicians
- Partnered in development of the international physician leadership curriculum
- Enhanced access to resource stewardship resources
- Completed the OBGYN leadership pilot
- Hosted visiting faculty from other Canadian medical schools for overview of the Internal Review, Board of Examiners and Wellness programs



Strategic Plan Update 2014-2015 *continued*

Strategic Direction #3: Recognize and support clinical teachers in the delivery of learner and health-system focused education

Priorities and action items included:

- All programs now using best practice in teaching assessment tool (RATE form)
- Established and awarded community-based teaching awards in collaboration with the Office of Integrated Medical Education (OIME)
- Participated in and facilitated data collection for the Teaching and Academic Capacity in Toronto (TACT) working group
- Engaged approximately 70 faculty leads and others in Global Health Educational Programming, and the PGME Global Health Education Sub-Committee created a network of Global Health leadership across departments/programs
- Initiated a faculty development in humanism and professionalism with development of modules and facilitators



Strategic Direction #4: Foster leadership in social accountability among PGME learners and faculty

Priorities and action items included:

- Continued to adjust residency quotas to meet population health needs
- Participated in the Association of Faculties of Medicine of Canada (AFMC)-led Committee on Resident Matching
- Continued to implement Best Practices in Admissions and Selection (BPAS) tools and workshops
- Launched the inaugural PGME learner diversity survey
- Collaborated with HealthForceOntario on a new menu of offerings for Practice Ontario
- Provided coordination and secretariat support and analysis for the National Postgraduate (PG) Deans and PG Managers
- Conducted the inaugural fellowship follow-up survey to assess perspectives and value of fellowship at U of T on physician careers nationally and internationally
- Engaged in the provincial MTD collection process in collaboration with 27 hospitals and 6 medical schools to build an accurate database of medical learner activity and ensure accountability for hospital funding
- Participated in the external review of MOHLTC funding for postgraduate medical education in Ontario
- Launched the Global Health Elective registration system, including Guidelines, Pre-Departure Training, and Post-Travel Debriefing
- Offered the 2nd Annual Global Health Day @ PGME
- Implemented the PGME Social Responsibility Award for Faculty and Residents
- Hosted a delegation from the University of Sao Paulo (USP) that reviewed student/resident wellness programs at U of T, conducted a needs assessment and provided consultation on the development of student/resident and faculty wellness programs at USP

Enrolment, Admissions and Output

Enrolment

In 2014-15, a grand total of 3,458 distinct trainees were registered in 75 programs across 17 departments or units [Figure 1]. These trainees include 2,054 residents and 1,418 fellows. Please note that a few trainees may transition from resident to fellow or vice versa during the course of an academic session. As a result of this slight overcount, the fellow and PGY columns are greater than the total.

Figure 1: Distinct trainees by department/division/unit for 2014-15

Department/ Division/ Unit	Distinct Trainees 2014-15		
	Fellow	PGY	Total
Anesthesia	129	106	235
Critical Care, Adult	45	16	61
Critical Care, Paediatrics	26	2	27
Diagnostic Radiology	103	68	170
Family Medicine	4	428	432
Laboratory Medicine	41	45	86
Medical Genetics	5	14	19
Medicine	358	543	895
Obstetrics & Gynaecology	52	78	129
Ophthalmology	35	34	69
Otolaryngology	27	26	53
Paediatrics	234	164	396
Palliative Medicine	0	6	6
Psychiatry	70	195	265
Public Health & Preventive Medicine	0	22	22
Radiation Oncology	30	33	62
Surgery	262	275	537
Total	1418	2054	3458



Enrolment, Admissions and Output *continued*

Quotas Allocation

In light of population health needs, requests from Program Directors, and other factors, the Quotas Allocation Subcommittee of the Postgraduate Medical Education Advisory Committee (PGMEAC) approved a re-allocation of PGY1 quotas for 2015. It allocated an additional five Canadian Medical Graduate (CMG) positions to Psychiatry, increasing the program's quota from 27 to 32 and two additional CMG positions to Internal Medicine, increasing its quota from 52 to 54. Positions were re-aligned from Anesthesia, Dermatology, Diagnostic Radiology, Obstetrics & Gynaecology, and Pediatrics. The proposal was approved by PGMEAC and later by the MOHLTC.

CaRMS

In 2014-15, PGME at the University of Toronto participated in four CaRMS matches: the PGY1 match, the Pediatric and Medicine Subspecialty matches, and the Canadian College of Family Physicians (CCFP) Emergency Medicine match.

In March, all CMG and International Medical Graduate (IMG) positions filled in the first iteration of the PGY1 match. For the third year in a row, U of T was the only medical school in Canada to fill all positions in the first round of the match. Of the 417 positions filled, 346 were filled by CMGs and 71 were filled by IMGs (Figure 2). In addition, U of T filled 31 positions in the Pediatric Subspecialty match, 60 positions in the Medicine Subspecialty match and 7 positions in the CCFP Emergency Medicine match.

Figure 2: U of T - 2015 1st iteration PGME CaRMS match results

Discipline	CMG Positions	IMG Positions	Total
Anesthesia	14	4	18
Cardiac Surgery	1		1
Dermatology	5	1	6
Diagnostic Radiology	8	3	11
Emergency Medicine	7	3	10
Family Medicine - GTA	115	20	135
Family Medicine - Barrie/Newmarket	14	4	18
Family Medicine - Rural	8		8
General Surgery	12	3	15
Internal Medicine	55	12	67
Laboratory Medicine	3	3	6
Medical Genetics	1	1	2
Neurology	5	2	7
Neurology - Pediatric	1	1	2
Neurosurgery	4		4
Obstetrics & Gynecology	10	2	12
Ophthalmology	4	1	5
Orthopedic Surgery	7	2	9
Otolaryngology	5		5
Pediatrics	15	4	19
Physical Med & Rehab	3	1	4
Plastic Surgery	4		4
Psychiatry	32	4	36
Public Health and Preventive Medicine	3		3
Radiation Oncology	4		4
Urology	4		4
Vascular Surgery	2		2
Total	346	71	417

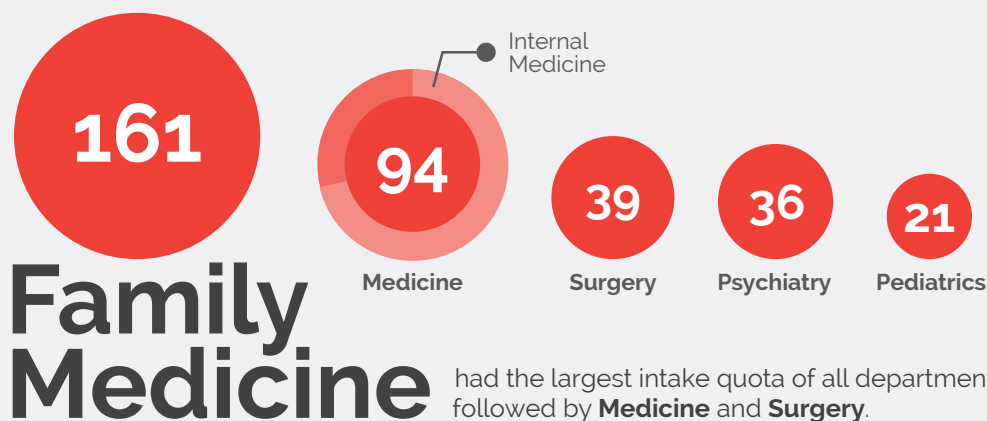
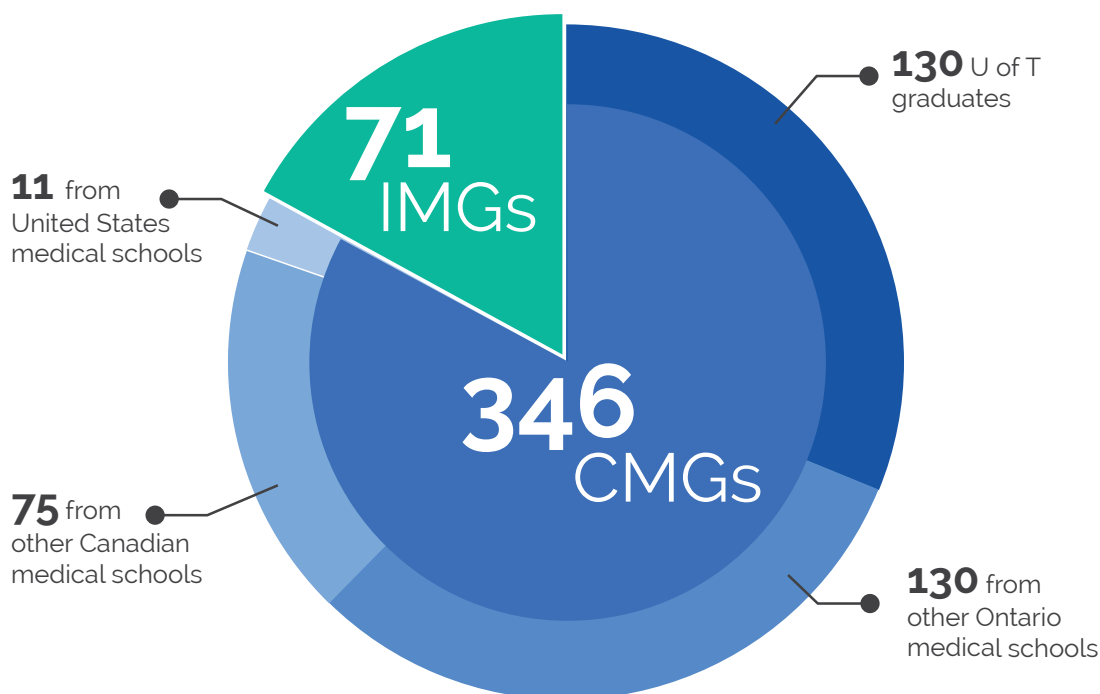
2015 CANADIAN RESIDENT MATCHING SERVICE (CARMS) PGY1 RESULTS

417 PGY1 positions filled in the **first iteration**. For the third year in a row, University of Toronto is the **only medical school to fill all of its positions in the first iteration**.

Our success in matching residents is a testament to the extraordinary efforts of our Program Directors, Program Assistants, Residency Selection Committees and other faculty and staff as well as the high quality of our residency programs.



Of the 417 filled positions, 346 were filled by Canadian Medical Graduates (CMGs) and 71 were filled by International Medical Graduates (IMGs).



U of T's total of 161 FM PGY1 positions also represents **32% of all Ontario FM positions** in the match.

By discipline, **Family Medicine** again had the largest quota, followed by **Internal Medicine** and **Psychiatry**.

Enrolment, Admissions and Output *continued*

Fellowship Education Advisory Committee

The Fellowship Education Advisory Committee (FEAC) meets quarterly under the direction of the Chair, Dr. David Latter. The FEAC was established in 2009 as a source of advice to the Vice Dean PGME on the oversight of clinical fellowship training and the management of fellowship issues. Committee membership includes representatives of clinical fellowship programs and university affiliated hospitals/HUEC, clinical fellows and PGME staff.

The FEAC's terms of reference, as well as the agendas and minutes of its meetings are publicly accessible through the website at www.pgme.utoronto.ca/content/fellowship-education-advisory-committee.

