

Postgraduate Medical Education Accreditation 2023

Issue 3-March 2023

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Save the Date

I recognize the level of engagement and involvement from the College of Medicine's Information Systems (IS; Ganna Tetyurenko, David Hall, Malcolm Whyte, Kelly Mulligan) and the PGME-SHA working group (Crystal Maslin, Kent Stobart, Brandace Winquist, Adrienne Hagen, and Steve Chard). This work has encompassed the College of Medicine/University of Saskatchewan and spans issues ranging from infrastructure to learning environment.

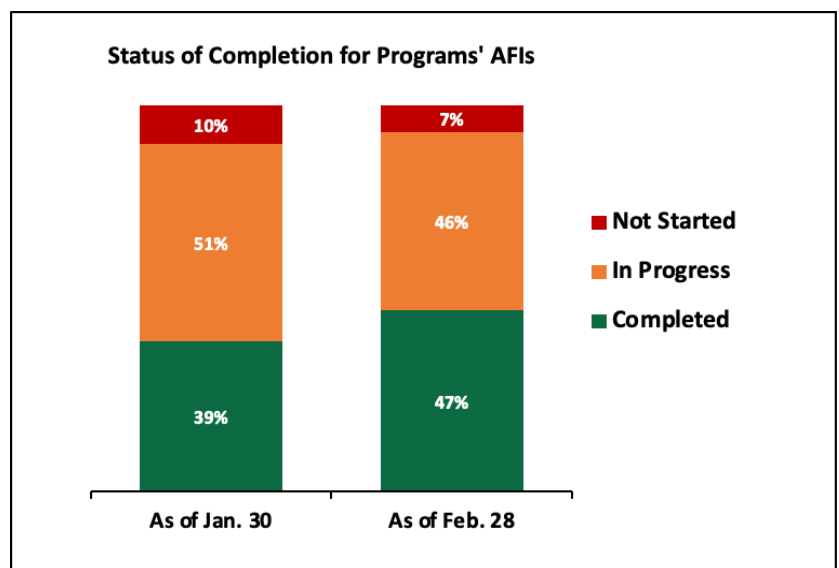
The PGME office has been working with the IS team on enhancements of Elentra for PGME functions at the program level and the PGME office level. With the incorporation of competency-based medical education (CBME) in postgraduate medical education the role of technology for management functions has increased considerably and it is critical to define and document roles and responsibilities.

The specific areas being addressed are standard data governance roles and responsibilities in accordance with accreditation standards and University and College policies related to data stewardship. The intent is to streamline the work and consolidate the data within a minimum number of systems to support ease of use by various constituents, ease of onboarding, and the optimization of IT support model/resources.

We have also been working closely with the PGME-SHA working group to address learning environment concerns relevant to accreditation success. These working meetings are ongoing and many action items are either completed or in progress. Collaboratively, we will continue to address areas for improvement as we move closer to our site visit. Our countdown is eight months, and I am confident we will continue with the current momentum.

Message from the Associate Dean

I would like to take this opportunity to acknowledge our department heads, program directors, program administrators, faculty, residents, external stakeholders, and the PGME unit for their ongoing commitment to accreditation work within the college. We are seeing outstanding and continued progress within our programs, with everyone working together for completion of AFIs.

