MEETING OF FACULTY COUNCIL
OF THE FACULTY OF MEDICINE

A meeting of Faculty Council will be held on Monday, October 16, 2017, from 4:00 p.m. to 6:00 p.m. in the Red Room, Donnelly Centre, University of Toronto.

AGENDA

1 Call to Order

2 Minutes of the previous meeting of Faculty Council – April 24, 2017
   2.1 Business Arising

3 Report from the Speaker
   3.1 External Reviews

4 Reports from the Dean’s Office
   4.2 Vice Dean, Research and Innovation
   4.3 Vice-Dean, Partnerships
   4.4 Vice-Deans, Education

5 Items for Approval
   The Executive Committee of Faculty Council recommends the approval of the following motions:

   “THAT the Constitution of the Faculty of Medicine be approved as submitted.”

   “THAT the By-Laws of the Faculty of Medicine be approved as submitted.”

6 Standing Committee Annual Reports
   Medical Radiation Sciences Board of Examiners

7 Faculty Council Forum
   TBD

8 Adjournment

NEXT MEETING: February 12, 2018
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Faculty Council of the Faculty of Medicine  
Minutes of the April 24, 2017 meeting  
4:00 p.m.  
Red Room, Donnelly Centre  


Call to Order  
The Speaker called the meeting to order and noted that there was a quorum.  

1 Institutional Strategic Research Plan  

Dr. Vivek Goel, Vice-President, Research & Innovation presented the Institutional Strategic Research Plan. Dr. Goel indicated that the mission of the Division of the Vice-President, Research & Innovation is to create a supportive environment so researchers, innovators, and learners can advance understanding and apply new knowledge. The Division is also working to support the President’s three Institutional Priorities: reimagining undergraduate education, leveraging urban location, and international impact. The Strategic Research Plan is intended to reflect the breadth of U of T research, provide direction for how to support university scholarship, provide support and direction but not limit research programs or priorities, and meet internal and external community needs.  

2017 marks the end of the current Institutional Strategic Research Plan. Developing a new plan for 2018-2023 will provide an opportunity to review research themes, assess emergent themes/areas, identify areas in need of support and innovation, and ensure external requirements continue to be met.  

The current Institutional Strategic Research Plan includes Research Themes, Strategic Objectives, and Enabling Actions. The seven Research Themes are: Explore: Our place in the universe; Sustain: Humanity and the environment; Promote: Healthy people, communities, world; Engage: Mind, language, culture, values; Advance: Institutions, peace, and prosperity; Enable: Technologies for the 21st century; Build: Community and liveable societies.  

The Strategic Objectives of the current plan are: 1) Strive for global leadership; 2) Address questions of local, provincial, national and international importance; 3) Provide world-class training through the integration of research and teaching; 4) Maximize the application of research and the innovation of creative concepts; 5) Facilitate intra- and inter-divisional collaboration within U of T and across institutions, Canada-wide and internationally; and 6) Create a culture of scholarship where interaction, collaboration and community are valued and facilitated.  

The Enabling Actions of the current plan are: 1) Attract, fund, and retain the world’s best talent; 2) Develop research leadership skills; 3) Encourage bold and innovative inquiry; 4) Advocate and communicate strength and successes; 5) Develop new integrated governance models for research across the university and with key partners; 6) Acquire and maintain state-of-the-art infrastructure; 7) Maintain a competitive and sustainable research funding base; and 8) Develop performance indicators and benchmarks.
During the spring of 2017 there will be consultations and discussions on scope of the new plan. There will be special sessions for each of the academic divisions as well as town hall meetings at each campus and an online survey. During the summer a draft plan will be developed with feedback and revisions taking place in the fall. The plan will go to governance in the late fall with a final document being circulated in January 2018.

Dr. Goel invited members to complete the online survey at [http://www.research.utoronto.ca/ISRP](http://www.research.utoronto.ca/ISRP) or direct any questions to vpri.reports@utoronto.ca.

2 Minutes of the previous meeting of Faculty Council – February 13, 2017

The minutes of the meeting of February 13, 2017 had been previously circulated. They were approved on a motion from J. Barkin and seconded by P. Berger. There was no business arising.

3 Report from the Speaker

The Speaker indicated that he did not have any items on which to report at this time.

