

# PGME Connect

*Facilitating conversations among the PGME community*

## **Message from the Associate Dean, PGME**

As the year 2022 comes to an end I am taking this opportunity to reflect on the few months since our last communication.

In October the PGME unit had the pleasure of hosting the PGME Celebration Night at Prairieland Park. We were delighted to hold our first in person event since 2019, acknowledging and celebrating the hard work and dedication of our residents, program directors, and program administrators. We were honoured to have Mr. Joseph Naytowhow open our event with his thoughtful opening remarks and his song, as well as Mr. Harvey Thunderchild for sharing his cultural learnings with all of us. It was wonderful to have and hear from our Minister of Health Honorable Paul Merriman and UofS President, Dr. Peter Stoicheff.





The external accreditation review of our residency programs and the PGME unit (site survey visit) will take place November 26-December 1, 2023. This is discussed more in the Accreditation section. Our goal is to achieve full accreditation status for all programs! The PGME office is working and supporting our programs and the institution for this review.

It is my sincere wish that all of us will take some time over the upcoming break to rest, rejuvenate, and share memories with friends and/or families.

My heartfelt gratitude to everyone in our PGME and the wider College community for your diligent dedication toward resident education.

All PGME updates, along with wellness and education resources, can be found on our website:

[medicine.usask.ca/residents/covid-19.php#PGMEUpdates](https://medicine.usask.ca/residents/covid-19.php#PGMEUpdates)

PGME maintains an open-door policy and we welcome inquiries – you can find a complete list of our office staff at

[medicine.usask.ca/residents/pgme.php#ContactUs](https://medicine.usask.ca/residents/pgme.php#ContactUs)

We want this newsletter to be valuable for you so please share your feedback and suggestions to help us improve!

Contact us at [pgme.communications@usask.ca](mailto:pgme.communications@usask.ca)

## PGME ACCREDITATION

**SITE SURVEY  
NOVEMBER 26 - DECEMBER 1, 2023**

### FROM THE ASSOCIATE DEAN

Our programs and the PGME unit of the College of Medicine are fully engaged to prepare for the 2023 conjoint Royal College of Physicians and Surgeons of Canada (RCPSC) and the College of Family Physicians of Canada (CFPC) regular accreditation review of the University of Saskatchewan scheduled for November 26 to December 1, 2023! This review includes a review of the institution and its oversight of residency education, all active residency programs, and affiliated education sites.

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A lot of work has been done already, and there is much more ground to cover, but I know that together, we can - and will - do this!

With our committed department heads, program directors, program administrators, faculty, residents, external stakeholders, and PGME unit who care deeply about the quality of education we deliver here in Saskatchewan, we are aiming for full accreditation (accredited with follow-up by regular review) of our residency programs and the PGME unit (referred to as the institutional review). I am assured of and thankful for the full support of the University, our College of Medicine, and the Saskatchewan Health Authority on this journey.

As we collectively and collaboratively address all areas for improvement (AFIs) identified in both 2015 external and 2021 internal reviews, our approach remains that of continuous quality improvement and evidence-based decision making. as we will seek to achieve exemplary indicators.

The findings of the internal reviews of programs led by the Internal Review committee (co-chaired by Dr. Marla Davidson and Dr. Ayisha Kurji and surveys done by our program directors and residents, and in some cases, by external reviewers) have been and are being considered by the Academic Program Enhancement Committee (APEC), led by co-chairs Dr. Mark Sheridan and Dr. Brian Geller and comprised of highly dedicated and experienced physician leaders (Drs. Anurag Saxena, Kylie Kvinlaug, Maryam Mehtar, Asma Noshawan, Darrien Rattray, Marla Davidson, Ayisha Kurji, and residents Nina Dhillon, Nicole Pendleton and Karan Vats). The APEC reviews and develops recommendations to address the AFIs and work towards quality improvement and exemplary requirements. The PGME committee is engaged in guiding this work at the PGME institutional level. The PGME Accreditation Oversight Team (Ope Okunola, Audrey Kincaid, Loni Desanghere, Maureen Lumbis, and Tanya Robertson-Frey) has developed an implementation plan and will continue to provide overall support and oversight, including progress monitoring, reporting, logistics, and managing stakeholder communications. A monthly newsletter dedicated to accreditation will be published starting from January 2023.

