

Resident
Doctors
of Canada



Médecins
résidents
du Canada

Annual Report

2016-2017

*The national voice
of resident doctors*



residentdoctors.ca

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

What a privilege to lead an organization that works daily to help improve the lives of over 9,000 members! I'm proud of what we've achieved this 2016-17 year at Resident Doctors of Canada, as we continue to strive to provide a strong, national, unified voice for resident doctors.

As a pan-Canadian organization we represent the diversity of resident physicians' needs. These needs vary based on speciality, stage of training, and geography. Our Board Members, Committee Members, Liaison Representatives, and staff work tirelessly to make sure that this diversity is represented in all of the key advocacy issues we tackle.

2016-17 was an important year for Resident Doctors of Canada in a number of areas. Some of the most exciting initiatives we spearheaded include:

- Piloting our national curriculum on resiliency at multiple universities. This curriculum will have additional pilots in the 2017-2018 year. It is part of our advocacy to ensure that the wellbeing of Canada's resident doctors continues to be a priority in our healthcare education.
- Played an active role in the renewal of College of Family Physicians and Royal College accreditation standards, providing the resident perspective as programs evolve to become competency-based.
- Continued to strengthen ties with our Provincial Housestaff Organization partners, our Quebec counterpart, the Fédération des médecins résidents du Québec, and other national medical organizations.

- Worked to improve our communications by adding resources to the residentdoctors.ca website, leveraging social media, and coordinating a National Resident Awareness Week.
- Advocated to ensure resident physicians who needed access to the Medical Council of Canada's LMCC part 2 in order to progress in their career were able to do so.
- Improved the frequency of our discussions with the Royal College to ensure a resident perspective is heard as we move into the rollout of Competency by Design.

RDoC strives to optimize the ongoing education and professional development of resident physicians, while also promoting our wellness. Ultimately, we want resident physicians to graduate as competent and capable physicians able to serve patients in a health care system that creates a healthy society. We are, after all, the next generation of physicians in Canada.



Dr. Kimberly Williams
RDoC President, 2016-17



Message from the Executive Director

I continue to be honoured to serve as the Executive Director of Resident Doctors of Canada. This, my second year in the role, was another one of exciting change, meaningful accomplishments, and progressive planning for the future.

In terms of change, what I wish to highlight here is the most obvious change we have made: our office relocation. The new space, just blocks from where we were, reflects a critical theme to our organization: collaboration. Our new workspace was designed to build on and extend our long, proud history of effectively collaborating with external stakeholders. It also supports the equally important organizational changes we have made to better serve our volunteers and committees.

As a member-driven organization, we rely on a group of more than 100 resident volunteers to achieve our mission and mandate. Through developing and implementing projects, creating thoughtful and coherent position statements, and sitting at more than 80 stakeholder committees, our volunteers ensure that the voice of resident doctors is consistently and effectively articulated. This tremendously talented group is deeply committed to enriching the lives of their peers across Canada and are the backbone of RDoC's success.

The members of the 2016-17 Board of Directors and its Executive Committee made enormous contributions this year, managing to find time and energy to devote to their roles in a manner that leaves me speechless. The commitment and passion with which they engage is a great source of inspiration to me – and it should be to anyone who cares deeply about the Canadian healthcare system. While often referred to as the “leaders of tomorrow”, they are, in fact, the leaders of today, and we should all be grateful.

RDoC could not achieve the successes it does without our seven Provincial Housestaff Organization partners. They represent the personal and practice interests of resident doctors within their respective regions, and work closely with us in all facets of our work. This past year has enhanced and solidified our collaborative relationship, and I personally look forward to both supporting them and continuing to draw on their collective wisdom and experience.

Finally, I owe an enormous debt of gratitude to the RDoC staff – a group of professionals with deep subject matter expertise and an unwavering commitment to supporting the strategic objectives of the organization. We made great strides as an organization in 2016-17, and I know that this will continue to be the case with their ongoing support and professionalism.

I am excited about the coming year, during which I will have the opportunity to continue to work with this extended team on developing RDoC's next three-year strategic plan.



Irving Gold
Executive Director, RDoC





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.

