

Psychiatry Residency Program Committee (PRPC) Terms of Reference General Psychiatry Residency Program

Mandate

The Psychiatry Residency Program Committee (PRPC) assists the Program Director (also known as Director, General Psychiatry Residency Program) in planning and organizing of the University of Toronto Psychiatry residency program. The PRPC is responsible for stewarding the 5-year Psychiatry residency program, including selection of residents, educational design, policy and process development, safety, resident wellness, assessment of resident progress, and continuous improvement. The PRPC is also responsible for overall operations of the Psychiatry residency program. This includes the overall objective of providing the environment, supervision, coaching, career development, and access to educational experiences sufficient to successfully complete the program and Royal College of Physicians and Surgeons of Canada (RCPSC) required training experiences and competencies for Psychiatry.

RCPSC Documents

Competencies, Psychiatry Training Experiences, Standards of Accreditation
 https://www.royalcollege.ca/en/standards-and-accreditation/information-by-discipline >
 Specialty > Psychiatry

Committee Composition

Voting Members

- Program Director, Chair
- Associate Program Director
- Assistant Program Director(s)
- Child and Adolescent Psychiatry (CAP) Core Rotation Co-ordinator [CAP Training Sites]
- Geriatric Psychiatry Training Site [Baycrest]
- Research Representative (Assistant Program Director, CSP Director or their Delegate who is a Psychiatrist and Faculty Member, UofT Department of Psychiatry)
- Faculty Lead/Chair, Safety Subcommittee (CAMH PG Site Director)
- Faculty Lead/Chair, Resident Wellness/Wellbeing Subcommittee
- Faculty Lead, Psychotherapy
- Faculty Lead, EDIIA (Equity, Diversity, Inclusion, Indigeneity, and Accessibility)
- Resident Members
 - o PRAT Co-presidents [1 vote]
 - o Chief Residents, CAMH and General Hospital Representative [1 vote]
- Site Directors, Toronto Academic Health Sciences (TAHSN) full-affiliate sites [CAMH, MSH, SHSC, SMH, UHN, WCH]
- Site Directors, Associate Affiliated training and expansion sites [NYGH, SJHC, SHN, THP]

Non-Voting Members

• Clerkship (Undergraduate Medicine) Representative

- Ex-officio members
 - Chair, Department of Psychiatry
 - Vice Chair, Education, Department of Psychiatry
- Program Administrators

Special guests by invitation of the Chair, PRPC to provide special reports, perspectives, or expertise on specific issues being considered by the PRPC.

Subcommittees

- Assessment, Support, and Promotion Assessment Subcommittee, Psychiatry
 Competence Subcommittee (PCS), and Resident Assessment and Support Sub-committee
 (RASC)
- Curriculum Subcommittee
- Psychiatry Education Advisory Committee (PEAC)
- Program Evaluation Subcommittee
- Safety Subcommittee
- Selections PGY1 Selection/CaRMS Admissions Subcommittee
- Wellness Resident Wellbeing Subcommittee

Please see Department of Psychiatry, University of Toronto <u>website</u> for Subcommittee Terms of Reference.

The PRPC and Program Director can establish working groups or subcommittees as needed to support key residency program activities.

Reporting

The PRPC will report to the Vice Chair, Education along with the Chair, Department of Psychiatry and Associate Dean, Postgraduate Medical Education (PGME) through the PRPC Chair/Program Director.

Meetings

PRPC meetings are scheduled monthly on the first or second Monday of every month from 0900-1130 am except for days when there is a PEAC meeting (PRPC ends at 1100 am) and in May (Postgraduate Education/Residency Program Retreat) and August (summer break). Members can attend and vote in-person, virtually (via videoconference or e-mail), or over the phone.

PEAC (Psychiatry Education Advisory Committee) meetings occur 3 times per year following PRPC from 11-12 (noon) and PRPC attends PEAC meetings.

Meeting quorum is a simple majority of members which must include one resident. If a quorum is not reached, the meeting will be rescheduled.

Decision making

Decisions will be made by consensus. It is desirable that decisions are acceptable to the majority of members; therefore, discussion should continue until a consensus is reached.