I am grateful for all the work that has gone into the preparation so far. As I look to the next 12 months, I am realistic about the amount of work before us and know we are up to the challenge. Our success is predicated on the collaborative work of everyone - please do not hesitate to contact members of the AOT or me if you have any questions.

I look forward to working with everyone as we prepare for November/December 2023!

Dr. Anurag Saxena

PGME Site Visit November 26 - December 1, 2023																				
2022 - 2023 Timeline																				
Key Activities	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23		
Program	APFC Meetings, recommendations to programs												APFC Meetings, APFC review of CanAMS docs, certifications from programs by August 15, 2023							
Meeting with Program Directors (PDs)	Ongoing meetings with PDs re internal reviews and other concerns and COI approach to PGME and respective programs, including Appreciative Inquiry based workshops for "ideal state" of the program (since internal reviews in fall 2021 - fall 2022) and assure programs are on track																			
Workshops					PD FA Workshop on accreditation readiness				PD FA Workshop on accreditation readiness									Accreditation workshop for residents (with PDs)	PD FA Workshop on accreditation readiness	
Address AFAs, Update CanAMS					Programs work on and complete 1st set of AFAs and enter information in CanAMS, submit monthly progress reports to PGME		Programs work on and complete 2nd set of AFAs and enter information in CanAMS, submit monthly progress reports to PGME		Programs work on and complete 3rd set of AFAs and enter information in CanAMS, submit monthly progress reports to PGME		Program CanAMS documents due in the PGME office by June 15, 2023							If changes required, programs revise CanAMS document and return to PGME office	Collect all documents required for document review	
Program Logistics																			As soon as date is secured for program review, send save the dates to all stakeholders to ensure they are available on the day of the review. Book room for program review, order food for residents	
Institution						Meetings with Dns and PDs			Meeting with Dns and PDs re current issues, CanAMS documents and anticipated challenges									Final meeting with PDs / Dept. heads and Chief Residents (completed by Nov 15, 2023)		
Meeting with Department Heads (Dns) and PDs									Monthly meetings with Dns, IT and E-Health	First meeting with Dns before October 15th, 2022. Follow-up meetings with the relevant stakeholders re issues with Institutional Standards								Meetings with residents and RVC and in some cases with faculty re accreditation at all sites of training in the province		
Meeting with other Stakeholders																				
Address AFAs, Update CanAMS									Institutional CanAMS instrument in process of being completed		Institutional CanAMS document completed and ready for review by the Dean/ Vice-Dean							If changes required, PGME office revise CanAMS document prior to submitting	Send documents to Dr. Sheart on August 20, 2023	All CanAMS documents submitted to RCPSC/CPC by PGME by September 15, 2023. Collect and collate all documents required for document review
PGME Oversight & Logistics																				
PGME Oversight					Planning, developing tools, meetings with APFC				Take inventory of CanAMS documents to ensure that they are in good shape	Monitoring the status of weaknesses (AFIs) and the current status with respect to COI approach to PGME	2-weekly touchbase with programs, resolve and summarize monthly reports from programs, POCA cycles							July 1st set out on June 1, 2023. Results to inform the final versions of all CanAMS documents	Monitoring the status of weaknesses (AFIs) and the current status with respect to COI approach to PGME, POCA cycles, ensure any new AFIs/Issues are addressed	
Stakeholder Communications									PGME Newsletter 15-minute/Email Touchbase with programs to clarify items										Accreditation Newsletter, PGME e-news, website, CDM e-news, Social media, 15-minute/email monthly Touch Base with programs	
PGME Logistics																			Work on all logistics for institutional review, program reviews, Sunday reception, Plan B. As soon as date is secured for program review, send save the dates to all stakeholders to ensure they are available on the day of the review	
Progress Reporting																				
PGME Dean									8-weekly progress reports to PG Dean by Admin Oversight team											
PGME Committee									PGME Committee Meeting		PGME Committee Meeting		PGME Committee Meeting		PGME Committee Meeting					
College of Medicine, U of S Leadership										Review of Institutional Standards Report with the Dean, Vice-Dean & COI with a preliminary plan to address issues									Institutional CanAMS document completed and ready for review by the Dean/ Vice-Dean	Briefings for senior leadership of the University (President and Provost) and RMA (COO and SMO) - through or with the Dean
Accrediting Bodies																				
CPC and RCPSC									Meeting with CPC		Preliminary plan will be by RCPSC and CPC items								Ongoing discussion with national colleges to finalize schedules	Site Survey NOVEMBER 26 - DECEMBER 1, 2023
Strategic Plan																				
EDI																				
Internationalization																				
Other																				

