

RESIDENT DOCTORS OF CANADA
ANNUAL REPORT
2015-2016

DRIVING EXCELLENCE IN MEDICAL EDUCATION

ABOUT RESIDENT DOCTORS OF CANADA

Resident Doctors of Canada (RDoC) represents over 9,000 residents across Canada. Established in 1972, we are a not-for-profit organization providing a unified, national voice for our membership.

OUR MISSION, VISION AND VALUES

RDoC's 2014-17 Strategic Plan was approved by the Board of Directors at its meeting on June 14, 2014. The plan articulates the following mission, vision and values:

MISSION

To drive excellence in medical education as the national voice of resident doctors.

VISION

Best training.
Best health.
Best care.

VALUES

Collaborative.
Proactive.
Accountable.

OUR MANDATE

At RDoC, we cultivate meaningful dialogue with our members and Provincial Housestaff Organizations to provide the perspective of resident doctors on issues surrounding national medical education. As a member-driven organization, we rely on resident volunteers to fulfill our mandate, and we collaborate with other national health organizations to foster excellence in training, wellness, and patient care.

OUR PROVINCIAL PARTNERS

RDoC's provincial partners are collectively known as the Provincial Housestaff Organizations (PHOs). The seven PHOs represent the personal and practice interests of resident doctors within their respective regions.

The relationship between RDoC and the PHOs is a fundamental one, even as RDoC has evolved into a blended model of membership. This relationship is multi-layered: RDoC has a relationship with the PHOs as a group as well as bilateral relationships with each PHO. These collaborations are essential to RDoC's work on behalf of residents across Canada.



THREE STRATEGIC DIRECTIONS

RDoC's work is focused on improving the experience of medical residents in Canada. To do so, we pursue these three strategic directions:



TRAINING:

To optimize the continuum of medical education

As trainees, teachers, and clinicians, we will be:

- Recognized for anticipating and providing leadership on medical education issues.
- Influential in residency training to foster exceptional patient-centred care.
- An integral part of national curriculum development, accreditation, certification, licensure and examination policy.
- Supporters of seamless transitions throughout training into practice.



WELLNESS:

To enrich the experience of medical education

As trainees, teachers, and clinicians, we will:

- Inspire a redefined work environment for resident doctors.
- Promote a culture of respect.
- Champion the good health of Canadian resident doctors.



REPRESENTATION:

To serve as the unified voice of Canadian residents

As trainees, teachers, and clinicians, we will:

- Be the go-to organization for the Canadian resident perspective on medical education.
- Cultivate continuous meaningful dialogue with our members and the PHOs.
- Seek to partner and collaborate with stakeholders as the national leader on resident issues.
- Ensure our Board members, Committee members, and liaison representatives are effective advocates for their colleagues.

MESSAGE FROM THE PRESIDENT

It has been an honour to serve as the President of Resident Doctors of Canada, and to lead an organization that works daily to help improve the lives of our over 9,000 members. 2015-16 was a significant year for RDoC. Our Board Members, Committee Members, Liaison Representatives, and staff have worked tirelessly to provide a strong, national, unified voice for resident doctors.

This past year, we tackled several important issues. For example, we:

- Developed a national curriculum on resident resiliency in collaboration with the Mental Health Commission of Canada.
 This curriculum will become fundamental to ensuring that the wellbeing of Canada's resident doctors is a priority in our healthcare education.
- Continued to strengthen ties with our Provincial Housestaff partners, our Quebec counterpart, the Fédération des médecins résidents du Québec, and other national medical organizations.
- Remained a central part of the renewal of CFPC and Royal College accreditation standards, providing the resident perspective as programs evolve to become competency-based.

