

Co-Creating a Logic Model for Program Evaluation of General Psychiatry Residency Program with Resident, Faculty, Program, and Hospital Site Representatives

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BACKGROUND

- Program evaluation is an essential component to provide evidence to prove and improve a program's quality and effectiveness.
- The Department of Psychiatry planned a half-day online retreat for the General Psychiatry Residency Program, with a focus on program evaluation, in September 2021.
- The didactic portion of the retreat provided an overview of the purpose of program evaluation and the use of a logic model to guide program evaluation of the General Psychiatry Residency Program.

OBJECTIVES

To co-create a feasible and sustainable framework (i.e., a Logic Model) for program evaluation of General Psychiatry Residency Program with resident, faculty, program, and hospital site representatives.

METHODS

- Four breakout groups were arranged (via Zoom) during the online retreat, representing the four core types of stakeholders/parties of the General Psychiatry Residency Program, including:



- Each breakout group was led by a facilitator who was involved in administration of the General Psychiatry Residency Program.
- Insights and feedback from retreat participants regarding the "input", "activities", "outputs", and "outcomes" components of the Logic Model (proposed by the retreat organizing committee), in addition to external factors and unintended outcomes of the General Psychiatry Residency Program were discussed and collected.
- A debrief and large group discussion took place after the breakout group session.

CONCLUSION

- A logic model was developed with key stakeholders to set priorities and guide program evaluation of the General Psychiatry Residency Program.
- This framework can be referred to (1) monitor actions and activities for achieving desired residency program outcomes; (2) collect and analyze data to prove and improve our program on an ongoing basis; and (3) document and reflect on short-term (e.g., program-related) and long-term (e.g., system-wide) accomplishments or changes as a result of the residency program.
- We also take into considerations of external factors and unintended outcomes of the General Psychiatry Residency Program while ensuring feasibility and sustainability of the evaluation efforts.
- We hope that by gathering insights and suggestions from the retreat participants, the Department of Psychiatry can improve the delivery and ongoing program evaluation of the General Psychiatry Residency Program.

