

# UBC Public Health & Preventive Medicine Residency Program Committee – Terms of Reference

Version: November 2022 | Committee Approved: November 18, 2022 | PGME Dean Approved: Forthcoming

## Purpose

The Residency Program Committee (RPC), in collaboration with the Program Director (PD) oversees all aspects of postgraduate residency training Public Health & Preventative Medicine (PHPM) at UBC. This includes educational design, policy and process development, selection of residents, assessment of resident progress, resident safety and wellness, and continuous quality improvement.

## Reporting

The RPC reports to both the Associate Dean of Postgraduate Medical Education (PGME) and to the Associate Director of Education at the School of Population and Public Health (SPPH) in the UBC Faculty of Medicine (FOM).

## Responsibilities

- Support the design, planning, implementation, and evaluation of educational activities that contribute to a resident's learning experience over the course of their 5-year program.
- Determine the UBC PHPM academic and clinical training requirements that meet, at a minimum, those outlined by the Royal College of Physicians and Surgeons of Canada (RCPSC) for PHPM.
- Evaluate key functions of the residency program using a range of data and information from multiple sources, and make recommendations for change in a manner that supports continuous quality improvement.
- Be familiar with and adopt relevant or required UBC PGME and SPPH policies and procedures, and review and approve policies and procedures that are specific to the PHPM program.
- Ensure that each health authority or agency teaching site has an effective organizational structure to facilitate educational activities, including a designated site faculty lead and site coordinator. [structure, process]
- Engage with local site teaching faculty and encourage additional [expectations of SPPH appointments, HOC]
- Provide advice on operational and resource planning to support residency education and the residency program, and ensure that there is an effective process to identify, advocate for and plan for additional resources as needed.
- Actively seek feedback from residency program stakeholders including health authorities, agencies, residents, clinical faculty, and academic faculty to identify issues, develop action plans, and resolve any gaps.
- Communicate decisions and actions in a timely manner to the program's residents, teachers, and administrative personnel, and with other relevant stakeholders.
- Engage in the selection of candidates for admission to the program, or establish a subcommittee to do so on behalf of the RPC.
- Ensure that the program meets or exceeds the general and specific standards of postgraduate residency training.
- Establish Standing Committees and ad hoc working groups as it deems necessary to execute its
  responsibilities, and delegate to them such duties as it sees fit. Review and approve minutes for
  standing committees.

- Collaborate with FOM's Undergraduate Medical Education (UGME) and Continuing Professional Development (CPD) programs as appropriate to support resident training.
- Provide a mechanism for resident appeals for residents and make recommendations when further action is warranted.

## Committee Member Responsibilities

- Bring forward issues or concerns raised by internal or external stakeholders for discussion, and provide advice and insights into solutions.
- Attend all regularly scheduled and ad hoc committee meetings OR send a designate on their health authority or agency's behalf.
- Actively participate in committee discussions and decision making representing the views and perspectives of their health authority or agency.
- Engage in activities that support the PD and program operations team in meeting the committee responsibilities including participation in subcommittees.
- Ensure effective communication and collaboration between the residency program, supervising clinical faculty, and site coordinators.
- Maintain an active appointment with UBCs Faculty of Medicine preferably but not exclusively within the SPPH.

## **Operations**

- Chaired by the PD or faculty designate, meetings will be held bi-monthly on the first Friday of the month with additional meetings called as required by the Chair.
- Meetings will normally be 90 minutes in length but may be extended as required.
- Agenda items are to be submitted one week in advance.
- The agenda will be prepared by the Chair and circulated along with related materials a minimum of 72 hours prior to the meeting.
- Quorum for meetings is minimum one-half of members including at least one health authority faculty, one specialty agency faculty, and one resident.
- Motions will be put forward by the Chair or any voting committee member for formal decisions for discussion.
- Decisions will be made based on consensus or a two-thirds majority of voting members in attendance.
- Both the motion put forward for formal decision and the voting results by number will be recorded in the minutes. Reason for voting member's abstention must be recorded and does not count as a 'no' vote.
- An asynchronous vote by email on a question or motion may be called at the discretion of the Chair.
- Meetings will be recorded for administrative purposes and summarized in minutes by the Program Manager of the residency program within two weeks of the meeting.
- Draft minutes for each meeting will be presented at the subsequent meeting for review and approval by the committee.
- Approved minutes will serve as the official record of the committee's deliberations.
- Regular minutes will be made available to all committee members, current residents, the Associate Director Education SPPH, and the Office of PGME
- In-camera minutes (resident progression, resident HR) will only be available to residents through appropriate mechanisms under UBC PGME guidelines and FIPPA legislation.