Activities and achievements of the FEAC in 2014-15 include:

- Administering the first Follow Up Survey of U of T Clinical Fellow Alumni to get perspectives on the clinical fellowship experience from clinical fellow alumni (2008-14) who had progressed in their career since training at U of T
- Updating and expanding the Clinical Fellowship Offer Letters: Guidelines and Exemplars, including content contributed by legal counsel, to help fellowship programs in the preparation of offer letters
- Reviewing U of T clinical fellowship program applications for Royal College accreditation as an Area of Focused Competence (AFC) program, to ensure the application meets Royal College standards with appropriate rigour and detail prior to the application's review and approval by the Vice Dean PGME
- Supporting the work of Program Administrators by developing Fellowship Notes, the first of a series of clinical fellowship-focused resource materials

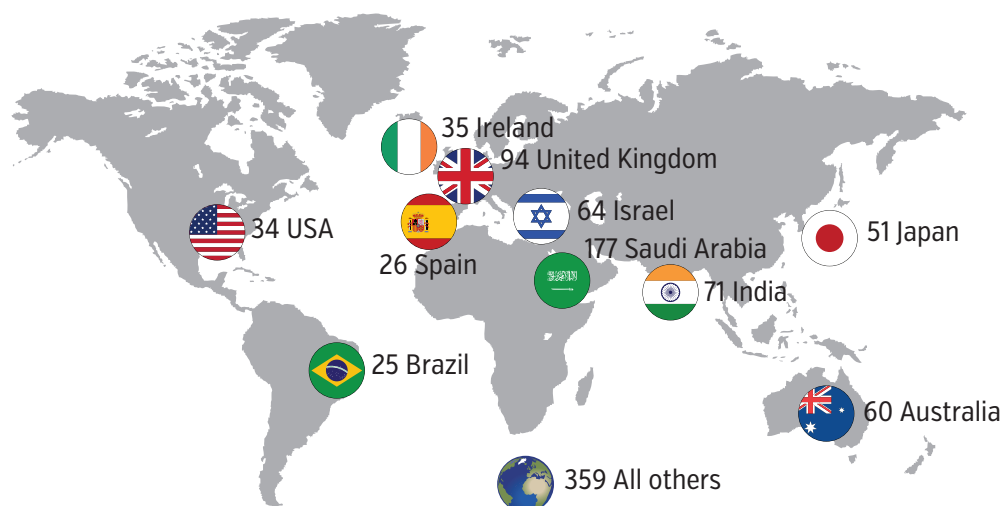
Visa Trainee Report

Registration

The PGME Office supports the University of Toronto's postgraduate medical programs in their commitment to training international learners (visa trainees). A total of 996 visa trainees registered with the PGME Office as research fellows, clinical fellows and residents in 2014-15, an increase of 3.6% [or 35 trainees] over the 961 registered in 2013-14.

Visa trainees registered in 2014-15 represented more than 70 nationalities. As in previous years, ten countries – Australia, Brazil, India, Ireland, Israel, Japan, Saudi Arabia, Spain, U.K and U.S.A. – accounted for almost two-thirds of all visa trainees enrolled (Figure 3).

Figure 3: Visa trainee enrolment – top 10 countries



Enrolment, Admissions and Output *continued*

Internationally Sponsored Visa Trainees

International sponsorship funding supported 22.6% [or 225] of the 996 visa trainees registered in 2014-15.

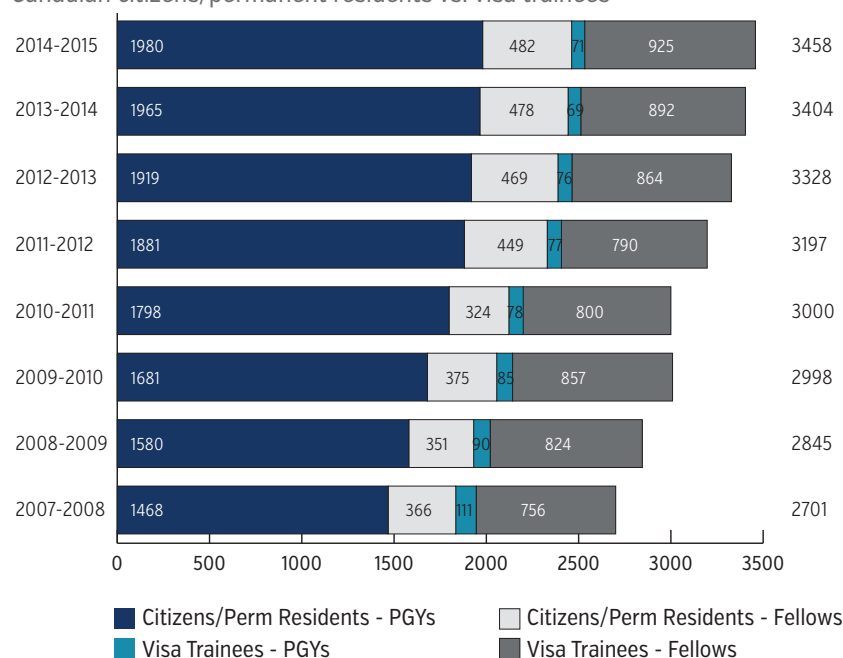
The total intake of new sponsored visa trainees for 2014-15 was 100 [22 new residents and 78 new fellows].

Visa Trainees as a Proportion of Total PGME Enrolment

According to POWER-sourced data for 2014-15 (Figure 4), visa trainees represented 28.7% of the total PGME enrolment [996 of 3,458 trainees]. Internationally sponsored residents made up 3.5% of the total enrolment of residents [71 of 2,054 residents].

Figure 4: PG trainee enrolment by legal status, 2007 – 2015

Canadian citizens/permanent residents vs. visa trainees



Contribution to Physician Supply

The University of Toronto continues to be the largest source of new physicians in Ontario, training 44% of the estimated practice entry cohort in 2014. As noted in the 2014-15 Canadian Postgraduate Education Registry Report, 35% of the provincial cohort of new Family Physicians and 49% of RCPSC Specialists exited from training at U of T (Figure 5).

Figure 5: 2014 Estimated practice entry cohort of new physicians by Ontario school of PG training

Family Physicians

U of T 35%	McMaster 16%	UWO 15%	Ottawa 13%	Queens 13%	NOSM 8%
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RCPSC Specialties

U of T 49%	McMaster 14%	UWO 13%	Ottawa 19%	Queens 5%
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Source: CAPER, 2014-15 Annual Census of Post MD Trainees

Enrolment, Admissions and Output *continued*

Affiliated Teaching Sites

The U of T Faculty of Medicine has 27 affiliated teaching sites; nine are fully affiliated hospitals and eighteen are community affiliated hospitals and sites [see Appendix A].

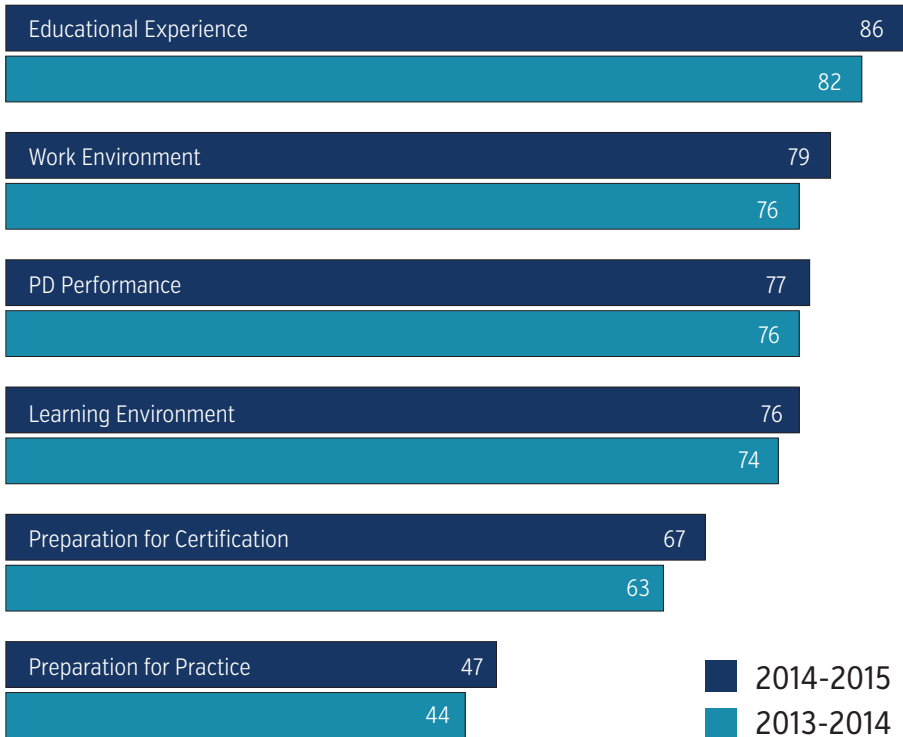
Resident Exit Survey

This year marked the 10th anniversary of the Resident Exit Survey. Since 2005, we have been asking exiting residents for feedback on the quality of their education and training, well-being and future plans. We are now able to compare a decade of residents' feedback on their experience at U of T. In addition, each year we included timely questions about topics such as duty hours, technology and factors contributing to residents' choice of specialty.

Every March, we email exiting residents an invitation to complete the online survey and allow them a few weeks to respond. Response rates started off at 28% in 2005, but have remained consistently high since 2007 [59% to 64%].

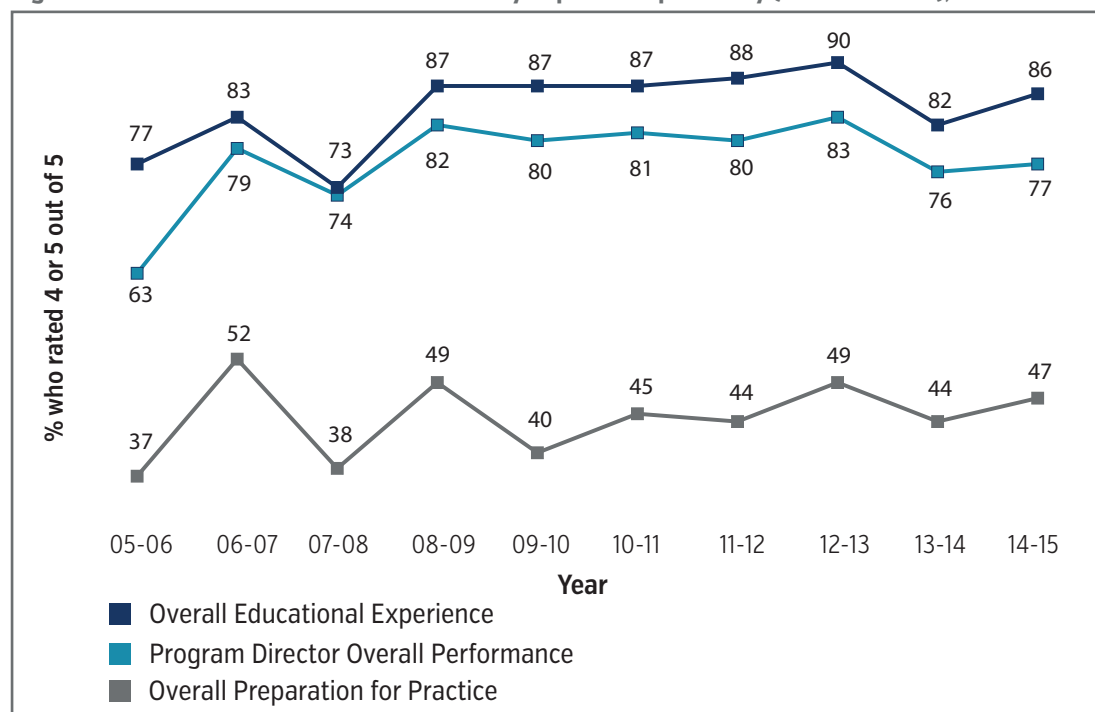
Since the survey's inception, we have asked residents to rate specific aspects of their educational experience, learning and work environments, preparation for practice and certification, and their Program Directors' performance. In 2014-15, 86% of respondents rated their educational experience 'very good' or 'excellent' [Figure 6]. These ratings have remained consistently high since 2008-09 with a slight dip in 2013-14 [Figure 7]. Over the years, residents also consistently rate their Program Directors' overall performance quite favorably, with 77% rating them 'very good' or 'excellent' this year. Preparation for practice is typically rated less favorably, with only 47% rating this aspect of their training 'very good' or 'excellent' in 2014-15.

Figure 6: % of those who rated their residency experience positively [4 or 5 out of 5], 2013-14 & 2014-15



Enrolment, Admissions and Output *continued*

Figure 7: % of those who rated their residency experience positively (4 or 5 out of 5), 2005 to 2014



When asked about their plans after residency (Figure 8), locums were most frequently listed [36%] as an option for the future, among all respondents, followed by independent practice [30%] and a clinical or research fellowship [30%]. Family Medicine residents said they were most likely to pursue a locum [38%] compared to RCPSC specialty residents [21%] who were most likely to pursue a fellowship [39%] or independent practice [31%].

