

Postgraduate Medical Education Annual Report

July 1, 2018 – June 30, 2019



UNIVERSITY OF SASKATCHEWAN

College of Medicine

POSTGRADUATE MEDICAL EDUCATION
MEDICINE.USASK.CA



Health Sciences Building

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Minister of Health



SASKATCHEWAN

Legislative Building
Regina, Saskatchewan



The Honourable Jim Reiter

Minister of Health



The Honourable Warren Kaeding

Minister Responsible for Rural and Remote Health

On behalf of the Government of Saskatchewan and the Ministry of Health, we're pleased to extend best wishes to the College of Medicine, University of Saskatchewan. We value our relationship with the College, and we appreciate your dedication in providing high quality education to our province's future physicians.

The strategic directions set by the College to integrate social accountability, community engagement and Indigenous health into medical education, and align with the Saskatchewan health system strategies reflect your commitment to lasting, positive change.

The residency programs offered by the College train medical graduates to excel as clinicians and become leaders who can drive health system transformation. There are exciting opportunities for physicians in Saskatchewan to work in a variety of urban and rural settings, be part of collaborative teams and play a leadership role in our health care system.

Our Government continues to invest in physician recruitment and retention, and training more physicians at home. The development of a new Pediatric residency program in Regina is a great addition to the expansion of family medicine and specialty training across the province.

Medical residents are a vibrant part of the medical community in our province. They bring new energy as trainees, providers of frontline patient-centred care, academic researchers, teachers and peers.

Please accept our gratitude for your commitment to ensuring our province has highly trained physicians who are able to meet the health care needs of Saskatchewan people.

Message from the Dean



Preston Smith

MD, MEd, CCFP, FCFP
Dean of Medicine

Postgraduate medical education (PGME) is integral to our college and to healthcare in our province. The PGME program is the final stage of medical training preparing our learners as they enter the physician workforce.

PGME does this important work by coordinating our resident placements and work experiences within our teaching hospitals, ensuring educational experiences are designed according to the national accreditation standards, and advancing relationships with various stakeholder agencies and medical departments in the province.

This year has seen many successes, as the PGME team continues to deliver on excellence in postgraduate medical education. I will highlight just a few of many accomplishments:

All 25 programs are accredited and work has begun for the next onsite accreditation visits in 2023, which include preparing for a new system of residency accreditation – Canadian Excellence in Residency Accreditation (CanERA).

As of July 1, 2018, four programs have fully transitioned to Competence by Design. The PGME office continues to work closely with additional programs to successfully transition to competency-based medical education.

This year has also seen progress in the expansion of geographically-based programs and specialties. There are now four specialty programs in Regina, and seven sites for family medicine across the province. The shift to competency-based education is also reflected in the Triple C Competency-based Curriculum used in our family medicine training.

Finally, I extend my thanks and acknowledge the PGME team's commitment and dedication to ensuring excellence in education and training and to supporting our learners.

Message from the Vice-Dean Medical Education



Kent Stobart

MD, MSc, FRCPC
Vice-Dean Medical Education
College of Medicine

Postgraduate Medical Education is vital to Saskatchewan's College of Medicine and health care system, and the postgraduate residency program is key to developing the physicians and surgeons needed in Saskatchewan.

In order to strengthen and enhance postgraduate medical education, the PGME office has provided numerous workshops and training events during the past year. This has included workshops for Program Directors and Program Administrative Assistants on current relevant topics, such as the introduction of the new accreditation standards. Chief Resident workshops were held throughout the year, which focus on developing their leadership roles. The PGME Resident Boot Camp was held, attended by all new, incoming residents. Over two full days, residents had the opportunity to participate in many hands-on sessions and to attend interactive sessions on relevant topics. These sessions not only help ensure a successful transition to residency training but also provide a good opportunity to meet and network with other incoming PGY1 residents.

Resident wellness continues to be a priority and the Resident Resource Office is well established to support residents through professional or personal challenges. PGME's important role in supporting the work of the Canadian Resident Matching Service (the national, independent, not-for-profit, fee-for-service organization that provides a fair, objective and transparent application and matching service for medical training throughout Canada) is key to ensuring appropriate resident placements as they continue their medical training.

Coordinating and supporting the various individuals and organizations involved in successful resident placements, experiences and learning is a critical component of medical education. With over 400 residents, more than 1,200 faculty, and 25 programs across 7 sites in the province, significant work is involved. The successful accreditation status of all residency programs is a solid indication that our PGME office is fulfilling this very important mission.

Message from the Associate Dean PGME



Anurag Saxena

MD, MEd, MBA, FRCPC, FCAP, CHE, CCPE

Associate Dean

Postgraduate Medical Education

On behalf of the Postgraduate Medical Education office at the University of Saskatchewan's College of Medicine, I am pleased to present the annual report for the 2018 – 19 academic year.

During the past year, residency programs have continued to implement competency-based medical education, with a total of four specialty programs now transitioned to Competence by Design (CBD). I am thankful for the work done by our residents, faculty, central and program-based educational administration staff (program directors and program administrative assistants, CBD Leads, Clinical Competence Committee members and chairs), in the successful implementation of competency-based residency education. The Family Medicine residency program was the first to adopt competency-based medical education (Triple C curriculum) and the successes and lessons learned were instrumental in the transition of specialty programs to CBD.

A number of external and internal reviews took place during the past year, with all 25 residency programs being accredited, and only two programs requiring an external review. This status speaks to the considerable institution-wide collaborative efforts in preparing for accreditation visits and the on-going quality improvement approach to residency education.

Our residency programs at the University of Saskatchewan, offered across the province from La Ronge to Swift Current, are key contributors to the physician human resource in our province and the country. We retain a high number of physicians in our province upon completion of their training, and since 2016, the percentage of residents remaining in Saskatchewan continues to increase.

Key to the success of postgraduate medical education at the University of Saskatchewan is the collaboration and hard work of many, including program directors, program administrative assistants, staff of the PGME office, academic and administrative leadership of the College of Medicine, the Ministry of Health, Ministry of Advanced Education and our key stakeholders including the Saskatchewan Health Authority, College of Physicians and Surgeons of Saskatchewan, Saskatchewan Medical Association, SaskDocs, RDoS and the national colleges. I look forward to continue working with the numerous individuals who ensure the successful education of our residents to serve our communities.

Respectfully submitted,

Anurag Saxena

PGME Staff

Lisa Bagonluri – Coordinator, Program Administrative Assistants *(end date April, 2019)*

Acts as a liaison between the PGME Office and the Program Administrative Assistants. Prepares Program Director contracts and appointments. Responsible for social media management.

Shelly Christianson – Manager, PMGE Operations *(on leave since December 2018)*

Provides overall support to PGME operations and planning. Responsible for PGME budget.

Samantha Curnew – Clerical Assistant, Reception *(end date August 2018)*

PGME reception and clerical support. Assists with Resident LOA and extensions, WCB, CAPER, admissions and resident administration.

