

Transition to Residency 2015

SUPERVISING SELECTIVES SUCCESSFULLY!
GETTING READY FOR YOUR 4TH YEAR
TRANSITION TO RESIDENCY STUDENT

DECEMBER 1, 2014



Overview

About You

Why do we have TTR and Selectives?

Who are these students?

Mechanics of Selectives

Expectations

Best Practices



Objectives

At the end of this webinar you will be able to:

Describe the structure and purpose of the Selectives program

Develop a plan for your Selective student(s)' experience

Describe Best Practices for learning activities

Describe Best Practices for student assessment

Describe the expectations of students and supervisors



About You



What have you been doing in UME?

Preclerkship teaching

Clerkship teaching and supervision

Elective supervision

Selective supervision

Nothing yet!

New or Experienced



Why do we have TTR and Selectives?



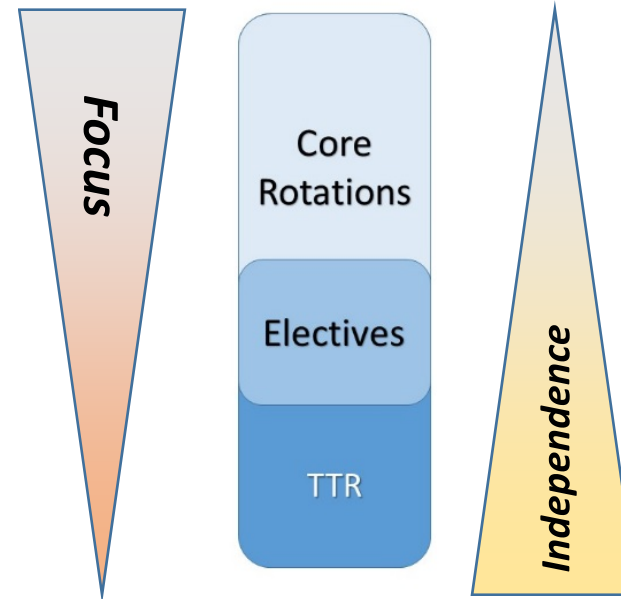
Clerkship *in toto* – 87 Weeks

Core Rotations

Electives

TTR

2 weeks Central teaching
2 weeks MCC Review
9 weeks Selectives



Who are these Students?



