

Guiding Principles for Resident Assignment to Core Rotations General Psychiatry Residency Program

Background

Resident assignment to core rotations (aka “the match”) exemplifies the interdependence and collaboration required to support a robust and rigorous core psychiatry training program at the University of Toronto (UofT). Given the importance of resident assignment to core rotations within the residency program, this document is intended to facilitate an effective and transparent decision-making process that includes input from residents (via the Psychiatry Residency Program Committee or PRPC) and other residency program stakeholders.

Values

As with all key residency program activities, assignment to core rotations is guided by the University of Toronto, Department of Psychiatry’s values: excellence, justice, and accountability.

- Excellence – academic and operational excellence
- Justice – transparent, principle-based approach
- Accountability – involves key stakeholders

Principles of resident assignment

- The residency program should select the best sites to provide core and elective experiences across the full breadth of required training experiences for residents.
 - *Required training experiences* encompass the minimum standards set by the Royal College of Physicians and Surgeons of Canada (RCPSC) and by the University of Toronto, General Psychiatry Residency Training Program via the PRPC (Psychiatry Residency Program Committee).
- All residency programs are expected to provide opportunities at community sites (Psychiatry Standards of Accreditation, Element 3.2, Indicator 3.2.1.5). The standards do not specify how this is operationalized and as such, it is at the discretion of the Program Director and the Psychiatry Residency Program Committee (PRPC), with input from rotation coordinators and Division Directors, as needed, as to the number of residents assigned to community sites for core rotations during each academic year.
 - Element 3.2 The residency program provides educational experiences designed to facilitate residents’ attainment of the outcomes-based competencies and/or objectives.
 - Indicator 3.2.1.5: The educational experiences include opportunities for community-based learning outside the academic learning centre.

- As per direction from UofT PGME, residency programs should consider expansion to community sites with undergraduate medical training programs – i.e. Mississauga Academy of Medicine (MAM) -Trillium Health Partners (THP) and Scarborough Academy of Medicine and Integrated Health (SAMIH) -Scarborough Health Network (SHN) & Michael Garron Hospital (MGH)
- All sites must deliver a minimum standard as articulated by the RCPSC Accreditation Standards and UofT PGME Guidelines/Policies.
- Assignments of residents should be stewarded by the PRPC after due consideration of all the issues.
- The residency program must balance educational, operational, patient care, faculty supervisor, and learner experience impacts of fragmentation with resident choice/career exploration.
- Resident choice is integrated developmentally and increases with more advanced stage of training with greatest choice in Transition to Discipline (TTD/PGY5).

Considerations

- Academic excellence - *Minimum specifications* for core rotations will be articulated by rotation coordinators, in consultation with faculty members who lead the rotations across the hospital sites and aligned with RCPSC Psychiatry Competencies and Psychiatry Training Experiences. These “minimum specs” will be reviewed and approved by PRPC. Selection of sites will be approved by PRPC. All sites must meet minimum specifications requirements.
- Learner experience, site-based resources, and educational experience - All sites must provide a high-quality clinical experience which includes a safe learning environment, appropriate clinical supervision, facilities, administrative support, and adequate patient volumes for a robust clinical exposure.
- Safety - All sites must “pass” site safety reviews by the Safety Subcommittee to remain clinical training sites.
- Data-informed approach - The Program Evaluation Subcommittee will review data pertaining to the learner experience and quality of clinical rotations to inform the PRPC about resident placement at sites including but not limited to EPA completion rates by faculty, RES (rotation evaluation scores), TES (teaching evaluation scores), and bi-annual site and residency program surveys.
 - The number of residents placed at a clinical site can be modified by the Program Director and PRPC as per Program Evaluation data about the quality of the learning and clinical/work environment.
- Service, Education, and Professional Practice - Assignment of residents to sites should also consider residents’ roles as service providers as per the PARO collective agreement, postgraduate medical learners at the University of Toronto, and members of a regulated health profession as per their CPSO postgraduate education certificate.
- Faculty leadership for residency education - All sites must have a Postgraduate Education Site Director to steward residency education at the site along with robust administrative support for the residency program portfolio.
- Sites participating in **core rotations** must actively support the academic mandate of the University of Toronto, Department of Psychiatry through:
 - An overarching commitment to the academic mission.