Loni Desanghere – PGME Research

Works in collaboration with the PGME staff, faculty and residents on research in medical education.

Jennifer Dybvig – Clerical Assistant, Residency Payments, Processing and Finance

Provides support relating to the budget. Processes payments, submits payroll and CMPA/CPSS Payments and collects data for the salary paygrade reporting.

Chantel Ellis – Clerical Assistant, Competence by Design (CBD) *(on leave since March 2019)*

Provides support for CBD and Critical Appraisal

Kailey Friesen – Clerical Assistant, RaPID

Provides support for the RaPID Program and general PGME Support.

Audrey Kincaid – Clerical Assistant, Operations and Accreditation

Provides clerical support and is the PGME Clerical team lead. Assists with PGME Committee and PGME Executive Committee, new program development, and Program Administrative Assistant meetings

Maureen Lumbis – Executive Assistant to PGME Associate Dean

Provides administrative support to the Associate Dean, Postgraduate Medical Education

Lisa Klassen – Clerical Assistant, Admissions and Resident Administration

Provides clerical support and responsible for registering new/returning residents, updating training status and MCC/RCPSC exam results.

Gayathri Manoharan – Coordinator, Wellness Resources

Manages resident wellness initiatives and resident resources. Organizes transition to practice workshops and oversees Clinical/Exam Accommodation Planning.

Ope Okunola – Coordinator, PGME Educational Programs

Coordinates IMG Orientation and Resident Bootcamp. Oversees Non-Medical Expert CanMEDS curriculum and competency-based curriculum in CanMEDS roles.

Aleksandra Pajic – Coordinator, Academic and Non-Academic Processes

Manages PGME policies, resident assessment processes and contracts.

Tanya Robertson-Frey – Coordinator, Program Evaluation

Responsible for program evaluations relating to accreditation, CBD, and all other PGME initiatives.

Betty Rohr – Coordinator, Education and Metrics *(end date August 2018)*

Manages competency-based curriculum in CanMEDS roles and PD/PAA/Chief Resident workshops.

Della Toews – Coordinator, Admissions and Resident Administration

Responsible for CARMS, resident orientation, transfers, fellowships, accommodations, Inter Institution Affiliation agreements, and resident awards. Oversees FITERS, CITERs, CCTS, Travel & MCC/RCPSC exam results.

Jennifer Uhryn – Clerical Assistant, IMG OA and Educational Programs

Provides clerical support and supports IMG Orientation, 6 Month Evaluations, TIPS, New Resident Bootcamp and PD/PAA/Chief Resident Workshops.

MISSION

We develop competent physicians with professional values to meet changing societal needs/demands.

VISION

Establish a Postgraduate Medical Education Program that is a sought after training site that offers high quality training in a collegial learning environment and fosters appropriate professional enculturation.

VALUES

Integrity - Respect - Diversity - Inclusivity - Responsibility - Excellence

Strategic Plan

Social and Organizational Accountability

SOCIAL ACCOUNTABILITY

- Allocations: Right mix and distribution of learners.
- Distributed Medical Education: Experience in diverse learning/working environments.
- Enhance diversity and inclusiveness in PGME setting.
- Meaningful contributions to national and global educational organizations.

ORGANIZATIONAL ACCOUNTABILITY

- Effective collaborative governance in PGME.
- Ensure operations meet accreditation standards.
- Actively shape student body.
- Postgraduate enterprise and learners' contribution to knowledge creation.
- Develop, support and recognize clinical teachers.

Learner Experience

LEARNER SUCCESS

- Create positive and supportive learning/work environments.
- Ensure effective integration and transitions along the educational continuum.
- Celebrate learner success and accomplishments.

LEARNER WELLNESS

- Develop an effective learner wellness program

Academic Programming

LEARNER-CENTERED PROGRAMMING

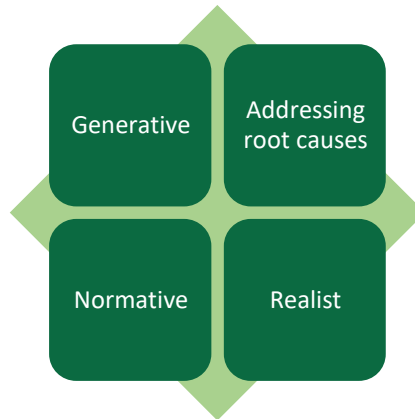
- Integrate competency-based curricula in postgraduate programs.
- Provide relevant teaching in Intrinsic CanMEDS roles.
- Enhance inter-professional education.
- Implement effective assessments.
- Foster learner creativity and innovation.

EFFICIENT EDUCATIONAL PROCESSES

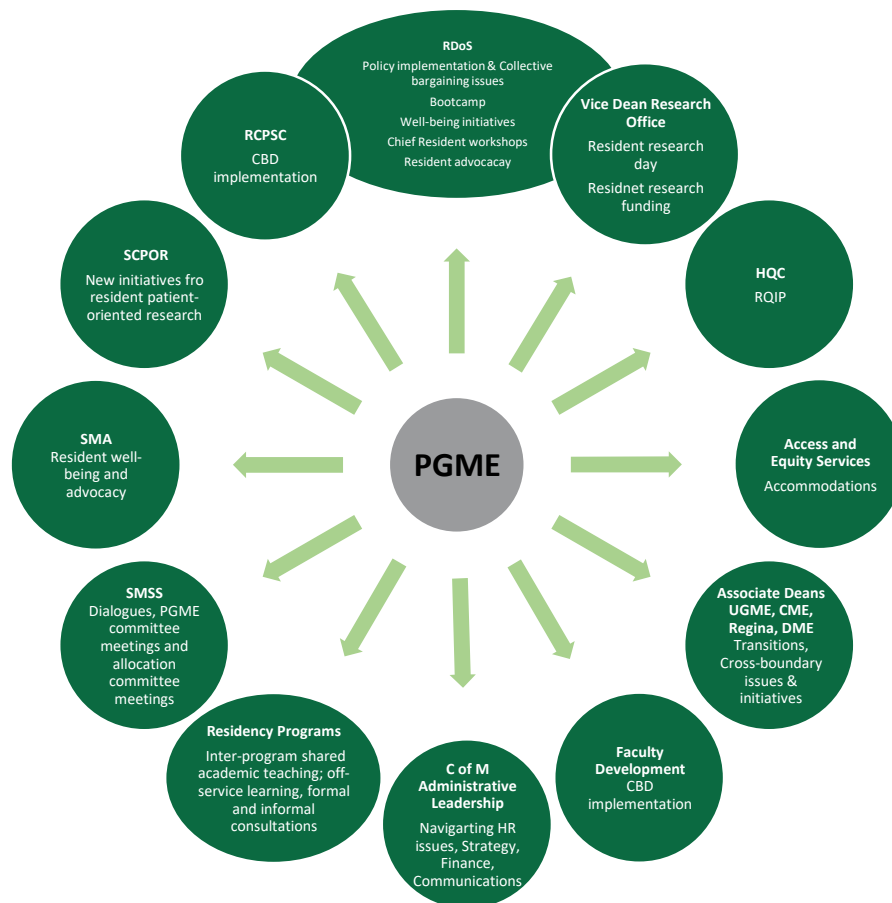
- Apply Continuous Quality Improvement principles to educational processes.
- Develop well-articulated policies in areas of postgraduate training for current work and planned initiatives.
- Ensure actions and decisions are consistent with local policies and training requirements of CFPC and RCPSC.
- Optimize information technology support across all sites in Saskatchewan.

