



Policy	Resident Participation in Academic Half-Day (AHD) while Off-Service
Date Approved	Approved March 24, 2022
Approved By	Postgraduate Medical Education Committee
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Responsible Portfolio/Unit/Committee	Postgraduate Medical Education Committee
Responsible Officer(s)	Associate Dean, PGME

Resident Participation in AHD while Off-Service

1.0 Background

Programs have integrated academic half-day teaching throughout their curriculum to address the learning needs of residents within the program. The guidelines below outline the process for managing the participation of residents during AHD. The principles have been reviewed to align with the Accreditation Standards (July 2020) and the PARO-CAHO collective agreement.

Accreditation References: Domain: Education Program

Element 3.2 states: The residency program provides educational experiences designed to facilitate residents' attainment of the outcomes-based competencies and/or objectives.

Requirement 3.2.2.: The residency program uses a comprehensive curriculum plan, which is specific to the discipline, and addresses all the CanMEDS/CanMEDS-FM Roles.

Indicator 3.2.2.3: The curriculum plan addresses expert instruction and experiential learning opportunities for each of the CanMEDS/CanMEDS-FM Roles with a variety of suitable learning activities.

PARO Reference

Article 26.1 - The hospitals recognize that residents are required to attend scheduled educational rounds/seminars which are mandated by the University Program, and that clinical duties should, in general, not unreasonably interfere with the ability of residents to attend such rounds/seminars. Where PARO has a concern that clinical duties are unduly interfering with the ability of residents to attend such rounds/seminars, the concern will first be raised at the program's residency training committee, or equivalent body. If the matter cannot be satisfactorily resolved at that level, each hospital agrees that it will meet with PARO and the appropriate University Program representatives with a view to resolving the matter.

2.0 Guidelines

1. Residents will have protected time to attend one AHD session per week.
2. Home and receiving program PDs will collaboratively decide if off-service residents will return to their home programs for their AHD or stay at their off-service rotation. This should happen well in advance to facilitate service coverage and academic schedule planning.
3. Trainees will not be expected to attend AHD post-call or if other scheduled activities have been approved in advance (e.g., vacation leave).
4. Off-service residents are not to be scheduled to cover the clinical responsibilities of their colleagues at the expense of their own protected time for AHD.
5. The learning needs of off-service residents should be factored into the receiving rotations AHDs.