- Faculty development for all teachers as required by the Department of Psychiatry and General Psychiatry Residency Program.
- Resident leadership for sites with > 6 residents at any point in time – i.e. Chief residents who support hospital operations along with medical student teaching. Chief residents should be supervised and mentored by the PG Site Director +/- Psychiatrist-in-Chief/Head or equivalent.
- Funding for Resident Community Building at site (amount allotted determined per resident and duration of core rotations), with programming organized and allocated by PG Site Director and Chief Resident.
- Resident learning opportunities & assessment including but not limited to:
 - Resident education
 - Critical Appraisal/Evidence-Based Medicine/Grand rounds
 - Formative and summative STACERs in the Foundations and Core of Discipline Stages of training (FOD and COD)
 - Opportunities for residents to teach junior learners (in most cases this refers to medical students but can also include junior/TTD + early FOD residents)
 - Faculty responsibilities
 - Timely and regular completion of Entrustable Professional Activities (EPAs) by faculty supervisors
 - Coaches/participation in Psychiatry Competence Subcommittee (PCS)
 - Timely completion of ITARs (in training assessment reports)
 - Participation in informal (within program) remediation/support plans for residents under review by the Resident Assessment Sub-committee (RASC)
 - Formal (Board of Examiners or BOE-PG) remediation/support plans
- Faculty for core teaching (curriculum development and delivery) along with leadership for core rotations (i.e. rotation coordinators)
- Faculty to lead and participate in other important residency program portfolios (e.g. Chair of Resident Assessment and Support Subcommittee, PGY5/TTP Curriculum Lead, participation in residency program subcommittees and working groups)

Implementation

- Core rotations (RCPSC or UofT requirement, Child and Adolescent Psychiatry exception) – Toronto Academic Health Sciences Network (TAHSN) full-affiliate sites (a.k.a. academic hospitals/sites) provide the majority of placements.
- The number of placements is determined annually before “match day” and is “right sized” to the number of residents - for example, total # of residents + 10%. The “extra” placements allow the residency program to be responsive to unforeseen circumstances.
- Rotation coordinators provide proposals to PRPC as to the number of placements at academic and community sites available at each site per block *prior* to match day.
- PRPC reviews the sites and placements, considering proposals from rotation coordinators, Program Evaluation data, and participation of sites in activities supporting

the academic mission of the Uof T Department of Psychiatry, to inform the number of placements at each site in preparation for “match day.”

- Given the complexity of the CAP (Child and Adolescent Psychiatry) rotation and number of community sites, floors/ceilings for the CAP rotation will be determined in close collaboration with the CAP Core Rotation Coordinator.
- Geriatric Psychiatry placements will also be conducted in coordination with the Geriatric Psychiatry Subspecialty Program Director via the Geriatric Psychiatry rotation coordinator for the General Psychiatry Residency Program.
- The residency program will make every effort to try and place residents (as per resident preference) at geographically disadvantaged sites (further from the core downtown Toronto sites) across core rotations in PGY3 and 4.

Note: The Program Director with Vice Chair Education and Chair, Department of Psychiatry, along with the Associate Dean, PGME reserves the capacity to redeploy residents from any site due to significant learner experience or other safety concerns.

Key Resources

- Psychiatry Competencies

<https://www.royalcollege.ca/rcsite/documents/ibd/psychiatry-competencies-e.pdf>

- Psychiatry Training Experiences

<https://www.royalcollege.ca/rcsite/documents/ibd/psychiatry-training-experiences-e.pdf>

- Psychiatry Standards of Accreditation

<https://www.royalcollege.ca/rcsite/documents/ibd/psychiatry-sa-e.pdf>

- University of Toronto, Postgraduate Medical Education (UofT, PGME) Guidelines for the Assignment and Removal of Trainees from Teaching Sites

<https://pgme.utoronto.ca/wp-content/uploads/2019/06/Assignment-and-Removal-PGMedicalTrainees-Teaching-Sites.pdf>

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