2016-2017 Board of Directors

Dr. Kimberly Williams – President
Dr. Tom McLaughlin – Past President
Dr. Terry Colbourne – Vice President
Dr. Vishal Varshney – Board Chair and Corporate Secretary
Dr. Sherman Wong – Treasurer

Dr. Melanie Bechard
Dr. Catherine Cheng
Dr. Jonathan Dean
Dr. Stephanie Kenny
Dr. David Kim
Dr. John-Paul King
Dr. Adriana Krawchenko-Shawarsky
Dr. Pamela Lai
Dr. Aarun Leekha
Dr. Alexandre Lefebvre
Dr. Colm McCarthy
Dr. Evan Martow
Dr. Matthew Nicholson
Dr. James Quinlan
Dr. Robbie Sidhu
Dr. Alyssa Smith

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Maritime Resident Doctors, and all the PHOs, work closely with RDoC to ensure our members get the benefit of all of the services of both organizations. It is important that we maintain regular communication to keep members abreast of our activities. The addition of a PHO Liaison to the RDoC staff has improved our communication and strengthened our partnership making us unified advocates for all residents.

”

— Sandi Carew
Chief Executive Officer
Maritime Resident Doctors (MARDOCS)





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. Tom McLaughlin, Chair
Dr. Alison Anton
Dr. Andrew Helt
Dr. Adriana Krawchenko-Shawarsky
Dr. Pamela Lai

Executive Committee

Dr. Kimberly Williams, President
Dr. Tom McLaughlin, Past President
Dr. Terry Colbourne, Vice President
Dr. Vishal Varshney, Board Chair and Corporate Secretary
Dr. Sherman Wong, Treasurer

Finance, Audit & Risk Committee

Dr. John-Paul King, Chair
Dr. Melanie Bechard
Dr. Catherine Cheng
Dr. Kimberly Williams
Dr. Sherman Wong

Governance & Nominating Committee

Dr. Terry Colbourne, Chair
Dr. Melanie Bechard
Dr. Adriana Krawchenko-Shawarsky
Dr. Pamela Lai
Dr. Aarun Leekha
Dr. Alex Lefebvre

Dr. Matthew Nicholson

Dr. Vishal Varshney
Dr. Kimberly Williams

Regional Networking Committee

Dr. Kimberly Williams, Chair
Dr. Catherine Cheng
Dr. Terry Colbourne
Dr. Jonathan Dean
Dr. David Kim
Dr. Stephanie Kenny
Dr. John-Paul King
Dr. Adriana Krawchenko-Shawarsky
Dr. Aarun Leekha

Practice Committee

Dr. Melanie Bechard, Co-Chair
Dr. James Quinlan, Co-Chair
Dr. Tanvi Agarwal
Dr. Sissi Cao
Dr. Stephen Cashman
Dr. Evan Chong
Dr. Justin Hall
Dr. Anthea Lafreniere
Dr. Reza Mirza
Dr. Christopher Nixon-Giles
Dr. Natalja Tchajkova
Dr. Salina Teja
Dr. Conrad Tsang
Dr. Vishal Varshney
Dr. Sherman Wong

Training Committee

Dr. Colm McCarthy, Co-Chair
Dr. Matthew Nicholson, Co-Chair
Dr. Ian Brasg
Dr. Terry Colbourne
Dr. Mark Elliott
Dr. Mary Ellen Gedye
Dr. Jena Hall
Dr. Irfan Kherani
Dr. Janet McMullen
Dr. Margaret Moores
Dr. David Parsons
Dr. Dmytro Pelipeychenko
Dr. Karthiha Raveenthiran
Dr. Shohinee Sarma
Dr. Alia Teja
Dr. Carl White Ulysse

Wellness Committee

Dr. Jonathan Dean, Co-Chair
Dr. Alyssa Smith, Co-Chair
Dr. Blair Bigham
Dr. Michelle Chan
Dr. Sara Dalley
Dr. Lindsay Hubenig
Dr. Tom McLaughlin
Dr. Sourabh Maiti
Dr. Nina Nguyen
Dr. Katarina Nikel
Dr. Meghna Rajaprakash
Dr. Sarah Smith
Dr. Kevin Zuo



