PGY1	SAMPLE	I FARNER	SCHEDULE FOR	PSYCHIATRY
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BLOCK #	1	2	3	4	5	6	7	8	9 10	11	12	13	2 to 13
CBD STAGE	Transition to Discipline (TTD)			Foundations of Discipline (FOD)									
ROTATION ¹ (Sites)	Ground School (CAMH, MSH, SHSC, SMH, UHN)	Addictions Psychiatry (CAMH, MSH, SHSC, SMH)	Psychiatry Emergency (Home site ² : SHSC, SMH, UHN)	Psychiatry Emergency (CAMH) ³	Consultation- Liaison Psychiatry (MSH, SHSC, SMH, UHN)	PLEX [Clinical/Research] or Underserved (Various sites)	Family Medicine (CAMH) or Paediatrics ER (HSC)	General Interr Medicine-CTU (MSH, SHSC, SMH, UHN)		Cognitive Neurology & Neuropsychiatry (SHSC)	Emergency Medicine (MSH, SHSC, SMH, UHN)	Palliative Care (MSH, SHSC, SMH, UHN)	Outpatient Experience ⁴ (CAMH, MSH, SHSC, SMH, UHN, WCH)
ASSESSMENTS View PGY1 EPA Rotation Cards View PGY1 EPA Map View Overall EPA Requirements View Royal College EPA Document Generally residents should aim to attempt at least 1 EPA	PRIORITY EPAS TTD1 TTD2 Other ITAR6	PRIORITY EPAS FOD1 Other ITAR AS ABLE EPAS TTD1 TTD2 FOD2 FOD3 FOD4 FOD5	PRIORITY EPAS FOD4 Other ITAR; Self-Reflection Form AS ABLE EPAS TTD1 TTD2 FOD2 FOD3	orm ⁷	PRIORITY EPAS FOD1 FOD2 FOD3 FOD4 FOD5 Other ITAR AS ABLE EPAS TTD1 TTD2	PRIORITY EPAS Applicable FOD EPAS Other ITAR COPE Exam® AS ABLE EPAS TTD1 TTD2	PRIORITY EPAs FOD1 Other ITAR	PRIORITY EPAS FOD1 FOD5 Other ITAR AS ABLE EPAS TTD2	PRIORITY EPAS FOD1 FOD5 Other ITAR; Self- Reflection Form	PRIORITY EPAS FOD1 Other ITAR AS ABLE EPAS FOD5	PRIORITY EPAS FOD1 Other ITAR	PRIORITY EPAs FOD1 Other ITAR	PRIORITY EPAS TTD1 TTD2 Other ITAR AS ABLE EPAS FOD2 FOD3 FOD4
a week. ⁵ REQUIRED TRAINING EXPERIENCES View the Royal College Training Experiences document	Clinical TTD 1.1 Any psychiatric clinical setting and/or simulated psychiatry experience	Clinical (may include) FOD 1.1.1 Adult inpatient FOD 1.1.2 Adult outpatient FOD 1.5.2 Community psychiatry FOD 1.1.3 Emergency, including after hours coverage	Clinical FOD 1.1.3 Emerg after hours cover		Clinical FOD 1.5.3 Consultation Liaison FOD 1.1.3 Emergency, including after hours coverage	Clinical FOD 1.1 Psychiatry FOD 1.1.3 Emergency, including after hours coverage	Clinical FOD 1.2 Medical inpatient service FOD 1.5.4 Family Medicine or FOD 1.5.8 Pediatrics	Clinical FOD 1.5.5 General Intern. Medicine or oth medical subspecialty FOD 1.2 Medic inpatient servic FOD 1.2.1 Afte hours coverage the medical service	her SS	Clinical FOD 1.3 Neurology May include: FOD 1.5.6 Geriatric Medicine	Clinical FOD 1.4 Emergency Medicine FOD 1.2.1 After hours coverage of the medical service	Clinical FOD1.5.7 Palliative care	Clinical FOD 1.1.1 Add outpatient FOD 5.3 Longitudinal psychiatry clin

¹ Rotation order shown is a **sample**. All PGY1s have 1 month of Ground School in July but the following rotations may appear in a different sequence. Grey shaded rotations denote on-service/psychiatry rotations, non-shaded rotations = off-service. ² MSH does not have a home Psych ER service. MSH home-site residents complete both Psychiatry ER rotations at CAMH.

³ All residents complete one Psych ER block at CAMH in addition to Psych ER at their home site.

⁴ **Outpatient Experience** is a once weekly, half-day experience in PGY1. Timing and day of the week will depend on each site.
⁵ **EPAs**: PGY1s are encouraged to attempt at least 1 EPA per week. Residents can always do more if they can. You do not have to be rated as entrustable on every EPA.

⁶ **ITARs**: In-Training Assessment Reports are the end-of-rotation assessment reports and are completed by the resident's primary supervisor via <u>POWER</u>. Supervisors are typically assigned by your homesite site administrator. ⁷ Self-Reflection Form: Residents must submit this mandatory form prior to each Psychiatry Competence Subcommittee review. This is typically done in Oct & Apr. Residents will be notified ahead of time regarding deadlines.

⁸ COPE Exam is offered online, once a year and is typically written in the Fall, however, the timing of the exam is subject to change. Residents will be emailed before the exam becomes available with instructions on timelines and access.

PGY1 SAMPLE LEARNER SCHEDULE FOR PSYCHIATRY													
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OTHER TRAINING EXPERIENCES ⁹	ACLS & BLS TIDES	AHD Outpatient Experience Meet with Coach ¹⁰	AHD Outpatient Experience	AHD Outpatient Experience Meet with Coach	AHD Outpatient Experience	AHD Outpatient Experience Meet with Coach	AHD Outpatient Experience	AHD Outpatient Experience Meet with Coach	AHD Outpatient Experience	AHD Outpatient Experience Meet with Coach	AHD Outpatient Experience	AHD Outpatient Experience Meet with Coach	AHD
PSYCHIATRY COMPETENCE SUBCOMMITTEE (PCS) KEY DATES ¹¹				Data cut: October 8, 2023	PCS Review: November				Data cut: April 7, 2024		PCS Review: May		

PGY1 Block Schedule is available on the PGME website: https://pgme.utoronto.ca/current-trainees/while-youre-training/common-rotation-schedules/

⁹ AHD = Academic Half Day occurs Wednesday mornings from 9am to 12pm. The AHD includes the PGY1 General Psychotherapy Seminar Series which occurs every Wednesday from 8am to 8:50am. For more details, refer to PGY1 Core Curriculum Schedule on Quercus > PGY1-5 Schedules and Documents > Curriculum Schedules

¹⁰ Coaching: Each resident is assigned a CBD Coach. The program recommends residents connect with their coach q2months i.e. August, October, December, February, April, and June. The frequency of meetings can be titrated up or down based on the needs of the resident. The purpose of these meetings is to help the resident navigate any issues within the program, to review assessment data such as ITARs, EPAs, etc., and to help the resident make connections in areas of interest.