4 Reports from the Dean’s Office

4.1 Dean’s Report

Dean Young commended faculty, staff, and students for their patience and cooperation during the ongoing asbestos issue in MSB. There were originally a number of labs affected but all are now open. Extra air testing has been done and will be ongoing to ensure safety.

Dean Young noted that there have been a number of successful eternal reviews including Otolaryngology, Ophthalmology, Medical imaging, Radiation Oncology, and Immunology. The Faculty of Medicine always performs well in national and international rankings.

There are currently two Chair searches underway for Anesthesia and Medical Biophysics. Michael Kidd has recently been appointed Chair of Family and Community Medicine.

4.2 Vice Dean, Research & Innovation

Dr. Richard Hegele indicated that the Faculty’s updated research plan will feed into the University Plan as outlined by Dr. Goel and will be developed for the Fall.

Dr. Hegele thanked the Dean for update on the asbestos situation and noted that there have been no new occurrences of asbestos in the air samples that have been taken in MSB.

Dr. Hegele noted that the Naylor Report has been submitted to the government. Details will be made available. Dr. Roderick McInnes has been appointed as acting president for CIHR. Baycrest is seeking a new Vice President, Research.

Dr. Hegele outlined that the Faculty remains a research powerhouse nationally with more publication and citations that UBC and McGill combined.

4.3 Vice-Dean, Partnerships

Dr. Lynn Wilson reminded the members that her last report indicated that her office was working on a more formalized international strategy, which was presented to the Dean’s Advisory Group last month. This report will focus on the key elements of this strategy.

The Faculty is committed to build and strengthen international relations in areas of strategic importance. This strategy is leading to significantly enhance international activity in ways beneficial to the faculty and its collaborators.
There are a number of reasons for the Faculty to aggressively pursue international relations: attract top faculty and graduate students; enhance student and faculty experience; increase diversity; enhance profile and reputation; build capacity; fulfill social responsibility; and generate revenue.

Dr. Wilson outlined three core objectives: Prepare; Discover; and Partner.

The Prepare objective focuses on student recruitment. The MD Program has filled 9 of 10 supernumerary spaces for international students. Once all 10 are filled, consideration will be given to add spaces. Internationally, there is a great deal of interest in the Faculty’s course based Master’s program. The MRS and PA Programs have interest in growing their programs by recruiting internationally.

The Discover objective focuses on academic collaboration. Dr. Wilson notes that a large amount of Faculty research is conducted with an international partner and her office is working to pursue research partnerships aligned with the Faculty’s academic goals.

The Partner objective focuses on operational consulting. Dr. Wilson encourages departments to maintain and promote inter-departmental cooperation and model best practices from across the Faculty. In addition, the Faculty receives a great deal of requests internationally for consulting services and Dr. Wilson hopes to develop a suite of consultative services to meet this need.

Moving forward, Dr. Wilson hopes to identify faculty and staff to serve as leads for the tactics within each priority area and develop faculty champions with expertise in particular regions. There will be a ‘best practices learning session’ in Fall 2017 to look at successes and opportunities in international relations. Dr. Wilson and her office will be working with the Vice President, International to ensure that Medicine is well represented in the development of the University’s overall international strategy.

4.4 Vice-Deans, Education

Dr. Allan Kaplan presented the report attached to these minutes beginning on page 7.

5 Items for Approval

“THAT the proposal to establish a new Master of Health Science in Medical Genomics be approved as submitted.”

Moved: S. Spadafora, Seconded: B. Steipe

Dr. Leah Cowen indicated that Genomics is a rapidly growing area with broad reaching implications from bench to bedside. Technological advances are being pushed to the clinic, and the ability to generate and interpret genomic information will drive a new era of healthcare and patient management. With this progress, there is a growing knowledge gap between clinical practice and the discoveries stemming from genomicscale research in human genetics. Advances in systems biology, including genomics, proteomics, and metabolomics, are outpacing the ability of undergraduate medical and scientific teaching to prepare medical and technical staff. Many practicing clinicians and laboratory personnel were trained before the development of modern genomic technologies, yet are faced with the need to generate, integrate, and interpret genetic and genomic data. To address this acute educational need, the Department of Molecular Genetics within the Faculty of Medicine, proposes a new program and associated degree, a professional Masters in Health Sciences (MHSc) in Medical Genomics. This new degree will provide medical trainees, research scientists, and laboratory professionals with the theory and practical knowledge necessary to incorporate genomics data into medical practice.