Confidentiality

It is understood that at times sensitive matters related to the residency program, residents, or faculty may be discussed at PRPC. PRPC members are to maintain confidentiality as to the details of these discussions, with minutes providing a high-level summary of discussions at PRPC being available via Quercus. PRPC deliberations regarding resident assessment (e.g. remediation plans, appeals of assessments) are faculty-only meetings, to preserve the confidentiality of resident assessment data.

Documentation

Agendas and relevant documentation are pre-circulated to PRPC members the week before the meeting.

Standing items on the agenda including:

- Resident Leadership Report to provide resident representatives the opportunity to provide updates, and to discuss or raise specific items of concern to residents.
- CBD/Curriculum Updates
- Learner Experience/Learning Environment (includes any matters relating to resident wellness)
- Safety Subcommittee

Minutes are taken by the Program Administrative Support or delegate and are available on Quercus.

Annual PRPC Topics

| Annual PRPC Topics | |
|--------------------|---|
| Month | Topic |
| July | Introductions |
| | Orientation to PRPC & confidentiality |
| | Residency Program Priorities for Academic Year (Site Directors and PD |
| | Report and Discussion) |
| | Site Survey Report (from May/June meeting) |
| August | No PRPC meeting – summer break |
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| September/October | Curriculum Subcommittee Update |
| | IMG Annual Report (Assistant PD, IMG) |
| | Site Survey Report (from May/June Survey) |
| November/December | CaRMS/PGY1 Selection Planning Update |
| | Psychotherapy Curriculum & Training Updates |
| | PCS Report (from November PCS meetings) including Waiver of |
| | Training recommendations |
| | Review of Program Policies and Website |
| | Wellness/Resident Wellbeing Subcommittee Report |
| January /February | PCS Report (from November PCS meetings) including Waiver of |
| | Training recommendations – if not presented in December |
| | Site Survey Report (from Nov/Dec Survey) |
| | Resident Assignment to Core rotations (aka "the match") |
| March | Resident Assignment to Core Rotations (aka "the match") |
| | Subcommittee and Working Group updates as needed |

| April | Research Report (Clinician Scientist and Scholar, training stream) Review of Program Policies and Website |
|-------|--|
| May | No meeting – Annual Postgraduate Education (PG) Retreat Program Evaluation Subcommittee Report – present at PG Retreat |
| June | Resident Assessment – PCS Report, Assessment Subcommittee update & RASC (Resident Assessment and Support) Annual Report Faculty assessment - Update from FASC (Faculty Assessment and Support Committee) |

Responsibilities

The PRPC is responsible for the following important domains alongside the relevant subcomittees:

Planning and organizing the residency program including the following activities

- Develop, adopt, and disseminate PRPC policies/procedures in an effective, transparent and collaborative manner.
- Review PRPC policies and processes regularly and make necessary changes.
- Review and adopt relevant postgraduate office and learning site policies.
- Identify, advocate, and plan for resources needed by the residency program.
- Follow processes to select, organize and review residency program learning sites based on the required educational experiences.
- Develop policies and processes that are consistent with the University of Toronto, Faculty of Medicine vision/ mission, policies and processes.
- Actively seek and respond to stakeholder input including residents' opinions.

Training program design including the following activities

- Review individual rotation evaluations and assess need for change in the program design.
- Discuss any relevant teaching or staff concerns (including faculty evaluations, if appropriate) that impact on rotations or overall program design.
- Review any hospital re-structuring and possible impact on rotations, resource and equipment allocations.
- Ongoing assessment of opportunities for a satisfactory level of research and scholarly activity.
- Ongoing assessment of program strengths and/or areas for improvement.

Training program curriculum including the following activities (in collaboration with Curriculum Subcommittee)

- Use a comprehensive curriculum plan that is specific to the discipline and addresses all of the CanMEDS roles to guide curriculum design and review.
- Regularly review program curriculum to ensure it is written in outcome-based terms using the CanMEDS framework relating to knowledge, skills and attitudes.
- Regularly review program competencies and/or objectives to ensure they meet all required standards for the discipline (including required training experiences) and address societal needs.

- Review and modify other aspects of the curriculum as needed including:
 - Educational experiences to ensure they facilitate residents' ability to achieve all competencies specific to the discipline.
 - Teaching to ensure that resident learning needs and stage or level of training are used to guide all teaching.
 - o System of resident assessment for effectiveness and organization.
- Annual review and ongoing update of formal half-day topics and presentations.
- Maintain mechanisms by which residents receive ongoing career counseling and support for development of skills in teaching, research and scientific inquiry.
- Ongoing review of individual rotation goals and objectives.

