

# Residency Program Committee (RPC) Terms of Reference

## 1. PURPOSE AND MANDATE

- 1.1 **Purpose/Mandate:** The Residency Program Committee (“Committee”) of the Postgraduate Medical Education Residency Program of the Department of Family Medicine (“DFM”), Max Rady College of Medicine, Rady Faculty of Health Sciences (“RFHS”) is established to facilitate the development, implementation, ongoing management and evaluation of the Department of Family Medicine’s postgraduate educational activities. The RPC also assists the Program Director in planning, organizing, evaluating, supervising and advancing the residency program.
- 1.2 **Rationale for Committee Formation:** The Committee & DFM seek to maintain and further incorporate concepts of postgraduate education and accreditation standards into its learning, working, research and service environments.
- 1.3 **Clarification on Purpose/Mandate:** This Committee is intended to complement existing DFM, Family Medicine Postgraduate Medical Education Residency Program, RFHS and University resources which address matters of postgraduate medical education and to foster collaboration on such matters relating to the DFM. This Committee is not intended to act as a substitute, duplicate or alternate forum to address issues over which other areas of the DFM have specific jurisdiction.

## 2. REPORTING AND ACCOUNTABILITY

- 2.1. **Reporting:** The Committee reports to the Program Director, Family Medicine Postgraduate Medical Education Residency Program, and through the Program Director to the Executive Management Committee.
- 2.2. **Accountability:** The Committee is accountable to the DFM Department Head.
- 2.3. Subcommittees or working groups shall report to the Committee. These include without limitation, the following:
  - Academic Curriculum Subcommittee (ACS)
  - Curriculum Quality Improvement Subcommittee (CQIS)
  - Education Directors Subcommittee
  - Enhanced Skills Programs Subcommittee (ESP)
  - Resident Progress Subcommittee (RPS)
  - Resident Wellness & Resilience Subcommittee (RWRS)

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### 3. CHAIRPERSON AND COMMITTEE MEMBERSHIP

3.1. **Chair:** The Committee Chair (i.e., the “**Chair**”) shall be appointed by the position as Program Director, Family Medicine Postgraduate Medical Education Residency Program. The Co-Chair(s) shall be appointed by Program Director, Family Medicine Postgraduate Medical Education Residency Program. The Chair is responsible for the following at Committee meetings:

- a) Calling the meeting to order;
- b) Establishing an agenda and ensuring agenda items are addressed;
- c) Ensuring the minutes from prior meeting(s) are reviewed and approved by the Committee (with or without modification);
- d) Facilitating discussion to reach consensus on matters under consideration in a professional manner;
- e) Adjourning meetings after business is concluded; and
- f) Acting as the main representative of the Committee.

3.2. **Membership:** The Committee membership shall then consist of the following members, including the Chair:

- a) Voting Members:
  - Program Director, Family Medicine Postgraduate Medical Education Residency Program (Chair)
  - Department Head
  - Associate Head, Distributed Medical Education
  - Education Directors of all DFM Residency Streams
  - Associate Program Director, Enhanced Skills Programs
  - Postgraduate Faculty Lead – Academic Curriculum
  - Postgraduate Faculty Lead – Behavioural Medicine
  - Postgraduate Faculty Lead – Indigenous Health
  - Postgraduate Faculty Lead – Integrative Medicine
  - Postgraduate Faculty Lead – Resident Assessment and Evaluation
  - Associate Director, Quality Improvement
  - One Chief Resident Representative for each DFM Residency Stream: Urban, Rural, Bilingual & Northern Remote, Thompson, to be selected annually by the Chief Resident Group
  - One resident representative for residents enrolled in Enhanced Skills Programs



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- Chair or a delegate from the Subcommittees:
  - Academic Curriculum Subcommittee (ACS)
  - Curriculum Quality Improvement Subcommittee (CQIS)
  - Enhanced Skills Programs Subcommittee (ESP)
  - Resident Progress Subcommittee (RPS)
  - Resident Wellness & Resilience Subcommittee (RWRS)
- One Inter-professional Faculty representative, to be appointed annually by the RPC/ to be named by Interprofessional Faculty Group

b) Non-voting Members:

- Director, Faculty Development, DFM
- Managing Director, DFM
- Education Manager, DFM
- Coordinator, Projects and Program Evaluation, DFM
- Postgraduate Program Coordinator, DFM
- Program Administrators of each DFM Residency Stream
- Education Secretary (recorder)

c) Corresponding Members:

- Program Director, Family Medicine Undergraduate Medical Education
- Director, Research and Quality Improvement
- Training Program Director, IMG

d) Ad Hoc Members:

- Other faculty members (physician or inter-professional faculty) and other Ad Hoc members as required and as deemed appropriate by the Chair and Committee.

