



PGME Selection Policy

Category:	Appointments, Curriculum, Assessments and Promotions
Responsibility:	Associate Dean, PGME
Approval:	PGME Committee
Date:	Date initially approved: June 2022 Date(s) reformatted or revised:

Purpose:

This policy establishes the guiding principles for the selection of applicants into residency positions in residency programs at the University of Saskatchewan through the CaRMS match process. The principles can be applied to selection outside the match process for transfer or sponsored training.

This policy is being written in accordance with the [CanRAC accreditation requirements](#).

Principles:

The University of Saskatchewan College of Medicine offers residency training leading to certification by the Royal College of Physicians and Surgeons, or the College of Family Physicians of Canada through residency training programs.

Applications for entry-level postgraduate positions in all primary certification programs, as well as applications for Family Medicine Enhanced Skills and Medicine Subspecialty programs at the University of Saskatchewan are made through the Canadian Resident Matching Service (CaRMS).

Definitions:

Associate Dean, Postgraduate Medical Education (PGME) the senior Faculty officer responsible for overall conduct and supervision of Postgraduate Medical Education within the Faculty in the College of Medicine. The Associate Dean, PGME reports to the Vice-Dean, Medical Education.

Best Practices in Application and Selection (BPAS) is a report published in 2013. In 2018, the Association of Faculties of Medicine of Canada (AFMC) endorsed the report. Following this endorsement all residency training programs were required to implement BPAS recommendations in their CaRMS program descriptions.

Canadian Resident Matching Service (CaRMS) is a not-for-profit organization that works in close cooperation with the medical education community, medical schools and medical

students/residents to provide an electronic application service and a computer match for entry into postgraduate medical training throughout Canada.

College of Family Physicians of Canada (CFPC) is the College of Family Physicians of Canada.

College of Physicians and Surgeons of Saskatchewan (CPSS) is the medical regulatory body responsible for the licensing of properly qualified medical practitioners in Saskatchewan.

Postgraduate Medical Education (PGME) Office refers to the Associate Dean, PGME and the administrative personnel who are responsible for coordination and administration related to the oversight of the residency training programs.

Program is the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians Canada accredited residency training program at the College of Medicine.

Program Director is the Faculty member most responsible for the overall conduct of the residency program in a given discipline and responsible to the Head of the Department and to the Associate Dean, PGME in accordance with the criteria of the RCPSC/CFPC. Responsibilities of the Program Director can also apply to the responsibilities of the Site Director in CFPC programs, where appropriately delegated to the Site Director by the Program Director.

Resident refers to postgraduate medical trainee enrolled in the RCPSC or the CFPC program.

Royal College (RCPSC) is the Royal College of Physicians and Surgeons of Canada.

Scope of this Policy:

The selection of residents is a program responsibility and must comply with [accreditation standards](#), the requirements of the PGME office and College of Physicians and Surgeons of Saskatchewan (CPSS), and applicable university policies. This policy has been adapted with permission from [Dalhousie University's Selection Policy](#) and the [University of British Columbia Selection Policy](#).

All residency training programs are required to implement [Best Practices in Application and Selection \(BPAS\)](#) recommendations in their CaRMS program descriptions to ensure a fair and transparent selection process for all applicants.

The PGME Office recommends all residency training programs adopt the following guiding principles of BPAS when developing program specific application and selection processes and guidelines:

- a) Selection criteria and processes should reflect the residency program's clearly articulated goals.
- b) Selection criteria and processes should reflect a balance of emphasis on all CanMEDS competencies.

- c) Selection criteria used for initial filtering, file review, interviews, and ranking should be as objective as possible.
- d) Selection criteria and processes should be fair and transparent for all applicant streams.
- e) Selection criteria and processes should promote diversity of the resident body (e.g. race, gender, sexual orientation, religion, family status), be free of inappropriate bias, and respect the obligation to provide for reasonable accommodation needs where appropriate.
- f) Programs should choose candidates who best meet the above criteria and most able to complete the specific residency curriculum and enter independent practice.
- g) Multiple independent objective assessments result in the most reliable and consistent applicant rankings.
- h) Undergraduate and postgraduate leaders and communities must engage in collaborative planning and innovation to optimize the transition between undergraduate and postgraduate as well as between specialty and subspecialty postgraduate programs for all learners.
- i) Postgraduate programs must be well informed of the educational needs of individual candidates to allow effective and efficient educational programming.
- j) Recognizing that past behavior and achievements are the best predictors of future performance, efforts should be made to include all relevant information (full disclosure) about applicant's past performance in application files.
- k) Applicants should be well informed about specialties of interest to them, including health human resources considerations.
- l) Programs must consider and value applicants with broad clinical experiences and not expect or over-emphasize numerous electives in one discipline or at a local site.
- m) Diversity of residents across postgraduate medical education programs must be pursued and measured.