Selection of residents including the following activities (in collaboration with PGY-1 Selections/CaRMS Subcommittee)

- Develop, maintain and adopt effective, clearly defined, formal processes for the selection of residents, including eligibility criteria and allocation of positions to hospitals.
- Participate in application reviews, interviewing and ranking candidates.
- Review applicants through various streams of entry into program (CaRMS, IMG, re-entry, transfer from one residency training program to another, etc.).

Resident Assessment and Promotion (in collaboration with Psychiatry Competence Subcommittee and Resident Assessment and Support Subcommittee)

- Provide oversight for the review of residents' readiness for increasing professional responsibility, progression, promotion and transition to independent practice.
- Ensure there is an effective, organized system of resident assessment tools and processes tailored to the educational experiences to measure that each resident is attaining experience-specific competencies and objectives in all CanMEDS roles and/or the CFPC evaluation objectives.
- Assist in the organization of appropriate remediation or probation for residents experiencing difficulties meeting the appropriate level of competence.

Appeals

- Initially an appeal is discussed with the rotation supervisor and/or PD
- Unresolved appeals are discussed at the PRPC or subcommittee (e.g. RASC, PCS).
- An unresolved issue is referred to the University of Toronto Postgraduate Education office as per the <u>formal policy</u> for evaluation and appeals.

Resource Management

- Identify, plan and advocate for necessary resources.
- Ensure appropriate level of opportunities to maintain research and scholarly activity in the residency program.

Resident Well-being/Wellness (in collaboration with Resident Wellbeing Subcommittee)

- Develop and regularly review program specific wellness policy for strengths and areas for improvement.
- Review and formulate program support systems for formal and informal counseling and stress-related issues.

Continuous Improvement of the Residency Program (in collaboration with Program Evaluation Subcommittee)

- Develop and adopt a process to continuously improve the residency program based on the review of multiple sources of information including feedback from residents, teachers, administrative personnel, and others as appropriate as per the Program Evaluation Subcommittee.
- Evaluate each of the residency program's educational experiences and learning environment including regular Site Surveys (q 6 mo) and Site Safety visits as per the terms of the Safety Subcommittee.
- Review residents' achievement of competencies, assessment data and feedback provided to teachers in the residency program.
- Use identified areas of improvement to develop and implement relevant and timely actions plans.
- Share identified strengths and action plans with residents, teachers, administrative personnel and others as appropriate.
- Follow a formal process to evaluate the effectiveness of actions taken.
- Review residency program's policies, available resources and assess the residency program's leadership at the learning sites.

PRPC Member Roles & Responsibilities

Program Director (PD)

- The PD collaborates with the PRPC to oversee key residency program functions while fostering an environment that empowers PRPC members, residents and teachers to identify needs and implement change.
- The PD effectively communicates PRPC actions and decisions with the Department of Psychiatry, administrative personnel and the Postgraduate Medical Education (PGME) office and ensures that residents, teachers, and administrative personnel have appropriate access to key documents, policies and procedures developed and adopted by the PRPC.
- The PD communicates as appropriate with other program stakeholders, health professions, the undergraduate medical education program, continuing professional development, and faculty development.

PRPC Members

- PRPC members attend meetings regularly and actively contribute to the productivity of the PRPC.
- Members contribute to a robust decision-making process ensuring full analysis of options and collaborative planning about how work will be done.
- Members take a leadership role in their area of expertise; in the site or component they represent, or the role agreed to on a subcommittee.

Resident Members

• The selected resident representative(s) seeks input from residents prior to each meeting and communicate major discussion points, actions, and decisions post meeting.

Site Directors and Faculty

• Site Directors/Faculty are responsible for sharing key information from their site/faculty and raising issues or concerns for discussion when necessary to the PRPC and communicating PRPC actions and decisions to program stakeholders at their site.

Program Administrative Support

• The Program Administrator is a non-voting member responsible for record keeping.

Prepared by: Director, General Psychiatry Residency Program & PRPC

Approved by PRPC: September 8, 2025

Initial version September 13, 2021; revisions June 5, 2023, and July 24, 2025

Date of next scheduled review: 2028-29