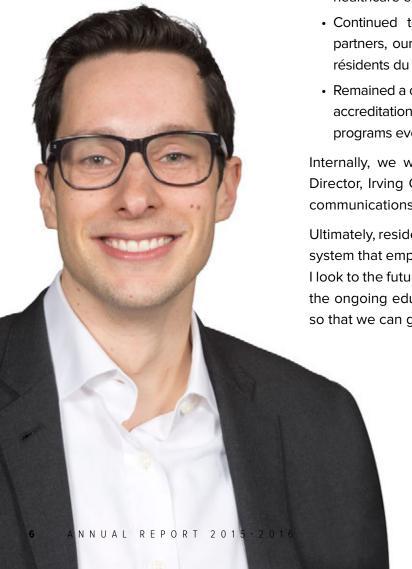
Internally, we were supported with the hire of a new Executive Director, Irving Gold, a new website, and a new social media and communications strategy.

Ultimately, resident doctors want and need a training and healthcare system that empowers us to effectively serve Canadian patients. As I look to the future, I'm confident that RDoC will continue to optimize the ongoing education and professional development of residents so that we can graduate as competent and capable physicians.

Dr. Thomas McLaughlin

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President



MESSAGE FROM THE EXECUTIVE DIRECTOR

I have been grateful to serve as the Executive Director of Resident Doctors of Canada during a year of great change, accomplishment, and planning for a progressive future.

In 2015-16, we laid the groundwork for what I believe will be an exciting and transformative stage in RDoC's development. One of the defining features of this remarkable organization is that it is driven by its members. The policies, projects, and strategic directions are set by a tremendously talented group of resident leaders who are deeply committed to bettering the lives of their peers across the country.

RDoC also works hand-in-hand with its provincial housestaff organization (PHO) partners, who provide support and work on behalf of residents at the local level. As we strengthen our relationships with PHOs, our collective missions are enhanced and, as a community, we are poised to even better represent the interests of our members.

Our staff members are also notable for their deep experience and unwavering commitment to the strategic objectives of the organization. I am very proud of the strides we have made in 2015-16, and am excited to continue to guide this extended team of impressive individuals to further RDoC's mission and mandate in the coming year.

Irving Gold
Executive Director





GOVERNANCE

RDoC's Board of Directors comprises resident doctors from each of the seven regions we represent. Another seven seats are allocated to the president of the corresponding provincial housestaff organization (PHO) in each region.

2015-2016 Board of Directors

Dr. Tom McLaughlin – President
Dr. Christina Nowik – Past President
Dr. Ashley Miller – Vice President
Dr. Gillian Shiau – Secretary

Dr. Breanna Balaton

Dr. François Pomerleau – Treasurer

Dr. Terry Colbourne

Dr. Jonathan Dean

Dr. Kaisra Esmail

Dr. Nicholas Field

Dr. Rasyidah Halim

Dr. Arun Jagdeo

Dr. John-Paul King

Dr. Pamela Lai

Dr. Robbie Sidhu

Dr. Natasha Snelgrove

Dr. Peter Sytnik

Dr. Salina Teja

Dr. Kimberly Williams

Dr. Sherman Wong

Dr. Matthew Wu



RDoC's leadership on the issue of duty hours and fatigue management has and continues to be highly valued by PARO. RDoC has played a pivotal role to ensure the work of the National Steering Committee on Resident Duty Hours continues to advocate strongly on behalf of all residents and we at PARO are proud of the collaborative PARO-RDoC relationship that supports that work. Both organizations work hand-in-hand to ensure fatigue risk management becomes a part of every residency program's mandate and that it becomes part of the day-to-day life of each of our members to achieve Optimal training and working conditions.



Stephanie Kenny, President Professional Association of Residents of Ontario (PARO)



COMMITTEES & LIAISON REPRESENTATIVES

The bulk of RDoC's work on behalf of its members takes place at the Committee level, with direction from the Board of Directors.