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Resident Doctors of Canada continues to impress me with its intelligent, balanced and unrelenting support of its members. In the past year, we have been fortunate to engage in regular meetings with the RDoC executive and that of the Fédération des médecins résidents du Québec. These touchpoints are helping us strengthen our relationships with our resident partners, which is of ever greater importance as we implement the Competence by Design initiative. We look forward to these ongoing collaborations and other opportunities to work together to create a better postgraduate medical education system and welcome the graduates from Royal College specialty programs into Fellowship.

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— Dr. Ken Harris
Executive Director, Office of Specialty Education
Royal College of Physicians and Surgeons of
Canada

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. Alison Anton	Dr. Bosco Law
Dr. Melanie Bechard	Dr. Vivian Leung
Dr. Ian Brasg	Dr. Clinton Lewis
Dr. Ranko Bulatovic	Dr. Anthony Lott
Dr. Stephen Cashman	Dr. Colm McCarthy
Dr. Heather Chambers	Dr. Tom McLaughlin
Dr. Wilfrid Chan	Dr. Janet McMullen
Dr. Evan Chong	Dr. Rajan Minhas
Dr. Karen Chu	Dr. Reza Mirza
Dr. Terry Colbourne	Dr. Matthew Nicholson
Dr. Julia Curtis	Dr. Christopher Nixon-Giles
Dr. Neil Dattani	Dr. Aimee Noel
Dr. Sheev Dattani	Dr. David Parsons
Dr. Gagandeep Dhaliwal	Dr. Jasmine Pawa
Dr. Adam Dmytriw	Dr. James Quinlan
Dr. Leema Dookhoo	Dr. Paul Ratti
Dr. Mark Elliott	Dr. Amanda Ritsma
Dr. Bruce Fage	Dr. Kyle Roherty
Dr. Mary Ellen Gedye	Dr. Krishin Singh
Dr. Justin Hall	Dr. Dhineskumar Sivananthan
Dr. Jena Hall	Dr. Sarah Smith
Dr. Ariel Hendin	Dr. Shaurya Taran
Dr. Katrina Hui	Dr. Jane Thornton
Dr. Gurpreet Jaswal	Dr. Stephanie Tom
Dr. Heather Johnson	Dr. Bez Toosi
Dr. Irfan Kherani	Dr. Conrad Tsang
Dr. Stephanie Klein	Dr. Vishal Varshney
Dr. Adriana Krawchenko	Dr. Jeff Wheeler
Shawarsky	Dr. Kimberly Williams
Dr. Stephanie Kwolek	Dr. Sherman Wong
Dr. Anthony La Delfa	Dr. Michael Yan
Dr. Anthea Lafreniere	Dr. Elizabeth Yorke
Dr. Pamela Lai	



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Resident Doctors of Canada / Residents of Canada
Dr. Matthew Nicholson
Saskatchewan





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 the continuum of medical education. This includes projects in support of seamless transitions from residency training into practice, and the delivery of patient-centred care.

Practice Management

RDoC believes that practice management (PM) training must be delivered universally to all resident doctors. The vehicle to do this should be a curriculum that is consistent, comprehensive and evidence-based. It should be done in collaboration with relevant organizations and sectors. This past year, we developed the *Principles for Practice Management Training in PGME* and an infographic conveying the core concepts of the Principles.

The purpose of this work is to promote the development of standardized PM curricula and training for resident doctors. Residents experience a significant transition when they graduate from the supervised learning environment to independent practice, and it is essential that they are supported with PM education (non-clinical aspects of running a practice ie. legal, administrative, financial) before they make that transition. The Practice Management Principles have been communicated broadly to stakeholders and were presented as an *Unconference* topic at the 2017 Canadian Conference on Medical Education.

Collaboration with the Canadian Medical Protective Association


RDoC and the Canadian Medical Protective Association (CMPA) have collaborated on the development of professional symposia on medico-legal topics for residents. The symposia were experiential and based on practical scenarios on four topics: informed consent and discharge, documentation, disclosing harm and speaking up/delegation/supervision.