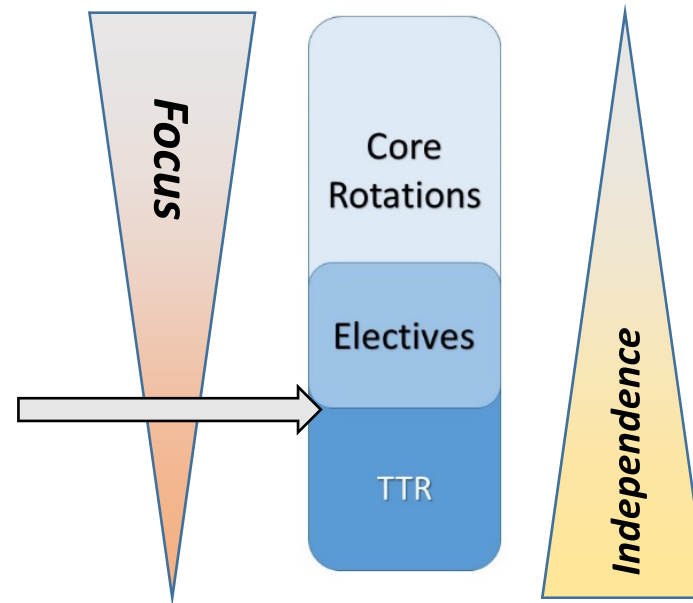
“Pregraduate” Students

Have all basic competencies

Have developed personal interests

More focused on “higher level” learning

Require LESS supervision



Mechanics of Selectives



Selective Structures

2, 3 or 4 weeks in length

CHOSEN or MATCHED by students

Principal/Sponsoring MD Supervisor

Direct supervision, co-supervision, delegated supervision



Processes

Student Arrival – Registering and Orientation

Learning Activities

Assessment and Feedback to Students – midway and final

Evaluation of experience and Supervisor by Students



Learning Activities

Students should be involved in “the work” of the environment

100% hands-on, experiential, workplace learning

Variety of activities encouraged

LESS supervision, but not NO supervision

Student directed goals



Learning Activities – Best Practices

Set aside space, time

Involve students in planning their activities

Have defined goals developed by both of you together

Preview each day

Provide short, relevant teaching in context

Teach from your experience

Q/A, debrief at end of day

Feedback, feedback, feedback



Assessment of Students

Broad focus – Knowledge is a smaller proportion

MedSIS – Student information system

Final Evaluation – Clinical and Professional – 2 web forms

Midway Evaluation – not mandatory - Document if needed

Professionalism concerns – can be done at any time



MedSIS Forms

Collaborator

	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations	Outstanding	N/A
	1	2	3	4	5	
<p>Willingness to work with other providers</p> <p><i>The student regularly demonstrates positive attitude toward participating as a group member to improve care.</i></p>	<p>Uncooperative and poorly integrated as a team member.</p>	<p>Occasionally shows willingness to work with other providers. Receptive to concept but does not regularly put into practice.</p>	<p>Generally functions well as team member. Accepts role as one of a group of providers.</p>	<p>Sees group work as essential to care. Reaches out to other group members to solicit their input into plan of care.</p>	<p>Seeks input from group on all relevant issues. Shows flexibility in role within the group. Able to take the lead on some issues and follow on others.</p>	
<p>Teamwork Skills</p> <p><i>The student can join a team of providers and contribute effectively to the overall function of the group.</i></p>	<p>Unaware of need for communication with other health care providers involved in care.</p>	<p>Communicates irregularly or inefficiently with other team members. Does not always define own role relative to others.</p>	<p>Usually defines own role and responsibilities within the team clearly. Usually checks progress of own work relative to other team members.</p>	<p>Responsive to requests for updates from team. Understands what group members need to know to progress in their work. Advanced discussion of all team members' roles.</p>	<p>Provides informative updates to other team members proactively. Offers to assist others in achieving care goals. Contributes expertise voluntarily.</p>	



Assessment – Best Practices

No surprises

Face to face discussion in last 1-2 days

Use the scales as written

Not everyone is “Outstanding” all the time

Call TTR office if concerned about anything

Understand students’ resources and responsibilities

www.md.utoronto.ca





[MD student emergency/crisis Advice](#)



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News & Events

Heather Sampson, Course Director for the Determinants of Community Health-2 (DOCH-2) course

Dr. Neil Sweezey, Director

Faculty of Medicine eLearning Task Force (eLTF)

In January 2014, the Faculty of Medicine launched an eLearning Task Force, co-chaired by Professors Dimitri Anastakis, Vice Dean of Continuing Professional Development, and Jay Rosenfield, Vice Dean of Undergraduate Medical Professions Education.

The eLearning Task Force is currently conducting a high-level SWOT and Gap Analysis within the Faculty of Medicine community to identify the gaps between where we are today and where we want to be over the next decade and beyond. Findings and recommendations from the Task Force will further position the faculty as a leader in eLearning (i.e. teaching, learning and

Office of the Vice-Dean

"Our medical school attracts the most remarkable, highly



Expectations of Students

Students attend all days and all scheduled activities

Students focus on clinical work first and foremost

Students treat you, other team members, and patients with respect

Students discuss their learning goals, speak up if needed, and don't take on too much or too little



Expectations of Supervisors

Welcome students, create time and space for them

Supervise, a little less

Teach whenever you can, answer questions as best you can

Provide feedback frequently

Notify us if there is a problem (phone, email)!

Complete Assessment forms in a timely manner

Take student Professionalism seriously



Other things

ttrfacdev.kenlocke.org

Tell us ASAP if you will not be filling out the MedSIS form!

Faculty Appointments

Contact us with Questions:

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