View the detailed 2022-2023 Accreditation timeline [HERE](#)

# PGME PORTFOLIO UPDATES

## WELLNESS

Each program and site are allocated wellness funds each year that can be used for wellness activities and/or initiatives. This year, fourteen programs utilized their wellness funds for events such as: bowling, welcome BBQ/events, holiday dinners, working lunches, escape rooms, indoor golf, wellness workshops/speakers, paint nights, and cultural activities such as indigenous beading. The feedback from these events have been overly positive as it allows residents to celebrate and promote wellness. Encouraging residents to connect outside of work in social settings allows them to recharge, team build, create memories, and create relationships they may not be fostered through the work environment.

To learn more about Wellness Resources in PGME, please contact the PGME wellness coordinator Jennifer Uhryn: [jennifer.uhryn@usask.ca](mailto:jennifer.uhryn@usask.ca) | 306-966-1669



## **Quality Referral and Consultation Education (QRCE)**

The Quality Referral and Consult Education (QRCE) was developed by the Saskatchewan Ministry of Health in collaboration with PGME to train residents on how to improve written and verbal referral/consultation communication. The curriculum consists of three parts:

- Introductory presentation provided to PGY1 at the PGME Resident Boot Camp
  - Two online modules: “Effective Consultation in an Acute Care Setting” and “How to
-

### Make an Effective Written Consultation”

- Interdisciplinary workshop co-facilitated by senior family medicine residents and senior residents from Royal College programs.

Now that many residents have completed all three components of the curriculum, an outcomes evaluation is underway to assess how successfully the various referral/consultation resources are being used and to determine if residents are satisfied with the referral process. Specifically, residents from family medicine and four specialty programs will be asked to participate in an online survey. Results of the project will help to inform program improvement.

## **Learning Environment Survey**

Last month, residents, program directors, program administrators, and teaching faculty were invited to participate in a survey pertaining to the work and learning environment. The information provided by survey participants will help the PGME office better understand residents faculty, and staff experiences and to identify areas for improvement. Topic areas included:

- Overall work/learning environment
- Residents’ learning environment
- Educational experiences
- Unprofessional behaviours
- Patient safety culture

Conducting this survey is also important as we prepare for onsite accreditation visits.

Specifically, the survey will address the following accreditation standards:

- STANDARD 5: Safety and wellness are promoted throughout the learning environment.
- STANDARD 9: There is continuous improvement of the educational experiences, to improve the residency program and ensure residents are prepared for independent practice.

Thank you to everyone who took the time to complete the survey. Your feedback is greatly appreciated!

## **PROGRAM SPOTLIGHT: INTERNAL MEDICINE**

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Simply put, I don't know how our residency program would function without Janna Ethier. Ever since Janna joined the PA team in July 2021, she has been recognized as someone who strives to support the program and its residents, and as someone that we can turn to in order to "get stuff done". In the last year, she has somehow gone from being a new member of the PA team to (at times) being the only member of the Internal Medicine PA team, working tirelessly to expertly manage our program. Among the residents, it is well known that Janna has been going above & beyond to support us. From a friendly "hello", to homemade bannock in the resident lounge, to prompt (and very helpful) email responses, we can always rely on her to brighten our days and make our lives as residents easier. We are incredibly grateful that she joined our program last year.

I know that I can speak for the rest of my resident cohort when I say – we are so lucky to have her!

Thanks,  
Internal Medicine, PGY2 Resident



## **RESIDENT SPOTLIGHT**

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As a pediatric resident in Saskatoon's children's hospital, Dr. Chris Christensen says every day he sees the cascading effects of a failure to deal with systemic issues that impact health care. Read the full article [HERE](#)

## RESEARCH

### International Conference on Residency Education (ICRE) 2022



Medical Education



In-Person Event



Oct 27 - 29, 2022



Montreal, Quebec, CA

A total of 25 people received funding from the PGME office to attend ICRE 2022 in Montreal. This included residents, program directors, program administrators, and PGME staff. To find out about their experiences/learnings, they were asked to complete a brief survey. There were a total of 16 participants who completed the survey, representing a 64% response rate.