A "mini" pilot was held on May 24th at the North York General Hospital (NYGH). 50 University of Toronto residents from NYGH and Scarborough & Rouge Valley Hospital sites participated. A larger pilot will be held in November 2017 at the Metro Toronto Convention Centre for 200 residents from the University of Toronto, with the goal of progressively expanding the symposia across Canada.

Health Human Resources

Resident Specialty Profiles

We have expanded our development of the resident specialty profiles portfolio this year. The profiles provide first-person accounts from residents about the challenges, opportunities, and rewards of their chosen fields. They assist learners in the early to mid-stages of choosing a career path. This year, we have renewed our focus on highlighting the experiences of subspecialty residents, and those who have



unique experiences in residency. Our goal is to provide learners with a breadth of understanding of the expectations in residency and beyond.

First launched during Resident Awareness Week in Feb 2016, a total of 25 profiles have been released as of June 2017, covering the following specialties: anatomical pathology, anaesthesiology, dermatology, emergency medicine, family medicine (including rural and northern/remote), general internal medicine, general surgery, internal medicine, obstetrics and gynaecology, orthopaedic surgery, pediatrics, plastic and reconstructive surgery, psychiatry, public health and preventive medicine and radiation oncology.

Career Resources

To support resident doctors in their career planning process, this year RDoC undertook a thorough review of external career planning resources. We have updated our Career Resources web page with links to national and provincial medical associations, provincial recruitment sites, national specialty societies, and other medical job posting sites. Website users can now organize and filter the available links according to the type of contact provided. The webpage will be updated on a regular basis.

Portable Locum Licensure

This year, we developed a collaborative statement on portable locum licensure. This is a topic of increasing concern for learners. The prime focus of our advocacy efforts has been ensuring that there is a collaborative approach.

The current licensure application process requires that physicians submit separate licensure applications to each provincial/territorial medical regulatory authority. RDoC is advocating for a locum license that would be portable and applicable across provinces and territories. This will provide physicians with the ability to practice between regions without submitting many applications to do so. The goal is to help deliver timely locum coverage in underserved regions.

Entry Routes

RDoC led the creation of an Entry Routes Working Group. Comprising national stakeholders in medical education, the group is exploring ways to address and influence change in the current procedures for the development of entry routes into postgraduate medical education. This includes examining the current climate of entry routes, including the significant growth in the number of residency training disciplines, to ensure that our medical education institutions are producing the right mix of physicians to meet patient needs.

This work is a continuation of RDoC's work on entry disciplines, which began in 2015. Central to RDoC's position is the belief that the mix of PGME entry disciplines, and their ability to serve the needs of the Canadian health care system, must be continually re-evaluated to ensure alignment with societal and patient needs, adequate generalist skills, and practice and career flexibility.

Social Accountability

We continue to explore the concept of social accountability and related issues of physician autonomy and medical professionalism. Social accountability is intrinsic to medicine and is an underlying principle for all Resident Doctors of Canada work. This year, we finalized a “Social Accountability Tool,” created to integrate social accountability within all RDoC activities and decision making processes.

Collaboration with Choosing Wisely Canada

This year, we collaborated with Choosing Wisely Canada (CWC) to create a list of five recommendations to help promote resource stewardship in residency training. After reviewing more than 20 evidence-based recommendations, we sent a list of 12 recommendations to residents across Canada, asking them to identify which recommendations were most relevant to them. The final list will help support resident decision-making on the appropriate allocation of resources for patient care management, which considers benefits, harms, and overall costs.

We are also collaborating with CWC on two additional projects relating to resource stewardship. The first will identify which residents in Canada are completing scholarly projects related to resource stewardship, and in what capacity. This information will help identify any gaps, and unite researchers with similar goals. The second is an assessment of how, and to what extent, resource stewardship is currently being taught within postgraduate medical education. This research will help identify various benchmarks for resource stewardship curriculums, and will help inform future advocacy campaigns.

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
- Practice management training
- Social accountability and resource stewardship
- Transition into practice







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. This includes projects in support of national curriculum development, accreditation, certification, licensure, and examination policy.