Committees

Awards Committee

Dr. Christina Nowik, Chair

Dr. Nicholas Costain

Dr. George Deng

Dr. Pamela Lai

Dr. Peter Sytnik

Executive Committee

Dr. Tom McLaughlin,

President

Dr. Christina Nowik, Past

President

Dr. Ashley Miller, Vice President

Dr. Gillian Shiau, Secretary

Dr. François Pomerleau,

Treasurer

Finance, Audit & Risk Committee

Dr. Nicholas Field, Chair

Dr. Arun Jagdeo

Dr. Tom McLaughlin

Dr. François Pomerleau

Dr. Robbie Sidhu

Governance &

Nominating Committee

Dr. Tom McLaughlin, Chair

Dr. Jonathan Dean

Dr. Rasyidah Halim

Dr. Arun Jagdeo

Dr. John-Paul King

Dr. Gillian Shiau

Dr. Robbie Sidhu

Dr. Peter Sytnik

Dr. Sherman Wong

Regional Networking

Committee

Dr. Tom McLaughlin, Chair

Dr. Jonathan Dean

Dr. Rasyidah Halim

Dr. John-Paul King

Dr. Natasha Snelgrove

Dr. Peter Sytnik

Dr. Salina Teja

Dr. Kimberly Williams

Practice Committee

Dr. Salina Teja, Co-Chair

Dr. Kimberly Williams, Co-Chair

Dr. Leslie Anderson

Dr. Paxton Bach

Dr. Melanie Bechard

Dr. Stephen Cashman

Dr. Harman Chaudry

Dr. Melini Gupta

Dr. Ashley Miller

Dr. Vishal Varshney

Dr. Aaron Wong

Dr. Sherman Wong

Training Committee

Dr. Terry Colbourne, Co-Chair

Dr. Natasha Snelgrove, Co-Chair

Dr. Anurag Bhalla

Dr. Ian Brasg

Dr. Safia Chatur

Dr. Scott Donald

Dr. Jessica Downing

Dr. Bailey Dyck

Dr. Kaisra Esmail

Dr. Bruce Fage

Dr. Jatin Kaicker

Dr. Irfan Kherani

Dr. Karim Mohamed

Dr. Gillian Shiau

Dr. Hong Tran

Wellness Committee

Dr. Breanna Balaton, Co-Chair

Dr. Jonathan Dean, Co-Chair

Dr. Selim Asmer

Dr. Michelle Chan

Dr. Justues Chang

Dr. Karen Chu

Dr. Lindsay Hubenig

Dr. Sahil Koppikar

Dr. Miriam Lermer

Dr. Pamela Liao

Dr. Sarah Smith

Dr. Matthew Wu

Over the past year, PARIM has experienced a noted improvement in our relationship to RDoC. With Executive Director Irving Gold's communication with the PHOs, as well as a sense that our concerns are heard, we feel that there is a renewed optimism and we are looking forward to continuing these improvements even more in the near future.

Dr. Mary Ellen Gedye Dr. Darrell Ginsberg Dr. Tamara Glavinovic

Dr. Melini Gupta Dr. Arun Jagdeo Dr. Maria Jogova Dr. Jesse Kancir

Dr. Irfan Kherani

Dr. Miriam Lermer Dr. Clinton Lewis

Dr. JP King

Jessica Burleson, Executive Director, Professional Association of Residents and

Liaison Representatives

RDoC's liaisons represent their fellow resident doctors at over 80 committees run by our national stakeholders. Liaison volunteers are key to bringing the resident perspective to these tables and for advocating on behalf of all resident doctors in Canada.

Dr. Simon Adams	Dr. Anthony Lott
Dr. Paxton Bach	Dr. Tom McLaughlin
Dr. Breanna Balaton	Dr. Janet McMullen
Dr. Katie Barnes-Prior	Dr. Ashley Miller
Dr. Melanie Bechard	Dr. Jasmine Pawa
Dr. Rahul Bhindi	Dr. François Pomerleau
Dr. lan Brasg	Dr. Eve Purdy

Di. Kanai Dilinai	Di. i fançois i omened
Dr. lan Brasg	Dr. Eve Purdy
Dr. Stephen Cashman	Dr. Ashish Rajput
Dr. Safia Chatur	Dr. Surabhi Rawal
Dr. Karen Chu	Dr. Timothy Roche
Dr. Nadia Clarizia	Dr. Rebecca Ronsley
Dr. Robin Clouston	Dr. Judith Seary
Dr. Terry Colbourne	Dr. Soniya Sharma
Dr. Jenna Dowhaniuk	Dr. Gillian Shiau
Dr. Jessica Downing	Dr. Robbie Sidhu
Dr. Austin Enright	Dr. Krishin Singh
Dr. Kaisra Esmail	Dr. Sarah Smith
Dr. Nicholas Field	Dr. Natasha Snelgrov