3.3. **Diversity of Membership:** The Committee strives to achieve diverse membership on its Committee that is reflective of its commitment to diversity and inclusion and this should be considered in the appointment of Committee members.

3.4. **Liaisons:** Committee members shall serve as liaison persons with others in the areas from which they are appointed.

3.5. **Best Interests:** Committee members shall deal with matters before the Committee in such a way that the best interests of the DFM, Family Medicine Postgraduate Medical Education Residency Program, RFHS take

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precedence over the interests of any of its constituent parts, should those interests conflict or appear to conflict.

3.6. **Consultation:** In carrying out its role, the Committee may call upon various resources as it deems required.

#### 4. TERM OF OFFICE

The term of office of each Committee member shall be until the first of the following occurs:

- (a) the individual no longer holds the position noted in 3.2;
- (b) the term of the appointment ends;
- (c) the appointment is rescinded by the appointer; or
- (d) the individual resigns from the Committee.

#### 5. FUNCTIONS AND ACTIVITIES OF COMMITTEE

5.1. As part of its Mandate, the Committee will engage in the following activities without limitation:

- a) Determine the goals of the Family Medicine Postgraduate Medical Education Residency Program (including the functions of education, research, service and administration)
- b) Establish the family medicine residency curriculum and learning objectives, based upon the educational objectives of the College of Family Physicians of Canada, the CFPC Triple C Competency Based Curriculum, CanMEDS-FM and the Max Rady College of Medicine, as applicable
- c) Advise the Associate Dean, Postgraduate Medical Education on the numbers of postgraduate positions and their distribution within the Department of Family Medicine
- d) Review and revise the admission criteria for the Family Medicine Postgraduate Medical Education Residency Program and the process of interviews and selection
- e) Review and revise the procedures and tools used in the assessment of residents
- f) Review and revise the Family Medicine Residency curriculum, in keeping with the accreditation requirements of the College of Family Physicians of Canada

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- g) Review and approve the stream-specific curricula for each stream of family medicine residency training
- h) Review the resources available to the Family Medicine Postgraduate Medical Education Residency Program and make recommendations to Executive Management or the Postgraduate Medical Education as appropriate, for additional resources and the optimal use of resources for the program goals
- i) Receive and approve the recommendations of the Resident Progress Subcommittee
- j) Make recommendations to the Faculty Development Committee, Family Medicine, suggesting topics of benefit to family medicine teachers; establish subcommittees, working groups or ad hoc committees as deemed necessary on specific topics related to postgraduate education
- k) Ensuring objectives of the Family Medicine Residency Program and the College of Family Physicians of Canada Specific Standards for Family Medicine Residency Programs relating to the curriculum are met
- l) Ensuring the review of all objectives, assessments and evaluations for each learning experience
- m) Communicating activities and reports to the DFM Executive Management Committee
- n) Receiving recommendations regarding its Mandate from the DFM Subcommittees, including the identification of priority issues.

### 6. MEETINGS

- 6.1. **Number of Meetings:** The Committee shall meet one (1) every block per academic year, or subject to the call of the Chair.
- 6.2. **Notice of Meetings:** Notice of a Committee meeting must be provided to Committee members, at least five (5) business days advance of the meeting, unless waived by the Committee members at the meeting.
- 6.3. **Agenda:** Agenda items should be sent to the Committee secretary at least 48 hours in advance of the meeting. The agenda should be prepared and distributed to the members of the Committee prior to the meeting.