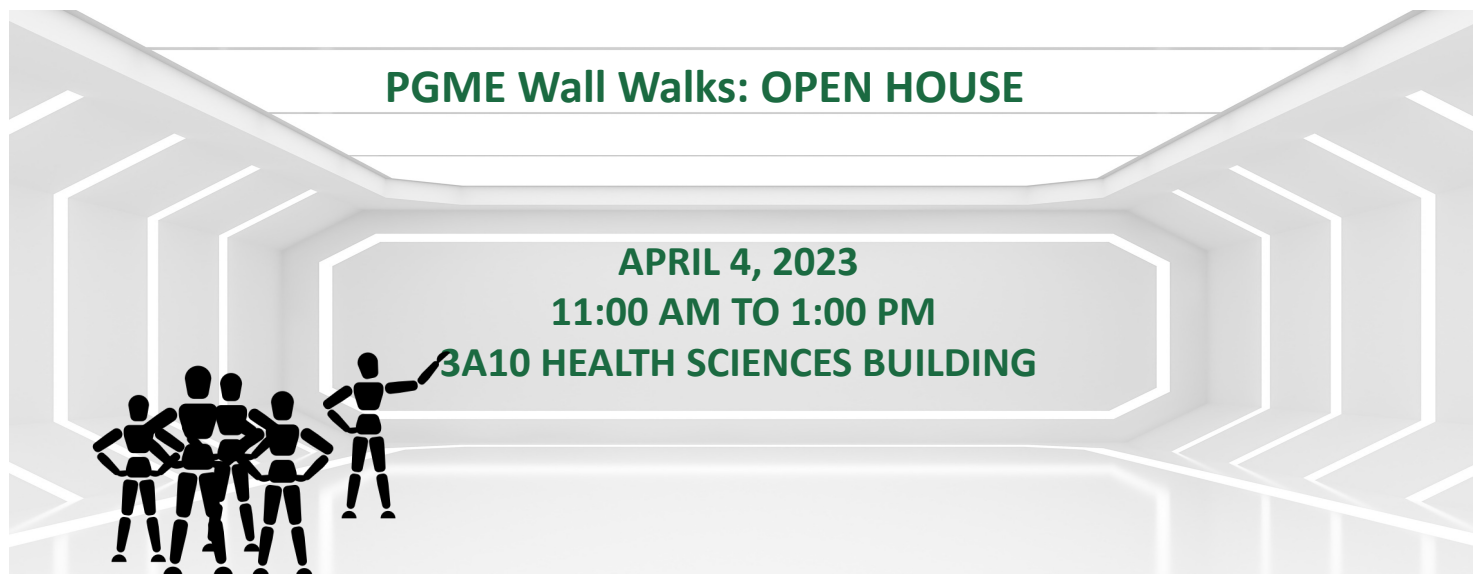


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Associate Dean, Postgraduate Medical Education, University of Saskatchewan



From the PGME Accreditation Oversight Team (AOT)

The Associate Dean PGME, along with the AOT and the PGME office, have been engaged in monthly 'wall walks' with senior leadership within the college. The purpose of these is to provide updates on accreditation status and progress as well as answer any questions about accreditation work. The AOT would like to engage with anyone who is interested in this ongoing work. The PGME office will be hosting an open house on April 4th from 11:00 am to 1:00 pm in HSc 3A10. If you would like to know more about accreditation, please join us!



Questions about Accreditation? The AOT has compiled some FAQs:

Q: What should I be doing right now (March) to prepare for the on-site visit?

A: As the CanAMS instruments are due to be completed by June 15, the Program Director and Program Administrator should be reviewing and updating the instrument in CanAMS that was completed for the internal reviews, ensuring all AFIs identified in the internal review are addressed (with evidence if required). CanAMS also has an AFI or APOR instrument which has all areas for improvement from the previous external review, and this document also needs to be completed by June 15.

Q: What sort of things should I be thinking of while reviewing and updating our CanAMS instrument?

A: The CanAMS instrument and documents are your surveyors' first impression of your program. Ensure that the information provided is clear and concise, spell out abbreviations at least once per page, and ensure there are no typos.

Q: When we know the date of our program's review, what should we do?

A: Ensure that all participants of the day are aware of the date and are aware of their role in the review and that their attendance is required. The Program Administrator should book a room for the review well in advance, arrange for food for the surveyors, ensure there is WiFi connectivity and that any required technology and/or digital systems are available, including a support technician.

Q: How do I know my curriculum map is correct and ready to use?

A: The new CBD Advisor/Lead Dr. Lynsey Martin, who was introduced at the PGME Committee meeting on March 2, will be reviewing all programs' curriculum maps in the near future. She is available to answer any questions you may have regarding your curriculum map.



TIMELINE REVIEW

2022

- ✓ Internal Review
- ✓ AFI Review
- ✓ AOT Oversight - development of Implementation Plan
- ✓ PGME meetings with Stakeholders (PDs, DHs, Residents, SHA, etc.)
- ✓ Accreditation Workshop for PDs and PAs - November
- ✓ Program Progress Reporting – Due December 22nd

January - May

- Program and Institutional AFI work
- Monthly Program Progress Reporting – **Due on the 20th of each month**
- Active Risk Management (bi-weekly touch base with programs)
- PGME meetings with Stakeholders (PDs, DHs, Residents, SHA, etc.)
- Accreditation Workshop for PDs and PAs - March
- APEC and PGME committee meetings - recommendations to programs
- AOT Oversight – Monitoring and reporting of progress
- Institutional CanAMS documents– **Due by May 31**
- AFIs addressed and CanAMS updated – **Due by May 31**