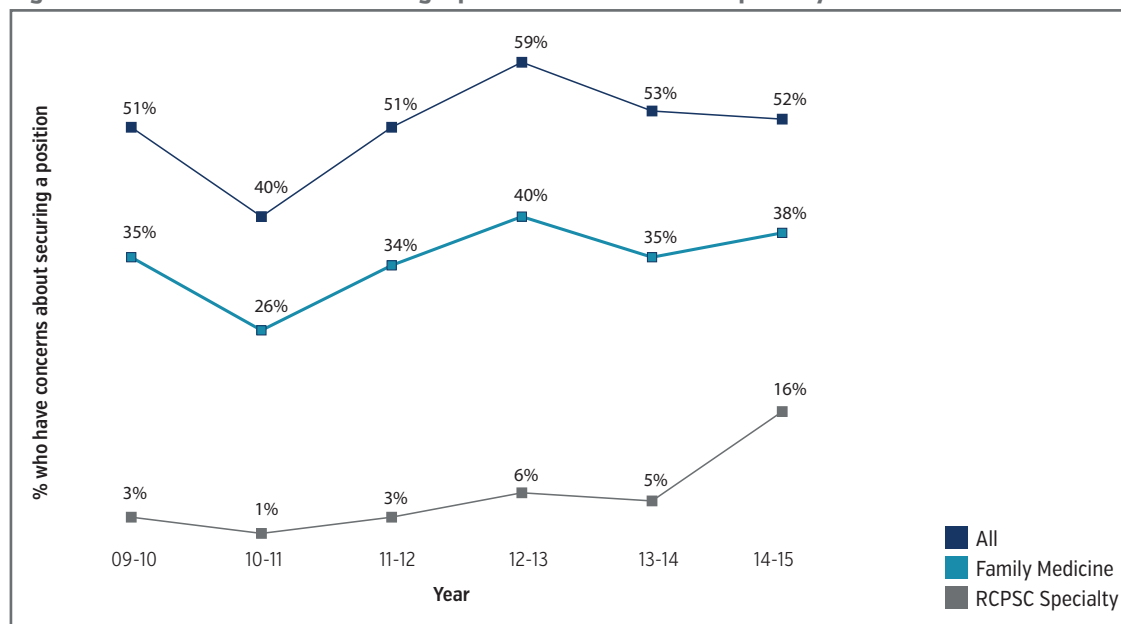
Figure 8: Plans after completion of residency

	All	Family Medicine	RCPSC Specialty
Locum	36%	38%	21%
Independent Practice	30%	18%	31%
Clinical or Research Fellowship	30%	10%	39%
Further Subspecialty	17%	14%	14%
Graduate Studies	11%	5%	14%
Clinical Associate/Contract Position	13%	4%	18%
Don't know	11%	8%	10%

In 2009-10, we began asking residents if they had concerns about securing a position in their chosen specialty. Concern peaked in 2012-13 (40%) with a majority of RCPSC specialty residents (60%) being concerned. In 2014-15, the proportion of residents who say they are concerned has remained steady at 38%, although the proportion of Family Medicine residents with concern has jumped to 16% which deviates from the low proportions in previous years (Figure 9).

Enrolment, Admissions and Output *continued*

Figure 9: % concerned about securing a position in their chosen specialty



Fellowship Survey

The Postgraduate Medical Education Office has conducted a biannual Survey of Clinical Fellows at the University of Toronto since 2008. In 2014-15, we launched a survey of post-clinical fellows. The focus of the survey was to seek feedback on the impact of the clinical fellowship experience at U of T on fellowship graduates' career and practice choices. We sent out 2,216 invitations to those who were registered as fellows with PGME from 2008 to 2014 and received 559 responses for a response rate of 25%.

We asked fellowship graduates to reflect on their experiences and to rate several aspects of their fellowship at U of T. A majority [72%] rated their overall experience 'very good' or 'excellent'. When compared to the most recent results from the fellowship surveys [2013-14], a larger proportion of graduates rate all aspects of their U of T experience more favourably than current fellows [Figure 10]. Graduates seemed most satisfied with the mix and diversity of cases and the quality of patient care experiences they received at U of T. An overwhelming majority [96%] would recommend their fellowship at U of T to others.

When asked about ways the clinical fellowship at U of T had an impact on their careers, graduates said it provided a unique training opportunity [80%], with highly advanced clinical training [73%] and allowed them to gain clinical experience that gave them an employment advantage [67%]. The following is an excerpt of respondents' comments of the impact of the fellowship on their careers:

"After the fellowship, I was the first person to return with a Fellowship in Critical Care in my whole country."

"[It] engrained the need for academic vigor in my day to day practice."

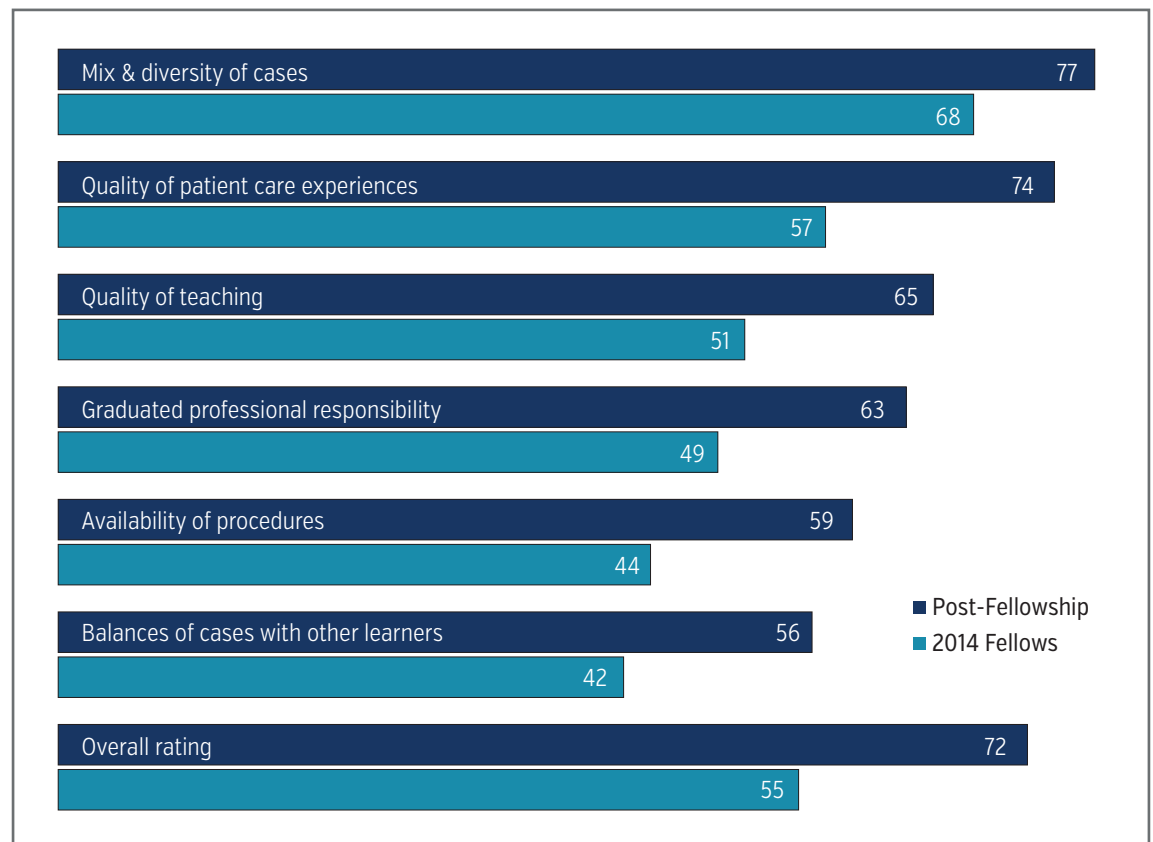
"I still feel inspired by the very motivated and committed individuals I had the privilege of working with and for."

"It put me in touch with the best international experts in my field of choice."

It appears that once out in the field, fellowship graduates have high regards for their experience at U of T.

Enrolment, Admissions and Output *continued*

Figure 10: % of those who rated their fellowship experience positively (4 or 5 out of 5), Post-Fellowship Survey and 2014 Fellowship Survey



Workshops, Information Series, Faculty Development and eLearning



Information Sessions for Program and Hospital Administrators

2014-15 Information Sessions for PGME Program and Hospital Administrators (updated May 13, 2015)					
Name	Description	Presenter	Date	Time	
1 ICRE	Getting ready for ICRE Note: Restricted to those registered for the ICRE Administrators Track	Education & Research	Wed Oct 8	11:30 am - 1:30 pm	
2 CaRMS Basics	CaRMS application process; program description; Quota allocation; file organization; interview scheduling; communications.	Policy & Analysis	Thurs Oct 30	11:30 am - 1:30 pm	
3 CPSO	Applications and credentialing; different kinds of licenses; purpose of goals and objectives for fellows; Physiciansapply.ca	CPSO	Wed Nov 12	9:00-11:00 am	
4 Registration Re-appointments for 2015-16	How to re-appoint trainees to 2015-16; Common Errors; Checklist; Re-appointing Visa Trainees; Registration Committee.	Operations	Thurs Nov 27	11:30 am - 1:30 pm	
5 Pre-entry Assessments and Assessment Verification Period	PEAPs and AVPs are assessment periods for international medical graduates. This session will explain the purpose of the assessment period and a completion and submission of PEAP and AVP forms for new trainees.	Operations	Tues Dec 16	11:30 am - 1:30 pm	
6 Adobe Pro Training	Adobe Professional training to prepare internal review documentation.	Education & Research	Tues Jan 13	11:30 am - 1:30 pm	
7 Internal Reviews	Purpose of the IRC; membership; review teams; documentation preparation; content of PSQ, appendices.	Education & Research	Thurs Jan 29	11:30 am - 1:30 pm	
8 The POWER System	Overview of components; registration, types of evaluation; summary reports; rotations, access, settings, help desk: Annual Reports to PDs and hospitals.	Policy & Analysis	Tues Feb 10	11:30 am - 1:30 pm	

Workshops, Information Series, Faculty Development and eLearning *continued*

9	PGME Office Overview	This two-hour session explains PGME's office structure and activities, registration of clinical fellows and residents at PGME from appointment by departments, Electives, payroll, information to trainees, and registration; funding.	Operations	Thurs Feb 19	11:30 am - 1:30 pm
10	PGCorEd	What is PGCorEd; module content; purpose of mandatory completion; record of completion.	Education & Research	Thurs Mar 26	11:30 am - 1:30 pm
11	PARO-CAHO contract	Rights and Responsibilities; Duty Hours; Stipends, Vacation, Benefits, Leave	PARO	Thurs Apr 16	11:30 am - 1:30 pm
12	Global Health@ PGME	This 2-hour discussion will include: 1. Global Health Education Initiative (GHEI) - promoting, application and registration 2. Global Health Electives - guidelines for trainees and faculty, application and pre-departure training 3. POWER - entry of global health electives	Global Health	Tues Apr 28	11:30 am - 1:30 pm
13	Visas + Reg'n of International Trainees	Overview of the Work Permit Process; Letters of Eligibility, Types of degrees and Credentials, PEAP	Operations	Tues May 12	11:30 am - 1:30 pm
14	POWER: Preparing for the New Training Session	This information session provides guidance to Program administrators who use the Evaluation system of POWER for purposes of rotation scheduling and evaluations. A checklist of tasks to be undertaken before the rollover to the 2015-16 session will be reviewed. Q & A period to follow.	Policy & Analysis	Tues May 19	11:30 am - 1:30 pm
15	Wellness	Office of Resident Wellness overview; services offered; what administrators can do for residents requiring help.	Resident Wellness	Tues May 26	11:30 am - 1:30 pm
16	Board of Examiners	Purpose of the BOE; membership; when resident cases are presented; Guidelines for Evaluation; remediation plans.	Education & Research	Tues June 2	1:30 pm - 3:30 pm
17	POWER: Preparing for the New Training Session	Repeat of Information Session 14 above.	Policy & Analysis	Thurs June 4	11:30 am - 1:30 pm
18	Year-End Appreciation Day at DoubleTree	PGME upcoming innovations. High Impact Communication and 7 Humour Habits in the Workplace.	PGME and Special Guest Speakers	Tues June 16	12:00-3:30 pm

Workshops, Information Series, Faculty Development and eLearning *continued*

Residency Education Development Series

The Residency Education Development Series (REDS) is a series of workshops for Program Directors, site directors, and faculty members who are interested in residency education, and is led by Dr. Susan Glover Takahashi, Education and Research Unit, Postgraduate Medical Education Office.