Strategy Implementation

Paradigms influencing strategy implementation:



Examples of meaningful and outcome-focused collaborations and partnerships:



Key Stats

Number of Residents by Program	As of June 2018	As of June 2019
Anesthesiology	34	33
Cardiology	6	6
Child & Adolescent Psychiatry	1	1
Clinician Investigator Program (Anesthesia)	1	1
Clinician Investigator Program (GIM)	1	0
Clinician Investigator Program (Orthopedic Surgery)	1	0
Clinician Investigator Program (Surgery)	3	2
Clinician Investigator Program (Neurosurgery)	0	1
Diagnostic Radiology	18	17
Emergency Medicine	11	14
Family Medicine Emergency Medicine (Regina)	5	5
Family Medicine Emergency Medicine (Saskatoon)	4	4
Family Medicine Enhanced Skills - Anesthesia	2	2
Family Medicine Enhanced Skills - Sports Medicine	1	1
Family Medicine Enhanced Skills - Surgical Skills	2	2
Family Medicine La Ronge	4	4
Family Medicine Moose Jaw	7	9
Family Medicine North Battleford	9	10
Family Medicine Prince Albert	13	13
Family Medicine Regina	23	25
Family Medicine Saskatoon	27	25
Family Medicine Swift Current	8	8
Forensic Psychiatry	0	0
General Internal Medicine	7	6
Internal Medicine (Regina)	12	13
Internal Medicine (Saskatoon)	55	52
Nephrology	1	1
Neurology	11	12
Neurosurgery	8	5
Obstetrics & Gynecology (Regina)	10	11
Obstetrics & Gynecology (Saskatoon)	23	22
Ophthalmology	5	5
Orthopedic Surgery	8	11
Pathology	11	10
Pediatrics	26	24
Physical Medicine & Rehabilitation	10	10
Psychiatry (Regina)	11	12
Psychiatry (Saskatoon)	22	22
Public Health & Preventive Medicine	4	4
Respiratory Medicine	4	4
Rheumatology	2	2
Surgery	27	26
Total	438	435

435 residents

25 residency training programs

7 program sites

- La Ronge
- Moose Jaw
- North Battleford
- Prince Albert
- Regina
- Saskatoon
- Swift Current



Accreditation

All 25 residency training programs are currently accredited, with the next on-site visits to be held in 2023. The following reviews took place during the past year:

External review in 2018: Diagnostic Radiology, General Surgery, Obstetrics & Gynecology, Ophthalmology, Family Medicine and Public Health & Preventive Medicine

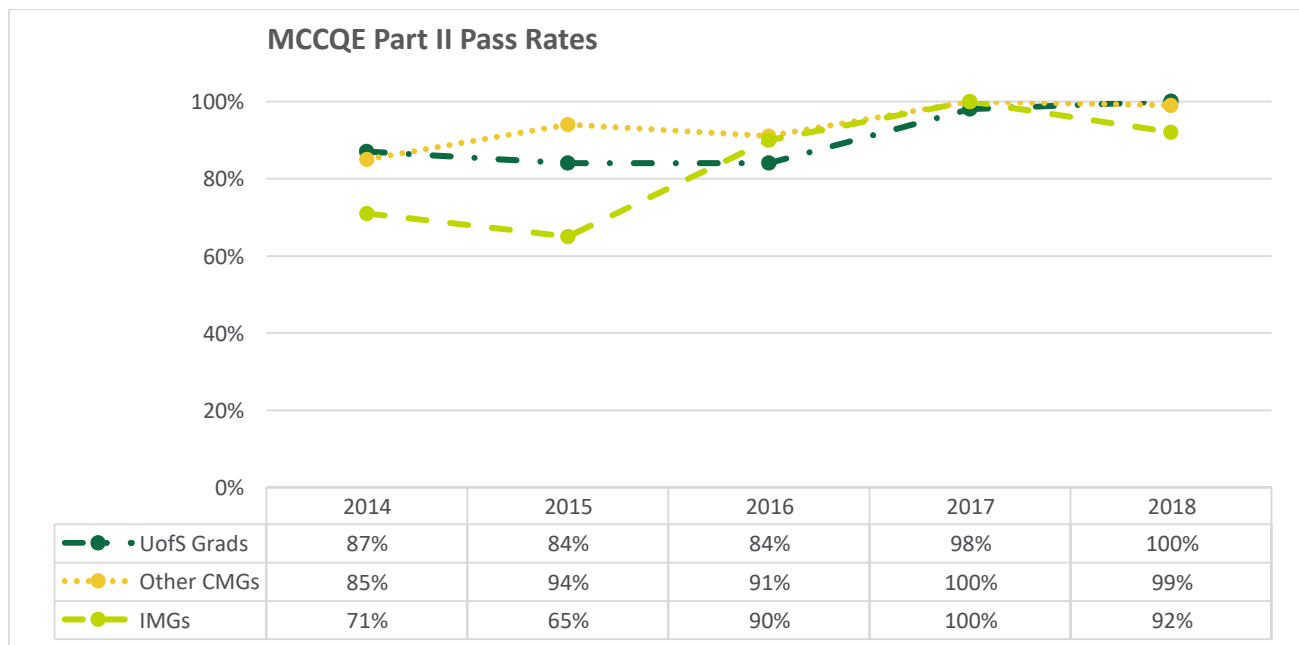
Internal review in 2018: Family Medicine Enhanced Skills