The MHSc in Medical Genomics is a professional Master’s degree that is focused on providing directly actionable skills and knowledge to enable graduates of the program to extend their professional practice. This new program complements the existing graduate programs within the Department of Molecular Genetics, and
significantly extends the educational mission by reaching a previously untargeted student cohort. In contrast to the department's existing MSc/PhD graduate program, which is research and thesis-focused, the MHSc in Medical Genomics is a lecture and project-based curriculum. Although similar in title, the department's existing MSc in Genetic Counselling serves a much smaller student cohort with a programmatic focus on clinical genetic counselling and inborn genetic disorders. This MHSc in Medical Genomics is being developed for a new era of research and clinical science, providing professional and practical skills for a world where genetic and genomic data are routinely collected and analyzed across a wide range of patient populations and medical indications.

As a professional Masters degree, the MHSc in Medical Genomics is focused on teaching theory and practice, rather than the creation of new knowledge as is integral to research graduate degrees. This MHSc program’s specific focus, orthogonal to existing curricula in the department, University, and across the province, will provide a means by which to provide professionally useful skills in Medical Genomics to students interested in immediate practical implementation.

The MHSc in Medical Genomics consists of a core set of lecture, discussion, and project based courses across a two year program duration. Lecture courses will be delivered by experts in the field comprising of faculty from the Molecular Genetics department and cross-appointed clinical faculty in conjunction with the Faculty of Law and Faculty of Public Health. In addition to lecture-based learning, students will participate in a capstone practicum during the final academic term of the program. For the practicum, students will be split into clinical (for undergraduate or post-graduate M.D.) and laboratory professional (for post-bachelor’s) streams, with unique course work focused on patient interaction and laboratory data generation, respectively.

This professional Master's degree will be the first of its kind in Canada, and will join several elite institutions leading the charge in the United States. This program developed organically from consultation with various stakeholders in Toronto, including clinical training programs, hospital affiliated laboratories, academic research departments, and other University Faculties of Public Health and Law.

The Department of Molecular Genetics, leveraging existing partnerships with the McLaughlin Centre and the Centre for Genetic Medicine at SickKids, is uniquely suited to serve the growing need for graduate-level training in Medical Genomics. This MHSc will leverage the academic strengths of the Department of Molecular Genetics, with direct teaching contributions to this program by more than 25 departmental faculty. Although few comparable programs currently exist in North America, the competitive landscape is expected to change rapidly over the next several years. The proposal is to start this program in Fall 2017, targeting an entering class of 20 students and steady-state of 20 entrants per year.

The motion passed.

“THAT the physics and biology streams in the MSc and PhD curriculum in the Department of Medical Biophysics be modified as submitted.”

Moved: S. Shakory, Seconded: S. Spadafora

Dr. John Sled and Ms. Merle Casci indicated that the proposal will implement a modified curriculum for physics and biology stream students starting in September 2017. The modified curriculum will be structured in terms of modules, based on but also extending the existing courses, that are 0.25 credits each, so that students will have greater flexibility to mix-and-match modules between the streams to meet their training goals.

The total degree credit requirements will also be reduced for the MSc and PhD and harmonized between the two streams. A total of 6 modules (1.5 FCE) plus the seminar course (1.0 FCE) is required for the MSc (2.5 FCE) and an additional 4 modules (1.0 FCE) are required for the PhD (3.5 FCE). A highlight of the modified curriculum is that the program will begin with two mandatory modules taken jointly by students in the biology and physics streams, addressing scientific exposition, ethics and statistical methodology.
In practice, a student will take the required seminar course and two required modules plus 4 elective modules for MSc. A PhD student will take the required seminar course and two required modules plus 8 elective modules (4 of which may have been completed during MSc, if MSc Medical Biophysics student). The new modular structure of the programs also required the creation of five new courses included in the proposal.

The motion passed.

