Residency Program Committee (RPC) Terms of Reference (TOR)

Purpose and Authority
The UBC Adult Critical Care Medicine Training Program Residency Program Committee (RPC) functions to assist the Program Director(s) in organizing the program/education design, selection of residents, selection of learning sites and management of resources, policy and process development, safety, resident wellness, resident assessment, and continuous quality improvement.

Goals and Responsibilities
The ultimate goal of the RPC is to work collaboratively with the CCM residents in the program, division members and other key stakeholders to create the optimal educational experience for each resident in the program. This will be achieved through:

1. Designing and maintaining a process for the selection of candidates for admission to the CCM training program.
2. Creating and regularly reviewing the curriculum and evaluation tools of the CCM training program using the goals and objectives outlined by the Royal College of Physicians and Surgeons of Canada as a foundational structure.
3. Reviewing summaries created by the Competence Committee on a quarterly basis regarding each residents' progress in the program. This will also include reviewing and approving recommendations for promotion put forward by the Competence Committee for each resident.
4. Establishing and maintaining mechanisms to provide career planning and counseling for residents and to deal with problems such as those related to stress.
5. Recognizing CCM residents who are experiencing difficulties in the program and, in collaboration with the Competence Committee, developing, implementing and evaluating plans for remediation when required.
6. Establishing and maintaining an appeal mechanism for any remediations.
7. Establishing and maintaining an evaluation mechanism of the quality of the educational experience and appropriateness of resources available to ensure maximum benefits are derived from integration of the components of the program. This includes:
    - Assessing the components of the program on a regular basis to ensure educational objectives are met.
    - Assessing resource allocation to ensure that facilities have the necessary resources and that they are being utilized with optimal effectiveness.
    - Assessing the teaching in the program including clinical teaching and academic half days.
    - Identifying opportunities for collaboration with other educational programs to maximize effectiveness of the training experience.

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8. Ensuring that the learning experiences actually encountered by each resident allows them the opportunity to achieve both their personal goals and learning objectives and those of the program.

Reporting Structure
The RPC will report to the Dean for Postgraduate Medical Education (PGME) through the RPC Chair(s).

Membership
- Adult Critical Care Medicine Training Program Director(s)/Chair(s) - voting
- Program Administrator - non-voting
- Lead resident (elected by peers) - voting
- Residents - non-voting
- Competence Committee Chair - voting
- Core Site Representatives (Site Education Coordinator or Director *) - voting
    - i. Vancouver General Hospital
    - ii. St. Paul's Hospital
    - iii. Royal Columbian Hospital
- Head, UBC Division of Critical Care Medicine - voting
- Quality Improvement Lead - voting
- Community ICU Representative - voting
- External Member ** - non-voting

* Both the Site Education Coordinator and Director will be invited to attend. If one of these individuals already holds another named position on the RPC, then the other individual must attend to fill the role of Core Site Representative.

** This individual will be a physician from outside the division of critical care.

Membership Terms
Members must attend 75% of RPC meetings in the academic year. If a member does not meet the minimum attendance requirement, eligibility on the RPC will be reviewed by the RPC Chair(s) and may impact Core Site designation.

Meeting Schedule and Administration
Meetings will occur quarterly or more frequently as needed. Members can participate in person, via teleconference or zoom.

The meeting agenda, previous minutes, and any documentation related to the agenda are circulated to the RPC members, prior to meetings, including agenda items that have been requested by members of the RPC.

The meeting minutes are taken for each meeting by the Program Administrator and distributed to all RPC members for approval after each meeting (with competence committee discussion details redacted).

Records will be maintained in accordance with UBC and the Faculty of Medicine records retention procedures.

Quorum and Decision-Making Process
Quorum will be defined by a simple majority of members, 50% plus 1, including at least one resident.

Decisions are made by consensus of members present at the meeting. If unable to reach consensus then 50% plus 1 majority of all members (present and not present) will be required.

Conflict of Interest and Confidentiality
RPC members must disclose to the Chair(s) any real or perceived conflict of interest with respect to any resident or issue presented to the RPC. The Chair(s) will determine the appropriate course of action. The Chair(s) may bring the matter to the full RPC.

The discussions and proceedings of the RPC are strictly confidential and are only shared on a professional need-to-know basis. Discussions regarding residents' performance and assessment reports from the Competence Committee are strictly confidential, and residents are excused from this portion of the meeting. The minutes of this component of the meeting are kept and not disseminated to prevent a breach in confidentiality.

Subcommittees
All subcommittees report to the Residency Program Committee (RPC).

<u>Competence Committee</u>
The Competence Committee is led by the CC Chair. The purpose of this subcommittee is to review residents' readiness for increasing professional responsibility, promotion, and transition into practice. For more details, refer to the Competence Committee Terms of Reference.

<u>Remediation Subcommittee</u>
This subcommittee is composed of the Program Director(s) as Chair(s), the CC Chair, and selected RPC members. The CC Chair will meet with any resident who is having trouble in their rotation or who has not met expectations for any of the CanMEDS roles to discuss the nature of the issue and to gain understanding of the resident's perspective and

insight. The CC Chair will present the issues to the subcommittee who will agree on a remediation strategy. The resident will be provided a Remediation Supervisor, who will support the resident in their individualized learning plan in a timeline based on the deficiency. The committee will approve completion of the remediation process following the final report from the Remediation Supervisor.

Selection Subcommittee

This subcommittee is composed of the Program Director(s) as Chair(s) and selected RPC members. This subcommittee will conduct all CaRMS, and externally funded applicant file reviews and interviews for the CCM program. All members of the selection subcommittee will complete mandatory Implicit Bias Training Module and EDI modules offered in the UBC Faculty Development and Educational Support site, as well as sign a Confidentiality and Privacy agreement.

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