Data Collection and Learner Privacy

This year, RDoC developed Data Collection & Learner Privacy Principles to help guide our advocacy on the storage, collection and protection of learners' personal information. While most organizations will treat data with appropriate processes to ensure anonymity, an increasingly wide range of data is collected about resident physicians during their training. Much of this data may be sensitive in nature, and it is critical that it is appropriately stored and protected.

Competency-Based Medical Education

In June 2016, RDoC released the position paper, *Implementing a Competency-Based Approach to Medical Education*. Since that time, we have continued to play a central role in CBME development in Canada. Through national advocacy work on behalf of our members and regular formal meetings with the Colleges, RDoC's goal is to ensure that the CBME roll-out at Canadian faculties of medicine engage learners in a supportive and streamlined transitional process. To inform our advocacy efforts, this past year, RDoC has undertaken an environmental scan of CBME implementation efforts, reaching out to the Competence-by-Design leads at faculties of medicine to assess their progress with the design and implementation of CBME. Of interest is learning what is working, what isn't, and what areas we can best advocate for on behalf of residents. This will help inform our advocacy efforts and those of RDoC representatives who attend meetings at various tables on the organization's behalf. This work is on-going. *Learning from others: why we need not reinvent the wheel implementing CBME in Canada* was presented as a workshop at the 2017 Canadian Conference on Medical Education.

Resident Teaching Skills in PGME

RDoC is exploring resident teaching skills programs in Canadian postgraduate medical education. Resident doctors are provided with opportunities in residency to develop their teaching, mentoring and leadership skills. To extend these opportunities to senior and junior residents, many programs offer teaching-skills programs for residents. However, these programs are varied in their content and delivery across institutions and programs. The purpose of our work is to identify best practices on what content and skills training should be included in a resident-as-teacher program. Our goal is to support successful implementation of these programs and to equip residents with the skills to execute their role as a teacher successfully.

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It has been a productive year in terms of the efforts made by RDoC towards creating and strengthening partnerships with PHOs. This is reflected in the creation of a joint Regional Networking Committee and executive director meeting where ideas can be exchanged and PHOs are seen as active partners. To truly provide a representative national voice for resident physicians across the country, an understanding of how each issue affects resident physicians at the provincial level is imperative. We commend this collaborative spirit and PARA looks forward to further strengthening of communication and partnerships in the years to come.

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— Dr. Catherine Cheng
PGY-3 Psychiatry, University of Alberta
President, Professional Association of Resident
Physicians in Alberta (PARA)

Accreditation

Regarding the changes to the General Standards of Accreditation and roll-out of the new accreditation process, RDoC continues to engage in discussions with Colleges and FMRQ. Our goal is to ensure that resident input is accounted for, in a confidential and anonymized process, prior to the onsite accreditation survey. We also support continued resident involvement in the on-site accreditation visits and use of the RDoC pre-accreditation questionnaire.

RDoC ensures the participation of residents as surveyors on accreditation survey teams. In 2016-17, residents served on all Royal College external review teams (McMaster University, University of British Columbia, University of Manitoba, Northern Ontario School of Medicine, Memorial University of Newfoundland, University of Saskatchewan, University of Calgary, Western University), as well as the College of Family Physicians Canada (CFPC) and Royal College full survey teams for Memorial University of Newfoundland and the University of Ottawa. We also continue to collaborate with the Colleges on presentations to chief residents in preparation for the full survey accreditation visits.

Liaison Work

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

- Competence-by-Design planning and implementation
- Resident matching
- Accreditation process and standards
- Examinations, assessment, credentialing and licensing
- 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 toward resident wellness. We are inspiring a redefined work environment for resident doctors by promoting a culture of respect. We also champion the good health of Canadian resident doctors in mind, body, and spirit.

Accommodations/Accessibility

The Wellness Committee began a literature review with the goal of developing a position statement about accommodations provided to residents with disabilities during their training. This review includes consultation with the Provincial Housestaff Organizations (PHOs) in each region of Canada.

