

UNIVERSITY OF SASKATCHEWAN College of Medicine POSTGRADUATE MEDICAL EDUCATION

MEDICINE.USASK.CA

PGME Educational Offerings Catalog

Mandatory Courses

https://medicine.usask.ca/residents/pgme-training.php#MandatoryCourses

Course	Mode	Length	Purpose	Notes
Resident Boot Camp	In-person/Virtual, Mandatory	3 days	Covers various topics to prepare incoming residents for residency.	Mandatory for all CMG and IMG applicants matched to RCPSC and CFPC residency training programs.
Residents as Teachers Online Module	Online, Mandatory course for new residents	Approximately 45 minutes to review the core materials and complete a brief questionnaire.	To provide a guide for residents' teaching practice as teaching is a core competency within the CanMEDS Scholar role. It will also prepare residents for the TIPS workshop.	New residents have to complete this course by July 31.
Teaching Improvement Project System (TIPS) for Residents	In-person, Mandatory course for new residents	2 days	To enhance residents' expertise as instructors through sessions in which they analyze, practice, and evaluate selected instructional techniques.	Provided in the distributed sites between July and January.
Quality Referral Consultation Curriculum	In-person with online modules and interdisciplinary workshop	Total resident time commitment for this curriculum is 3 hours.	To ensure that residents are familiar with and able to use various tools that will facilitate effective communication during a referral and consult.	A one-hour introductory presentation at the PGME Resident Boot Camp; Two (2) modules which residents will be required to complete during their training; one interdisciplinary workshop.
Critical Appraisal	In-person, Mandatory for residents in RCPSC programs	Two-hour introductory session. Resident appraisal of relevant academic literature using appropriate, standardized paper evaluation forms within the home program.	To apply critical appraisal techniques to the medical literature in residents' areas of specialization and understand how to apply evidence-based medicine to patient care.	Centrally administered introductory session is for programs not currently offering their own integrated curriculum. It is provided either virtual or in person at a time and location most suitable to resident needs.
CLR 800.3- Clinical Research	Online. All residents in the		Designed to provide awareness, understanding and skill development in various clinical	CLR 800 is offered twice per year with intake in July and

Methodology	Family Medicine program are required to complete this course. Some Royal College programs also require the completion of this course.	research methods including: study design, quantitative, measurements, clinical trials, qualitative methodologies, community-based participatory research, Aboriginal research, research ethics, communication skills, N=1 studies, quality assessment and knowledge translation.	October.
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Other Courses Provided by/through PGME

Course	Mode	Length	Purpose	Notes
Application of CanMEDS Roles to Case Studies	Case-based modules	Workshop material	The CanMEDS 2015 Physician Competency Framework has embedded in the competencies and skills needed for physicians to assume a consultant's role in their specialty.	Upon request by residency programs, the PGME office can develop case-based modules that can be used for workshops. Each case represents a few of the competencies that residents might find themselves having to demonstrate while treating a single patient.
Resident Quality Improvement Program (RQIP)	Flipped Classroom- combination of Online and in- person modules	Approximately 24 hours over a 1-2 year period.	To better prepare residents to be able to engage in continuous quality improvement and actively contribute to the culture of patient safety.	PGME may provide support if required.
Chief Resident Workshop	In-person	One-Day workshop for new chief residents.	Given the variation of the leadership responsibilities in this role, and thus the need for a diverse skill set, the purpose of this one-day workshop is to explore	Two workshops offered in spring and fall.

MD Management Seminar	In person	This is a one-day seminar available to senior specialty residents as an aide in setting up a future practice	different elements relevant to success in the Chief Resident position. Recommended as a core skill by RCPSC, this course addresses personal and professional financial and career planning issues that are essential for all physicians starting practice, including, but not limited to physicians remunerated by fee- for-service, salary, as part of an alternative payment plan (APP) or as part of an academic or community environment.	This is not a mandatory course, but all senior specialty residents and their significant others are invited to attend. The date chosen is generally mid-January.
RaPID	In Saskatoon and Regina	Sessions hold on one half- day per block from blocks 2 through 13- Four (4) resuscitation sessions, five (5) ultrasound sessions, and three (3) central line insertion sessions.	To develop residents' ability to recognize an acutely unwell patient, call for appropriate help, and initiate a basic assessment and management plan; to teach how to accurately generate, interpret, and integrate ultrasound images for clinical decision- making; to teach residents to safely insert a central venous catheter and peripheral IVs using ultrasound guidance.	For PGY1 Residents in Internal Medicine, Emergency Medicine, Anesthesia, General Surgery, Neurosurgery, O & G, Orthopedic Surgery, Neurology

<u>Website Resources</u>

PGME Program Information - College of Medicine | University of Saskatchewan (usask.ca)

