Dear PGY1 Residents:

It has come to our attention, both through the Learner Experience Committee and through feedback at the different sites, that there is concern about the absence of an academic half-day in the new PGY2 curriculum. This communication aims to clarify several points on this issue:

1) Didactic teaching as it stands was never a part of the CBD curriculum once the PGY2 year converted entirely over to this new model. The pilot varies slightly in that there was need for consistency between CBD and non-CBD residents in the same year and thus pilot residents have thus far been included in part of the didactic teaching on Wednesdays. Though residents have enjoyed the social cohesion of this model, several challenges have also been identified such as creating increased stress in the clinical setting (due to disruption of time on site) and a high burden of travel.

2) Education research has consistently found that didactic teaching is not the most efficient way of learning content. With the transition to the new curriculum, we are aiming to include more evidence-based educational methods to improve the experience of our learners. Though the details have not yet been finalized, you can likely expect a mix of different educational activities to cover the content that has previously been taught through didactic teaching. We will not be removing lectures altogether, but instead reducing the number of lectures and ensuring that each lecture given is of the highest quality. Other educational activities will be completed in protected time, therefore not increasing the onus on the resident for their education.

3) Finally, attendance has traditionally been poor at didactic teaching throughout the years of the program. This pattern suggests that residents have not been finding didactic activity to be useful. There is also a challenge regarding how to evaluate these absences with respect to professionalism. Over the years, the program has tried multiple methods of assessment regarding professionalism, but none have seemed to impact attendance rates. This phenomenon begs the question, again, if residents are not attending because it has not been found to be a worthwhile activity.

With that being said, the program remains cognizant of the fact that didactic days have also served the function of promoting social cohesion and wellness, given the break they provide from clinical work, and that some sessions have been highly valued. Hence, we are maintaining the PGY1 academic half day for future cohorts. We aim to remain attentive to these factors in the upper years of the program and hope to be inventive in coming up with new and useful activities that can serve this function, including, but not limited to, didactic lectures.

Kind regards,

Mark, Sarah, Deanna and Sarah