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- 6.4. **Quorum:** A majority of the Committee membership must be present at a meeting in order to constitute a quorum.
- 6.5. **Decision-Making:** The preferred model for decision-making is consensus. If consensus cannot be reached, a vote shall be held. The Chair will not vote unless to break a tie.
- 6.6. **Committee Meeting Guests:** All Committee meetings will be limited to members only unless the Chair otherwise grants approval for certain individuals to attend all or a portion of the meeting.
- 6.7. **Telephone Meetings and Email Discussion:** The Chair may consult with Committee members by email or arrange telephone meetings instead of in-person meetings, as the circumstances may require.
- 6.8. **Confidentiality:** All Committee members, resource persons, consultants, guests, and administrative support persons who may be in attendance at a Committee meeting or privy to Committee information are required to protect and keep confidential any protected information (e.g., classified or privileged information) received through participation on the Subcommittee, unless such information is otherwise approved for public information.
- 6.9. **Minutes & Confidentiality:** Minutes are to be taken of business occurring during Committee meetings. However, the Committee may move “in camera” to deal with certain items if the subject matter being considered relates to personal and confidential matters that are exempt from disclosure under applicable access and privacy legislation. Once approved by the Committee, meeting minutes shall be publicly available, in accordance with applicable legislation.

### **7. COMMITTEE ADMINISTRATIVE SUPPORT**

The Committee shall receive administrative support from the DFM. The administrative support shall be provided through an individual whose duties shall include:

- a) Assisting the Chair with preparation of Committee meeting agendas and distributing notification of meetings;
- b) Ensuring follow-up of Committee action items;
- c) Information gathering;
- d) Preparation and distribution of meeting material;



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- e) Minute-taking; and
- f) Maintaining Committee records.

### 8. WORKING GROUPS

- 8.1. **Referral to Working Groups:** The Committee may refer issues of priority, confirmed by the DFM as requiring review, collaboration and analysis, to one or more Working Groups, which may be Department-specific, as the circumstances require.
- 8.2. **Working Group Leads:** Each Working Group shall have one or more Leads, as appointed by the Committee Chair, in consultation with the Committee. The Lead need not necessarily be a Committee member. The Lead shall provide the Committee Chair with periodic updates of the Working Group work and progress and shall provide a final report to the Subcommittee Chair at the completion of the Working Group's project.
- 8.3. **Working Group Reporting:** Committee Working Groups shall report to the Subcommittee Chair through their identified leads ("Leads"), who will then consult with the Committee and report to the DFM RPC.
- 8.4. **Working Group Mandate:** Each Lead (or Co-Leads) shall consult with the Committee Chair in clarifying the parameters and timelines associated with the assigned issue/project.
- 8.5. **Working Group Membership:** The Lead(s) of each Working Group shall recruit the membership they deem necessary to carry out the work on their assigned issue/project.
- 8.6. **Working Group Terms of Reference:** In addition to the above provisions on Working Groups:
  - a) The Leads shall bear in mind the DFM and Family Medicine Postgraduate Medical Education Residency Program commitment to diversity when recruiting Working Group members;
  - b) The terms of office for each Working Group member shall be for the duration of the assigned project, unless the Lead determines otherwise; and
  - c) The above provisions dealing with Committee Meetings shall apply as the circumstances permit (except that minute-taking is not a requirement at Working Group meetings, given that administrative support may not be available).

### 9. AMENDMENTS TO TERMS OF REFERENCE

Amendments to this Terms of Reference may be proposed by the Subcommittees and Working Groups to the DFM RPC for approval.



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### **10. DATES OF APPROVAL, REVIEW AND REVISION**

#### **10.1. Date approved:**

- August 4, 2020: DFM Executive Management Committee
- July 8, 2020: DFM Residency Program Committee (RPC)

10.2. **Review:** Formal review of these terms will be conducted every ten (10) years. In the interim these terms may be revised or rescinded if the Subcommittee Chair or the DFM RPC deems necessary. All revisions must be approved by the DFM RPC and the DFM Executive Management Committee.

10.3. **Supersedes:** Previous Terms of Reference versions

10.4. **Committee Administrative Support:** DFM Administrative Staff (i.e. secretary, program administrator, coordinator as assigned)

10.5. **Effect on Previous Statements:** These terms shall supersede all previous DFM Family Medicine Postgraduate Medical Education Residency Program terms on the subject matter herein.