#### **Evaluation**

A full review of the terms of reference, deliberations and effectiveness of the RPC will be conducted annually by the committee or its designate subcommittee with the results of that review to be presented to the Committee for discussion and action.

## **Standing Committees**

#### Internal Residency Committee

The purpose of the Internal Residency Committee is to provide a forum for discussion between residents, the PD, and SPPH program staff on issues relevant to training experience and its day-to-day operations. This includes providing input into and/or making decisions regarding curriculum design, resident engagement, and resident wellness.

#### Competence Committee

The purpose of the Competence Committee is to review each resident's progression through 4 stages of training across the 5-year PHPM program and make decisions related to promotion, remediation, and probation. This includes supporting increasing professional responsibility providing recommendations for training experiences to ensure each learner achieve the competencies of a PHPM specialist physician, and advising on Individual Education Plan (IEP) (including return-to-work, remediation, and probation).

#### Selections Committee

The purpose of the Selections Committee is to prepare for and participate the selection of new residents through the medical student Canadian Resident Matching Service (CaRMS) or the re-entry physician application process. This includes reviewing selection policies and processes, ensuring reference materials are up-to-date, participating in file reviews and interviews, and putting forward a final rank list.

#### Educational Design Committee

The purpose of the Educational Design Committee is to ensure that all academic and clinical training experiences meet the requirements of the RCPSC and support the learning needs of resident trainees. This includes evaluating current training experiences, developing new training experiences, implementing changes as required and ensuring continuous quality improvement (CQI).

#### Resident Wellness Committee

The purpose of the Resident Wellness Committee is to promote a positive and supportive learning environments that understand and model physician wellness as an essential component in the delivery of high-quality health care. This includes ensuring that learning environments that are free of harassment or bullying, and that mechanisms are in place to support resident safety, health and wellbeing.

#### Other

As determined over the course of the year by the Chair and/or RPC based on the needs of the program.

# Membership

The composition of the RPC will be reviewed on an annual basis and may be subject to change over the course of a year at the discretion of a health authority or an agency. Voting members and delegates must hold a UBC faculty appointment or be an active PHPM resident. Faculty members should be PHPM specialists where possible and appropriate.

Two positions must be reserved for PHPM residents (one appointed, and one elected by resident body).

<u>Committee members are requested to commit to a 3-year term (2-year minimum) and extensions are possible.</u>

	Role	Name
Voting Members:		
Program Director and Faculty Advisors		
1.	Program Director (Chair)	Dr. Trevor Corneil
2.	Public Health Practice Advisor	Dr. Lindsay Bowthorpe
3.	Applied Research Advisor	Dr. Geoff McKee
4.	Resident Wellness Co-Leads	Drs. Sue Pollock & Olivia Sampson
Health Authority Faculty Site Leads:		
5.	Vancouver Coastal Health (VCH)	Dr. Mark Lysyshyn
6.	Fraser Health Authority (FHA)	Dr. Ingrid Tyler
7.	Vancouver Island Health Authority (VIHA)	Dr. Sandra Allison
8.	Interior Health Authority (IHA)	Dr. Carol Fenton
9.	Northern Health Authority (NHA)	Dr. Rakel Kling
10.	First Nations Health Authority (FNHA)	Dr. Kamran Golmohammadi
Supporting Agency Faculty Site Leads		
11.	BC Centre for Disease Control (Communicable Disease)	TBD
12.	BC Centre for Disease Control (Environmental Health)	Dr. David McVea
13.	WorkSafe BC (Occupational Health)	Dr. Olivia Sampson
14.	Office of the Provincial Health Officer	Dr. Martin Lavoie
Resident Representatives (minimum two):		
15.	Chief Resident	Ex-officio
16.	Elected Resident	Ex-officio
Non-Voting Members:		
17.	Past PHPM Program Director	Dr. David Moore
18.	Associate Director of Education, School of Population and Public	Dr. Hugh Davies
	Health	
19.	Senior Education Manager, School of Population and Public	Lisa McCune
	Health	
20.	Program Manager, PHPM Program	Rishi Chatterjee