

Faculty Teacher Support and Development Guidelines General Psychiatry Residency Program

Background

The General Psychiatry Residency Program is committed to a safe and rigorous learning environment, much of which occurs in the workplace in the form of workplace-based learning at hospital-based clinical services or rotations. Given the importance of faculty teachers in residency training, the program is committed to working with Temerty Faculty of Medicine, Department of Psychiatry, and hospital-based leadership on supporting faculty who supervise and teach in the residency program.

- **Residents** are learners as per UofT PGME, service providers as per the provisions of the PARO-OTH collective agreement, and members of a regulated health profession as per the CPSO, under the terms of postgraduate education certification of registration.
- Faculty teachers/supervisors occupy multiple roles they are, as noted, faculty members with privileges to teach and supervise medical trainees as per the Temerty Faculty of Medicine, University of Toronto alongside functioning as hospital medical staff credentialed via hospital-based leadership structures including Psychiatrist-in-Chiefs/Heads (PIC/Hs). Physician faculty teachers/supervisors are also members of the CPSO, and as it relates to medical trainees, must comport with the <u>CPSO's Professional Responsibilities in Medical Education</u>.
- **Hospital training sites** Residency training occurs at a variety of hospital sites with affiliation agreements with the Temerty Faculty of Medicine, University of Toronto.

With regards to the importance of supporting faculty teachers, the **RCPSC Standards of Accreditation** for Psychiatry programs articulates the following:

Standard 7: Teachers deliver and support all aspects of the residency program effectively. Element 7.1: Teachers are assessed, recognized, and supported in their development as positive role models for residents in the residency program.

Requirement 7.1.1: Teachers are regularly assessed and supported in their development.

- Indicator 7.1.1.1: There is an effective process for the assessment of teachers involved in the residency program, aligned with applicable central processes, that balances timely feedback with preserving resident confidentiality.
- Indicator 7.1.1.2: The system of teacher assessment ensures recognition of excellence in teaching, and is used to address performance concerns.
- Indicator 7.1.1.3: Resident input is a component of the system of teacher assessment.
- Indicator 7.1.1.4: Faculty development for teaching that is relevant and accessible to the program is offered on a regular basis.
- Indicator 7.1.1.5: There is an effective process to identify, document, and address unprofessional behaviour by teachers.
- Indicator 7.1.1.6: The residency program identifies and addresses priorities for faculty development within residency training.

Requirement 7.1.2: Teachers in the residency program are effective role models for residents.

- Indicator 7.1.2.1: Teachers exercise the dual responsibility of providing high quality and ethical patient care, and excellent supervision and teaching.
- Indicator 7.1.2.2: Teachers contribute to academic activities of the residency program and institution, which may include, but are not limited to: lectures, workshops, examination preparation, and internal reviews.
- Indicator 7.1.2.3: Teachers are supported and recognized for their contributions outside the residency program, which may include, but are not limited to: peer reviews, medical licensing authorities, exam boards, specialty committees, accreditation committees, specialty societies, and government medical advisory boards.
- Indicator 7.1.2.4: Teachers contribute to scholarship on an ongoing basis.

Other relevant standards include the following:

Standard 3: Residents are prepared for independent practice.

Element 3.3: Teachers facilitate residents' attainment of competencies and/or objectives.

Requirement 3.3.1: Resident learning needs, stage or level of training, and other relevant factors are used to guide all teaching, supporting resident attainment of competencies and/or objectives.

- Indicator 3.3.1.1: Teachers use experience-specific competencies and/or objectives to guide educational interactions with residents.
- Indicator 3.3.1.2: Teachers align their teaching appropriately with residents' stage or level of training, and individual learning needs and objectives.
- Indicator 3.3.1.3: Teachers contribute to the promotion and maintenance of a positive learning environment.
- Indicator 3.3.1.4: Residents' feedback to teachers facilitates the adjustment of teaching approaches and learner assignment, as appropriate, to maximize the educational experiences.

Standard 5: Safety and wellness is promoted throughout the learning environment.

Element 5.1: The safety and wellness of patients and residents are actively promoted. Requirement 5.1.1: Residents are appropriately supervised.

- Indicator 5.1.1.1: Residents and teachers follow central policies and any program-specific policies regarding the supervision of residents, including ensuring the physical presence of the appropriate supervisor, when mandated, during acts or procedures performed by the resident, and ensuring supervision is appropriate for the level or stage of training.
- Indicator 5.1.1.2: Teachers are available for consultation for decisions related to patient care in a timely manner.
- Indicator 5.1.1.3: Teachers follow the policies and processes for disclosure of resident involvement in patient care, and for patient consent for such participation.

The following **data** is reviewed by the residency program to support faculty teachers:

- Learner Assessment of Clinical Teacher (LACT) which provide Teaching Effectiveness Scores (TES)
- Rotation Evaluation Scores (RES) which pertain to clinical rotations and occasionally learners provide feedback regarding faculty teachers in these assessments

- Teacher assessments from core teaching/academic half-day or other teaching sessions delivered by the residency program
- Bi-annual site surveys conducted by the residency program in which residents provide feedback about their clinical rotations and on-call experiences
- Reports from the Learner Experience Unit, Office of Learner Affairs
- Other sources of data as per the residency program's Program Evaluation Subcommittee (e.g. special surveys, focus groups etc.)