Fatigue Risk Management

In 2016-2017, we completed enviroscans in the following project areas: nutrition availability and quality in teaching hospitals, call room requirements, and the issue of presenteeism (working while sick). These enviroscans will be shared with the PHOs and further opportunities for advocacy will be discussed.

Optimizing a Positive Work Environment

RDoC advocates strongly for a positive learning and working environment in postgraduate medical education (PGME). In support of this, the Wellness Committee completed a directory of faculty specific online resources and policies to support residents who experience or witness intimidation or harassment. RDoC is in the early stages of planning a national, multi-stakeholder summit on creating and maintaining a positive working environment.

Online Resources

The Wellness Committee continues to enhance RDoC's online member resources, including a comprehensive article with helpful information about starting a family during residency. Committee members also participated in two social media events for resident wellness. On Bell Let's Talk Day

(January 25, 2017), RDoC discussed the unique barriers that residents face with regards to mental health and stress. On May 24, 2017 RDoC hosted its first ever Wellness Twitter Chat with two wellness experts in the PGME community.

Liaison Work

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

- Distributed Medical Education
- Physician Health and Wellness
- Ethics
- Fatigue Risk Management
- Accommodations
- Health and Public Policy
- Regional Advisory Groups
- Rural Physicians



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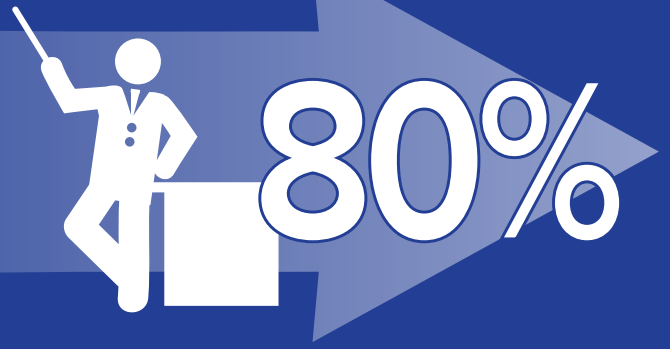
The College of Family Physicians of Canada values the level of participation between our Section of Residents and Resident Doctors of Canada (RDoC) members. Collaboration on priority initiatives such as the resiliency curriculum, the Residency Accreditation Committee and the Certification Examination in Family Medicine provides an important perspective, fresh ideas and stronger outcomes. We commend RDoC on their accomplishments over the past year and look forward to continuing our working relationship in the future.

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— Francine Lemire, MD CM, CCFP, FCFP, CAE
Executive Director and Chief Executive Officer
College of Family Physicians of Canada (CFPC)

Paying it Forward

After completing their training, **over 80%** of residents plan to spend time in teaching/education roles.

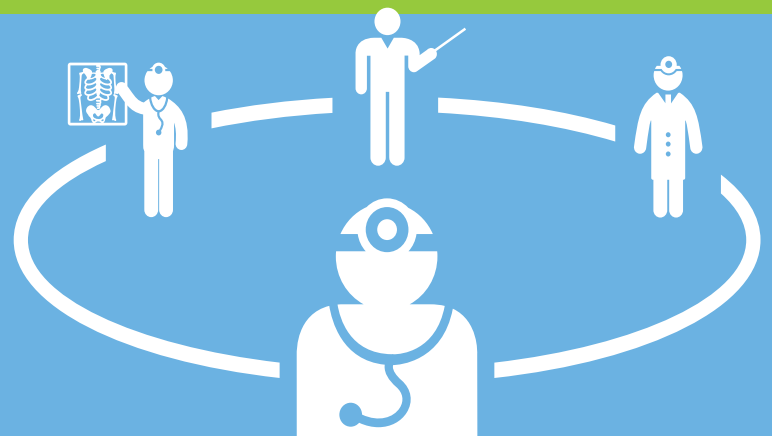


Demographically Speaking

Over **70%** of residents were born in Canada, with the **other 30%** coming from over 45 countries.

Many Hats

As an integral part of the frontline of patient-centered healthcare, **resident doctors are teachers, trainees, and clinicians.**



Beyond the Teaching Hospital

Residents provide care throughout **Canada** in a variety of urban, rural, and remote communities.