The list of workshops offered in 2014-15 included:

Workshop Title	Description
Moving forward with Competency-Based Residency Education	What's real, what's hype in developing and implementing competency-based approaches to residency education.
Remediation 101: Basics in Identification and Management of Struggling Residents	Planning and implementing targeted remediation plans that support residents in difficulty.
CaRMS Workshop	Best practices in Admissions & Selection. This workshop is focused on file review, sample interviews and ranking.
Developing Goals & Objectives and ITERs that work	Meeting accreditation and internal review standards for residency program goals & objectives and ITERs.
Integrating PGCorEd Into Residency Education	Case examples on how to integrate PGCorEd into residency curriculum.
Pre-Survey Questionnaire (PSQ) Writing Workshop	Preparing PSQs and understanding where it 'fits' in accreditation and program design.
Moving Forward in Best Practices in Admissions & Selection [BPAS]	Selecting the best residents for your program: Why BPAS and why now?
Collaborator Role Workshop	Tools to teach and assess the collaborator role in residency education.
Communicator Role Workshop	Tools to teach and assess the communicator role in residency education.

Workshops, Information Series, Faculty Development and eLearning *continued*

UT PGME~~Exchange~~ is a central place to collect and share learning resources within the University of Toronto PGME community, including tools for teaching, assessment, curriculum, planning and workshop development.

Within the **UT PGME~~Exchange~~**, each resource has a corresponding 'guide' for teachers and other users on how to use the resource in the educational setting. Resources can be sorted by CanMEDS role, intended audience, program, format, author and more. The **UT PGME~~Exchange~~** is an online, web-based resource that can be accessed from your personal computer or mobile device. These shared resources can be used and re-used to support learning activities.

The **UT PGME~~Exchange~~** currently contains 100 learning resources spanning all 7 of the CanMEDS competencies. Since its launch in June 2014, 68 users have accessed the exchange resulting in more than 100 downloads. www.pgmxchange.utoronto.ca



PGCorEd

The PGME Core Curriculum Web initiative (**PGCorEd**) is a set of web-based eLearning modules, which cover the foundational competencies for the University of Toronto postgraduate trainees. **PGCorEd** is designed to be responsive to the practical realities of residency training by being available when and where the resident needs the information.

Each **PGCorEd** module is approximately 4 hours in length and includes 6-8 units, each of which require approximately 30 minutes to complete. **PGCorEd** modules focus on generic foundational competencies linked to the CanMEDS roles; in particular, the non-medical expert roles. The content is targeted at the PGY1 and PGY2 resident and aims to help the PGY1 in transition from the learner role in medical school to the practitioner role in residency and includes:

- End of Life Care
- Resident as Manager
- Essentials for Communication
- Communication Basics
- Resident as Learner and Teacher
- Patient Safety
- Resident as Professional

Workshops, Information Series, Faculty Development and eLearning *continued*

Residents are required to complete the modules before the end of their PGY2 year. Failure to do so delays a resident's promotion to the next training level or completion of the Final In-Training Evaluation Report (FITER), and may also constitute professional misconduct. Modules are also made available for subspecialty programs and senior residents upon request.

Development for the new and improved **PGCorEd** 2.0 is underway. **PGCorEd** 2.0 will be mobile and will have features such as: available offline, streamlined content and a revised approach to learner assessment.

CIPCorEd

The Clinician Investigator Program Core Education (**CIPCorEd**) is an online resource which consists of a series of educational units designed specifically for the clinician investigator trainee. Each unit contains information critical to the development of a body of knowledge and skills required for success as a clinical investigator. **CIPCorEd** is a mandatory educational requirement for residents enrolled in the Clinician Investigator Program (CIP) and is open and available to any residency program at the request of the Program Director.

The complete list of **CIPCorEd** units includes:

1. Grant Writing
2. Manuscript Writing
3. CV Writing
4. Research Ethics
5. Knowledge Translation
6. Supervising Trainees and Mentoring
7. Collaboration in Research
8. Presentations



Internal Review/Accreditation

The Internal Review Committee (IRC) is a subcommittee of the PGMEAC and retains oversight responsibility of the internal review of residency programs according to the standards of accreditation of the RCPSC and the CFPC. The Family Medicine Internal Review Subcommittee (FM-IRSC) is an ad hoc subcommittee of the IRC and PGMEAC.

Chair, Internal Review Committee – Dr. Linda Probyn
 Vice Chair, Internal Review Committee – Dr. Tony Mazzulli
 Chair, Family Medicine Internal Review Subcommittee – Dr. Roy Wyman



Continuing through the accreditation cycle, regularly scheduled internal reviews began in January 2015. In addition, programs have been working on any follow-up requests as per the decisions made by the CFPC and the RCPSC Accreditation Committees in 2013 (Figure 11).

Figure 11: Internal review and accreditation activities July 1, 2014 to June 30, 2015

Activities	2014-15
Internal Review Cycle (July 1, 2014 to June 30 2015):	
Routine mid-cycle Reviews of RCPSC Programs	21
Mandated Internal Reviews	3
Mandated External Reviews	1
Internal Review Committee Recommendations	13
RCPSC Accreditation Decisions	8
CFPC Accreditation Decisions	2
FIRE Applications to RCPSC	1



Assessment and Evaluation

In-Training Evaluation Reports

In 2012, the University of Toronto PGMEAC approved the PGME Minimum Standards for Resident In-Training Evaluation Reports (ITERs). The ITER form is one method of resident assessment and evaluation used within all U of T residency programs. The PGME Minimum Standards for ITERs is an effort to implement standards and guidelines to enhance form design and content. Specifically, these standards were designed to: improve rating clarity for pass or fail, improve evaluator/user friendliness, ensure ITERs are based on the goals and objectives of the rotation, ensure ITERs are of reasonable length and ensure that all ITERs have one question that serves as the overall global performance.

The PGME Office has worked collaboratively with programs to amend/develop their ITERs to meet the minimum standards and to upload ITERs to the POWER system for use [Figure 12].

Figure 12:
ITER Review & Development

Academic Year	# of Programs Participating	# of ITERs submitted for review	# of ITERs finalized
2012-13	21	160	101
2013-14	22	93	73
2014-15	17	168	78
Total		421	252

There were 50 programs that worked on and completed amending/developing ITERs over this three-year period [some programs submitted ITERs in more than one academic year]. The number of ITERs submitted per program ranged from 1 to 23. As of June 30, 2015 there were over 100 ITERs active in the review process.

Board of Examiners – Postgraduate Programs

The Board of Examiners – Postgraduate Programs (BOE-PG) is a committee of faculty and residents appointed by Faculty Council, chaired by Dr. Jonathan Pirie. Trainees in a residency program are routinely evaluated on an ongoing basis, both formally and informally. This evaluation must be conducted in accordance with the policies of the University of Toronto, the RCPSC and the CFPC. When residents have difficulty achieving the goals and objectives of the residency program they are referred to the BOE-PG. The evaluation procedures are outlined in the [Guidelines for the Evaluation of Postgraduate Trainees of the Faculty of Medicine at the University of Toronto](#) [Feb 2007].

Role of BOE-PG

At the request of a Program Director and the Vice Dean Postgraduate Medical Education, the BOE-PG reviews the cases of residents in academic difficulty to decide the course(s) of action, which may include remediation, remediation with probation, probation, or suspension and dismissal [Figure 13]. The assessment of a resident's performance may include the evaluation of the resident's academic, behavioural, ethical and professional performance in their residency program, or the evaluation and recommendation from an independent process [Figure 14].

PGME Support

The PGME Education & Research Unit offers support and educational expertise to programs in planning a remedial program, as well as provides teaching and assessment resources to assist Program Directors with a remedial program.

Assessment and Evaluation *continued*

Figure 13: BOE case volumes & outcomes

BOE Case Volumes & Outcomes	2012-13	2013-14	2014-15
1. Total cases over year	26	35	36
Total cases open and active at beginning of academic year (July 1)	10	13	21
Number of NEW cases over year	16	22	15
2. Total closed cases over year	13	14	26
Successful completion	11	13	23
Withdrawal	2	0	1
Dismissal	0	0	1
Resignation	0	0	1
Transfer	0	1	0

Figure 14: BOE cases by category

Category	Criteria	2012-13 Count (%) [n=26]	2013-14 Count (%) [n=35]	2014-15 Count (%) [n=36]
Training Level	PGY1	6 [23%]	2 [6%]	2 [6%]
	PGY2	7 [27%]	8 [23%]	11 [31%]
	PGY3	3 [12%]	7 [20%]	5 [14%]
	PGY4	7 [27%]	7 [20%]	6 [17%]
	PGY5+	3 [12%]	11 [31%]	12 [33%]
Type of Trainees	MOH CMG	14 [54%]	18 [51%]	20 [56%]
	MOH IMG	12 [46%]	15 [43%]	15 [42%]
	Visa/other	0	2 [6%]	1 [3%]
Type of Problem by case (most cases have >1 CanMEDS problem area)	Medical Expert	19 [73%]	25 [71%]	24 [67%]
	Professional	12 [46%]	19 [54%]	19 [53%]
	Communicator	14 [54%]	19 [54%]	15 [42%]
	Manager	6 [23%]	9 [26%]	8 [22%]
	Collaborator	1 [4%]	5 [14%]	7 [19%]
	Health Advocate	0	0	1 [3%]
	Scholar	0	1 [3%]	1 [3%]

POWER Innovations

The following are highlights from activities related to POWER and the POWER Steering Committee, from June 2014 to June 2015:

Rotation and Education Site Evaluation Changes

The new Rotation and Education Site Evaluation (RESe) tool was piloted in 36 RCPSC Programs and 18 FM Programs in 2014-15. For the 2015-16 academic year, the standardized RE form will be implemented for all residency programs in POWER. As part of the enhancement, the Rotation Effectiveness Score Report will be improved to clarify measures of comparison with new filters, and a legend for the 2015-16 academic year.

Teacher Evaluation Score Reporting Changes

The Teacher Evaluation Score (TES) reporting screen was updated to provide more clarity. The labels were updated to be consistent throughout the report and the legend more accurately describes what information is captured in each category.

Rotation Scheduler Enhancements

In July 2014, several enhancements were released into POWER to capture granular rotation information for Medical Trainee Days reporting. The second phase of enhancements will be implemented in November 2015 and will include the ability to schedule evaluations at the sub-rotation level.

On Call Stipends

The process for tracking on call stipends has recently changed. Trainees are now required to submit their call stipends through POWER. Calls are reviewed by the hospitals and then submitted to the Toronto Hospitals' Postgraduate Payroll Association (THPPA) through POWER.

POWER Help Web Site

The POWER Help Web Site was recently launched into POWER. This site contains instructions for using POWER and information regarding new POWER enhancements.

Training Sessions

Private and semi-private POWER training sessions were available as requested by users. The following formal training sessions were offered during the 2014-15 academic session:

- PA Info Session: The POWER System - Feb 10, 2015
- PA Info Session: POWER: Preparing for the New Training Session - May 19, 2015



Resident Wellness

The Office of Resident Wellness (ORW) provides services to residents and fellows in need, enhances curricular development in physician health and well-being, and contributes to the development of scholarly work in physician health in medical education.

Trainee Support

In 2014-15, 183 residents and fellows sought support services at the ORW. In total, trainees seeking help attended 681 individual sessions (Figures 15 and 16).