Please note that whilst the residency program appreciates that *informal verbal feedback* regarding faculty teachers is sometimes provided via a variety of avenues (e.g. resident leaders at PRAT, Chief Residents, PG Site Directors), faculty teacher feedback must be documented in order to proceed with formal feedback (via PIC/H) and support of the faculty member.

Review and Management of Faculty Teacher Assessment Data

Addressing faculty teacher performance concerns is the purview of the Psychiatrist-in-Chief/Head (PIC/H) of the hospital where the faculty teacher is appointed as medical staff in collaboration with the Chair, Department of Psychiatry or their delegate in medical education, the Vice Chair, Education.

- LACTs or RES that have a score of less than 3 are flagged weekly to the Program Director via POWER (Postgraduate Web Registration System).
- For Site Surveys, they are reviewed initially by faculty site survey co-leads for serious safety concerns once received by residency program administrator.
- Any serious safety concerns* that are flagged via LACTs, RES, or Site Surveys are escalated via the Program Director to the Vice Chair, Education along with PG Site Director and PIC/H to investigate and address.
- Serious faculty teacher performance concerns (i.e. learner mistreatment or serious breaches of
 professional responsibilities in supervision of medical trainees) that are flagged via LACTs (or less
 commonly, RES and/or Site Surveys) are brought to the <u>Faculty Assessment and Support
 Committee (FASC)</u> and faculty feedback and support follows as per the terms of the FASC via the
 Vice Chair, Education and PIC/H
- Residents may also discuss, disclose, or report learner mistreatment via the <u>Office of Learner</u> <u>Affairs</u> Temerty Faculty of Medicine
 - Reports of learner mistreatment are addressed via the Program Director and Vice Chair, Education in collaboration with the PIC/H where the faculty teacher is credentialed as medical staff. Anonymous feedback that necessarily lacks specificity may limit the nature and extent of action that can be taken. However, every effort will be made based on available data to address learner experience concerns, considering due process for both faculty teachers and learners.

*Serious safety concerns are those that involve a high risk of or actual physical, psychological, or emotional harm to residents. Should serious safety concerns be identified on a clinical rotation, the residency program reserves the right, in alignment with UofT PGME Guidelines for the Assignment and Removal of Postgraduate Medical Trainees from Training Sites, to redeploy residents.

Psychological Safety and Teacher Assessment

In balancing responsiveness to feedback with confidentiality, the residency program aims to cultivate psychological safety, where learners can provide honest feedback about learner experience without fear

of negative consequences. Faculty teachers should likewise feel safe in providing authentic feedback to learners regarding areas for improvement or when a learner's performance does not meet core competencies, aligned with their responsibility to prepare residents for independent practice. Residency program leadership is committed to working with residents, faculty teachers, departmental, and hospital leadership in cultivating a culture of goodwill, psychological safety, and trust.

Faculty Development occurs via:

- Hospital-based
 - coaching offered through PIC/Hs or other site-based leadership
 - o annual performance reviews as per PIC/Hs, which includes review of TES from LACTs
- Continuing Professional and Practice Development (CPPD)
 - faculty teachers are advised to regularly review their TES* (at least annually) and to reflect on strengths and suggestions for improvement in their teaching
 - the above review can be included in RCPSC required <u>Maintenance of Certification</u> (MOC)
 *all faculty teachers have access to their clinical teaching assessments (LACTs) via POWER
 *the residency training program also provides teaching assessments for any lectures provided in core teaching from PGY1-5
- Department of Psychiatry in collaboration with the Director, Faculty Development
- Participation of faculty teachers at the Department of Psychiatry's annual Don Wasylenki Education Day <u>https://psychiatry.utoronto.ca/event/donald-wasylenki-education-day-0</u>
- Faculty Development offerings through UofT PGME https://pgme.utoronto.ca/faculty-staff/ or the Centre for Faculty Development https://centreforfacdev.ca/
- Participation in conferences either psychiatry-specific or related to medical education

There are multiple opportunities to **recognize excellence in teaching** via local, national, and international awards. Within the residency program, the Robin Hunter Award for Postgraduate Teaching and Maria Mara Award for Resident Advocacy amongst many other awards are available to our faculty teachers. <u>https://psychiatry.utoronto.ca/education-awards-faculty</u>

Acronyms

CPSO – College of Physicians of Surgeons of Canada LACT – Learner Assessment of Clinical Teacher PARO-OTH – Professional Association of Residents of Ontario-Ontario Teaching Hospitals PIC/H – Psychiatrist-in-Chief or Head PG – Postgraduate PGME – Postgraduate Medical Education PRAT – Psychiatry Residents' Association of Toronto RCPSC – Royal College of Physicians and Surgeons of Canada RES – Rotation Evaluation Score TES – Teaching Effectiveness Score UofT – University of Toronto

Reference Documents

CPSO – <u>Professional Responsibilities in Medical Education</u> PARO-OTH Agreement <u>https://myparo.ca/your-contract/</u> RCPSC Standards of Accreditation for Residency Programs (Psychiatry) <u>https://www.royalcollege.ca/ca/en/ibd-search.html</u>

UofT PGME Guidelines and Policies

Guidelines for the Assignment and Removal of Postgraduate Medical Trainees from Training Sites Guideline for Managing Disclosures about Learner Mistreatment Resolution of Resident Disagreement with Attending Physician or Supervisor

Created by: Associate Program Director and Program Director, in consultation with Vice Chair, Education and Psychiatrist-in-Chiefs/Heads (PIC/H) **Approved by PRPC:** September 11, 2023 **Next review:** 2026