

Pediatric Residents Academic Progress Committee Terms of Reference

- 1 The Academic Progress Committee will monitor the evaluation and promotion of residents within the program.
- 2 The committee will meet at least three times a year.
- 3 The membership of the committee will include the Program Director (Chair), 2 or 3 faculty involved in the Residency Training Committee, 1 faculty that is not a committee member, the site director for the Waterloo program and the chief resident(s).
- 4 The principle of confidentiality will be strictly respected
- 5 The Academic Progress Committee actions will be guided by the Evaluation Policy of the McMaster Post-Graduate Medical Education Office.
- 6 The records of all residents will be reviewed twice a year. The committee must review the entire record of a resident who has received a provisional satisfactory, unsatisfactory or incomplete evaluation during any rotation evaluation. The committee, at the discretion of the Program Director, can review the overall performance of any resident.
- 7 Residents receiving **PROVISIONAL SATISFACTORY, UNSATISFACTORY or INCOMPLETE** evaluations:
 - a) In all cases, the Program Director and resident shall meet as soon as reasonably possible to discuss and review the In-Training Evaluation Report (ITER) and all supporting documentation. This will be followed by further discussion at the Academic Progress Committee.
 - b) The resident may elect to accept or reject the designation. If s/he elects to reject the designation, s/he may appeal the designation at Level 1 Appeals – Program Level, in accordance with Section VII (Appeals) of the postgraduate evaluation policy.
- 8 If the resident accepts the designation: The Academic Progress Committee will follow the guidelines set out by the Postgraduate Medicine Evaluation Policy with respect to a) reporting to the education advisory board (2 provisional or 1 unsatisfactory) and b) initiating a remediation plan.
- 9 Level 1 Appeals: Program Level
 - a) A resident may submit an appeal to the Academic Progress Committee in respect of any procedural or substantive decision

(i.e. decisions involving academic judgment or speciality specific skills) arising out of the Evaluation Process, including a decision to indicate a designation other than “Satisfactory” on the resident’s ITER.

- b) All appeals submitted at Level 1 must include a written statement from the resident clearly stating the decision(s) under appeal, providing detailed reasons why the decision is thought to be incorrect or inaccurate, and the desired result. The resident is encouraged to submit the appeal no later than 2 weeks after they become aware of the decision under appeal.
- c) Once the Program Director has received an appeal, s/he must provide the Student with a copy of the Postgraduate Evaluation Policy and Procedures, along with any program specific evaluation policies.
- d) The Student must be offered the opportunity to attend the committee meeting where his/her case is being reviewed. The Student must be provided the opportunity to invite relevant individuals and / or counsel.
- e) If the Student does not agree with the committee’s decision, s/he has the option to appeal all matters to the Evaluation Advisory Board.
- f) If the program committee is unable to reach a decision on the issue, the Program may elect to refer the matter to the Evaluation Advisory Board.
- g) There must be written report documenting the details and the outcome of all appeals. A copy is sent to the Assistant Dean, Postgraduate Medical Education, as well a copy is maintained in the Student’s file.
- h) For residents completing a Pre-Entry Assessment Program (PEAP), an Assessment Verification Period (AVP), a Practice Ready Assessment (PRA), or clinical examinations (STACERs), the sole remedy that may be granted following a successful appeal is the ability to repeat relevant components of the assessment or the clinical event, as applicable, one more time only.

10 The Academic Progress Committee can recommend the withdrawal of a resident from the training program for academic or non-academic reasons. This recommendation will be sent to the Education Advisory Board (EAB).

- 11 After an Academic Progress Committee meeting, if concerns have been raised, a letter delineating the concerns will be sent to the resident, with a copy to the resident advisor. The resident will be advised to meet with his/her advisor/coach to develop an education plan that addresses the pertinent issues as per the Academic Progress Committee's recommendations. The education plan should be submitted to the Chair of the Academic Progress Committee (Program Director) and the Academic Support Committee. If the resident is being forwarded to the ERB, this will also be stated in the letter.
- 12 MacPeds has a comprehensive assessment program in place. The AB-ITE, MCQ, SAQ and OSCE examinations are both formative and summative in our program. Residents who perform below their group average on the AB-ITE (American Board In-Training Exam), the OSCE, MCQ and/or the SAQ exam will be sent a letter requiring the resident to complete a level A, B or C remediation plan. The above plus the following are triggers that would initiate a referral to the Academic Support Committee (ASC)
 - I. Scores on OSCEs, MCQ, SAQ and American Board In-Training Exam:
 - a. Level A – Results of one of the above examinations at ≥ 1 Standard Deviation (SD) below the mean score of year of training
 - b. Level B – Results of two of the above examinations are ≥ 1 SD below the mean score of year of training
 - c. Level C – Results of 3 or more of the above examinations at ≥ 1 SD below the mean score of year of training
 - II. Any 'Unsatisfactory' ITER
 - III. 2 or more 'Provisional Satisfactory' ITERs
 - a. 1 Provisional satisfactory ITER – to be reviewed first by Academic Coach
 - IV. Failure to make adequate progress on the continuum of 'Novice to Expert' on Developmental Milestones or Programmatic Milestones at the discretion of the Program Director or Academic Progress Committee.
 - V. Ongoing and similar concerns identified on multiple assessments (MSF/Encounter cards/Portfolio/LCC evaluations) by multiple Pediatricians, Allied Health Staff
 - VI. Breach in professionalism (moderate to severe) according to Professionalism in Practice policy
- 13 The committee will review former residents that were unsuccessful in the Royal College exams.