Internal review in 2019: Child and Adolescent Psychiatry, Internal Medicine

Pass Rates in National Exams

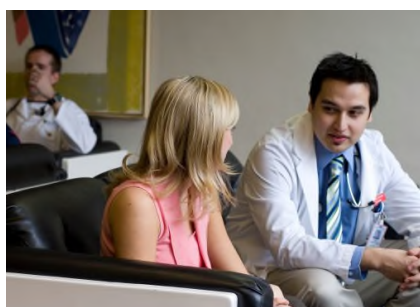
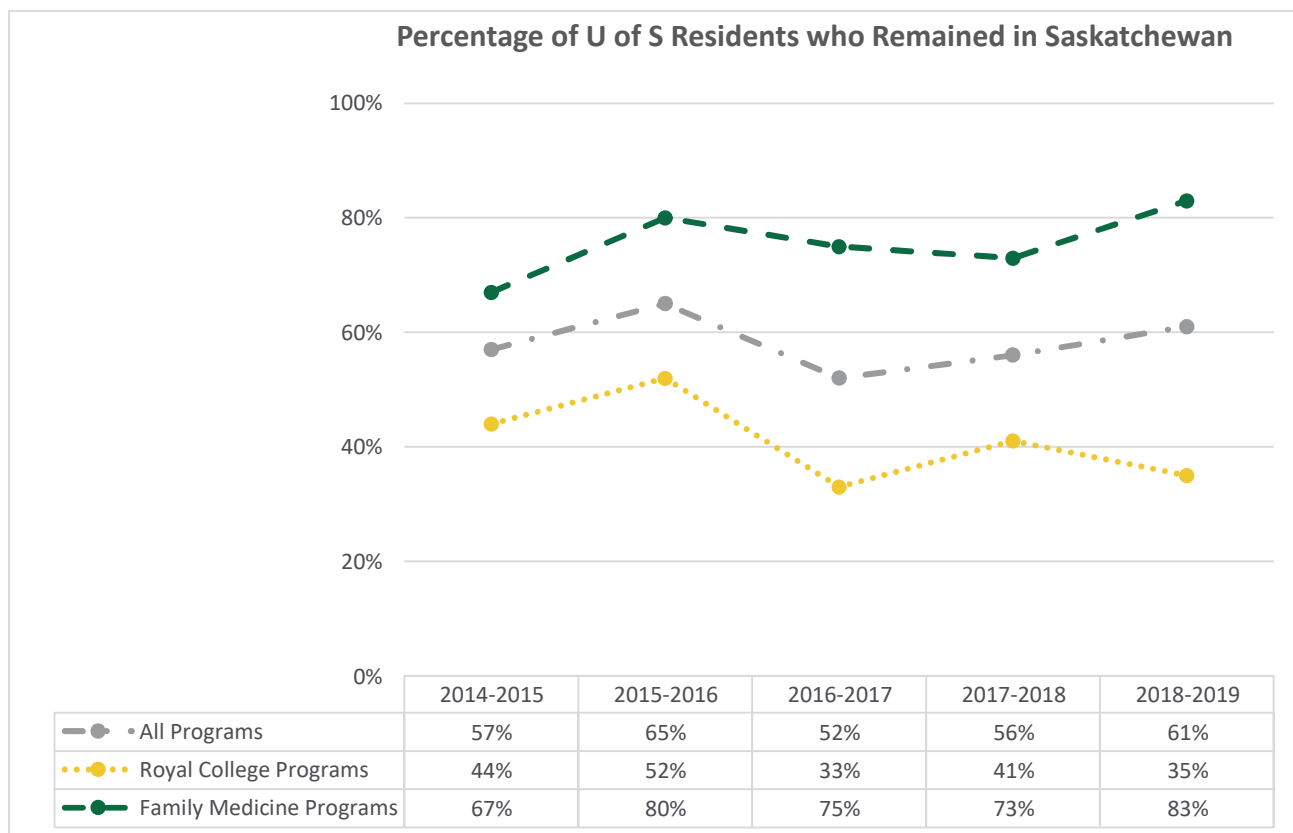
The Medical Council of Canada Qualifying Examination (MCCQE) Part II is a two-day clinical exam that assesses the candidate's core abilities to apply medical knowledge, demonstrate clinical skills, develop investigational and therapeutic clinical plans, as well as demonstrate professional behaviours and attitudes at a level expected of a physician in independent practice in Canada. Candidates must have successfully completed the MCCQE Part I and be completing their postgraduate medical education.

Shown below are the pass rates over the last five years for all residents, indicating if they are graduates from the U of S undergraduate medical program, graduates of another Canadian medical school (CMGs), or graduates from an International medical school (IMGs).



Retention in Saskatchewan of U of S Residents

Based on the past five years, an average of 58% of residents who completed their training have remained and practised in Saskatchewan. Presented below are the averages from 2014 to 2019, based on type of program.



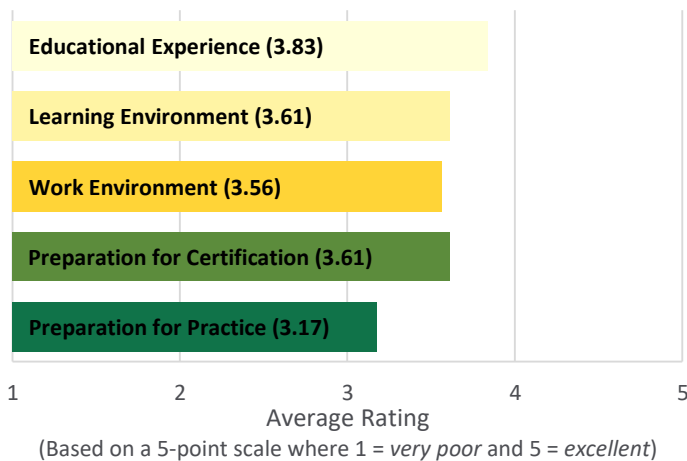
Resident Survey Results

2018 – 2019 Resident Exit Survey

The Resident Exit Survey, adapted from the University of Toronto survey, asks for feedback on various aspects of resident training including: learning and work environment, call schedules, debt, well-being, intimidation and harassment, and future plans. Residents who completed training between October 2018 and September 2019 were invited to complete the survey. A total of 46 residents participated, representing a 36% response rate.

Overall Experience

Residents were asked to provide an overall rating for five aspects of their residency experience:



65% of residents rated their overall educational experience as “Above Average” or “Excellent”

Additional Findings

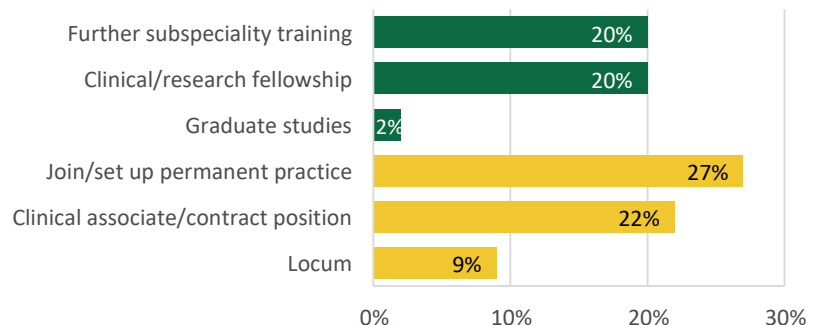
Resident well-being: it was found that **stress** experienced during residency training was most likely to affect residents’ **personal life** (67%), and **academic performance** (40%).

Harassment/intimidation: The majority of residents (**77%**) indicated they did **not** experience harassment/intimidation during residency. Of those who did, **verbal** was the most common form, followed by **emotional**.

Future plans: **63%** of residents hoped to pursue their future plans in **Saskatchewan**.

42% indicated their immediate plans included **additional training/education**.

58% indicated they plan to enter **practice** following residency training.



