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Parent Policy: PGME Continuous Quality Improvement of Structure, Governance, and Learning Environment Policy

PGME Continuous Quality Improvement of Structure and Governance Procedure

Office of Accountability:	Faculty of Medicine & Dentistry (FoMD)			
Office of Administrative Responsibility:	Postgraduate Medical Education (PGME)			
Approver:	Vice-Dean, Education			
Classification:	Governance and Administration			
Scope:	PGME institution and members of the PGME community, including residency and Area of Focused Competence (AFC) programs.			

Overview

Continuous quality improvement (CQI) of our PGME institution requires embedding organizational processes to review, evaluate, and improve our governance structures and enhance our function. These governance structures and functions include those listed in the General Standards of Accreditation for Institutions with Residency Programs by the Canadian Residency Accreditation Consortium (CanRAC). Thus, we've used the accreditation standards to inform the governance structures and functions that our PGME institution aims to achieve, then regularly and systematically review, evaluate, and improve these governance structures and functions. Our procedure strives to align with the following institutional accreditation standards:

8.1.1: There is a systematic process to regularly review and improve the postgraduate governance and structure.

8.1.2: A range of data and information is reviewed to inform evaluation and improvement of the postgraduate governance and structure.

8.1.3: Based on the data and information reviewed, strengths are identified and action is taken to address areas identified for improvement.

Purpose

This document outlines the procedure governing the regular and systematic review, evaluation, and improvement of PGME structure and governance in keeping with the principles described in the parent policy.



PROCEDURE

1. COMPONENTS OF PGME STRUCTURE AND GOVERNANCE TO BE REVIEWED

The components of PGME structure and governance that will undergo regular review include:

- Performance of the leadership of the PGME office including the Associate Dean, PGME (or simply Associate Dean), Assistant Dean, PGME (or simply Assistant Dean), and Directors within the PGME office.
- b. Performance of the PGME office administrative personnel.
- c. All the activities and components listed in Appendix A of this document, including
 - i. The review of PGME processes and functions as outlined in the institutional accreditation standards.
 - ii. The function of the committees within PGME including the PGME Committee, its subcommittees, and other committees as required to execute the functions of PGME.

2. OVERSIGHT OF THE CONTINUOUS QUALITY IMPROVEMENT REVIEW

- a. Typically, FOMD's Vice Dean of Education (VDE) will conduct the review of the Associate Dean's performance.
- b. For the other components of PGME structure and governance review, the Dean of FOMD or Vice-Dean of Education may delegate someone, including the Associate Dean, to conduct or oversee the review. The Associate Dean may, in turn, appoint PGME Directors or others to conduct reviews of individual components of the PGME enterprise while overseeing organization of the entire review.

3. CONDUCT OF THE REVIEW, GATHERING OF DATA AND INFORMATION, AND ADDRESSING AREAS FOR IMPROVEMENT

- a. In the spirit of quality improvement, performance of the leadership within the PGME office will be reviewed as follows:
 - i. Associate Dean, PGME:
 - At least once per year, the VDE will meet with the Associate Dean to formally review performance and provide feedback.
 - The VDE will usually base this review on direct observation and input from multiple sources.
 - Together, the VDE and Associate Dean will develop and implement action plans for improvement.
 - ii. Assistant Dean, PGME:
 - At least once per year, the Associate Dean, PGME, will meet with the Assistant Dean to formally review performance and provide feedback.
 - The Associate Dean will usually base this review on direct observation and input from multiple sources.
 - Together, the Associate Dean and Assistant Dean will develop and implement action plans for improvement.
 - iii. Directors within the PGME office:
 - At least once per year, the Associate Dean, PGME, will individually meet with the PGME Directors within the PGME office to formally review performance and provide feedback.