[Or. Natasha Snelgrove
[Or. Peter Sytnik
I	Or. Salina Teja
I	Or. Marissa Tsoi
I	Or. Sarah Tymchuk
I	Or. Vishal Varshney
I	Or. Andrew Weiss
I	Or. Kimberly Williams
I	Or. Sherman Wong
I	Or. Tony Zhang
[Or. Nancy Zhou





PRACTICE COMMITTEE

RDoC's Strategic Direction #1 is "Training: To optimize the continuum of medical education."

The Practice Committee works on behalf of the Board to oversee the creation and realization of RDoC activities related to Training. The committee focuses on projects in support of seamless transitions from residency training into practice and the delivery of patient-centred care.

Entry Disciplines/Medical Education Reform

In 2015, the Practice Committee responded to the growing concern and evidence that the current system of entry disciplines does not produce a physician workforce that best serves the needs of Canadian patients. The result of this work is a formal position and national advocacy approach to address and influence changes in education delivery that align with patient needs and support learner transitions across the education continuum and into practice.

The RDoC position paper, *Principles on Entry Discipline and Framework for Medical Education Reform* (November 2015), identifies four guiding principles for social accountability, coordinating decisions, versatility, and relevance to future practice. These are accompanied by a comprehensive set of calls to action for medical educators, health authorities, and governments to consider when discussing entry disciplines and medical education reform.

Central to RDoC's position is the belief that the mix of Postgraduate Medical Education entry disciplines, and their ability to serve the needs of the Canadian health care system, must be continually re-evaluated to ensure they are aligned with societal and patient needs, adequate generalist skills, and practice and career flexibility. RDoC presented this position at the 2016 Canadian Conference on Medical Education (CCME) and called upon stakeholders to create a national task force to move the discussion forward.

Physician Workforce/Career Planning

This past year, RDoC continued to focus on advocacy and participation in national stakeholder initiatives based on the *Resident Physician Principles on Health Human Resources*, a position paper we developed in 2013. It calls for a national health human resources (HHR) plan and better ways to anticipate physician supply and demand to meet patient needs. It also calls for reliable data and better coordination between patient needs and residency training positions to help residents with career decisions. RDoC representatives presented on HHR at the CMA General Council (August 2015), the RC Physician Employment Summit (November 2015), and at CCME (April 2016).

RDoC also undertook a new initiative to develop a series of resident specialty profiles to assist learners in the early stages of choosing a career path. The profiles provide first-person accounts from residents on the challenges, opportunities, and rewards of their chosen fields. First launched during Resident

Awareness Week (Feb 2016), a total of 14 profiles have been released as of June 2016, covering the following specialties: family medicine (including rural and northern/remote), internal medicine, emergency medicine, psychology, pediatrics, anatomical pathology, obstetrics and gynecology, general surgery, orthopedic surgery, public health and preventive medicine, and dermatology.

Practice Management Training

Led by the Practice Committee, RDoC is taking a leadership role to examine and evaluate current practices in order to advance the standardization of practice management (PM) curricula across Canadian residency programs.

In 2015-16, the committee continued the work of gathering information and assessing the current situation of PM training for Canadian residents, with the goal of developing a formal position and guiding principles to advocate with key stakeholders to move this agenda forward. Highlights of this work included:

- Ongoing participation in stakeholder initiatives focused on transition to practice.
- · Conducting a systematic literature review on PM training in postgraduate medical education.
- Analyzing data from RDoC's 2015 National Resident Survey on Canadian residents' experiences with PM training, priorities, and perceived needs and preferences.
- Synthesizing the results of the literature review and resident experiences and preferences into a set
 of guiding principles and calls for action for PM training in PGME, which will form the foundation for
 RDoC's advocacy work going forward.

