



Faculté de médecine
Études médicales postdoctorales
 Faculty of Medicine
Postgraduate Medical Education

**CLINICIAN INVESTIGATOR PROGRAM
 RESIDENCY PROGRAM COMMITTEE
 TERMS OF REFERENCE**

PREAMBLE

The CIP Residency Program Committee is a standing committee that works with the Program Director to oversee, coordinate and revise the clinician investigator program in accordance with:

- a) The Royal College Specialty Resident Training Requirements
- b) The University of Ottawa Office of Post Graduate Medical Education
- c) Local CIP policies

MEMBERSHIP

The composition of the CIP RPC is governed by the Royal College Standards of Accreditation (550A_PO_1.2; July 2023) and is composed of the Program Director, the Vice Dean PGME ex-officio, the Vice Dean Graduate and Postdoctoral Studies plus key stakeholders namely representatives from the clinical departments and academic units that oversee training of the residents as well as the residents themselves. Representatives from the clinical departments will be nominated by their Department Heads. Historically, the majority of CIP residents have come from the two most research intensive departments, Medicine and Surgery, and so these departments will continue to have standing representation. Additional members may be added for a 2-4 year term depending on the training requirements of residents in a given period.

- A. The Program Director will hold a Royal College certification and must be a clinician investigator/scientist and hold an academic faculty position (Assistant Professor or higher) within the uOttawa Faculty of Medicine.
- B. The RPC standing committee shall be comprise of the following voting members:
 1. Program Director (Chair)
 2. Vice Dean PGME (ex-officio)
 3. Vice Dean Graduate and Postdoctoral Studies
 4. Representative, Dept of Medicine
 5. Representative, Dept of Surgery
 6. Graduate Program Director (or delegate), School of Epidemiology & Public Health
 7. Graduate Program Director (or delegate), Cell and Molecular Medicine
 8. Associate Scientific Director of Training, The Ottawa Hospital Research Institute
 9. CIP Chief Resident
- C. Additional voting members may be added depending on the training requirements of residents in the CIP in a given period and may include any of:
 1. Representative from a resident's clinical training department
 2. Representative from a resident's graduate program
 3. Representative from a relevant research institute.

- D. The PD, Vice Dean PGME, Vice Dean Graduate and Postdoctoral Studies, Graduate Program Directors and the OHRI Associate Scientific Director of Training will remain on the RPC for the duration of the tenure of their office. The chief resident term will be 1 year. The remaining standing committee members will be appointed for a 5-year term, renewable once for a second 5-year term. Ad hoc committee members added to ensure stakeholder representation for specific trainees will be appointed for a single 2 or 4-year term depending on the graduate program of the specific resident (MSc or PhD).
- E. The CIP chief resident will be elected at the beginning of each academic year by the residents currently in the program. The process of electing a new chief resident including the call for nominations, election, and notification of the incumbent will be carried out by the out-going chief resident. The PD and RPC will have no role or influence in the process.
- F. Guests (non-voting) may be invited to meetings at the discretion of the Chair.

FREQUENCY OF MEETINGS:

The RPC will meet at least quarterly. Additional meetings may be called as needed at the discretion of the Chair. Meetings may be held virtually to facilitate attendance.

QUORUM:

The quorum for the RPC meetings shall be at least 5 members from the standing committee.

FUNCTION OF THE COMMITTEE: The roles and responsibilities of the RPC are as follows:

- A. Ensure effective operation of the program including the planning, organization, evaluating and advancement of the program.
- B. Ensure all Royal College accreditation standards are being met.
- C. Ensure the CIP provides the training necessary for residents to achieve the Royal College Clinician Investigator Competencies (RC; 2023) in accordance with the CanMed roles.
- D. Ensure the CIP provides the necessary Training Experiences for Clinician Investigator Programs (RC; 2023) as set forth by the Royal College.
- E. Facilitate and maintain interdepartmental and interdisciplinary linkages. The PD will have the primary responsibility but may also rely on RPC members to communicate with Graduate Program Directors, Clinical Program Directors, Division and Department Heads, residents, etc.
- F. Review and approve annually recommendations from the Admissions Subcommittee regarding selection of new residents to the CIP.
- G. Review and approve annually the progress and promotion of each resident in the CIP. Approval will be based on information and recommendations provided by the Evaluations Subcommittee.
- H. Approve satisfactory completion of the CIP for each resident.
- I. Communication with residents in the program. The Chief resident is a member of the RPC and is elected annually by residents currently in the CIP. The election is completely independent of and without influence from the RPC and PD. The primary role of the Chief Resident is bidirectional communication between the RPC and the residents. The Chief resident will bring resident concerns to the RPC and ensure residents are informed about committee activities including any changes to or considerations within the program.
- J. Review and approve the CIP curriculum on a biannual basis. Ensure topics align with the Royal College Training Experiences for Clinician Investigator Programs (RC; 2023)
- K. Contribute to and ensure processes are in place to provide career planning and counseling to trainees.