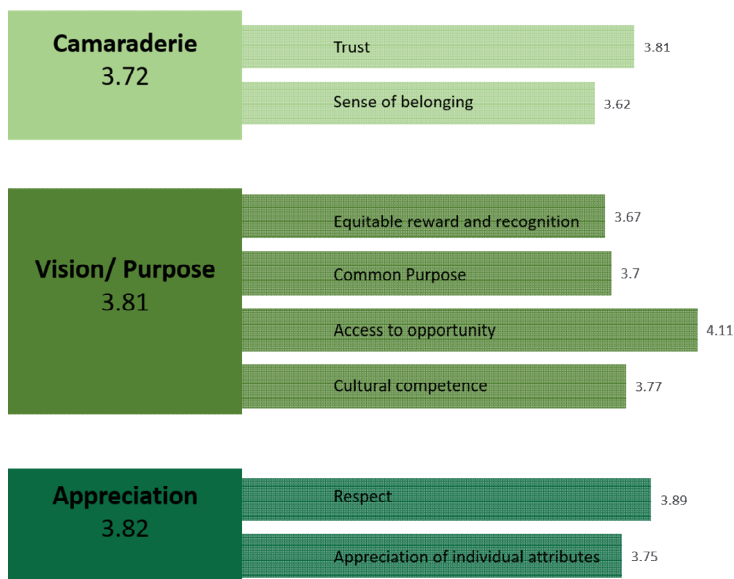
Semi-Annual Survey

The December 2018 Semi-Annual Resident Survey was conducted in order to explore diversity and engagement within postgraduate residency training programs at the University of Saskatchewan.

A total of 122 residents completed the Diversity Engagement Survey (Person et al., 2015), representing a 27% response rate. Mean responses are represented below (1=strongly disagree, 2=disagree, 3=neither agree nor disagree, 4=agree, 5=strongly agree).

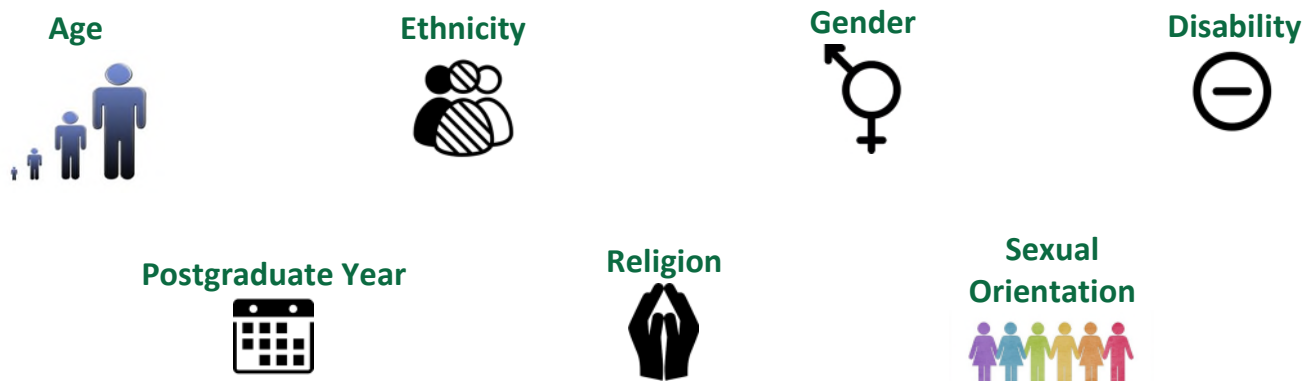
The Diversity Engagement Survey consists of eight inclusion factors (trust, sense of belonging, equitable reward and recognition, common purpose, access to opportunity, cultural competence, respect, and appreciation of individual attributes) which map onto three engagement domains (camaraderie, vision/purpose, appreciation).

Results



Across all participants, ratings were overall **positive** for all **inclusion factors** and **engagement domains**

Several of the seven demographic variables (diversity factors) have been found to impact ratings on **inclusion factors** and **engagement domains**. Data collection is on-going.



PGME Portfolio Reports

Competence by Design (CBD)

Competency based medical education aims to ensure that graduate outcomes of postgraduate training programs meet the needs of the patients that graduates will serve. The Royal College of Physicians and Surgeons of Canada (RCPSC) is initiating competency based medical education in the RCPSC programs in a multi-year change initiative labelled Competence by Design (CBD). At the University of Saskatchewan, Anesthesiology launched its first cohort in July 2017, followed in July 2018 by Emergency Medicine, Nephrology and Surgical Foundations.

A CBD Working Group was formed from April 2016 to February 2018 to assist with the implementation and transition process at our institution. The CBD Working Group, led by the PGME Association Dean, included College of Medicine key stakeholders, programs directors, program administrative

assistants, information technology, finance, human resources, residents, and various staff from PGME. The CBD Working Group developed products such as resource templates, policy recommendations, educational administration role descriptions, programmatic assessment philosophy, learner development recommendations, and faculty development training modules/videos.

As the initial cohorts transitioned to CBD, the resources and policies developed were used to facilitate ongoing change within the launched programs and facilitate the launch of future cohorts. Based on a needs assessments of disciplines, a multi-faceted educational program has been developed, with regular progress meetings taking place with each discipline to ensure needs are met by the PGME Office.

Competence by Design Activities in 2018-19

Resident Leads Advisory Council

- Met six times during the past year.
- Presented to the UGME students.
- Initiated a research project to assist in the successful implementation of CBD.

Creating Competent Competence Committees Workshops

- These workshops were attended by 50 participants from 14 disciplines.

Curriculum Mapping Workshops

- Tailored to meet the needs of individual programs, participants from eight disciplines participated in these workshops.

ePortfolio Workshop

- Led by Sartaj Gill from RCPSC, this workshop was attended by over 50 participants from Saskatoon and Regina.

Readiness Tracking Surveys

- Conducted every six months, results help to track implementation and fidelity success.

Individual Meetings

- The CBD PGME Lead met with all disciplines who have launched or are set to as of July 1, 2019.

National Meetings

- The CBD PGME Lead participated in national discussions with the Program Evaluation Committee, CBD Leads group, and ePortfolio super user group to ensure U of S has the most up to date CBD knowledge.

Education

Chief Resident Workshop

Chief Residents play key roles within their residency-training programs, with responsibilities such as administration, scheduling, developing educational programs, directing clinical services, role modeling, and ensuring resident-faculty communications. Given the variation of the leadership responsibilities in this role, and thus the need for a diverse skill set, the purpose of this half-day workshop is to explore different elements relevant to success in the Chief Resident position. The workshop in the fall of 2019 included interactive sessions on the Resident Doctors of Saskatchewan (RDoS) Collective Agreement and Leadership and Others: Managing time, self and energy.

Program Directors and Program Administrative Assistants Workshop

With the view to develop leading practices and innovations in all residency processes, professional development workshops are held every year for program directors (PDs) and program administrative assistants (PAAs) on various topics pertinent to their roles. The learning objectives for the spring workshop was developed as one of the steps to enable successful transition from the old to the new accreditation standards.