Participants highlighted several topics of learning that were personally helpful to them or could be applied to residency education in their program. Some of these topics included **curriculum development, coaching, wellness, engagement, equity, diversity and inclusivity, assessments, leadership, and Elentra** to name a few.

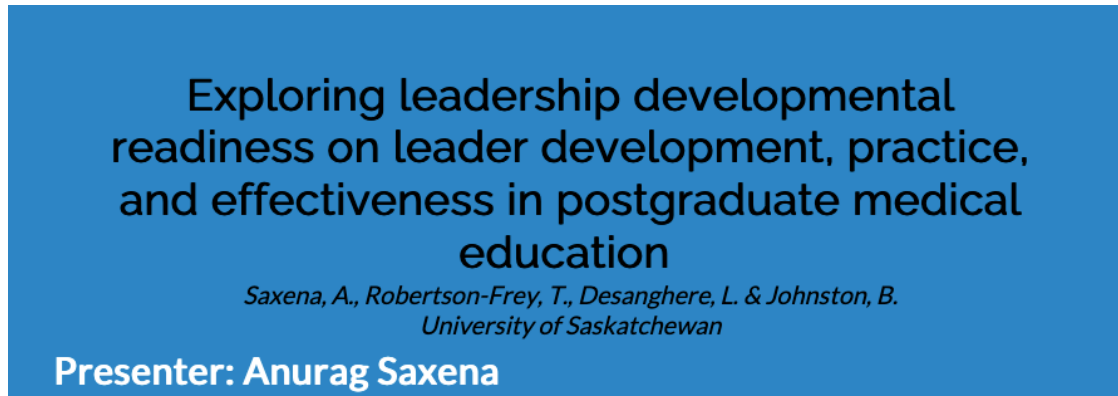
Next year, ICRE takes place in Halifax, Nova Scotia on October 19-21. ICRE is now accepting abstract submissions under the research in residency education and 'What Works' categories. Deadline for abstract submissions is January 6th, 2023. Visit their



[website](#) to review submission guidelines.

### **PGME Research Presentations**

PGME presented several research projects this fall on leadership developmental readiness and leadership effectiveness at the International Summit on Leadership Education for Physicians (TISLEP) and at the International Leadership Association (ILA) Global conference.



**Exploring leadership developmental readiness on leader development, practice, and effectiveness in postgraduate medical education**

*Saxena, A., Robertson-Frey, T., Desanghere, L. & Johnston, B.*  
*University of Saskatchewan*

**Presenter: Anurag Saxena**



The International Summit on Leadership Education for Physicians

*À Présent: Leadership for a World Redefined*

More than a pre-conference event  
We are a community of practice in Leadership Education!

In this project we explored individual and organizational factors shaping leader developmental readiness (LDR) and the relationship between leader readiness, efficacy, practice, and effectiveness.

An online survey was distributed in 2022 (participants: 98 residents including 60 females), which measured two constructs of LDR (ability and motivation) and organizational supports for leader development, personal leadership efficacy, and leadership effectiveness. Results showed significant impacts of age, leadership experience and perceived organizational support on measures of leadership ability and motivation. As well, ability and motivation to develop were positively associated with transformational leadership behaviours, leader efficacy, and leader effectiveness.

Understanding learners' developmental readiness, impact of individual and organizational factors on this development, and how leader development interacts with learner readiness is informative for leadership development programs for learners and healthcare professionals.

# Leader Effectiveness And Factors Contributing To Success: Perspectives From Physician Leaders Across Canada

Saxena, A., Smith, P., Dickson, G., Van Aerde, J. & Desanghere, L.

### INTRODUCTION

- Effective organizational leadership ~ maximizing organizational efficiency & achieving organizational goals.
- Leadership efficacy – depends upon – leader competencies / competence.
- Critical success factors (CSFs): Requirements that must be met continually for the success of an enterprise.<sup>1,2</sup>
- Our previous research findings:
  - Medical education leaders identified three CSFs:
    - quality relationships, holding oneself accountable, and reflective leadership.