- L. Continuous Quality Improvement. Conduct an overview of the CIP as well as all policies and procedures at least every 2 years. Seek input from all stakeholders including residents on how the program can be improved and take remedial action where indicated. Ensure all training experiences and competencies are being addressed.
- M. Accreditation. The RPC will assist the Program Director in preparing for on-site accreditation visits from the Royal College as well as interim internal accreditations. This may include reviewing and approving documents and policies, ensuring Standards of Accreditation or met, meeting with surveyors, etc.
- N. Remediation. For residents with unsatisfactory or marginal progress in the CIP, the RPC will oversee the development of a remediation plan in accordance with established PGME policies.

FUNCTION OF THE PROGRAM DIRECTOR: The roles and responsibilities of the PD are:

- A. Oversee all the roles and responsibilities of the RPC as listed above.
- B. Chair the RPC meetings
- C. Prepare and assume the primary contact for on-site accreditation visits from the Royal College as well as interim internal accreditations.
- D. Participate as a member of the Royal College National Advisory Committee on the CIP
- E. Control and monitor budget expenditures for all operational activities of the program.
- F. Communicate twice yearly with each resident's clinical program director to assess progress and CanMeds competencies.
- G. Communicate twice yearly with each resident's research supervisor to assess progress and research productivity.
- H. Meet with each resident every 6 months to review progress and career planning.
- I. Meet with prospective residents expressing interest in the CIP.

SUBCOMMITTEES:

- A. **Admissions Subcommittee:** The RPC standing committee will form the admissions subcommittee. Application to the CIP is limited to residents currently enrolled in uOttawa Royal College Accredited post graduate clinical training programs. The subcommittee will:
 - Ensure appropriate admissions criteria and procedures are established and followed.
 - Meet separately as a subcommittee with a nominated Chair (not the PD).
 - Review applications. Ensure feasibility of proposed research projects, suitability of proposed research supervisors, and acceptability of proposed research environments.
 - Meet at least once annually to rank applicants to the CIP and make recommendations to the RPC regarding admission to the program.
- B. **Evaluations Subcommittee:** The RPC standing committee with the exception of the Chief Resident will form the evaluations subcommittee. The subcommittee will:
 - Maintain an effective Evaluation and Program Completion Policy.
 - Meet separately as a subcommittee with a nominated Chair (not the PD).
 - Meet at the end of each academic year to review resident progress in the program.
 - Base resident evaluations on each resident's ITERS, Thesis Advisory Committee reports (written), and feedback from their clinical Program Director (written or verbal).
 - Provide recommendations to the RPC regarding annual resident promotion within the program.
 - Verify and approve final completion of the CIP for each resident based on ITERS, completion of the CIP seminar series, completion of all graduate course work and requirements, and successful thesis defence.

- C. **Wellness Subcommittee:** The RPC standing committee will form the wellness subcommittee. The subcommittee will:
- Review the CIP wellness and safety policy at least once every 2 years.
 - Meet separately as a subcommittee with a nominated Chair (not the PD).
 - Meet at least once annually and as needed.
- Ensure resources are in place and available to address resident wellness and assist with stress, fatigue, etc
 - Ensure residents and faculty of are aware of resources available to address resident wellness and assist with stress, fatigue, etc
 - Ensure residents, staff and faculty have access to the PGME and CIP policies on resident safety
 - Be available individually or collectively for residents experiencing distress.
- D. The RPC may establish additional subcommittees as necessary to address issues as they arise or implement policies and procedures as needed. Terms of reference are to be determined by each subcommittee and approved by the RPC. Chairs of these subcommittees will report to the RPC.

Procedures and Accountability:

- A. Committee members are encouraged to work towards consensus-based decision making. Motions will be passed by majority vote with the Chair as a voting member.
- B. Members must declare conflicts of interest to the Chair in advance who will determine an appropriate course of action. This may include excusing a member from discussions or voting.
- C. Confidentiality particularly when discussing trainees must be maintained by all members of the RPC and the Program Administrator at all times.
- D. Administrative support for the RPC and all subcommittees is provided by the Program Administrator.
- E. RPC agendas and minutes are to be distributed to members within 1 week of meetings.
- F. All subcommittees report to the RPC
- G. The RPC through the PD reports to the Vice Dean PGME.