- 14 The committee will be responsible for the promotion of residents from year to year (see Appendix B). Any resident undergoing support by the ASC will need to have successfully completed the educational plan in order to be promoted. If the plan is a longitudinal plan, the committee will ensure that the timelines are being achieved before recommending promotion. Not achieving all the elements does not necessarily mean the resident will not be promoted. The committee will make recommendations for residents who have not completed the required elements for promotion. This may require residents to complete certain tasks in a set time period as a condition of promotion.

Appendix A:

Levels of Remediation:

- Level A. The resident will review and personally reflect on their scores develop a personal learning plan.
- Level B. The resident will review their scores/ITER and then develop a learning plan with their advisor within a month of receiving letter from Program Director.
- The resident meets with Academic Support Committee (ASC), completes a Self-assessment form, reviews learning plan with Academic Support Supervisor.
 - A tracking sheet is established and submitted monthly to the ASC
 - The resident will meet with Academic Support Supervisor every 2 months
 - A progress report will be sent to the Program Director and Advisor after a 6-month period where the resident has successfully met the goals or proceed to Level C support.
- Level C The resident will review their scores/ITER, then:
- Meet with Academic Support Supervisor to review scores/ITER.
 - The resident completes a Self-assessment form and an individualized learning plan to be developed with achievable timelines
 - An Academic Support Contract to be agreed upon and signed
 - A tracking sheet to be established and submitted monthly to the ASC
 - The resident will meet monthly with the Academic Support Supervisor
 - An interim progress report will be sent to the Program Director and Advisor every 3 months
 - A final outcome of the Academic support will be determined by the Program Director, in consultation with the Academic Support Committee and the resident's performance.

Academic Support Committee (ASC) is a sub-committee of the Academic Progress Committee (APC)

Appendix B:

PGY 1

- All ITERs Successful
- All encounter cards completed and showing no deficits
- Weekly Mini-MAS completed for each rotation and showing no deficits
- Learning Contract completed for each rotation
- OSCE, MCQ, SAQ and ABP scores within or above their group average
- Completed two observed long cases/year
- Completed all aspects of the Portfolio
- Completed all aspects of and has maintained minimum credits for maintenance of competence (MOC)
- Has participated in one external CME activity
- If a educational plan has been prescribed, has followed through on the plan and has successfully met the criteria for completing the education plan
- Has a research idea and supervisor in place
- Met Academic Coach on a regular basis and is progressing with program milestones
- Completed two sets of Multisource Feedback Evaluations and acted on any deficiencies identified.
- Maintained procedure log
- Has had no professionalism issues identified.

PGY 2

- All ITERs Successful
- All encounter cards completed and showing no deficits
- Weekly Mini-MAS completed for each rotation and showing no deficits
- Learning Contract completed for each rotation
- OSCE, MCQ, SAQ and ABP scores within or above their group average
- Completed two observed long cases/year
- Completed all aspects of the Portfolio
- Completed all aspects of and has maintained minimum credits for maintenance of competence (MOC)
- Has participated in one external CME activity
- If a educational plan has been prescribed, has followed through on the plan and has successfully met the criteria for completing the education plan
- Has presented research at research round table or is scheduled to do so in their PGY 3 year.
- Met Academic Coach on a regular basis and is progressing with program milestones
- Completed two sets of Multisource Feedback Evaluations and acted on any deficiencies identified.
- Maintained procedure log
- Has submitted all documentation for electives
- Has had no professionalism issues identified.

PGY 3

- All ITERs Successful
- All encounter cards completed and showing no deficits
- Weekly Mini-MAS completed for each rotation and showing no deficits
- Learning Contract completed for each rotation
- OSCE, MCQ, SAQ and ABP scores within or above their group average
- Completed two observed long cases and or passed the STACER
- Completed all aspects of the Portfolio
- Completed all aspects of and has maintained minimum credits for maintenance of competence (MOC)
- Has participated in one external CME activity
- If a educational plan has been prescribed, has followed through on the plan and has successfully met the criteria for completing the education plan
- Has submitted abstract for presentation and or has presented work as per the research committee guidelines
- Met Academic Coach on a regular basis and is progressing with program milestones
- Completed two sets of Multisource Feedback Evaluations and acted on any deficiencies identified.
- Maintained procedure log
- Has submitted all documentation for electives
- Has had no professionalism issues identified.

PGY 4

- All ITERs Successful
- All encounter cards completed and showing no deficits
- Weekly Mini-MAS completed for each rotation and showing no deficits
- Learning Contract completed for each rotation
- OSCE, MCQ, SAQ and ABP scores within or above their group average
- Completed two observed long cases and or passed the STACER
- Completed all aspects of the Portfolio
- Completed all aspects of and has maintained minimum credits for maintenance of competence (MOC)
- Has participated in one external CME activity
- If a educational plan has been prescribed, has followed through on the plan and has successfully met the criteria for completing the education plan
- Has submitted abstract for presentation and or has presented work as per the research committee guidelines
- Met Academic Coach on a regular basis and is progressing with program milestones
- Completed two sets of Multisource Feedback Evaluations and acted on any deficiencies identified.
- Maintained procedure log
- Has submitted all documentation for electives
- Completed educational project
- Participated in at least one faculty development workshop
- Has had no professionalism issues identified.

CME: the CME activity should be an external activity. Conferences that are part of AHD are not counted.

Any resident falling below their group average will be required to submit a level A, B or C education plan, which will have to be successfully completed in order to be considered for promotion.

The Evaluation Policy and Professionalism Policy of the McMaster Post-Graduate Medical Education Office can be found here:

<http://fhs.mcmaster.ca/postgrad/policies.html>