Figure 15: Number of trainees and visits to the ORW by academic year, 2009-10 to 2014-15

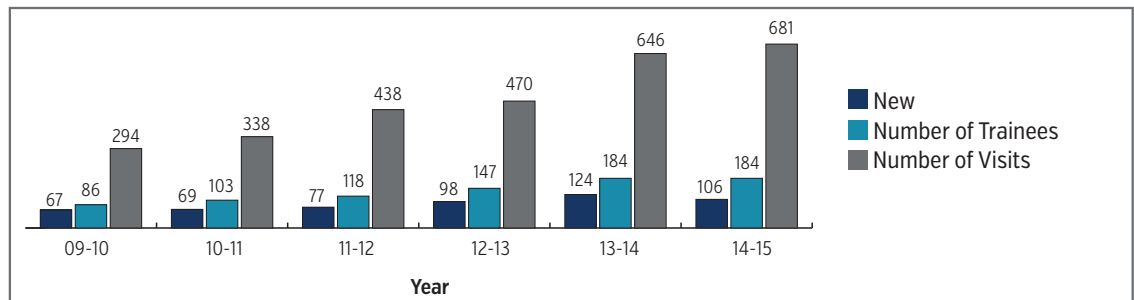
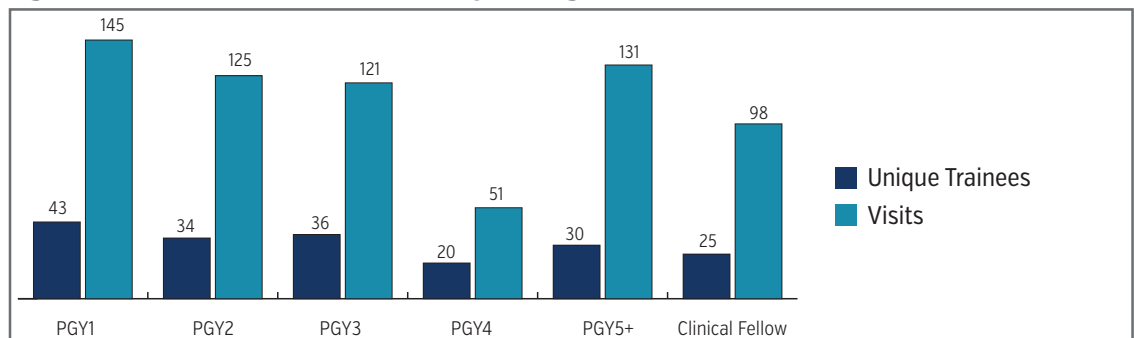
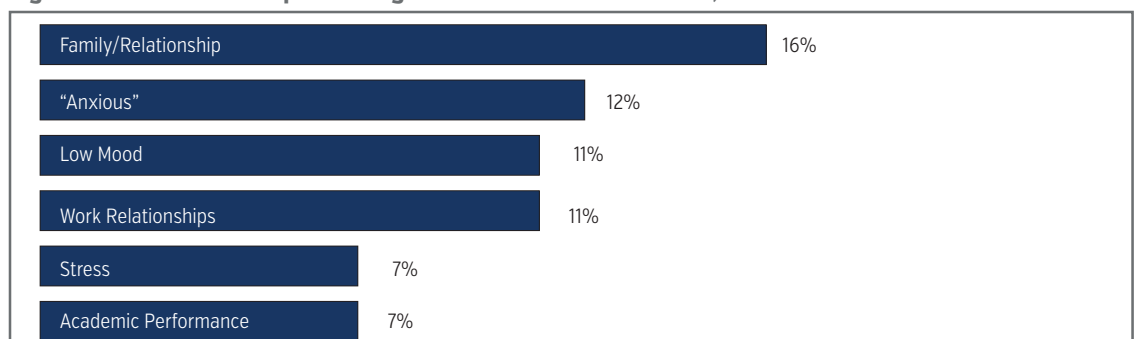


Figure 16: Number of trainees and visits by training level, 2014-15



Broadly, mental health concerns are the most common issues that bring trainees to the ORW, including general stress and feeling anxious or low mood (Figure 17). For the first time, concerns regarding personal relationships entered the list of top presenting issues, followed by concerns with work relationships. Included in this category are difficulties managing relationships with faculty, staff and training colleagues, as well as concerns regarding learner mistreatment. Trainees in academic difficulty continue to be a common reason for seeking ORW services.

Figure 17: Most common presenting issues on first visit to ORW, 2014-15



Resident Wellness *continued*

Educational Activities

The ORW offered eight workshops in their 2014-15 wellness curriculum and also added a four-part series on Fatigue Management. The workshops were designed to support the development of self-regulation skills that enhance both clinical performance and professional well-being. Workshops are between 1.5 to 2 hours in length, highly interactive and include brief evidence-based didactic presentations, experiential exercises, reflective processes and group discussion.

Wellness Workshop Series 2014-15

1. Enhancing Well-Being and Performance
2. i. An Introduction to Fatigue Management
ii. Fatigue Management series:
 - a) Managing Sleep Deprivation and Physical Fatigue
 - b) Managing Cognitive Fatigue
 - c) Managing Emotional Exhaustion
 - d) Managing Motivation
3. Managing Transitions and Change throughout the Medical Career
4. Mindful Career Planning
5. Enhancing Exam Preparation and Performance
6. Time Management
7. Resident Resilience in the Context of Adverse Events: A Mindful Approach
8. Mindfulness in Medical Life

During the academic year, 21 workshops were presented to 14 University of Toronto postgraduate programs. The wellness workshops were well received by residents and faculty with a large majority (84%) indicating that they were satisfied or very satisfied with the sessions and 90% considered the content relevant to their training. Participants continue to identify group reflection, knowledge acquisition, and practical skills development as the most valued aspects

of the workshops. Openly discussing common experiences of challenges and adaptations to training is seen as a unique and highly regarded opportunity.

Faculty development to support wellness education continues to be a priority for the ORW. This year, wellness workshops were presented at four departmental/hospital faculty development meetings in addition to national and international medical and physician health education meetings. The faculty presentations aim to enhance participants' own self-regulatory skills in addition to supporting and encouraging them to model and teach these skills to learners.

For the fourth year, the ORW supported the UME's 'Transition to Residency Program' by presenting a workshop on "Managing Transitions" in December 2014. Dr. Susan Edwards recorded a webinar entitled "The Experience of Addiction and Treatment in Residency" for the AFMC's Addiction eLearning for Physician Wellness Webinar and Podcast series.

Local, National and International Partnerships for Wellness Activities

Learning Environment Working Group, Faculty of Medicine

In 2014-15, this subgroup of HUEC, co-chaired by the Associate Dean of the Office of Health Professions Student Affairs and the Director, Curriculum (UME), expanded from an initiative to improve the clinical learning environment for undergraduate students to include PG learners (residents and fellows). Both the Director of Resident Wellness and the Faculty Lead of Strategic Initiatives represent PGME on this working group.

Health, Arts and Humanities Program

In 2014-15, PGME supported a number of activities for PG trainees including an elective in Theatre of Medicine, the Resident Creative Writing Group, and ongoing support for "Cinema Medica: Health and Illness in Film", to promote reflective discussion on themes relevant to health professionals.

Resident Wellness *continued*

Practice Ontario-UT

Practice Ontario-UT (PO-UT) offers free career planning and guidance, job search assistance and transition to practice preparation to postgraduate medical residents. The ORW partnership between HealthForceOntario (HFO) and PGME was initiated in 2009 to match University of Toronto residents with available jobs in Ontario.

PGME has been working with HFO to enhance service, including free and flexible job search assistance for permanent and locum opportunities, as well as personal career guidance and transition strategies to aid the smooth adjustment from learner to practicing physician.

In 2014-15, 297 University of Toronto residents were in contact with PO-UT to receive specific information or to seek career advice. Through PO-UT, 147 residents accepted 180 full-time, part-time, and/or locum opportunities within the Greater Toronto Area (GTA) and 46 residents accepted 57 opportunities outside the GTA.

Association of Faculties of Medicine of Canada

The ORW continues to be well represented on AFMC groups and committees. Dr. Susan Edwards is in her second of a three year term as Chair, AFMC Resource Group on Physician Health and Well-being professionals. Additionally she sits on two FMEC PG working groups:

- Transitions from Medical School to Residency: Learner Handover Working Group which aims to explore the risks and merits of a post CaRMS match learner handover process from UME to PG and develop recommendations and protocols for such a process.
- Learning and Work Environment Implementation Committee which aims to implement the recommendation to create positive and supportive work and learning environments.

University of Sao Paulo (USP) Consultation

Under the leadership of Dr. Sarita Verma, Lead, Institutional Assessment and Strategic Plan, the

ORW was pleased to partner with the Office of Health Professionals Student Affairs, to consult on the creation of a Learner/Faculty Wellness Office in the Faculty of Medicine at USP. This included hosting a delegation from the Faculty of Medicine, USP which reviewed the student and resident wellness programs at U of T in September/October in 2014, and was followed up by an invitation to visit USP in March 2015, where a needs assessment of learner and faculty wellness programs was completed and consultation on the development of a wellness office was provided. Ongoing support by the Director, ORW and Associate Dean, OHPSA for the work of the USP Wellness Office continues.

Board of Medical Assessors-PG

The Board of Medical Assessors-PG (BMA-PG) is a committee of clinical faculty, chaired by Dr. David Tannenbaum, to support the PGME office in developing best practices for supporting learner disability and accommodation in postgraduate medical training (Figure 18).

Figure 18: BMA Activity, 2013-14 and 2014-15

BMA Activity	2013-14	2014-15
Meetings	5	6 [1 online]
New cases	1	5
Active [ongoing]	2	3
Closed	0	4

Leadership/Stewardship

PGME's Resource Stewardship Committee is unrolling a multifaceted approach to engaging our learners in the responsible stewardship of health care resources. Efforts to date have focused on increasing general awareness of Choosing Wisely Canada initiatives through our website, and profiling resource stewardship competency and opportunity among our Program Directors, chief residents, and incoming residents in some specialties. We recognize the critical role played by faculty in teaching and role modeling the core competencies of resource stewardship. To that end, we have designed a half-day faculty development workshop to give them the educational tools and resources they require to be most effective in this regard. This workshop will take place in November 2015.



Leadership

Local activities in physician leadership education are being complemented by activities of a more global nature. In October 2014, the U of T's Institute of Health Policy, Measurement and Evaluation and the Faculty of Medicine partnered with the RCPSC to hold the Toronto International Summit on Leadership Education for Physicians [TISLEP]. At TISLEP, stakeholders (patients, learners, faculty, educators, leaders and other health care professionals) from eight different countries were convened to consider key principles for physician leadership education and development, and to initiate development of an international curriculum in this area. The Summit was a great success and a follow up Summit [TISLEP 2015] will be held October 20, 2015 in Vancouver as a pre-conference event before ICRE. The [TISLEP 2014 Report of Proceedings](#) is available on the PGME website.



Chief Resident Initiative

The chief residency position is one filled with leadership activities and opportunities. Ordinarily these residents do not receive formal leadership skills training before beginning their chief residency year, and once the academic year is underway, leadership opportunities are primarily context dependent. We have recognized a value in creating a venue for leadership skills training and networking for chief residents across our PGME landscape. A pilot event in March 2015 attracted 24 residents at the end of the work day, and building on the success of this event, we have planned for a quarterly Chief Resident Forum in the 2015-16 academic year.