Liaison Work

The Practice Committee directly oversees a number of RDoC's liaison positions on key stakeholder committees that examine a range of issues, including:

- · Career planning and transitions across the medical education continuum
- Physician employment and workforce planning
- Entry disciplines and medical education reform
- Learner education handover
- · Learning and work environment
- · Practice management training
- · Social accountability and resource stewardship
- · eHealth leadership
- · Professional learning and development





TRAINING COMMITTEE

RDoC's Strategic Direction #1 is "Training: To optimize the continuum of medical education."

The Training Committee oversees the creation and realization of Resident Doctors' activities relating to Training. The committee focuses on projects in support of national curriculum development, accreditation, certification, licensure, and examination policy.

Accreditation

Education about the accreditation process and the key role of RDoC's pre-accreditation questionnaire remained a top priority for RDoC in the past year. In August 2015, the Training Committee released the third edition of *The Accreditation Process – Ensuring Quality Postgraduate Medical Education in Canada: A Manual for Residents*. In October 2015, RDoC and representatives from the Royal College of Physicians and Surgeons of Canada held an accreditation workshop at the Professional Association of Residents of Ontario (PARO) office.

RDoC ensures the participation of residents as surveyors on accreditation survey teams. In 2015-2016, RDoC residents served on all Royal College external review teams (Dalhousie University, McMaster University, University of British Columbia, University of Manitoba, University of Toronto) as well as the College of Family Physicians Canada (CFPC) and Royal College full survey teams for the University of Saskatchewan. In May 2016, representatives from RDoC, the Royal College, and CFPC presented to residents and staff at the University of Ottawa in preparation for the full survey in November 2016.

RDoC participates in a number of key committees tasked with updating the post-graduate accreditation standards, including the Conjoint Task Force on Resident Input into the Accreditation Process. This task force reviews opportunities to improve resident input overall as part of a continuous quality improvement process and to ensure that the processes to obtain resident input are effective, valid, consistent, transparent, and of high quality.

Competency-Based Medical Education

RDoC keeps a close eye on the roll-out of Competency-Based Medical Education (CBME) across Canada, including an initial monitoring of the Queens CBME FIRE project. Last year, RDoC presented on CBME at the International Conference on Residency Education (ICRE) and CCME. Our new Position Paper, Competency-Based Medical Education, addresses concerns about CBME and risk mitigation and was approved in June 2016.

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Resident Doctors of Canada has been an important partner for the Medical Council of Canada. We are very appreciative of the leadership's support to help us address a significant capacity issue facing our Medical Council of Canada Qualifying Examination Part II. The executive and membership provided invaluable input in the recent policy decision to enable PGY-1 candidates completing their first year of residency to challenge this exam, helping to alleviate capacity in the fall session. We also commend RDoC for its engagement and input into our exam program changes, including the upcoming new examination Blueprint, to ensure quality assessment across the continuum. Thank you so much for your collaboration.

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Dr. Ian Bowmer,
Executive Director of the Medical
Council of Canada (MCC)

Mentorship

The Training Committee's Mentorship Team is developing a mentorship resource guide for residents and programs. Intended to be housed on the RDoC website, the guide will include a checklist and list of online resources.

Liaison Work

The Training Committee also directly oversees a number of RDoC's liaison positions on key stakeholder committees that examine a range of issues, including:

- · Resident matching (PGY-1, R3, sub-specialties)
- · Entrustable professional activities
- · Accreditation process and standards
- Internal medicine programs
- The future of medical education
- · Examinations, assessment, and credentialing
- Family medicine specialty-specific issues
- · Royal College specialty-specific issues





WELLNESS COMMITTEE

RDoC's Strategic Direction #2 is "Wellness: To enrich the experience of medical education."

The Wellness Committee works to oversee the creation and realization of RDoC activities relating to that goal. The committee focuses on projects in support of fatigue management, work-life balance, intimidation and harassment, and inspiring a redefined work environment for resident doctors.