6 Standing Committee Annual Reports

6.1 Education Committee

Dr. Jerry Maniate thanked Dr. Ian Witterick, the Past Chair and Mr. Todd Coomber, the Faculty Affairs Officer, for their support during his first year as Chair. Dr. Maniate indicated that the year’s business centred on renewing the Faculty’s programs to prepare graduates for the current & future realities of health care.

The Committee recommended to Council the approval the two Major Program Modifications presented to Council today (Master of Health Science in Medical Genomics and the modifications to the MSc and PhD programs in Medical Biophysics).

On behalf of Council, the Education Committee approved a number of Minor Program Modifications:

New Graduate Courses

- “Visual Representation of Biomolecular Structure and Function” (MSC 2020H)
- “Applied Research in Immunology” (IMM 2551Y)
- “Graphic Medicine Seminar” (MSC 2022H)
- “Emerging Tools for Precision Medicine in Oncology” (MSC 1502H)
- “Advanced Topics in the Neural Basis for Sensation” (PSL1072H)
- “Evidence Based Practice in Physical Therapy” (PHT1016Y)

Amended Graduate Courses

- “Research Project in Immunology II” (IMM 1550Y) and “Research Project in Immunology III” (IMM 2550Y) amended
- “Fundamentals of Drug Discovery” course code (PHM 1122S) changed to JNP 1122H
- “Techniques in Immunology” (IMM 2041H) amended
- Nutritional Science graduate courses to the Dalla Lana School of Public Health

Other Minor Program Modifications

- Change in pre-requisites for admission to the Medical Radiation Sciences Program
- Change in pre-requisites for admission, required courses, and new electives for the Biomedical Communications MSc Program
- Change in required courses, and Decrease number of electives from 1.5 FCE to 1.0 FCE for the Applied Immunology MSc Program
- Amended Guidelines for the Assessment of Postgraduate Residents

New Awards

- Miriam Rossi Award for Health Equity in Undergraduate Medical Education
6.2 Research Committee

Dr. Mario Ostrowski indicated that the Research Committee had recommended for approval the proposed Constitutional and Bylaw amendments (Faculty Council approval postponed to Fall 2017) but had not met in person as there was no additional business to discuss. Dr. Ostrowski indicated he will look to make better use of the Research Committee when there are no business items specifically directed to that group.

7 Faculty Council Forum

Dr. Allan Kaplan presented the Task Force Report on Research Integrity (included with these minutes beginning on page 24).

8 Adjournment

The meeting was adjourned at 6:00pm
Council of Education Vice Deans
Faculty Council Report

April 24, 2017

Submitted by:

Patricia Houston, Vice Dean, MD Program
Allan S. Kaplan, Vice Dean, Graduate and Academic Affairs
Salvatore Spadafora, Vice-Dean, Post MD Education (PGME & CPD)
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A. Education Vice-Deans, Integrative Activities

1. External Education and Teaching Awards – Call for Nominations

Each spring and fall, the Faculty’s Teaching and Education Awards Committee has the privilege of recognizing individuals who are making significant contributions to medical education.

We are currently calling for nominations for the following awards:

- AFMC - John Ruiedy Award for Innovation in Medical Education
- AFMC – May Cohen Equity, Diversity & Gender Award
- AFMC - President’s Award
- AFMC - Young Educators Award
- CAME - Meridith Marks Award
- CMA - Award for Young Leaders
- CMA - May Cohen Award for Women Mentors
- RCPSC - Donald R. Wilson Award
- RCPSC – The Duncan Graham Award
- STLHE – Alan Blizzard Award
- UofT – President’s Teaching Award (University of Toronto)

Please submit the online nomination form and supporting documentation by 5PM on Saturday, May 27, 2017. Nominations require a one-page letter of support from the nominator; this should be emailed, along with the nominee’s current CV and Teaching and Education Report, to
2. Award Announcements

This year’s recipients of the Excellence in Community-based Teaching Awards are:

Dr. Yvonne Chan, Dr. David Eisen and Dr. Sid Feldman

Dr. Yvonne Chan (Otolaryngology – Head and Neck Surgery), Dr. David Eisen (Family & Community Medicine) and Dr. Sid Feldman (Family & Community Medicine) have been awarded the Faculty of Medicine’s 2017 Community Based Teaching Awards. They are recognized for their significant contributions to the education of University of Toronto medical students and residents, and for excellence in community-based clinical teaching.

