



Call Subcommittee Terms of Reference General Psychiatry Residency Program

Purpose

Given the importance of the on-call experience for psychiatry residents with regards to competency requirements as per the Royal College of Surgeons of Canada (RCPS) and service requirements as per the PARO-OTH collective agreement, the Call Subcommittee works with key stakeholders within the residency program alongside seeking consultation outside of the residency program as needed to ensure a robust educational and workplace experience for residents.

In the General Psychiatry Residency Program at the University of Toronto, on-call or call is understood to refer to after-hours coverage for emergency psychiatry services or coverage of the aforementioned services on weekends or holidays.

RCPS Required Training Experiences

- Foundations of Discipline (FOD)
 - 1.1.3. Emergency, including after-hours coverage

- Core of Discipline
 - 1.1.8. After-hours coverage for psychiatry and/or one of its subspecialties, including psychiatry emergency and inpatient unit

- Transition to Practice
 - 1.2. After-hours coverage for psychiatry or one of its subspecialties

The goals of the working group are to:

1. Ensure continuity and preservation of institutional memory given the complexity of the residency program (e.g. multiple sites, large faculty and number of residents).
2. Iteratively review the General Psychiatry Residency Program Call Allocations Guidelines document in collaboration with PRAT, and any other key residency program working groups and subcommittees (e.g. Safety Subcommittee), with input from the relevant full affiliate [TAHSN](#) PIC/Hs (Psychiatrist-in-Chief/Heads). Approval of any guidelines related to the call experience occurs at the Psychiatry Residency Program Committee (PRPC).
3. Standardize core on-call expectations for residents across hospital sites with the understanding that implementation may be tailored to the clinical service/site/setting.
4. Provide support and guidance to the residency program with on-call related issues and/or concerns including when there are conflicts regarding the on-call experience.
5. Work with the Safety Subcommittee & Subcommittee on Resident Wellbeing to provide guidance to the PRPC with regards to any safety, learner experience, and/or resident well-being issues brought to the Program Director and PRPC via a variety of feedback mechanisms including but not limited to regular reporting of adverse events; bi-annual residency program and site survey feedback; Site Safety Reviews; and Rotation Evaluations.

6. Liaise with the Curriculum & Assessment Subcommittees with regards to curricular and assessment strategies to foster the alignment of the educational value and goals of the call experience (as per the Royal College of Physicians and Surgeons of Canada Psychiatry Competencies and Required Training Experiences) and patient care/service responsibilities (as per the PARO-OTH collective agreement) during residency training to prepare residents for independent practice.

Issues should be brought to the attention of the Call Subcommittee if:

1. Local (hospital/site-based) discussion has been unsuccessful at finding a satisfactory resolution.
2. The issue involves more than one call site.
3. There are concerns about a potential violation of the PARO-OTH Collective Agreement.
4. The concern may be indicative of a larger systemic issue that needs to be addressed.
5. It is requested by any of the local parties involved.

Membership

Faculty Members

- Co-Chairs – Centre for Addiction and Mental Health & General Hospital Site (3 year-term, renewable once at the discretion of the Program Director for 3 years)
- Emergency Psychiatry Rotation Coordinator (ex-officio)

Resident representation (ex-officio)

- PRAT Senior Call Officers
- Chief Resident Representation (CAMH and General Hospital Site)
- PARO Representative (General Council or Board Member)

Reporting

The subcommittee reports to the Director, General Psychiatry Residency Program and PRPC.

Please note that given the importance of the on-call experience across hospital sites, the Program Director will both solicit feedback & keep PIC/Hs (Psychiatrist-in-Chief/Heads) up to date with regards to the Call Subcommittee.

Decision Making

It is desirable that decisions are acceptable to the majority of members; therefore, discussions should continue until a consensus is reached. If consensus cannot be reached, then a vote of members will be conducted, and a simple majority required for decision-making. Decisions of the Call Subcommittee move forward as recommendations to the Program Director and PRPC with final decision making with regards to on-call experiences being made by the PRPC.

Meetings

At least twice per year in preparation for call allocations and at the call of the Co-Chairs.

Administrative Support

Residency program administrators will assist in coordinating virtual (Zoom) or in-person meetings as needed.

References

PARO-OTH Collective Agreement <https://myparo.ca/>

Royal College of Physicians and Surgeons of Canada -National Standards for Training AFTER 1 July 2020 (<https://www.royalcollege.ca/en.html> > Information By Discipline > Psychiatry)

Site and Residency Program Surveys

PRAT Call Allocations Document

Created by: Program Director and Co-Chairs, Call Working Group (with input from Call Working Group)

Reviewed at PRPC: October 6, 2025

Next review: 2028-29