Fatigue Risk Management

In the past year, RDoC advocated for properly calibrated fatigue risk management programs. Such programs help to identify and mitigate fatigue-related risk at hospitals and universities, have a positive impact on patient safety, and improve resident health and wellness. RDoC led work in this area as co-chair of the Fatigue Risk Management Project Task Force.

In 2015-2016, the Wellness Committee explored areas of fatigue risk management beyond resident duty hours, such as advocacy work to improve the availability and quality of call rooms and nutritious meals in learning environments. The Committee aimed to highlight the importance of access to healthy and balanced meals for residents, as well as safe and comfortable call room s during shifts.

Patient Handover

The Wellness Committee reviewed information from the I-PASS study and discussed how to support residents with their responsibilities for patient handover. The mission of the I-PASS Study Group is to improve patient safety by standardizing provider communication, with a specific focus on improving transitions of care.

Optimizing a Positive Work Environment

Studies and surveys conducted over the past decade confirm that intimidation and harassment remains a serious and prevalent issue within Canada's medical community. RDoC's newly updated position paper, Optimizing a Positive Work Environment by Addressing Intimidation & Harassment, was released during the Canadian Conference on Medical Education (CCME) in April 2016.

The Wellness Committee advocated strongly for a positive learning and working environment in Postgraduate Medical Education. One major project included researching and compiling faculty-specific resources across the country for residents concerned about inappropriate workplace behaviours such as intimidation and harassment.

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We are encouraged by the commitment of Resident Doctors of Canada to strengthen its relationships with the provincial housestaff organizations. It is truly important to communicate both shared and varied perspectives of the resident doctors training throughout the country to provide the best support to all of our members. We look forward to continued collaborative communication with RDoC in the future.

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Kristin Johnson,
Chief Executive Officer,
Professional Association of
Internes and Residents of
Saskatchewan (PAIRS)

Website Resources

The Wellness Committee set out to enhance the online resources available to all RDoC members. The two main thrusts of this project included the creation of resources for residents wishing to start a family, and resources for residents with disabilities. The committee has drafted comprehensive FAQs with helpful information on a variety of topics related to resident wellness.

National Resident Wellness Day

RDoC celebrated National Resident Wellness Day on May 25, 2016 by releasing a new infographic, "Be Well." It contained tips and tricks for keeping healthy during residency, and was shared widely online.

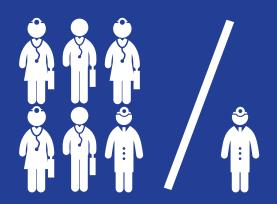
Liaison Work

The Wellness Committee directly oversees a number of RDoC's liaison positions on key stakeholder committees that examine a range of issues, including:

- Distributed medical education
- · Graduation questionnaire
- · Physician health and wellness
- Ethics
- Fatigue risk management
- Health and public policy
- Regional advisory groups
- · Rural physicians

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For every 6 active physicians in Canada, there is 1 resident.



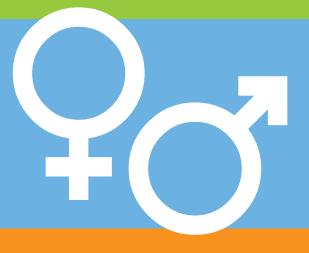


Fine Fellows

Almost 2,500 residents further their training through fellowships.

Gender Mix

There are **slightly more women** than men in residency.





Just My Specialty

Residents train in one of **over 80 specialties**. In 2015, Family Medicine was the **most preferred choice**, followed by Internal Medicine and all surgical disciplines.

Home Sweet Home

75% of Canadian residents who completed their training in 2009 were practicing medicine in the same province five years later.





RESILIENCY WORKING GROUP

Resiliency is the ability to recover from or adjust easily to misfortune or change. RDoC's Resiliency Working Group was established in 2015 to develop a complete, tailored resiliency curriculum that will include resident-focused modules and a train-the-trainer program.