Objectives of this highly interactive workshop included identification of characteristics unique to PDs, PAAs, residents and PGME in the new standards, gaps and concerns in fulfilling roles, best practices and strategies to enhance autonomy and team support, and metrics for success.

Resident Boot Camp

To provide effective transition into residency, all applicants matched to RCPSC and CFPC residency training programs at the University of Saskatchewan must attend a PGME Resident boot camp. The program is aimed to bring into focus current topics relevant to safe and good medical practice and assist new residents to consolidate baseline skills relevant to successful residency. Trainees also find the boot camp a good opportunity to meet, learn, and network with other incoming PGY1 residents. Highlights of the two day 2019 program included a variety of hands-on sessions at the Clinical Learning Resource Centre as well as interactive sessions on topics such as privacy, consent, professional boundaries, time and energy management, incident management, access to information, resiliency, laboratory and radiology basics, and success tips from current residents.

The simulation sessions allowed me to ease into a learning/ clinical environment. I also was able to network and meet people so I will have friendly faces to connect with. I was thankful that all residents were at the boot camp to have this unique networking opportunity.

Resident Boot Camp Participant



Resident Quality Improvement Program

The Resident Quality Improvement Program (RQIP) curriculum was developed to better prepare our physician trainees to lead, assist with, or support improvement initiatives in the province. The vision is for residents to be able to engage in continuous quality improvement and actively contribute to the culture of patient safety. The RQIP curriculum was developed by a collaborative initiative of the Saskatoon Health Region and the College of Medicine under the Safety Hoshin. The program is aligned with patient safety and quality improvement competencies as outlined in CanMEDS 2015 as well as existing orientation processes within the health authority. The curriculum is delivered across residency programs, with faculty members engaged in facilitation and the Health Quality Council providing support as required.

The sessions provided lots of opportunities for reflecting on day to day issues or areas requiring some improvement that I will carry forward through residency and beyond.

RQIP Participant

Online Residents as Teachers Orientation Module

Residents at the University of Saskatchewan are expected to teach a variety of people including patients, medical students, clerks, and fellow residents. The main goal of the Online Module is to provide a guide to their teaching practice as

teaching is a core competency within the CanMEDS Scholar role. It also prepares residents for the two day TIPS for Residents workshop that they will attend within their first year of training. All 2019 PGY1 residents were required to work through the core material and complete the questionnaire/feedback by July 31st.

Teaching Improvement Project Systems (TIPS) Course

For most physicians, including non-academic physicians, the ability to effectively communicate information in a learning environment is essential. In recognition of the important role that residents play in teaching, and the need for effective teaching skills in practice, the Teaching Improvement Project Systems (TIPS) course provides an opportunity for residents to acquire and strengthen effective teaching skills – it is very interactive with much group discussion and practice teaching. Research has shown that teaching skills and confidence improve significantly as a result of the course. In 2019, the course was provided to residents across various distributed sites in the province



Resuscitation and Procedural Interdisciplinary (RaPID) Curriculum

Through participation in the Resuscitation and Procedural Interdisciplinary (RaPID) Curriculum, residents become more comfortable resuscitating acutely ill patients, working and learning in interdisciplinary teams, teaching and utilizing clinical ultrasound, and inserting central venous catheters, while faculty are prepared for, and comfortable with training and evaluation using competency-based medical education principles and in contributing to the delivery of high-fidelity simulation and task training curricula. The curriculum, offered in Saskatoon and Regina, involved PGY1s from Internal Medicine, Emergency Medicine, Anesthesia, General Surgery, Neuro Surgery, Obstetrics and Gynecology, Orthopedic Surgery, and Neurology.

I really loved the hands on practice, testing sessions and direct feedback from instructors. I found it really improved my comfort with being able to carry out the procedure from start to finish.

RaPID Participant

The multidisciplinary aspect of the course was excellent. Was able to get to know off-service junior residents in a different environment. Felt it improved team and relations (and likely patient care) when I encountered these residents in the clinical setting.

RaPID Instructor

Critical Appraisal Course – Introductory Course for Residents

The introductory Critical Appraisal Course for Residents is required to be completed by all residents at the University of Saskatchewan at some time during their residency. This course is part of the overall curriculum in the College of Medicine, which aims to enable residents to access information efficiently, evaluate the quality of the evidence underlying information and then to apply it competently to their clinical practice. The course is provided to residents during Academic Half Days through a combination of interactive, online activities and small-group, in-person discussions facilitated by experts in informatics, epidemiology and statistics, and applied clinical practice.

2018 Canadian Resident Matching Service (CaRMS): Match Results

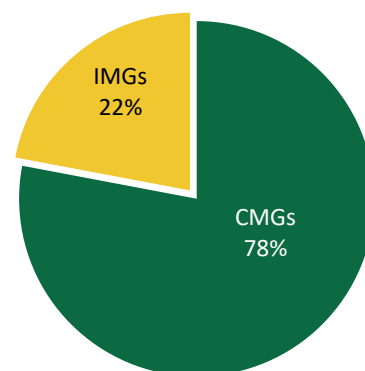
In 2018, the University of Saskatchewan PGME participated in three CaRMS matches: R-1 Main Residency match; R-3 Family Medicine/Emergency Medicine match; and R-4 Medicine Subspecialty match.

The allocation of positions for each match is determined by the PGME Allocation Committee in consultation with key stakeholders including residency training programs, Saskatchewan Health Authority and the Ministry of Health. The Ministry of Health approved 118 positions for the R-1 match; nine positions for the R-3 match; and nine positions for the R-4 match.

The U of S matched all 118 available positions in the first and second iterations of the R-1 match. These positions were filled by 92 Canadian medical graduates (CMGs) and 26 international medical graduates (IMGs). More than half the CMG positions were filled by U of S medical students.

International medical graduates who matched to positions in Family Medicine, General Pathology, Internal Medicine, Pediatrics, and Psychiatry have a Return of Service with a commitment to practice in Saskatchewan when they complete their training program.