### METHODS

- 151 physician leaders from across Canada.
  - Members of the Canadian Society of Physician Leaders (CSPL) and the Québec Medical Association (QMA).
- Q: (online survey)
  - Describe what you do on a consistent basis to become/stay effective as a leader,
  - Self rate your effectiveness as a leader (0-not effective at all, 100-extremely effective).
- Analyzed in NVIVO, content analysis was used to generate emergent themes from the data.

### PURPOSE

- Explore factors identified by physician leaders that contribute to their success
- The impact of perceived leader effectiveness on identifying the factors.

Age (n)	Leadership Experience (n)
25-34 years (7)	3-5 years (20)
35-44 years (20)	4-6 years (23)
45-54 years (45)	7-10 years(24)
55-64 years (91)	11-15 years (24)
65 years and above (38)	16-20 years (14)
	20+ years (48)

Gender (n)
Female (67)
Male (83)
Other (1)

### RESULTS

#### Perceived Leadership Effectiveness

Participant responses were grouped based on self-identified levels of leader effectiveness: 20% of participants rated effectiveness as lower (<= 60), 53% as mid-range (>60, <= 80) and 27% as high (>80).

#### What do effective leaders say contribute to leader success?

Six overarching themes were identified as contributing to leader success:

Factor	Salient findings
<b>Communication</b>	<ul style="list-style-type: none"> <li>Listening: frequent communication, clarity of communication</li> <li>Mid-range effective leaders: Listening was referred to most by them</li> </ul>
<b>Engaging and working with others</b>	<ul style="list-style-type: none"> <li>Low effectiveness leaders:               <ul style="list-style-type: none"> <li>mentioned the 2x (than mid-range) &amp; 6x more (than high effectiveness leaders)</li> <li>Comments reflected their own engagement, rather than the engagement of others, e.g., staying involved even when not asked</li> </ul> </li> <li>All groups referred to this event. Staying focused on achieving goals and results</li> <li>Adapting with organizational goals, setting goals and monitoring results, and carrying through with strategic initiatives.</li> </ul>
<b>Self and organizational improvement</b>	<ul style="list-style-type: none"> <li>All groups: Continued learning either formally (i.e., courses) or informally (i.e., reading) was important to stay effective.</li> <li>Mid-range leaders: referred more to professional development, conferences, mentoring, seeking feedback</li> <li>Lower and higher effectiveness groups: referred more to seeking org/ improvements</li> <li>High effectiveness group: referred more to <b>self-education</b></li> <li>Low effectiveness group: referred more to <b>learning innovation</b> (new) (using technology)</li> </ul>
<b>Crediting the team</b>	<ul style="list-style-type: none"> <li>High effectiveness group: referred more to "crediting their team"</li> <li>None of the respondents in the lower effectiveness group mentioned this.</li> <li>Mid-range group: A few chief having an excellent team, using their team to keep them in line, and having an efficient assistant</li> </ul>
<b>Personal Characteristics</b>	<ul style="list-style-type: none"> <li>e.g., patience, persistence, flexibility, compassion, empathy, and being organized</li> <li>Although mentioned rarely, these were present across all effectiveness groups.</li> </ul>

### CONCLUSION

- Results build on our previous findings of three CSFs for effective leadership in medical education, broadening this framework to incorporate physician leaders and levels of effectiveness into leadership success.
- These results hold significance for health organizations to enhance individual and collective leadership within their areas of influence and mandates:
  - Effective healthcare leadership requires deliberate attention to the CSFs in strategic, operational, and individual domains.
- Since effective physician leadership has been shown to improve physician engagement and organizational effectiveness,<sup>3,4</sup> individual and organizational leadership practices and leadership development programs would benefit by addressing these CSFs.

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### ACKNOWLEDGEMENTS

Thank you to all participants as well as to the CSPL for helping distribute the survey.

Thank you to the Social Science Research Laboratory at the University of Saskatchewan for data analysis.

Critical success factors (CSFs) refer to those requirements that must be continually met for the success of an enterprise. In this study, we build upon previous findings of three CSFs for effective leadership in medical education, broadening this framework to incorporate physician leaders and levels of effectiveness. 151 physician leaders from across Canada were surveyed to investigate perceived level of leader effectiveness and descriptions of what they do on a consistent basis to stay effective. Six overarching themes were identified, with varying input based on leader effectiveness. These results have implications for leadership development in health care organizations.