Policy:

Each Program will establish its own processes and procedures for resident selection consistent with the principles and best practices described in BPAS and this policy. The selection processes must be fair, open and transparent.

The Program Director and the Resident Program Committee (RPC) should review the goals for the residency program on an annual basis, in advance of CaRMS program description submission deadlines. Factors to consider should include (but not limited to): mission and vision of division/department; local resource constraints; local and national needs; local and national human resource trends; local and national diversity in specialty; specialty-specific changes in practice. Programs should regularly assess the outcomes of their process to determine if program goals and BPAS principles are being met.

Residents should be selected on the basis of individual achievement and merit. A broad range of criteria may be taken into account including academic achievement, achievement in standardized tests, demonstrated learning or aptitudes, activities in and out of school and personal preparedness to undertake residency training.

If resident selection is facilitated through CaRMS, the program's process must comply with the requirements of the CaRMS matching process for that match cycle.

Selection Criteria and Process

The Program Director and RPC are responsible for determining the resident selection criteria and process. The criteria should be objective and reflect the goals of the program and criteria should take into account all CanMEDS competencies relevant to predict success in the discipline. There should be defined criteria for all applicant streams (if applicable). Key criteria for initial filtering, file review, interviews and ranking should be transparent and communicated to applicants via the CaRMS program description.

The selection criteria (including definition and weighting) and process should be communicated to all members involved in the selection process prior to file review. Use of information other than that contained in the application files should be defined ahead of applicant discussion and ranking.

If programs systematically use information other than that contained in application files and interviews, this must be consistent, fair and transparent for all applicants. Programs using such information must have a process to investigate and validate such information prior to considering it for selection processes.

Components of Selection Process

Initial Filtering and Shortlisting of Applicant Files

Initial filtering and shortlisting can be carried out by an individual (usually the Program Director) or a small working group and should be based on previously defined objective criteria.

File Review

The criteria and process for file review should be clearly communicated to all reviewers. If possible, individual file review should be performed by more than one reviewer. Programs should create a record of the file review results.

Interview

The criteria, including definition and weighting, should be communicated to members involved in the interview process, prior to the interview. The design and conduct of the interview should serve to further inform the selection committee about the applicant's CanMEDS competencies, and suitability for the program and discipline. Individual applicants should be interviewed by more than one individual.

Ranking

The criteria (including item weighting) and process of rank determination should be communicated to ranking committee members prior to the ranking discussion.

Applicant ranking should be based on information derived from multiple objective, independent assessments, determined prior to the ranking discussion. Programs should rank candidates in the appropriate order based on assessment and not based on whom committee members think will rank the program highly.

Programs must have a process to receive (and, when appropriate, investigate, validate and then produce for consideration to the selection committee) information from any source that alleges improper behavior of candidates. There should be a record of the ranking decision.

Conflict of Interest

Programs must establish and follow guidelines for management of conflict of interest in selection decisions. Any individual with an assessment role in the resident selection process must declare any potential conflict of interest to the program director. If needed, the PGME Associate Dean can be consulted regarding adjudication and handling of any conflict of interest.

Confidentiality

All individuals with an assessment role in the resident selection process must respect and maintain confidentiality of applicant identity, file contents, discussion, and decisions related to the entire resident selection process and must sign a confidentiality form.

Composition and Training of Selection Team

Selection teams should be comprised of individuals with a breadth of perspectives that reflect program goals. A program can choose to include residents in any part of the selection process. Residents must abide by the rules governing conflict of interest and confidentiality for all selection committee members. Selection team members should be trained in all aspects of the process relevant to their contribution.

Maintenance of Records

Programs should maintain records in accordance with the CaRMS contract and privacy legislation. Written records of major decisions (e.g. ranking summary list) should contain the least amount of information needed for the decision, and should be maintained in a safe and confidential manner for a minimum of one year after the decision. After one year it is strongly recommended that these records be permanently destroyed.

Responsibilities

It is the responsibility of the residency training program to ensure faculty and staff are aware of and adhere to the PGME Selection Policy. Residency training programs are responsible for the creation of their own selection policy processes.

Non-compliance:

Instances or concerns of non-compliance with this policy should be brought to the attention of the Associate Dean, PGME.

Procedures:

Each residency program is responsible for the creation of their own selection policy process and procedures document. The contents of the process and procedures document will be used for the program and selection information posted in the CaRMS program description. This information will also be provided to each selection committee member prior to file review and selection of shortlisted candidates.

Contact:

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