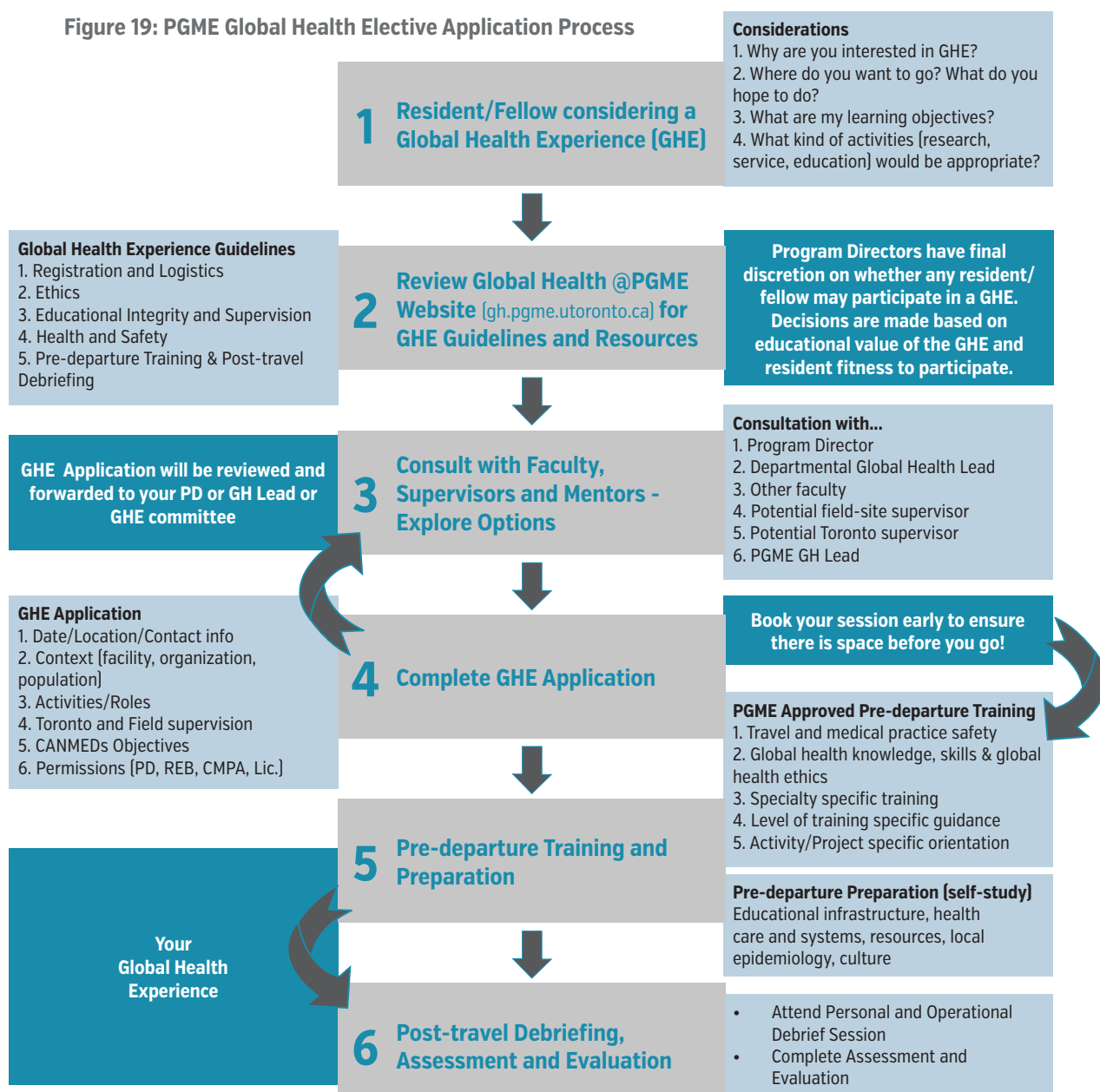
Global Health

<http://gh.pgme.utoronto.ca/>

Global Health at Postgraduate Medical Education (GH @ PGME) continues to develop and implement innovative programs to support resident interests in global health and to fulfill our social accountability mandate.

PGME now has a comprehensive process for registering and preparing residents for global health electives that are safe, ethical and educationally valuable (Figure 19). As part of this mandatory process, residents can read through the [Global Health electives guidelines and register for their electives online](#), and attend PGME-offered pre-departure training and post-travel debriefing sessions in person.

Figure 19: PGME Global Health Elective Application Process



Global Health *continued*

The Global Health Education Initiative (GHEI), now in its seventh year, welcomed its Class of 2017. The GHEI boasts over 100+ participants, 100+ faculty, and 100+ graduates from two dozen specialties who have gone on to be global health leaders in Canada and beyond, and who participate in an alumni network of GHEI graduates.

http://gh.pgme.utoronto.ca/?page_id=36

Over 250 residents, fellows and faculty attended Global Health Day on June 11, 2015. The day, on the theme of “Is Global Health Possible?” included lectures, debates and 20 roundtable sessions with global health leaders from across the university and affiliated non-governmental organizations.

http://gh.pgme.utoronto.ca/?page_id=1108

In 2014-15, GH @ PGME also inaugurated a new social responsibility award for residents and faculty in recognition of their outstanding contributions in the development and/or implementation of socially responsible initiatives, programs or research related to postgraduate medical education. The 2015 Inaugural PGME Social Responsibility Award winners were: Faculty Award (shared) Dr. Lisa Andermann and Dr. Kenneth Fung; and Resident Award Dr. Nicole Kozloff PGY6.

Global Health educational initiatives are overseen by the Global Health Education Sub-Committee and report to PGMEAC. Dr. Barry Pakes is Academic Lead for Global Health at PGME and Judy Kopelow is Manager, Strategic Programs and Initiatives.

Comments from PGME’s Global Health Education Initiative participants include:

“Through GHEI, I’ve met trailblazing leaders in global health as well as inspiring residents with whom I hope to collaborate in the future. The seminars have helped me clarify how I can engage with low-income communities in relationships of mutuality and solidarity. GHEI has been a highlight of residency for me.”

John Ihnat, PGY2 Family Medicine

“Participating in GHEI was a wonderful experience! It allowed me to learn more about the practice of global health from a variety of perspectives and allowed me to better understand the breadth of opportunities in the field, widening my perspective to thinking beyond only providing direct clinical care. It was also wonderful to meet and continue to connect with like-minded individuals from diverse areas of medicine across the faculty.”

Amy Gajara, PGY4 Psychiatry, Chief Resident, Center for Addiction and Mental Health

“I plan to continue future clinical and research work on the global impact of infection and severe illness. The GHEI program provided an excellent backbone to the theory of global health and to meeting exceptional U of T faculty members who have chosen global health as a career path.”

Aleksandra Leligdowicz, PGY5 Critical Care

“The GHEI provided an excellent overview of Global Health at the appropriate level for residents. After taking the course, I feel I now have a knowledge base that I can use when faced with Global Health issues in my research collaborations abroad.”

Horia Vulpe, PGY4 Radiation Oncology

“The GHEI gave me exposure to a variety of people, projects and programs, that helped shape my future career path. Because of this exposure to the content in GHEI, I now work to provide healthcare for vulnerable populations. Thank you for this wonderful opportunity!”

Naheed Dosani, Palliative Care Physician, Division of Palliative Care, William Osler Health System, Brampton Civic Hospital and St. Michael’s Hospital

Certificate Ceremonies

In June 2015, PGME again partnered with U of T Advancement and the Faculty of Medicine clinical departments to host certificate ceremonies at Hart House and The Faculty Club with the Departments of Radiation Oncology, Obstetrics & Gynaecology, Medicine, Pediatrics and Anesthesia.

These memorable events mark the successful completion of the advanced training of our medical residents and clinical fellows as they seek out the next chapter in their careers. It was an opportunity for our learners to celebrate their accomplishments with warm congratulations from family, friends and faculty members.

The completion of training certificates are produced centrally by PGME on specialized parchment embossed with the name, crest and seal of the university, and signed by the Program Director/supervisor, Department Chair and Vice Dean.

While each of the events had its own departmental “flavour” – with some announcing other awards and prizes – all included inspirational remarks and a tribute to the graduates. Each of the events involved several months of detailed planning and coordination. Special thanks to Advancement’s Julie Lafford, Cody Copeman and Rohini Chopra, and the dedicated efforts of many departmental administrative staff involved in the organization of the year-end events.



Appendix A - Affiliated Teaching Sites

Fully Affiliated Hospitals

- Baycrest
- Centre for Addiction and Mental Health
- Holland Bloorview Kids Rehabilitation Hospital
- Mount Sinai Hospital
- St. Michael's Hospital
- Sunnybrook Health Sciences Centre
- The Hospital for Sick Children
- University Health Network
- Women's College Hospital

Community Affiliated Hospitals and Teaching Sites

- Bridgepoint Health
- George Hull Centre for Children and Families
- Hincks-Dellcrest Centre
- Humber River Regional Hospital
- Lakeridge Health Network
- Markham Stouffville Hospital
- North York General Hospital
- Ontario Shores Centre for Mental Health Sciences
- Providence Healthcare
- Royal Victoria Hospital Regional Health Centre
- Southlake Regional Health Centre
- St. Joseph's Health Centre
- Surrey Place Centre
- The Scarborough Hospital
- Toronto East General Hospital
- Trillium Health Partners
- Waypoint Centre For Mental Health Care (Penetanguishene)
- West Park Healthcare Centre

Appendix B - Incoming/Outgoing Residency Program Directors

Program	Incoming PD and Date	Outgoing PD
Adolescent Medicine	Dr. Katherine Hick July 1, 2014	Dr. Eudice Goldberg
Anesthesia	Dr. Lisa Bahrey July 1, 2015	Dr. Mark Levine
Cardiac Surgery	Dr. Robert Cusimano May 1, 2015	Dr. Gideon Cohen
Child and Adolescent Psychiatry	Dr. Daniel Gorman (on leave) September 1, 2014 returning October 2015	Dr. John Langley
Child and Adolescent Psychiatry	Dr. Raj Rasasingham (Interim)	
Critical Care (Adult)	Dr. Andrew Steel January 1, 2015	Dr. Damon Scales
Gastroenterology	Dr. Yaron Avitzur September 1, 2014	Dr. Simon Ling
GREI	Dr. Kim Liu July 1, 2015	Dr. Barbara Cruickshank
Medical Genetics	Dr. Melissa Carter July 1, 2015	Dr. Roberto Mendoza
Medical Microbiology	Dr. Larissa Matukas July 1, 2014	Dr. Tony Mazzulli
Nuclear Medicine	Dr. Amer Shammam November 10, 2014	Dr. Marc Freeman
Orthopedic Surgery	Dr. Markku Nousiainen November 1, 2014	Dr. Peter Ferguson
Palliative Care	Dr. James Downar July 1, 2015	Dr. Giovanna Sirianni

Appendix C - Publications/Presentations

Reporting period: July 1, 2014 to June 30, 2015

2014-15 Posters (count: 14)

Title: "This Is An Important Topic We Don't Often Address": Resident Evaluations Of A Wellness Curriculum In Postgraduate Medical Education

Author: S. Edwards, C. Hurst, M. Ruetalo

Conference/Grant/Publication: International Conference on Physician Health (ICPH), September 15-17, 2014, London, England

Type: Poster

Title: Disability and Accommodation in Residency: Lessons from the Board of Medical Assessors [Postgraduate], Department of Family and Community Medicine, University of Toronto

Author: S. Edwards, D. Tannenbaum

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Poster

Title: Developments in Assessment Reports: Performance Indicators to Track Evaluation Completion and Quality at the University of Toronto

Authors: C. Abrahams, G. Bandiera, S. Spadafora, L. Probyn, S. Healy, A. Sharif

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Poster

Title: Development of mobile evaluations to enhance the learner experience

Authors: A. Pattern, S. Spadafora, G. Bandiera, L. Muharuma, K. Adatia, T. Cameron, C. Abrahams

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Poster

Title: Tracking learner activity at the University of Toronto: A case study of collaboration, systems change and accountability for clinical education

Authors: S. Spadafora, J. James, A. Pattern, S. Chan, L. Muharuma, C. Abrahams

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Poster

Title: Tracking learner activity at the University of Toronto: A case study of collaboration, systems change and accountability for clinical education

Authors: C. Abrahams, S. Spadafora, J. James, A. Sharif, A. Pattern

Conference/Grant/Publication: Canadian Conference on Medical Education (CCME), April 23-25, 2015 Vancouver, Canada

Type: Poster

Title: Development of a Mobile Procedure Logging Application to Enhance the Learner Experience

Authors: A. Pattern, K. Imrie, C. Abrahams, K. Adatia, L. Muharuma, S. Spadafora

Conference/Grant/Publication: Canadian Conference on Medical Education (CCME), April 23-25, 2015 Vancouver, Canada

Type: Poster

Appendix C - Publications/Presentations *continued*

Title: E-Learning Orientation Modules at the University of Toronto: Streamlining the hospital registration process

Authors: A. Pattern, M. Law, W. Kubasik, S. Edwards, L. Nickell, J. Irvine, L. Muharuma, S. Spadafora, J. James

Conference/Grant/Publication: Canadian Conference on Medical Education [CCME], April 23-25, 2015
Vancouver, Canada

Type: Poster

Title: The University of Toronto Location Registry: Development of an integrated location registry to standardize locations across the Faculty of Medicine

Authors: A. Pattern, F. Howard, R. Pittini, C. Abrahams, L. Muharuma, S. Spadafora, A. Sharif, K. Adatia, N. Chin, W. Robertson, S. Chan

Conference/Grant/Publication: 2015 Information Technology in Academic Medicine Conference, sponsored by the AAMC, San Diego, California, USA, June 3-5, 2015

Type: Poster

Title: Registration Modules at the University of Toronto: Streamlining the registration process to reduce hospital registration times

Authors: A. Pattern, M. Law, W. Kubasik, S. Edwards, L. Nickell, J. Irvine, L. Muharuma, S. Spadafora, J. James

Conference/Grant/Publication: 2015 Information Technology in Academic Medicine Conference, sponsored by the AAMC, San Diego, California, USA, June 3-5, 2015

Type: Poster

Title: Developments in Assessment Reports: Performance Indicators to Track Evaluation Completion and Quality at the University of Toronto