- The Associate Dean will usually base this review on direct observation and input from multiple sources.
- Together, the Associate Dean and PGME Director will develop and implement action plans for improvement.
- b. Performance of the administrative personnel in the PGME office will be reviewed as follows:
 - i. The Faculty General Manager of FOMD or designate will conduct annual performance reviews of the Manager of PGME Administration, with input from the Associate Dean, PGME, in accordance with the applicable University collective bargaining agreement.
 - ii. The Manager of PGME Administration or the PGME Education Team Lead will conduct annual performance reviews of the administrative personnel in the PGME office in accordance with the applicable University collective bargaining agreement.
- c. Other areas of PGME governance and structure will undergo regular and systematic review as illustrated in the flowchart in Appendix A at the end of this document. The flowchart shows the following:
 - i. the components of PGME governance and structure that are reviewed.
 - ii. the data used to inform the reviews.
 - iii. the relevant portfolio leader or education stakeholder(s) tasked with evaluating the data and determining strengths and areas for improvement.
 - iv. the process to implement action plans and review the effectiveness of actions taken.

4. REPORTING AND ACCOUNTABILITY

- a. At least twice a year, the Associate Dean will provide a report of the review of PGME governance and structure to the Vice Dean, Education. The Associate Dean will also provide highlights of the report to the PGME Committee.
- b. Individual PGME Directors who oversee reviews of PGME governance and structure will annually report their findings to the PGME committee on a rotating basis throughout the year.



DEFINITIONS

Definitions are listed in the sequence they occur in the document (i.e. not alphabetical).

Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use.

General Standards of Accreditation for Institutions with Residency Programs	The General Standards of Accreditation for Institutions with Residency Programs are national standards that apply to the accreditation of institutions with residency programs. These standards are maintained by the Canadian Residency Accreditation Consortium which includes the Royal College of Physicians and Surgeons of Canada (RCPSC), College of Family Physicians of Canada (CFPC), and Collège des médecins du Québec (CMQ). The standards apply to faculties of medicine, postgraduate offices, and learning sites, written to provide a framework which aims to provide clarity of expectations, while maintaining flexibility for innovation.
Canadian Residency Accreditation Consortium or CanRAC	The Canadian Residency Accreditation Consortium is composed of the three residency education accrediting colleges in Canada: Royal College of Physicians and Surgeons of Canada (RCPSC), College of Family Physicians of Canada (CFPC) and Collège des médecins du Québec (CMQ).



Appendix A: Process to Review PGME Governance and Structure

PGME's Support to Programs - Accreditation and Curricular Requirements>Surveys to PDs, PAs, Residents, Internal and Accreditation Reviews>-Directors of PG Core Curriculum; Quality Improvement & Patient Safety -portfolio leader(s) develop an action improvement &PGME's Support to Programs - Social Accountability>Surveys to PDs, PAs, Residents>Directors of EDI; Indigenous Health; Office of Rural & Regional Health↓PGME Committee Structure and Function>Surveys to committee members, Chairs' reports>Committee ChairsThe responsible portfolio leader(s) implement the action planPGME Administrative Processes, Communication, Organizational Structure>Surveys to PDs, PAs, Academic Dept Managers, Vice Dean Education>Manager PGME Administration & PGME support for Programs' Trainee Assessment of Teachers>Surveys to PDs, PAs, Internal and Accreditation Reviews>Internal Review Cmte↓PGME's Oversight of Programs' Decision-making Process for Trainee Progression>Surveys to PDs, PAs, Internal and Accreditation Review and Accreditation Review policies, structure>PGME Associate Dean & Dept collected after the action plans are implemented. The data is then evaluated and further action plans are implemented. The data is then evaluated and further action plans are implemented. The data is then evaluated and further action plans are implemented. The ongoing cycle of continuous qualityPGME's Resource Support for PGME's Resource Support for PGME's Resource Support fo	Components of PGME Governance and Structure for Review	>	Data Collected for Evaluation	>	Individual(s) Responsible for Data Evaluation and Action Plan Development	> 	After evaluating the data, the PGME Associate Dean and responsible	
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