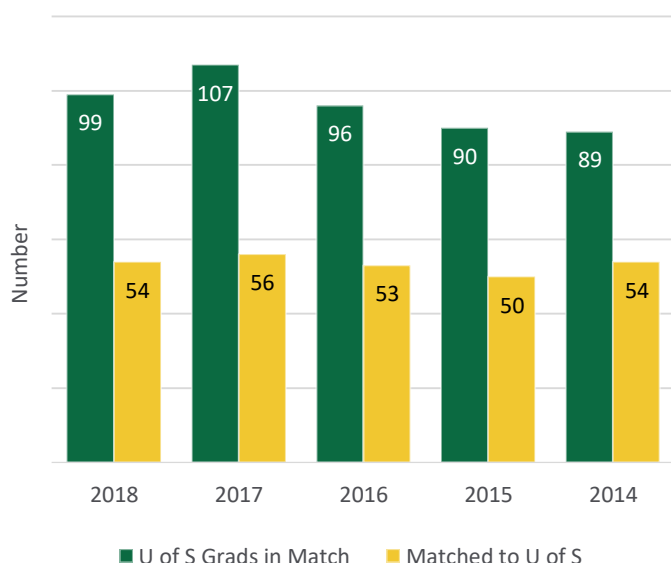
CaRMS 2018 R-1 Match Results



2018 R-1 Match: Distribution of Matched Positions

Program	CMG	IMG	Total
Anesthesia	5	0	5
Diagnostic Radiology	4	0	4
Emergency Medicine	3	0	3
Family Medicine-La Ronge	1	1	2
Family Medicine-Moose Jaw	3	1	4
Family Medicine-North Battleford	1	4	5
Family Medicine-Prince Albert	6	1	7
Family Medicine-Regina	8	5	13
Family Medicine-Saskatoon	9	1	10
Family Medicine-Swift Current	1	3	4
General Pathology	0	2	2
General Surgery	4	0	4
Internal Medicine-Saskatoon	14	4	18
Internal Medicine-Regina	5	0	5
Neurology	2	0	2
Neurosurgery	1	0	1
Obstetrics & Gynecology-Saskatoon	4	0	4
Obstetrics & Gynecology Regina	2	0	2
Ophthalmology	1	0	1
Orthopedic Surgery	3	0	3
Pediatrics	7	1	8
Physical Medicine & Rehabilitation	2	0	2
Psychiatry-Saskatoon	4	1	5
Psychiatry-Regina	2	1	3
Public Health & Preventive Medicine	0	1	1
Total Matched Positions	92	26	118

Historical Match Results for U of S Grads

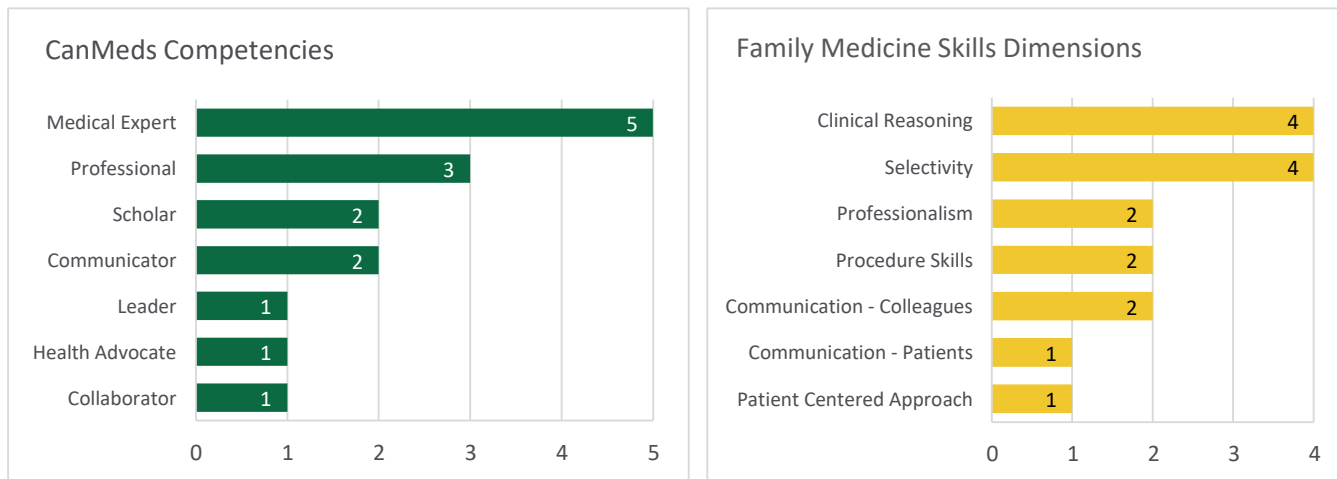


Modified Learning Plans

Modified learning plans are developed and designed to address identified performance deficiencies or areas of weakness in residents. Remedial actions are triggered by knowledge or procedural skills deficits, breaches of professional conduct or other performance concerns. Depending on the nature and gravity of those concerns, informal learning support or formal learning interventions (such as remediation or probation) are being used.

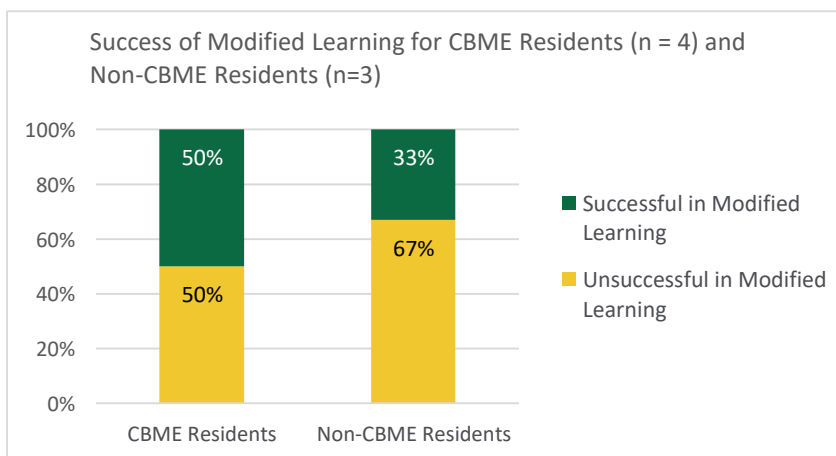
During the 2018-19 academic year, 12 residents went through some modifications of their training – 6 informal learning plans, 5 remediations and 4 probations – representing less than 0.03 percent of the total number of U of S residents. The reasons for remedial training were diverse and the outcomes of the modifications were varied: 8 were successfully completed and residents continued or completed their training; the remaining 4 are still in progress or require further actions.

Reasons for Modified Learning Plans



Modified Learning & Competency Based Medical Education (CBME)

Competency Based Medical Education (CBME) provides program specific curriculum planning and allows programs to tailor modified learning plans to fit a resident's precise needs. Competencies are measurable and observable, permitting continuous improvement in performance through appropriate training, feedback and assessment.



Policies and Procedures

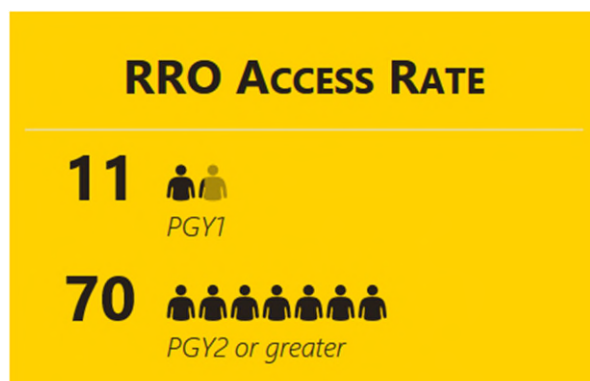
During the 2018-19 academic year, numerous policies and procedures were developed and/or updated.