## ACADEMIC CORNER

PGME would like to highlight the following article which is focused on writing high-quality narrative comments used in assessments:

### Narrative Assessments in Higher Education: A Scoping Review to Identify Evidence-Based Quality Indicators

Chakroun, Molk MSc<sup>1</sup>; Dion, Vincent R.<sup>2</sup>; Ouellet, Kathleen MSc<sup>3</sup>; Graillon, Ann MD<sup>4</sup>; Désilets, Valérie MD<sup>5</sup>; Xhignesse, Marianne MD<sup>6</sup>; St-Onge, Christina PhD<sup>7</sup>

Find the link to the full article here: [Academic Medicine, 97\(11\), 1699-1706, November 2022](https://doi.org/10.1177/1043986222111111)

### Abstract

## **Purpose**

Narrative comments are increasingly used in assessment to document trainees' performance and to make important decisions about academic progress. However, little is known about how to document the quality of narrative comments, since traditional psychometric analysis cannot be applied. The authors aimed to generate a list of quality indicators for narrative comments, to identify recommendations for writing high-quality narrative comments, and to document factors that influence the quality of narrative comments used in assessments in higher education.

## **Method**

The authors conducted a scoping review according to Arksey & O'Malley's framework. The search strategy yielded 690 articles from 6 databases. Team members screened abstracts for inclusion and exclusion, then extracted numerical and qualitative data based on predetermined categories. Numerical data were used for descriptive analysis. The authors completed the thematic analysis of qualitative data with iterative discussions until they achieved consensus for the interpretation of the results.

## **Results**

After the full-text review of 213 selected articles, 47 were included. Through the thematic analysis, the authors identified 7 quality indicators, 12 recommendations for writing quality narratives, and 3 factors that influence the quality of narrative comments used in assessment. The 7 quality indicators are (1) describes performance with a focus on particular elements (attitudes, knowledge, skills); (2) provides a balanced message between positive elements and elements needing improvement; (3) provides recommendations to learners on how to improve their performance; (4) compares the observed performance with an expected standard of performance; (5) provides justification for the mark/score given; (6) uses language that is clear and easily understood; and (7) uses a nonjudgmental style.

## **Conclusions**

Assessors can use these quality indicators and recommendations to write high-quality narrative comments, thus reinforcing the appropriate documentation of trainees' performance, facilitating solid decision making about trainees' progression, and enhancing the impact of narrative feedback for both learners and programs.

## **HIGHLIGHTS IN MEDICAL EDUCATION**



A new training module on well-being, *Time and Energy Management for Work-Life Integration*, is now available as a resource for the CanMEDS LEADER role on the Royal College of Physicians and Surgeons of Canada Website in both [English language](#) and [French language](#) versions. The module was co-authored by the CoM's Dr. Anurag Saxena, Associate Dean, PGME, and Dr. Sey Shwetz, Assistant Professor Emergency

Medicine, and Dr. Lara Hazelton, Professor of Psychiatry at Dalhousie University. It can be used personally or as a training module for physicians, residents and RCPSC members.

## **ANNOUNCEMENTS**

### **Welcome - New Staff**

Since September 2022, PGME welcomed the following Program Directors, Site Directors, Assistant Program Directors, and Program Administrators:

#### **Program Directors:**

Dr. Marty Heroux, Family Medicine Enhanced Skills

Dr. Dorie-Anna Dueck, Medical Oncology

#### **Site Directors:**

Dr. Megan Clark, Family Medicine Regina

Dr. Aaron Prystupa, Family Medicine North Battleford

Dr. Kelsey Leavins, Family Medicine Swift Current

Dr. Kristin Foy, Family Medicine Southeast

#### **Assistant Program Directors:**

Dr. Kaitlyn Hughes, Family Medicine Regina

Dr. Olivia Reis, Family Medicine Regina

Dr. Julie Kryzanowski, Public Health & Preventive Medicine

#### **Program Administrators:**

Nancy\_Groeneveld, Pediatrics & Medical Oncology

Cynthia Carey, Family Medicine Swift Current

Nicole Craft, Internal Medicine Saskatoon



**The PGME office will be closed December 26th 2022 to January 2nd 2023.**



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