Course	Mode	Length	Objectives	Notes
Written Communication Module	This module includes a series of readings and three activities. It provides a self-paced independent framework to enhance your own foundational knowledge and skills of communication through reflective practice.	The core activities and readings in the module should take approximately 1.5 hours, to complete.	Describe the CanMEDS/CanMEDS-FM competencies related to written communication • List the types of written communication we use in medicine • Discuss the components of good documentation • Reflect on our own documentation and how we can improve • Explain the importance of documentation from a medico-legal perspective	The module also includes supplemental resources for further independent learning.
Verbal Communication Module	This module includes a series of readings and three activities. It provides a self-paced independent framework to enhance your own foundational knowledge and skills of communication through reflective practice.	The core activities and readings in the module should take approximately 1.5 hours to complete.	List the CanMEDS/CanMEDS-FM competencies related to communication. • Discuss why the communicator role matters. • Describe the qualities of a good communicator. • Discuss one framework for verbal communication skills. • Develop some possible communication scripts for various communication scenarios in your field.	The module also includes supplemental resources for further independent learning.
Collaborator Foundations Module	This module includes a series of readings and four activities .	The module should take approximately two hours to complete: one hour pre-work to review the module; and	Describe and explain the importance of the Collaborator Role. Outline good practices of collaboration. Explain various aspects of relationship-centered care. Identify possible barriers of	The module also includes supplemental resources for further independent learning.

		one hour group discussion on the four activities, relating to specialty where applicable.	collaboration and how to mitigate against them. Identify factors that contribute to conflict and steps to promote understanding.	
Handover module	Draft being reviewed			
Leader Foundations Module	Being developed			
Time Management Module	Draft being reviewed			
Health advocate Foundations Module	Being developed			
Professional Foundations Module	This module includes a series of readings and four activities. The aim of this module it to improve learners' understanding and raise awareness in CanMEDS Professional Role by providing a foundational series of activities and content for the learner.	The core activities and readings in the module should take approximately 2 hours to complete. It is recommended that the module be completed in a group rather than individually.	 Recognize common words related to the process and content of the Professional Role. Apply professional skills to examples from everyday practice. Develop personal professionalism resources for day-to-day practice 	The module also includes supplemental resources for further independent learning.

Medical Expert

CanMEDS Role: Medical Expert: The Royal College of Physicians and Surgeons of Canada

Professional

CanMEDS Role: Professional: The Royal College of Physicians and Surgeons of Canada

Communicator

CanMEDS Role: Communicator: The Royal College of Physicians and Surgeons of Canada

Collaborator

CanMEDS Role: Collaborator: The Royal College of Physicians and Surgeons of Canada

Leader

CanMEDS Role: Leader: The Royal College of Physicians and Surgeons of Canada

Health Advocate

CanMEDS Role: Health Advocate: The Royal College of Physicians and Surgeons of Canada

Scholar Role Link to RCPSC Resources

CanMEDS Role: Scholar: The Royal College of Physicians and Surgeons of Canada

Half-Day Offerings

Course	Mode	Length	Objectives	Notes
Cost of Care/Resource Stewardship Workshop	The session will incorporate a mix of facilitation/learning methods including presentation, video, and several facilitated discussion questions.	Time commitment will be 90 minutes to 2 hours.	The goal of this workshop is to enable residents to be able to engage in the stewardship of healthcare resources (CanMEDS 2015). The session will introduce the Choosing Wisely Canada campaign, how it links to their daily practice and the important roles of clinicians, patients and families in reduction of unnecessary care. Drivers of unnecessary care from the perspective of patients, families and physicians via sharing experiences (successes/challenges) will be identified.	Facilitator: Ms. Angie Palen
LGBTQ2 Part One- facilitator not yet confirmed; please check with PGME	Basic Principles of Language for Inclusion: Recorded module and Interactive Academic Half Day Session	Total time: 2 hours	Develop expertise in a gender and orientation inclusive interview. Explore why this is important. Develop strategies for an inclusive interview specific to your field. Develop expertise in a gender and orientation inclusive interview. Explore why this is important. Develop strategies for an inclusive interview specific to your field.	Course developed by Dr. Ayisha Kurji & Dr. Sara Dungavell
LGBTQ2 Part Two facilitator not yet confirmed; please check with PGME	Intersectionality, Fragility, and Creating Safety: Interactive Academic Half Day Session Delivered by Dr. Sara Dungavell	Total Time: 1 hour	Explore personal barriers to treating 2SLGBTQ folk. Increase comfort in effectively treating 2SLGBTQ folk.	Programs may request this session based on their individual needs, or a combined academic half day for programs interested can be arranged.
LGBTQ2 Part Three facilitator not yet confirmed; please check with PGME	Section 3: Gender Dysphoria This is an interactive half day session led by Dr.	Total time: 1 hour	Increase expertise in gender dysphoria and its treatment	Programs may request this session based on their individual needs, or a combined academic