Policies
Accommodation of residents with disabilities
Access to information in resident's files
Accounting for non-educational time away from educational program
Allocation of Ministry funded PGME positions
Alternative Routes to direct entry into residency
Appropriate use of social media
Electives for non-UofS residents
Electives for UofS residents
Essential skills and abilities required for the practice in PGME programs
Leaves of absence from residency training
Moonlighting and Independent clinical practice
PGME Intimidation and Harassment Guidelines
Reporting work related injuries and incidents
Request for payment
Resident appeal
Resident assessment
Resident health and safety
Resident research
Resident Supervision
Resident transfer
Waiver of training after a leave of absence
Writing Prescriptions

Guideline/Procedure/Other
CBD Guidelines
Clinical Fellowship Guidelines
Procedure for accommodation of residents with disabilities
Procedure for conducting a resident appeal
Procedure for electives for University of Saskatchewan residents
Procedure for obtaining independent clinical practice privileges
Procedure for obtaining moonlighting privileges
Procedure for request, approval of and return from leave of absence
Procedure for resident transfer
Procedure for waiver of training after a leave of absence
Program-level appeal process
Request for payment

Resident Resource Office

The Resident Resource Office (RRO) provides non-academic support in a safe and confidential environment to residents who may be coping with professional or personal challenges. The office directs residents to resources and provides education and referrals to support services both on and off campus in order to maintain well-being throughout residency.



Top Areas of Access:

- Clinical/Exam Accommodations
- Counselling Resources
- eHealth Privacy Breaches

Wellness Initiatives

In the past year, RRO has established partnership with various stakeholders to advance educational opportunities for residents; collaborative agreements have been signed with the Canadian Medical Protective Association (CMPA), Resident Doctors of Canada (RDoC) and Access and Equity Services (AES). In response to the increased need for psychological services, RRO has increased its funding support to learning assessments and training sessions that promotes health and well-being of our residents. The RRO also launched a funding program in 2017 to support wellness initiatives organized at the program/site level, with a 72% increase in funding requests compared to the inaugural program.



Resident Research Day

The PGME office and Office of the Vice-Dean Research (OVDR) teamed up again to host our third annual Resident Research Day in June 2019. Our poster day celebrated the accomplishments of our resident



researchers and the positive impact of resident research. A panel discussion on “Leveraging Data for Healthcare Improvement” was held and the top poster award recipients were recognized at the annual PGME Celebration Night in September. This partnership between OVDR and PGME will help build the research profile in the College of Medicine.

Resident Awards

The Postgraduate Medical Education Office administers the nomination and selection process for a variety of program and resident awards.

Awards	Recipients
CSCI/CIHR Resident Research Prize Awarded annually for the best resident research project conducted during a RCPSC/CFPC training program at each Canadian medical school. Funding to support this initiative is provided by the Canadian Society for Clinical Investigation and the Canadian Institutes of Health Research.	Dr. Tara Sander (Anesthesia)
Medical Class of 1939 Resident Teacher Award in Medicine Established through a donation from Dr. Donald Wilson (class of 1939) to recognize medical residents who have demonstrated excellence in teaching during their residency training.	Dr. Nicole Shedden (Family Medicine-Saskatoon) Dr. Quinten Paterson (Emergency Medicine)
CanMEDS Awards Introduced in 2013 to honour residents who model excellence in the following CanMEDS roles: <div style="text-align: right;"> Collaborator Communicator Health Advocate Leadership (Family Medicine) Leadership (Royal College) Professional </div>	Dr. Jennifer Woo (Psychiatry-Regina) Dr. Karen Ho (Internal Medicine-Regina) Dr. Maria Giroux (Obstetrics & Gynecology-Regina) Dr. Jessica Harris (Family Medicine-Saskatoon) Dr. Sey Shwetz (Emergency Medicine) Dr. Riley Hartmann (Emergency Medicine)
Exemplary Resident Award This CANMEDS award recognizes residents who demonstrate all intrinsic CanMEDS roles during their residency training.	Dr. Guerman Rolzing (Family Medicine-La Ronge) Dr. Amanda Hall (General Surgery)
Program Director of the Year and Program Administrative Assistant of the Year Awards These awards were created to publicly recognize the accomplishments and achievements of program directors and program administrative assistants in University of Saskatchewan residency training programs.	Dr. Marla Davidson (Psychiatry) Dr. Rob Woods (Emergency Medicine) Ms. Judy Classen (Orthopedic Surgery)



PGME Research

The PGME office, in collaboration with faculty, residents and medical students, have disseminated research findings in the form of publications and presentations at national and local conferences.

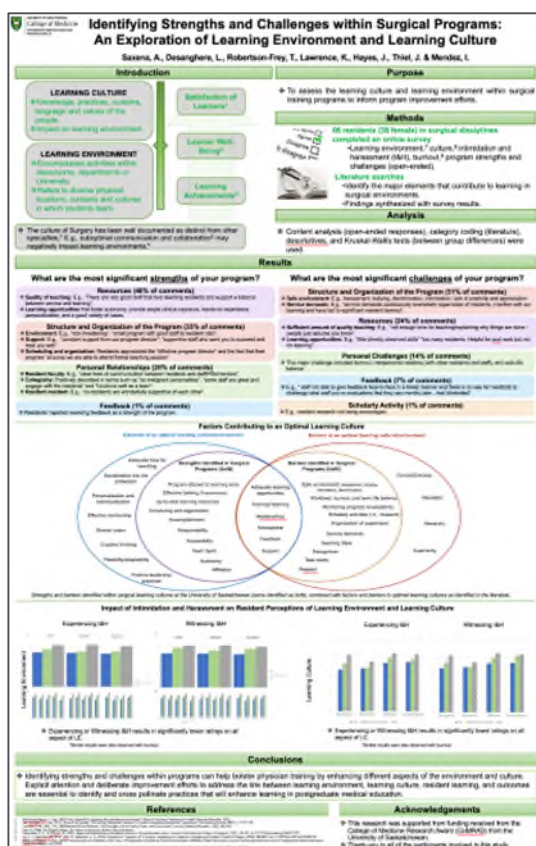
Selected Publications and Presentations

Saxena, A., Lawrence, K., Desanghere, L., Smith-Windsor, T., White, G., Florizone, D., McGartland, S. & Stobart, K. (2018). Challenges, success factors and pitfalls: implementation of distributed medical education. *Medical Education*, 52: 1167-1177.

Card, S.E, Robertson-Frey, T. Desanghere, L., Rohr, B., Jalbert, R., Elliott, M. & Saxena, A. (2018). Competence by design: determining learner needs. International Conference on Resident Education, October, 2018.

Desanghere, L, Saxena, A. & Rohr, B. (2019). Conflict management: Perspectives from a Chief Resident Workshop. Canadian Conference on Medical Education, April 2019.

Ulmer, B., & Robertson-Frey, T. (2019). A strategy to develop coaching in the Competence by Design (CBD) model. Medical Education Research and Scholarship Day, Regina, Saskatchewan, Canada, June 2019.



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