# Program Operations – Educational Experience (Part 1)

April 2023

This document highlights some of the key operational process improvements made to the PHPM program over the last two years and illustrates some features of the newly redesigned program.

Indicates program changes since May 2022 Internal Accreditation Review

### **Program Structure**

The resident learning experience has been updated to better reflect the RCPSC training requirements. See attached rotation map that outlines three pathways through the PHPM program:

- Standard PHPM program
- Combined program (combines PHPM with Family Practice)
- Re-entry program

#### **Public Health Training**

- Expanded opportunities for public health practice in all 5 regional health authorities
- New program structure integrates residents into MHO practice for an improved learning experience
  - Residents are required to complete minimum 12 months public health practice at three different health authorities (including one outside the Lower Mainland)
- Public health training is integrated into the resident experience throughout all five years of training
  - Residents complete Intro to Public Health rotations during their first year of academic training
  - Residents complete public health electives during their Basic Clinical Year or Family Practice training

#### Master of Public Health

- Reviewed and renewed academic foundations training with a Senate-approved 42-credit PHPMspecific pathway through the Master of Public Health program
- This revised curriculum allows residents to complete the MPH program in 12 months during their first year of residency
- The revised curriculum also ensures that MPH coursework and the MPH practicum are aligned with PHPM residency training objectives
- The Competence Committee clarified expectations regard resident performance during the MPH (residents expected to meet minimum UBC Graduate & Postdoctoral Studies requirements for grades)
- Approved for tuition subsidization by PGME

#### **Basic Clinical Training**

 Developed a PHPM basic clinical training year pathway that better reflects the required clinical foundations of public health practice

## Resident Research

- Under the leadership of the Faculty Research lead, the PHPM program has designed and implemented a research curriculum
- Expectations for resident research have been clarified and outlined in a research syllabus
- SPPH now hires a Research TA to support the delivery of the research curriculum through AHD

## **Competencies & Resident Assessment**

#### Competency Database & Rotation Guides

- The PHPM Educational Design Committee has created a competency database
  - Competency database allows residents to track progress towards learning objectives and competencies
- Rotation guides have been developed for all core PHPM rotations, outlining objectives, expectations per stage of training, and evaluation (see attached example)
  - Rotation guides help residents and preceptors define rotation learning objectives and help ensure resident activities during each rotation are aligned with the competencies the resident needs to develop

#### Resident Assessments

- The PHPM program has implemented workplace-based assessments (WBAs) that provide frequent, low-stakes feedback to residents
- Newly redesigned ITERs are rotation-specific and evaluate residents based on their stage of training
- Resident progression is assessed twice per year (mid-year and end-year) by the Competence Committee. Resident assessment is based on a variety of sources (outlined in the attached Resident Assessment Policy).
  - Resident e-portfolios gather relevant materials for assessment over the course of a resident's training, and are accessible by both the resident and the Competence Committee
  - Resident experiencing difficulty are assigned a group of Competence Committee faculty to work with them directly to support their learning needs