	Sara Dungavell.			half day for programs interested can be arranged.
Patient Safety Part One	Session on Basic Concepts of patient Safety at the PGME bootcamp for all residents prior to starting residency (1 hour).	Total time: 1 hour		Tools to create this curriculum are adapted from Healthcare Excellence Canada, the new amalgamation of the Canadian Foundation for Healthcare Improvement and the Canadian Patient Safety Institute.
Patient Safety Part Two (To be Developed)	Workshop structured around the TeamSTEPPS (Team Strategies and Tools to Enhance Performance and Patient Safety),	Half-day Workshop	The basic modules included are: Communication Situation Monitoring Mutual Support Leading Teams	This could be delivered either via a multi- disciplinary program academic half day, or within each program by determining a few patient safety champions and training them via a train-the- trainer model.
Patient Safety Part Three (To be Developed)	Programs may have program specific content applicable to their own programs that is already taught.		Additional specific modules, both general and more specific to different areas (I.e. critical care, OR safety, mental health, home care) are available here:	
Conflict Management (To be Developed)				

PGME Communication Skills Workshops

These communication skills workshops were developed by Dr. Mark Inman and Dr. Ayisha Kurji for the Pediatrics residency program. They are interactive half-day sessions facilitated by various pediatric faculty held on a three-year cycle. Workshops will address a variety of communication-related topics with discussion-based and practice-based components.

Most of the examples are pediatrics-specific, but the workshops can be customized for other specialties. Programs should contact Ope Okunola, PGME Educational Programs Coordinator if assistance is required for this.

Goal: to engage in active practice of core communication skill sets to enhance one's overall ability to communicate more effectively with patients, families, and colleagues.

Session Format

- 3-4 groups per session (3-5 residents per group)
- (Exception: "end of life care" facilitated in large group with Dr. Hodgson-Viden as discussion)
- 4 staff per session
 - (Exception: "end of life care")
- Each session is 2 hours in length
 - First 30-45 minutes: orientation to topic, group discussion, Q&A
 - o Remaining 60-75 minutes: breakout groups with simulated cases and discussion

Objectives:

Through completion of these workshops over a three-year cycle, pediatric residents should be able to:

- 1. Feel more confident in addressing more challenging communication situations with patients, families, and colleagues
- 2. Describe and utilize a various communication skill sets during their training and future practice
- 3. List communication strategies that will better facilitate interactions in the following situations:
 - a. Breaking bad news to patients and families
 - b. Disclosure of medical error (and near-misses) and apology
 - c. Communication challenges
 - i. with colleagues and other staff (failure to fulfill one's duties, engagement in inappropriate behaviours)
 - ii. with patients and families (differences in care wishes, leaving AMA)
 - d. Discussion around end of life care including DNR planning/patient care goals
 - e. Cultural competency (how to recognize and acknowledge differences in cultural beliefs/values, non-traditional medicine, how to interact with translation services, etc.)

Workshops:

- 1. Disclosure of Medical Error
- 2. Breaking Bad News
- 3. Difficult Communication
- 4. End of Life Care Discussion
- 5. Cultural Competency

Other Courses

Course	Mode	Length	Objectives	Notes
The Role of Practitioner's in Indigenous Wellness	Online, self- directed course	Participants are expected to complete the online modules at their own pace, within their registered twelve- week session.	Upon completion, health care practitioners will be equipped with the knowledge and insights to employ an interdisciplinary approach in understanding and supporting indigenous patients.	Offered via Continuing Medical Education (CME) https://cmelearning.usask.ca/#CMEOnlineCourses
CanMEDS Resource Stewardship Curriculum Toolkit Series	Toolkits include modifiable power point slide decks, annotated bibliographies, how-to guides, etc.	Three toolkits for teaching residents the foundations of resource stewardship. Designed for use with as much or as little adaptation as required;	This toolkit provides faculty and trainees a foundational knowledge of resource stewardship principles and the ability to recognize opportunities in daily practice to apply resource stewardship concepts through clinical care, teaching and assessment.	PowerPoint presentations consisting of a core set of slides, with the option to tailor the presentation for specialty-specific, target-audience relevance. <u>https://www.royalcollege.ca/rcsite/canmeds/resource- stewardship-e</u>

Courses available through CME

https://cmelearning.usask.ca/#CMEOnlineCourses

- 1. Fitness to Drive: AFM residents take the Fitness to Drive course every 2 years and receive support from the PGME office for their registrations.
- 2. Pain and Therapeutics-linked to the Pain conference but can be used asynchronously as the videos of the presentations are provided.
- 3. Diagnostic Imaging-a new offering provided in partnership with Diagnostic Imaging and Emergency Medicine.
- 4. Choosing Wisely-similar in design to the Pain conference-this conference is a great one for PGME residents.

Courses Available through Faculty Development

- 5. Advanced TIPS training for residents who have an interest in Medical Education
- 6. Asynchronous courses/recorded events from FD website
- 7. Faculty Development sessions
- 8. Med Ed Reading Club (last Thursday of each month at 2pm)
- 9. A monthly T Time (Timely Topics in Medical Education)
- 10. Medical Education Research and Scholarship Day.
- 11. Online Boot Camp course for clinical teaching and classroom teaching
- 12. Online Clinical Education Diploma
- 13. Master's in education (Health Professions Education)
- 14. Elective in Medical Education

For any questions about the PGME courses, please contact Ope Okunola at <u>ope.okunola@usask.ca</u>.