30-somethings

The **average age** of resident doctors in Canada is just **under 30.**



By the Numbers

No. of volunteers:

≈ 100

committee members and liaison reps

No. of stakeholder committees:

60+

No. of meetings per year:

86+

in person, plus countless teleconferences and email discussions



Resiliency Working Group

We created a comprehensive resiliency training workshop for residents. The workshop draws from the Canadian Armed Forces' Road to Mental Readiness program and the Mental Health Commission of Canada's (MHCC) course, The Working Mind.



It is skills-based and designed to help mitigate stress and optimize performance. It is instrumental in helping residents overcome both the anticipated and the unexpected adversities of their medical training. At the same time, it prepares residents to transition into rewarding, sustainable careers. Ultimately this yields benefits for all patients and Canada's healthcare system as a whole.

The resiliency workshop was piloted with more than 200 residents at two participating faculties, Dalhousie University and the University of Calgary. This table shows the pilot activities:

Workshop Date	Faculty	Program
July 13, 2016	Dalhousie University	Internal Medicine
July 25, 2016	Dalhousie University	Surgical Foundations
August 25, 2016	University of Calgary	Surgical Foundations
August 25, 2016	University of Calgary	Anesthesiology
September 30, 2016	Dalhousie University	Family Medicine

The Resiliency Working Group continues to collect data and feedback regarding the resident workshop, and we will report on the pilot project evaluation. We are also now developing a leadership module for roles such as chief residents, program directors, and program administrators.

Train-the-Trainer

RDoC invited two groups of residents to participate in train-the-trainer sessions held in June 2016 and March 2016. These residents learned how to deliver the resiliency workshop to their peers, and they will continue to bring the workshop to various programs across Canada.

Conferences & Events

The Resiliency Team had the opportunity to present at several national and international stakeholder events in the 2015-16 year:

- The Canadian Medical Association (CMA) General Council Meeting
- The International Conference on Residency Education (ICRE)
- The International Resident Leadership Summit (IRLS)
- The Canadian Conference on Medical Education (CCME)
- The Canadian Pediatric Society (CPS) Annual Conference



RDoC Awards 2016-17

Since 2002, the RDoC Awards Program has honoured individuals who have contributed to improving various elements of the lives of resident doctors in Canada. The Wellness and Medical Education Awards each recognize outstanding resident and staff physicians in these areas. The Service to Resident Doctors Award highlights the important role played by non-physician staff in the post-graduate medical training environment.

RDoC received 30 nominations for the 2016 Awards, and for the second year in a row, the number of nominations in the Resident categories surpassed those in the Staff categories. Those nominees who did not receive an RDoC Award were still acknowledged by the RDoC President and Executive Director on behalf of residents across Canada, and were encouraged to continue their valuable work.

The Awards Presentation reception took place on April 30, 2017 at the Delta Winnipeg, in conjunction with the Canadian Conference on Medical Education. About 50 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.

2016 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. Zafrina Poonja
PGY-3 Emergency
Medicine, the
University of
Saskatchewan



Dr. Dianna Louie
Pediatrician, BC
Children's Hospital,
Vancouver

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. Kathryn Darras
PGY-5 Radiology,
University of
British Columbia



Dr. Barry Kassen
CTU Director,
St. Paul's Hospital,
Vancouver

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. Sharon Cameron
Program Administrator
Competency-based Medical
Education Postgraduate
Implementation Manager,
McMaster University



Financial Statement

Financial Statement **April 1, 2016 – March 31, 2017**

REVENUES

Member Dues (0.236% of salary per resident)	\$ 1,532,007
Other Revenue	\$ 170,414

EXPENSES

Human Resources	\$ 738,904
Operations	\$ 272,825
Governance	\$ 221,321
Stakeholder Relations	\$ 82,076
Liaison Representatives	\$ 49,989
Corporate Communications	\$ 57,106
Committees (Practice, Training, Wellness)	\$ 50,888
Resiliency Project	\$ 82,748
Memberships & Sponsorships	\$ 45,362

NET INCOME	\$ 101,202
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