Resiliency Curriculum

The working group has focused on the development of a resiliency curriculum that is national in scope, drawing from the highly successful Road to Mental Readiness project created and implemented by the Canadian Armed Forces and the Working Mind Program of the Mental Health Commission of Canada (MHCC).

The curriculum is skills-based and designed to help mitigate stress and optimize performance. It is instrumental in helping medical residents overcome both the anticipated and the unexpected adversities of medical training. It also supports residents to transition to long, rewarding, sustainable careers – which yields benefits for patients and for Canada's whole healthcare system.

Conferences

The Resiliency Team presented a preview of the curriculum to several audiences in the Fall of 2015, including stakeholders at these organizations:

- The Canadian Conference on Physician Health (CCPH)
- The CENTILE International Conference to Promote Resiliency, Empathy, and Well-Being in Health Care Professions
- The International Conference on Residency Education (ICRE)
- Family Medicine Forum (FMF)

The team collected feedback at each presentation and continued fine-tuning the material to optimize its effectiveness. Feedback showed that residents and faculties across Canada were engaged and excited to bring this training to their programs.

Pilot Project

In collaboration with Dalhousie University and the University of Calgary, the Resiliency Team organized a pilot project of half-day workshops during the Summer of 2016 for several programs.

RDoC recruited a group of peer trainers to help deliver the workshops. The call for trainers was circulated broadly and received an excellent response, with many residents, medical students, and faculty members keen to get involved in the initiative.

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The wellness of Canada's resident doctors is critical to every Canadian, as residents are an integral part of the frontline of patient-centered healthcare, serving as teachers, trainees, and clinicians. By providing support and service to our resident doctors, these award recipients are also contributing to the wellness of our national healthcare system and of all Canadians.

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Dr. Tom McLaughlin
President, Resident Doctors
of Canada



RDoC AWARDS 2015-16

The RDoC Awards Committee was re-established in August 2015 in order to reflect the annual nature of the Awards program and to ensure consistency in its administration. As part of this process, the RDoC Awards were re-branded, the language used in the descriptions was updated and the names were simplified while still respecting the Awards' origins.

35 nominations were received for the 2015 Awards, the third-highest number since 2009. For the first time, the number of nominations in the Resident categories surpassed those in the Staff categories.

The Awards Presentation reception took place on April 17, 2016 at the Fairmont Queen Elizabeth in Montreal, in conjunction with the Canadian Conference on Medical Education. About 80 individuals attended, representing a cross-section of residents, medical students, PGME deans, medical educators, administrators, and representatives from RDoC's stakeholders. Their feedback was overwhelmingly positive.

2015 Award Recipients

RDoC Puddester Award for Resident Wellness

The RDoC Puddester Awards for Resident Wellness honour individuals who have contributed to improving resident wellness in Canada.



Dr. Laura Swaney PGY-3 Pediatrics at Dalhousie University.



Dr. Susan Edwards
Family physician
and Director of
Resident Wellness
at the University of
Toronto.

RDoC Mikhael Award for Medical Education

The RDoC Mikhael Awards for Medical Education honour individuals who have contributed meaningfully to improving undergraduate and postgraduate medical education in Canada.



Dr. Nada Gawad Resident in general surgery at the University of Ottawa.



Dr. Sharon Peters Internist, respirologist, and medical educator at Memorial University.

RDoC Ross Award for Service to Resident Doctors

The RDoC Ross Award for Service to Resident Doctors honours one individual who has contributed to the enrichment of resident life in Canada.



Ms. Marilyn Blake
Program Administrator
for the Anesthesia
and Pain Management
program at the
University of Alberta.

FINANCIAL SUMMARY

Financial Statement April 1, 2015 - March 31, 2016	
REVENUES	
Member Dues	\$ 1,508,745
(0.236% of salary per resident)	
Other Revenue	\$ 100,429
EXPENSES	
Administration	\$ 937,253
Communications	\$ 56,249
Governance Committees	\$ 197,126
Management Committees	\$ 192,801
Liaison & Institutional Support	\$ 111,842
NET INCOME	\$ 113,903





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residentdoctors.ca

Ce document est également disponible en français.