2023

June - August

- PGME meetings with Stakeholders (PDs, DHs, Residents, SHA, etc.)
- Survey to inform the final versions of all CanAMS documents – **Due June 1**
- Active Risk Management (bi-weekly touch base with programs)
- Program CanAMS documents - **Due by June 15**
- APEC review of CanAMS documents - **Due by August 15**
- AOT Oversight – Monitoring and reporting of progress
- Program and Institutional Logistics, Plan B

September - December

- All CanAMS documents submitted to RCPSC/CFPC by PGME - **Due by September 15**
- Programs complete their schedules and ensure all participants are aware and have it booked in their calendars, book rooms and order food – **Due September 11th - 15th**
- PGME meetings with Stakeholders (PDs, DHs, Residents, SHA, etc.)
- Accreditation Workshop for Residents – September
- Accreditation Workshop for PDs and PAs – October
- AOT Oversight – Monitoring and reporting of progress
- **Site Survey – November 26th – December 1st**



Standards Spotlight

PGME is developing information sheets relevant to accreditation standards. The purpose of these are to provide residents and faculty with quick and informative information on these topics. In this Issue we would like to spotlight two standards: **Role Modelling** and **Hidden Curriculum**. The information pages can be found on our [website](#) and are linked below.



ROLE MODELLING

STANDARD 4: The delivery and administration of the residency program are supported by appropriate resources.

- **Requirement 4.2.1:** Teachers appropriately implement the residency curriculum, supervise, and assess trainees, contribute to the program, and role model effective practice.

STANDARD 7: Teachers deliver and support all aspects of the residency program effectively.

- **Requirement 7.1.2:** Teachers in the residency program are effective role models for residents.

For the role modelling information sheet, click [HERE](#). Highlighted in this document is an overview of what role modelling is, why it's important in medical education, and best practices.

HIDDEN CURRICULUM



STANDARD 9: There is continuous improvement of the educational experiences, to improve the residency program and ensure residents are prepared for independent practice.

- **Requirement 9.1.1:** There is a systematic process to regularly review and improve the residency program.
 - **Indicator 9.1.1.2:** There is an evaluation of the learning environment, including evaluation of any influence, positive or negative, resulting from the presence of the hidden curriculum.

For the Hidden Curriculum information sheet, click [HERE](#). Highlighted in this document is an overview of the Hidden Curriculum, why it's important in medical education, and best practices.

Policy Spotlight: Fatigue Risk Management (FRM)

FRM is a set of ongoing fatigue prevention practices, beliefs, and procedures integrated throughout all levels of an organization to monitor, assess, and minimize the effects of fatigue and associated risks for the health and safety of healthcare personnel and the patient population they serve (FRM task force, 2018). FRM is an important part of accreditation and can be found in program requirements 3.2.2 (The residency program uses a comprehensive curriculum plan, which is specific to the discipline, and addresses all the CanMEDS/CanMEDS-FM Roles) and 5.1.2 (Residency education occurs in a safe learning environment).

Procedures and Guidelines

Fatigue Risk Management

Categories: [FATIGUE](#) [WELLNESS](#) [PGME](#)

The PGME fatigue risk management policy can be found on the PGME website [HERE](#). The purpose of this policy is to provide guidance to residents and programs in reducing resident fatigue and to promote resident fatigue risk awareness and management within residency training.



RESOURCES

[Fatigue Risk Management in PGME](#)

[Fatigue Risk Management for Residents, Leaders, and Policy makes in Canadian Postgraduate Education](#)

Acknowledge. Act. Adapt.



[PGME Website](#)



For information and updates on Accreditation, please visit the new [Accreditation](#) section on the PGME website

Accreditation Standards

- [Program Standards](#)
- [Institution Standards](#)

QUESTIONS?

For all accreditation related matters and questions, please contact:
Audrey Kincaid: audrey.kincaid@usask.ca | 306-966-5536

SAVE THE DATE

PGME Program Directors & Program Administrators Workshop

TOPIC: *Fatigue Risk Management*

Thursday, March 30, 2023
1:00 pm – 4:00 pm

VIRTUAL WORKSHOP via ZOOM

Facilitated by Dr. Ayisha Kurji

