McMaster Otolaryngology-Head and Neck Surgery Competence Committee Terms of Reference

Overview of the Competence Committee:

As per the Royal College of Physicians and Surgeons of Canada, a competence committee (CC) is a critical component of Competency-Based Medical Education that allows for robust and transparent resident performance review. The goal of this committee is to ensure that all learners achieve their requirements of the discipline through synthesis and review of qualitative and quantitative assessment data at each stage of training, and to provide recommendation on future learning activities and promotion to the residency program committee (RPC) of the discipline.

Purpose of the Competence Committee:

To review and make recommendations related to the progress of residents enrolled in a Competency-Based Residency Program, in achieving the national standards established by the Royal College discipline in Otolaryngology-Head and Neck Surgery (OTL-HNS).

Membership:

- Membership will consist of five people, three of which are to be clinical faculty
 - A Chair will be appointed by the CC
 - Must be a member of the clinical teaching faculty
 - Cannot be the Program Director (PD)
 - Program Director to serve as a general member
 - One other clinical teaching faculty member
 - Does not necessarily have to be a clinical faculty member in OTL-HNS but should have expertise relevant to the CC' s work
 - o Two additional members to be appointed as necessary
 - Can be external to the program as long as they can provide useful input
 - Residents will not be appointed to the OTL-HNS CC, but will have a voice through the OTL-HNS RPC
- Membership term is two years with the option to renew indefinitely
 - Chair to be reappointed annually
- Members can be recommended through the RPC
- Quorum is set at a simple majority (3/5 members) except for stage promotions, at which time quorum will be set at 4 members
- Stand-ins are not permitted, particularly in a voting situation
- The Chair may wish to appoint an administrative staff person as a nonvoting member to help with documentation and reporting such as the home resident Program Administrator

Meetings:

- As per Royal College guidelines, CC will meet four times per year, each resident to be reviewed at least twice per year
- Meetings should ideally occur in August, early December, March and May
 - o To ensure alignment with the various stages of training
 - Transition to Discipline (2 blocks)
 - Foundation (18 blocks)
 - Core (39 blocks)
 - Transition to Practice (6 blocks)
- Initial meetings to be held in person
- Later meetings to be held in person at least once per year
 - Other meetings can be done virtually/by email if needed
- Given the current reporting structure, the CC will need to meet a few weeks before the RPC meetings
- Agenda and minutes from each meeting will be kept in a secure server and members of the CC will be granted full access.

Sources of Data:

- Competence by Design (CBD) Academic Advisors collects results of the Entrustable Professional Activities (form 1) from the Royal College Mainport eportfolio and Formative Surgical Evaluation (FSE) from MedSIS.
- Program Director and/or Program Administrator collect the following reports from MEdSIS/Drop box which are also part of the program requirements for advancement and promotion criteria:
 - Attendance to all academic events
 - Summary of ITER when applicable
 - Research progress report
 - Non- clinical work-based assessments (Grand Round presentations, Journal club critical appraisal, teaching evaluations)
 - Clinical work based assessments (multisource, surgical procedures, consultation letters, OR dictations)
 - o Courses/workshops mandatory
 - In-House Exam (written and oral)
 - National in Training Exam (PGY2,3,4,5)
 - Surgical Foundation Exam (PGY2)
 - Surgical loggings completed
 - Quality assurance medical chart review, self-audit(PGY5)
- Competence Committee will have access to Royal College Mainport, which provides a summary of all Entrustable Professional Activities (EPA)

Reporting Structure:

- Each resident is assigned a CBD Academic Advisor (please refer to the CBD Academic Advisor job description)
- The CBD Academic Advisor completes a detailed review of the progress of their assigned resident based on evidence from completed observations and other assessments or reflections included within the Royal College Mainport eportfolio (form 1) and MedSIS (FSE)
- The CBD Academic Advisor concludes their report with a succinct synthesis including strengths, weaknesses and impression of the resident's overall progress to the CC
- The CBD Academic Advisor provides their report in person to the CC when stage promotion decisions are being made
 - Minor decisions can be made virtually/by email
- The CBD Academic Advisor must use the report template
- The PD with the assistance of the Program Administrator provides a summary report of the program's requirements for advancement and promotion criteria once per year (see list of requirements under sources of data)
- The PD must use the report template
- The Chair of the CC reports to the OTL-HNS RPC by submitting an advisory opinion for each resident reviewed
- Residency Program Committee makes the final decision about each resident progress/status