Authors: C. Abrahams, G. Bandiera, S. Spadafora, L. Probyn, S. Healy, A. Sharif

Conference/Grant/Publication: 2015 Information Technology in Academic Medicine Conference, sponsored by the AAMC, San Diego, California, USA, June 3-5, 2015

Type: Poster

Title: Professionalism Remediation: Creative Approaches to Support Reflective Understanding

Authors: E. Abner, D. McKnight

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Poster

Title: Scoping review of Postgraduate Anesthesiology Residency Education using an online survey tool for data collection and reporting

Author: LL. Murgaski, S. Bance, S. Glover Takahashi, J. Herold, M. Kennedy Hynes, C. Ringsted

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Poster

Title: Remediation of Residents in Need: Supporting Faculty Using a Team Approach to the Identification and Diagnosis of, and Interventions for, Residents in Need

Author: S. Glover Takahashi, S. Edwards, M. Nayer, C. Hurst, M. Kennedy Hynes, S. Spadafora

Conference/Grant/Publication: CCME, Vancouver, Canada, April 2015

Type: Poster

Appendix C - Publications/Presentations *continued*

2014-15 Paper Presentations (count: 12)

Title: A Year In Transition: Resident Narratives Of Wellbeing And Adaptation Throughout The First Year Of Training

Author: S. Edwards, C. Hurst, D. Kahan, M. Ruetalo

Conference/Grant/Publication: International Conference on Physician Health (ICPH), September 16, 2014, London, England

Type: Research Presentation

Title: Development of a Mobile Compatible Procedure Logging System to Enhance the Learner Experience

Authors: A. Pattern, K. Imrie, C. Abrahams, K. Adatia, L. Muharuma, S. Spadafora

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Presentation

Title: Best Practices in Rotation Evaluation for Postgraduate Medical Education

Authors: L. Probyn, C. Abrahams, S. Glover Takahashi

Conference/Grant/Publication: Canadian Conference on Medical Education (CCME), April 23-25, Vancouver, Canada

Type: Presentation

Title: A Prospective Evaluation of the Utility of Simulation to Enhance Radiology Resident Knowledge of Acute, Life-Threatening Emergencies

Authors: J. Riley, M. McGowan, C. Lang, L. Probyn

Conference/Grant/Publication: Canadian Conference on Medical Education (CCME), April 23-25, Vancouver, Canada

Type: Presentation

Title: The Utility of an Instructional Video to Teach Chest-Tube Insertion to Medical Trainees

Authors: T. Saun, S. Odorizzi, M. Johnson, G. Bandiera, S. Dev

Conference/Grant/Publication: Canadian Conference on Medical Education (CCME), April 23-25, Vancouver, Canada

Type: Presentation

Title: Bullet Proofing Yourself in Practice: 'Post' post-graduation: Lessons learned

Author: D. Martin

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Presentation

Title: It's all about communication... or is it?

Author: D. Martin, S. Glover Takahashi

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Presentation

Title: Item analysis and revision of an instrument to assess the competencies of residency program directors in a multi-source feedback

Author: J. Herold, S. Lieff, A. Zaretsky, G. Bandiera, S. Spadafora, M. Hynes, K. Imrie, S. Glover Takahashi

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Presentation

Appendix C - Publications/Presentations *continued*

Title: Potential of using a social media, ladders of engagement model, to explore how Twitter currently facilitates medical educators' learning

Author: LL. Murgaski, S. Glover Takahashi

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Presentation

Title: Bridging the Gap: Comparing Orthopaedic Surgery Faculty and Residents' Perspectives on the CanMEDS Roles and Entrustable Professional Activities That Are Important to Becoming a Competent Physician

Author: M. Kennedy Hynes, M. Nousiainen, P. Ferguson, S. Glover Takahashi

Conference/Grant/Publication: CCME, Vancouver, Canada, April 2015

Type: Presentation

Title: Surgical Prep Camp 2014: Assessing the Effectiveness of a Two-Week Training Course for Surgical Residents

Author: P. Mironova, L. Satterthwaite, K. Koo, B. Girardi, S. Glover Takahashi, R. Levine, O. Safir

Conference/Grant/Publication: CCME, Vancouver, Canada, April 2015

Type: Presentation

Title: Pediatric Resident Experiences with the Hidden Curriculum at the University of Toronto

Authors: J. Collins, T. Martimianakis, A. Atkinson, A. Matlow

Conference/Grant/Publication: ICRE, Toronto Canada, Oct 2014

Type: Presentation

2014-15 Workshops (count: 14)

Title: Enhancing PA well-being and resilience

Author: C. Hurst

Conference/Grant/Publication: International Conference on Residency Education (ICRE), October 23, 2014, Toronto

Type: Workshop

Title: Exploring Our Stories of Transition

Author: S. Edwards, C. Hurst

Conference/Grant/Publication: International Conference on Residency Education (ICRE), October 25, 2014, Toronto

Type: Workshop

Title: Fatigue Management for Optimal Well-Being and Performance

Author: S. Edwards, C. Hurst

Conference/Grant/Publication: International Conference on Residency Education (ICRE), October 25, 2014, Toronto

Type: Workshop

Title: Fatigue Management In Residency Training: Personal And Workplace Strategies to Mitigate Risks of Sleep Debt And Fatigue

Author: S. Edwards, C. Hurst

Conference/Grant/Publication: International Conference on Residency Education (ICRE) - International Residents Leadership Summit (IRLS), October 26, 2014, Toronto

Type: Workshop

Appendix C - Publications/Presentations *continued*

Title: Challenges surrounding International Medical Graduates (IMG) education: The Good, The Bad and Not so Ugly

Author: U. Najeeb, S. Edwards

Conference/Grant/Publication: Canadian Conference on Medical Education (CCME), Vancouver, Canada, April 28, 2015

Type: Workshop

Title: Best practices in residency applications and selection: File review

Authors: L. Probyn, S. Glover Takahashi, C. Abrahams, M. Ruetalo, G. Bandiera

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Workshop

Title: Best practices in residency applications and selection: File review

Authors: G. Bandiera, S. Glover Takahashi, L. Probyn, C. Abrahams, M. Ruetalo

Conference/Grant/Publication: AMEE, Milan, Italy, August 2014

Type: Workshop

Title: CQI in medical education at U of T PGME

Authors: G. Bandiera, L. Probyn, S. Glover Takahashi, S. Edwards, L. Muharuma, S. Spadafora, B. Pakes, C. Abrahams, A. Matlow

Conference/Grant/Publication: ICRE, Toronto, Canada, 2014

Type: Workshop

Title: Reach for the Top: Leadership Development in Our Learners

Authors: M.K. Chan, A. Matlow, W. Watson

Conference/Grant/Publication: Canadian Conference on Medical Education (CCME), Vancouver, Canada, April 28, 2015

Type: Workshop

Title: CAPER: Data and Discussion on the Hot Topics in PGME

Author: S. Slade, S. Spadafora

Conference/Grant/Publication: ICRE, Toronto, Canada, 2014

Type: Workshop

Title: Workshop for New Program Directors: The resident in difficulty

Author: S. Glover Takahashi, W. Wong

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Workshop

Title: Supporting Residents in Difficulty – Issues and Options

Author: M. Nayer; S. Glover Takahashi, D. Martin, L. Probyn, W. Gold

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Workshop

Title: Preventing misunderstandings, managing differences and resolving conflicts

Author: S. Glover Takahashi, D. Richardson, D. Martin

Conference/Grant/Publication: ICRE, Toronto, Canada, Oct 2014

Type: Workshop

Appendix C - Publications/Presentations *continued*

Title: Issues and Best Practices in CanMEDS Objective Structured Clinical Examinations

Author: M. Nayer, S. Glover Takahashi

Conference/Grant/Publication: CCME, Vancouver, Canada, April 2015

Type: Workshop

2014-15 Peer Reviewed Publications (count: 17)

Bandiera G, Maniate J, Hanson M, Woods N, Hodges BD. Access and Selection: Canadian perspectives on who will be a good doctor and how to find them. Acad Med. 2015; Epub ahead of print.

Jachyra P, Bandiera G, Atkinson M. Urban cyclists' perspectives on behaviour change: A qualitative study. Transportation Research Part F: Traffic Psychology and Behaviour. 2015(31):133-145.

Bandiera G, Gaunt K, Sinclair D, Trafford A. Emergency Department Overcrowding and Long Wait Times: Taking a Corporate Approach to Improving Patient Flow. Health Care Quarterly. 2015;17(4):34-40.

Cheng A, Gray B, Mackinnon D, Deja D, Bandiera G, Dowdell T. Variation in the Utilization and Positivity Rates of CT Pulmonary Angiography among Emergency Physicians at an Academic Tertiary Emergency Department. Emergency Radiology. 2014 Sep.

Bandiera G, Kennedy M, Spadafora S. Duty hour restrictions: organizational dynamics, systems issues, and the impact on faculty. BMC Medical Education. 2014;14(1):S5-11.

Monteiro S, Sherbino JD, Ilgen JS, Dore K, Wood TJ, Young M, Bandiera G [Collab], Blouin D, Gaissmeier W, Norman GR. Disrupting Diagnostic Reasoning: Do Interruptions, Instructions, and Experience Affect the Diagnostic Accuracy and Response Time of Residents and Emergency Physicians? Acad Med. 2014; epub ahead of print.

Sherbino J, van Melle E, Bandiera G, McEwen J, LeBlanc C, Bhanji F, Frank J, Regehr G, Snell L. Education Scholarship in Emergency Medicine Part 1: Innovating and improving teaching and learning. CJEM. 2014;15(S1):S1-S5.

Bandiera G, LeBlanc C, Regehr G, Snell L, Frank J, Sherbino J. Education scholarship in emergency medicine part 2: supporting and developing scholars. CJEM. 2014;15(S1):S6-S12.

Bandiera G, Abrahams C, Glover Takahashi S, Imrie K. Designing and implementing an evidence-informed approach to improving teacher assessments: Experience in a large and diverse health sciences network. Academic Medicine. 2014.

Probyn L, Tomlinson G, Bandiera G, Lang C. Multisource feedback and self-assessment of the Communicator, Collaborator and Professional CanMEDS roles for Diagnostic Radiology Residents. Canadian Association of Radiologists Journal. 2014.

Appendix C - Publications/Presentations *continued*

Bandiera G, Abrahams C, Ruetalo M, Hanson M, Nickell L, Spadafora S. Selecting future physicians with integrity: Implementing best practices in residency application and selection in a complex academic health network. *Academic Medicine*. 2014.

Wiesenfeld L, Abbey S, Glover Takahashi S, Abrahams C, [2014]. Choosing Psychiatry as a Career: Motivators and Deterrents at a Critical Decision-Making Juncture. *The Canadian Journal of Psychiatry*, 59[8]: 450-454.

Hrynchak P, Glover Takahashi S, Nayer M. Key-feature questions for assessment of clinical reasoning: a literature review. *Medical Education* [in press, 2014].

Stockwell DC, Bisarya H, Classen DC, Kirkendall ES, Lachman PI, Matlow AG, Tham E, Hyman D, Lehman SM, Searles E, Muething SE, Sharek PJ. Development of an Electronic Pediatric All-Cause Harm Measurement Tool Using a Modified Delphi Method. *J Patient Saf*. 2014 Aug 26. [Epub ahead of print]

Al-Maani A, Streitenberger L, Clarke M, Yau YC, Kovach D, Wray R, Matlow A. Nosocomial transmission of group B streptococci proven by positive environmental culture. *Oman Med J*. 2014 Sep;29[5]:376-9.

Hoffman AS, Matlow A, Shroff M, Cohen E. Factors impacting same-day cancellation of outpatient pediatric magnetic resonance imaging under anesthesia. *Pediatr Radiol*. 2015 Jan;45[1]:99-107

Taylor G, Gravel D, Saxinger L, Bush K, Simmonds K, Matlow A, Embree J, Le Saux N, Johnston L, Suh KN, Embil J, Henderson E, John M, Roth V, Wong A; Canadian Nosocomial Infection Surveillance Program. Prevalence of antimicrobial use in a network of Canadian hospitals in 2002 and 2009. *Can J Infect Dis Med Microbiol*. 2015 Mar-Apr;26[2]:85-9.