RESULTS

	PROCESS EVALUATION			OUTCOME EVALUATION	
	INPUTS	ACTIVITIES	OUTPUTS	SHORT-TERM OUTCOMES	LONG-TERM OUTCOMES
	RESIDENTS	<ul style="list-style-type: none"> • Recruitment of residents • Admission of residents • Development of Wellness Subcommittee (as part of PRPC) 	<ul style="list-style-type: none"> • Orientation (Springboard) • Core curriculum • Academic half-days • PRAT • Wellness needs assessment 	<ul style="list-style-type: none"> • PCS reports (EPAs, Grand Rounds Evaluations, ITARs/ITERS, Practice / General / Exit STACERS, COPE Exam Results) (# of residents progressing as expected) • RASC reports (# of residents referred to BOE) • Resident self-reflections • PRAT TOR & minutes • Wellness strategy (aligned with the APA Wellbeing Ambassador Framework) 	<ul style="list-style-type: none"> • Resident perceived confidence in transition to practice (readiness to practice) • Resident-perceived sense of wellbeing
FACULTY	<ul style="list-style-type: none"> • Recruitment of preceptors, supervisors, coaches • Faculty development 	<ul style="list-style-type: none"> • Faculty orientation • Promotions Primer • Mentorship program • CFD Workshops: Customized Series for Psychiatry • Recruitment of residents • Orientation (Springboard) • Core curriculum (teach, precept, supervise, coach) • Academic half-days (teach, precept, supervise, coach) 	<ul style="list-style-type: none"> • # of new preceptors, supervisors, coaches recruited • # of faculty participated in: Faculty orientation, Promotions Primer, Mentorship program • CFD Workshops: Customized Series for Psychiatry • CaRMS participation (# of faculty members as interviewers or program ambassadors) • Assessment of residents • Evaluation of curriculum • Evaluation of hospital sites • TES 	<ul style="list-style-type: none"> • Faculty perceived career development / satisfaction as preceptors, supervisors, coaches 	<ul style="list-style-type: none"> • Faculty promotion and tenure • Faculty recruitment & retention • Faculty recognized (internally or externally) for excellence and innovation in teaching, research, education scholarship, quality improvement (QI) or creative professional activity (CPA)
PROGRAM	<ul style="list-style-type: none"> • U of T Psychiatry Residency Curriculum <ul style="list-style-type: none"> ❖ Consider a focus on rotation structure and sequence • Department of Psychiatry CBD Resources <ul style="list-style-type: none"> ❖ Consider CBD resources as per Psychiatry Competence Subcommittee (PCS) • Clinician Scientist Program • Clinician Scholar Program • Subspecialty Programs • Special resident pools within program (e.g., IMGs, VISA IMGs, transfer, re-entry residents) 	<ul style="list-style-type: none"> • CaRMS • Clinician Scientist Program: orientation; resources & support • Clinician Scholar Program: orientation; resources & support • Subspecialty Programs: orientation; resources & support • Special resident pools within program (e.g., IMGs, VISA IMGs, transfer, re-entry residents): orientation; resources & support • Royal College exam 	<ul style="list-style-type: none"> • # of applicants, interviews, residents ranked, residents admitted • # of residents admitted to Clinician Scientist Program • # of residents admitted to Clinician Scholar Program • # of residents admitted to Subspecialty Programs • # of residents admitted to special resident pools within program (e.g., IMGs, VISA IMGs, transfer, re-entry residents) • Passing rate of Royal College exam 	<ul style="list-style-type: none"> • % residents matched, transitioned to practice, transitioned to further training (e.g., fellowships) • % residents graduated from Clinician Scientist Program, Clinician Scholar Program, Subspecialty Residency Programs, special resident pools within program (e.g., IMGs, VISA IMGs, transfer, re-entry residents), General Psychiatry Residency Program 	<ul style="list-style-type: none"> • Scholarly productivity of residents/graduates in Clinician Scientist Program & Clinician Scholar Program • % of General psychiatrists in Canada trained at U of T • % Child and Adolescent psychiatrists in Canada trained at U of T • % Forensic psychiatrists in Canada trained at U of T • % Geriatric psychiatrists in Canada trained at U of T • % IMG / VISA IMG psychiatrists in Canada trained at U of T
HOSPITALS	<ul style="list-style-type: none"> • Hospital CBD resources • Clinical space and time • Administrative staff support • Hospital leadership support • Interprofessional healthcare team • Patients, family, caregivers • Resident lunches or benefits 	<ul style="list-style-type: none"> • Resident rotation schedule • Site-specific orientation • Proactive site safety reviews & retrospective reviews of critical safety incidents 	<ul style="list-style-type: none"> • # of hospital sites and residency rotations • RES • # of site surveys completed (every 6 months) • Safety Subcommittee reports (Safety Checklist & Safety Site Visit Template developed by the RSS) 	<ul style="list-style-type: none"> • Safe and effective clinical practice environment for residency training 	<ul style="list-style-type: none"> • Hospital site recruitment & retention • Residency (new) rotations recruitment & retention • Hospital sites recognized (internally or externally) for excellence and innovation in teaching, research, education scholarship, QI or CPA

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EXTERNAL FACTORS

- [Royal College Specialty Training Requirements in Psychiatry](#)
- [U of T PGME CBME](#)
- COVID-19 pandemic (public health protocols)
- Changes in practice (e.g., virtual care, more consultation & community engagement)
- Social and structural determinants of health
- Interactions between/among hospital sites, universities, & Professional Association of Residents of Ontario (PARO)

UNINTENDED OUTCOMES

- "Training to the test" rather than preparing for real-life practice in an authentic, values-driven manner (e.g., residents choosing to seek preceptor completion of EPA assessments only when entrustment (autonomy or excellence) was achieved)