Decision-Making Process and Promotion Criteria:

- The Chair welcomes members and orients all present to the agenda in the decision to be made
- The Chair reminds members regarding the confidentiality of the proceedings
- Decision-making about advancement and promotion must be made on multiple sources of data over time (see above list of sources of data)
- Each resident is considered in term with the Academic Advisor presenting the resident's progress and review of the EPA's (form 1 and FSE). The Academic Advisor concludes by proposing a status for the resident going forward in the program in regards to the EPAs (in progress, completed all EPAs)
- Each resident is considered in term with the PD presenting the resident's progress and review all data requirements for advancement and promotion. A member of the CC proposes a status for the resident going forward in the program in regards to the above mentioned program requirements.
- If seconded by another committee member, all members are invited to discuss the motion
- The Chair will call a vote of the proposed recommendation

- Competence committee aim for a consensus decision-making process; however if a vote is needed, 75% agreement is needed to pass with at least 4/5 members present
- If the recommendation is not seconded or the motion does not achieve a majority of vote, the Chair will then request another motion regarding the resident. This will continue until a majority of CC members supports a status motion (75%)
- Decision will be deferred only if additional information is required however this deferred decision must be revisited within four weeks
- After the vote, the status decision is recorded in the residents' eportfolio, communicated to the RPC and recorded in the CC's archives

Learner Status	Learner - Resident Action	PG Dean approval / awareness
Progressing As Expected	Monitor Learner - Resident	Not required
	Modify Learning Plan – Suggested Focus on EPA/IM observations or RTE	Not required
	Promote Learner - Resident – to Stage 2	Not required
	Promote Learner - Resident – to Stage 3	Not required
	Promote Learner - Resident – RC Exam Eligible*	Awareness
	Promote Learner - Resident – to Stage 4	Not required
	Promote Learner - Resident – RC Certification Eligible	Required*
Not Progressing As Expected	Modify Learning Plan – Additional Focus on EPA/IM observations or RTE	Not required
	Formal Remediation	Required
Progress Is Accelerated	Modify Learning Plan – Modify required EPA/IM observations or RTE	Awareness
	Promote Learner - Resident – to Stage 2	Awareness
	Promote Learner - Resident – to Stage 3	Awareness
	Promote Learner - Resident – RC Exam Eligible	Awareness
	Promote Learner - Resident – to Stage 4	Awareness
	Promote Learner - Resident – RC Certification Eligible	Required*
Failure to Progress	Modify Learning Plan – Additional Focus on EPA/IM observations or RTE	Awareness
	Formal Remediation	Required
	Withdraw Training	Required
Inactive	Monitor Learner - Resident (i.e. expected return - parental leave, sick leave, etc.)	Required
	Withdraw Training	Required

• The Chair prepares a brief report for the PD at the end of each meeting

- The Chair prepares at least one annual report for the RPC
- All adversary decisions will be subject to full review by the RPC
- Residency Program Committee may ask for residents input at this stage

Post competence committee meetings:

As soon as possible after the CC has reported to the RPC members and PD their advisory opinion, the RPC members make the final decision. The PD will inform the resident and their Academic Advisor the final decision. Changes to the resident's learning plan, assessments, or rotation schedule will be developed as soon as feasible, when applicable.

Appeal process:

Once a decision has been made with regards to the status of the resident it may be appealed by the resident. The level 1 appeal will occur under their purview of the RPC. Subsequent appeals (Level 2 and above) will occur in concordance with the McMaster University Post Graduate Medical Education Policy and Procedures document for the evaluation of postgraduate students performances.

https://pgme.mcmaster.ca/app/uploads/2019/07/Assessment-Policy-June-2019.pdf