Appendix D - PGME Awards

Adjudication Committees

1) Research Award

- Dr. Blaise Clarke
- Dr. Debra Katzman
- Dr. David Mazer
- Dr. Cynthia Menard
- Dr. Melinda Musgrave
- Dr. Nicolae Petrescu
- Dr. Scott Walsh

2) PSI and PARO Awards

- Dr. Blaise Clarke
- Dr. Debra Katzman
- Dr. David Mazer
- Dr. Cynthia Menard
- Dr. Melinda Musgrave
- Dr. Scott Walsh
- Dr. Petra Wildgoose

3) CSCI/CIHR Award

- Dr. Crystal Chan
- Dr. Debra Katzman
- Dr. David Mazer
- Dr. Cynthia Menard
- Dr. Melinda Musgrave
- Dr. Nicolae Petrescu
- Dr. Scott Walsh

4) Sarita Verma Award

- Caroline Abrahams
- Dr. Susan Edwards
- Dr. Susan Glover Takahashi
- Dr. Anne Matlow
- Maureen Morris
- Loreta Muharuma
- Dr. Linda Probyn

5) Leadership Award

- Caroline Abrahams
- Dr. Susan Edwards
- Dr. Susan Glover Takahashi
- Dr. Anne Matlow
- Maureen Morris
- Loreta Muharuma
- Dr. Petra Wildgoose

6) PG Excellence Award

- Dr. Ron Kodama
- Dr. Oleg Safir
- Dr. Steven Shadowitz
- Dr. Ari Zaretsky

PGME Research Awards

1) Summary of PGME Research Awards - Applicants and Funding

- Total number of applicants: 73
- Total funds available: \$225,308.56
- Total awarded: \$221,094.68
- Awards per trainee: \$1,380.88 to \$13,600.00
- 28 out of 73 applicants successful: 38%

2) PGME Research Awards - Funding Sources and Amounts

- Joseph M. West Family Memorial Fund - \$100,529.15
- Edward Christie Stevens Fellowship - \$58,832.97
- Chisholm Memorial Fellowship - \$26,227.23
- William S. Fenwick Research Fellowship - \$13,043.08
- Ellen Epstein Rykov Memorial Prize - \$8,079.32
- Miriam Neveren Memorial Award - \$4,892.82
- Edie Steinberg Scholarship Fund - \$4,101.42
- Elizabeth Arbuthnot Dyson Fellowship - \$2,532.04
- Javenthey Soobiah Scholarship - \$1,380.88
- Heidi Sternbach Scholarship - \$974.93
- Nellie L. Farthing Fellowship - \$281.32
- Timeposters Fellowship - \$219.52
- Starr Medals - Gold Medals Only

Appendix D - PGME Awards *continued*

PGME Research Award Winners (by department)

Department	Name	Award
Anesthesia	Neil Goldenberg	Joseph M. West Family Memorial Fund Edie Steinberg Scholarship Fund Sarr Medal
Laboratory Medicine	Michael Herman Chui	Joseph M. West Family Memorial Fund William S. Fenwick Fellowship
Laboratory Medicine	Hubert Tsui	Joseph M. West Family Memorial Fund William S. Fenwick Fellowship
Medicine	Moogeh Baharnoori	Chisholm Memorial Fellowship Joseph M. West Family Memorial Fund William S. Fenwick Fellowship
Medicine	Claude Steriade	Joseph M. West Family Memorial Fund William S. Fenwick Fellowship Chisholm Memorial Fellowship
Medicine	Aaron Drucker	Joseph M. West Family Memorial Fund Chisholm Memorial Fellowship William S. Fenwick Fellowship
Medicine	James Kennedy	Joseph M. West Family Memorial Fund Timeposters Fellowship Sarr Medal
Medicine	Lihi Eder	Joseph M. West Family Memorial Fund Miriam Neveren Memorial Award
Medicine	Owen Lyons	Joseph M. West Family Memorial Fund
Obstetrics & Gynaecology	Crystal Chan	Joseph M. West Family Memorial Fund
Otolaryngology	Jennifer Rui Wang	Joseph M. West Family Memorial Fund William S. Fenwick Research Fellowship
Paediatrics	Dragos Nita	Joseph M. West Family Memorial Fund Chisholm Memorial Fellowship Elizabeth Arbuthnot Dyson Fellowship
Paediatrics	Kevin Scharz	Edward Christie Stevens Fellowships in Medicine Elizabeth Arbuthnot Dyson Fellowship
Psychiatry	Nicole Kozloff	Chisholm Memorial Fellowship Joseph M. West Family Memorial Fund William S. Fenwick Research Fellowship

Appendix D - PGME Awards *continued*

Public Health & Preventive Medicine	Aaron Orkin	Edward Christie Stevens Fellowships in Medicine Joseph M. West Family Memorial Fund
Surgery	Vivek Bodani	Edward Christie Stevens Fellowships in Medicine Chisholm Memorial Fellowship Nellie L. Farthing Fellowship
Surgery	David Gomez Jaramillo	Joseph M. West Family Memorial Fund Chisholm Memorial Fellowship Miriam Neveren Memorial Award
Surgery	Si-Hyeong [Sam] Park	Edward Christie Stevens Fellowships in Medicine Joseph M. West Family Memorial Fund
Surgery	Karineh Kazazian	Ellen Epstein Rykov Memorial Prize Joseph M. West Family Memorial Fund Starr Medal
Surgery	Joseph Catapano	Edward Christie Stevens Fellowships in Medicine Joseph M. West Family Memorial Fund
Surgery	Ashton Connor	Edward Christie Stevens Fellowships in Medicine Joseph M. West Family Memorial Fund
Surgery	Madhur Nayan	Edward Christie Stevens Fellowships in Medicine Joseph M. West Family Memorial Fund
Surgery	Chethan Sathya	Edward Christie Stevens Fellowships in Medicine Joseph M. West Family Memorial Fund
Surgery	Saswata Deb	Joseph M. West Family Memorial Fund Edie Steinberg Scholarship Fund
Surgery	Shuyin [Veronica] Liang	Joseph M. West Family Memorial Fund Heidi Sternbach Scholarship
Surgery	Allan Martin	Edward Christie Stevens Fellowships in Medicine Joseph M. West Family Memorial Fund
Surgery	Dale Podolsky	Edward Christie Stevens Fellowships in Medicine William S. Fenwick Research Fellowship
Surgery	Kasra Tajdaran	Javenthey Soobiah Scholarship

Appendix D - PGME Awards *continued*

Other PGME Awards

1) CSCI/CIHR Resident Research Award (awarded July 2014)

- Value of award: \$1,000
- Number of applicants: 18
- Winner:
Nir Lipsman, PGY4, Neurosurgery

2) PSI Resident Research Awards (awarded November 2014)

- Value of award: \$2,000
- Number of applicants: 24
- Winners:
Kate Hanneman, PGY5, Diagnostic Radiology
Derek MacFadden, PGY4, Adult Infectious Diseases
Rachel Mitchell, PGY5, Child & Adolescent Psychiatry
Karli Mayo, PGY4, Obstetrics & Gynaecology
Brent Williams, PGY6, Paediatrics

3) PARO Resident Teaching Awards (awarded February 2015)

- Value of award: \$1,000
- Number of applicants: 12
- Winners:
Alireza Mansouri, PGY4, Neurosurgery
Heather Millar, PGY5, Obstetrics & Gynaecology

4) Sarita Verma Award (awarded March 2015)

- Value of award: \$500
- Number of applicants: 6
- Winner:
Mark Fefergrad, Psychiatry

5) PG Excellence Awards (awarded May 2015)

Development and Innovation:

- Value of award: \$1,000
- Number of applicants: 4
- Winners:
Jordan Chenkin, Emergency Medicine
Michael Pollanen, Laboratory Medicine & Pathobiology

Teaching Performance/Mentorship/Advocacy:

- Value of award: \$1,000
- Number of applicants: 4
- Winners:
Lesley Wiesenfeld, Psychiatry
Eric Yu, Adult Cardiology

Appendix D - PGME Awards *continued*

6) Trainee Leadership Awards (awarded May 2015)

- Value of award: \$500
- Number of applicants: 9
- Winners:
Tarek Abdelhalim, PGY4, Internal Medicine
Matthew Boyle, PGY4, Psychiatry
Michael Fralick, PGY3, Internal Medicine
Danielle Rodin, PGY3, Radiation Oncology

7) Charles Mickle Fellowship (awarded May 2015)

- Awarded to a member of the medical profession anywhere in the world who has contributed greatly to medicine during the past 10 years
- Value of award: \$8,500
- Winner:
Dr. Murray Urowitz, Centre for Prognosis Studies in the Rheumatic Diseases

8) PGME Social Responsibility Award

- Value of award: \$500
- Winner Faculty Award (shared):
Dr. Lisa Andermann, Dept. of Psychiatry and Dr. Kenneth Fung, Dept. of Psychiatry
- Winner Resident Award:
Dr. Nicole Kozloff, Psychiatry, PGY6

9) Clinician Graduate Degree Scholarship Program (awarded February 2015)

- This program is designed to foster clinician scientist/educator graduate training during postgraduate training by using funds generated from the Vision Science Research Program and the Postgraduate Medical Education office to “top up” stipends of postgraduate trainees in graduate programs to levels approximating those of their corresponding PGY level.
- Total Funds Available: \$200,000
- Total Top-up Funding Requested for 11 trainees: \$137,014
- Total Awarded: \$137,014

Department	# of Trainees	Vision Science Top-up	PGME Top-op
Medicine	4	\$63,111.66	\$10,016.34
Laboratory Medicine & Pathobiology	3	\$23,421.35	\$3,717.15
Surgery	2	\$21,032.06	\$3,337.93
Paediatrics	2	\$10,682.15	\$1,695.34
TOTAL	11	\$118,247.22	\$18,766.76

Appendix D - PGME Awards *continued*

Awards Administered by the PGME Office (adjudicated by departments):

10) C. P. Shah Award

- Value of award: \$487
- Winners:
Fareen Karachiwalla, Dalla Lana School of Public Health
Alanna Fitzgerald-Husek, Dalla Lana School of Public Health

11) Dr. Peter Prendergast – Ontario Shores Prize in Quality Improvement

- Value of award: \$500
- Winners:
Uday Krishnan, Dept. of Psychiatry
Lovneet Hayer, Dept. of Psychiatry
Matthew Boyle, Dept. of Psychiatry

12) Freda Noyek Merit Award in Otolaryngology

- Value of award: \$550
- Winner:
Vinay Fernandes, Dept. of Otolaryngology

13) Dr. Frederick R. Papsin Postgraduate Award

- Value of award: \$1,000
- Winners:
Amanda Cipolla, Dept. of Obstetrics & Gynaecology
Heather Millar, Dept. of Obstetrics & Gynaecology

14) Irving Heward Cameron Memorial Scholarship – to Dept of Surgery Trainees

- Value of award: \$100- \$10,245.61
- Winners:
Matthew Adamson
Kathleen Armstrong
Saswata Deb
Anick Nater Goulet
Rebecca Hicks
George Ibrahim
Stephen Lee
Nir Lipsman
Elizabeth Miazga
Dorotea Mutabdzic
Dale Podolsky
Chethan Sathya
Stefan Tomescu
Kim Tsoi

15) Dr. David A. Scott Award

- Value of award: \$500
- Winner:
Graeme Sargent, Dept. of Biochemistry

Appendix D - PGME Awards *continued*

16) Knox Ritchie Research Award – to Dept of Obstetrics & Gynaecology Trainees

- Value of award: \$200
- Winners:
Anat Herscu Klement
Claire Jones
Kyunga Kim
Julie Nguyen
Jennifer Power
Ashley Raeside
Premalatha Shathasivam

17) Kris Conrad Merit Award in Facial Plastic Surgery

- Value of award: \$1,000
- Winner:
Elaheh Akbari, Dept. of Otolaryngology

18) Stuart Alan Hoffman Memorial Prize

- Value of award: \$750
- Winner:
Pawel Buczkowicz, Dept. of Lab. Medicine & Pathobiology

19) Thomas Donald Hammell Memorial Award in Anesthesia

- Value of award: \$499
- Winner:
Marcos Silva Restrepo, Dept. of Anesthesia

20) Hynek Rothbart Award

- Value of award: \$210
- Winner:
Ben Steinberg, Dept. of Anesthesia

21) Roberta Jong Graduate Award for Study in Breast Cancer

- Value of award: \$1,000
- Winner:
Glen Lo, Dept. of Medical Imaging

22) Sim Fai Liu Memorial Award

- Value of award: \$1,972
- Winner:
Jillian Alston, Dept. of Medicine