This year’s recipients of the CAME Certificate of Merit Award are:

Dr. Cynthia Whitehead, Dr. Maria Mylopolous and Dr. Paolo Campisi

Dr. Cynthia Whitehead (DFCM), Dr. Maria Mylopolous (Paediatrics) and Dr. Paolo Campisi (Otolaryngology) will each receive a 2017 Canadian Association for Medical Education (CAME) Certificate of Merit. This award, given annually, recognizes faculty for their commitment to Canadian medical schools and for their significant contributions to medical education.

3. Annual Education Achievement Celebration

The Faculty of Medicine’s 15th Annual Education Achievement Celebration will be held on Monday, May 15th, 2017 from 5:30–7:30pm in the Great Hall at Hart House. The C.I. Whiteside Education Achievement Keynote Address will be presented by Dr. Arno Kumagai, Vice-Chair Education, Department of Medicine. Doors will open at 5:00 pm. The event itself will get underway at approximately 5:30 PM.

Please RSVP here no later than Monday May 1, 2017.

4. Office Staffing

We look forward to welcoming Lindsey Fechtig back to her role as Administrative and Project Manager in the Office of the Education Vice-Deans as of May 8th. She can be reached at lindsey.fechtig@utoronto.ca. Elizabeth Murray completes the administrative complement for the
Education Vice-Deans in her role as Administrative Assistant, Office of the Education Vice-Deans. Thank you to Morag Paton for her contributions over the last year.

B. MD Program

5. CaRMS – 2017 Match Results

92.97% (225 of 242) of UofT class of 2017 students who applied to Canadian residency positions were matched in the first iteration of CaRMS, which is consistent with both our 2016 first iteration match rate (92.94%) and the 2017 national average 93.47%.

Of the UofT class of 2017 students who were matched in the first iteration of CaRMS:
- 27% of the overall class and 26% of MAM students matched to Family Medicine
- 48.35% matched to UofT residency programs
- 70.25% matched in Ontario

We are actively working with our students who did not match in the first iteration to help them prepare for the second iteration. It is important to note that, based on the information available, those students who did not match do not look significantly different than those who did. The match process is a complex system, and the reasons for not matching are multi-factoral.

An option available to students who remain unmatched is the MD Extended Clerkship (MEC), which is intended to support students to maximize their opportunities for their future career. For the past several years the Faculty offered a post MD non-degree program for students who remained unmatched after their CaRMS cycle. While that program will continue to be offered, the format has changed to meet CPSO requirements. Under this new format, students that take part in the MD Extended Clerkship will be required to delay graduation until June of the following year, but will be eligible to pursue a more fulsome suite of elective opportunities.

Efforts have been initiated on a number of fronts (both locally at the UofT and nationally by the AFMC) to better understand and address the concerning national trend regarding students who remain unmatched after the second iteration, which doubled in 2012 and has remained high ever since.

6. Admissions

Interviews of candidates for September 2017 entry were held on February 26, March 25 and 26, and April 8 and 9.

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* 9 international applicants were interviewed in addition to the 599 domestic applicants for 2017 entry.

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<th>Sept 2016 entry</th>
<th>Sept 2017 entry</th>
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7. **Black Students Application Program (BSAP)**

The Black Students Application Program (BSAP) was formally launched on March 8, 2017. BSAP aims to increase and support Black (Black African, Black Caribbean, Black North American, etc.) medical student representation at the University of Toronto. It will be in place for the 2017/2018 admissions cycle. BSAP is modeled after the Indigenous Student Application Program (ISAP), which promotes and supports the entry of Indigenous students into the MD Program. Since ISAP launched in the 2012-2013 academic year, there has been an increase in the number of applications from students who self-identify as being of Aboriginal descent. We hope to see a similar impact on applications submitted by Black students resulting from BSAP.

8. **Longitudinal Integrated Clerkship (LInC)**

In 2017-18 there will be a total of 34 LInC students, comprised of eight students at the FitzGerald Academy, nine at the Mississauga Academy of Medicine, five at the Peters-Boyd Academy, and 12 at the Wightman-Berris Academy.

9. **Interim Accreditation Review**

The site visit for the MD Program’s Interim Accreditation Review was held over March 28-29, 2017. The external reviewer was Dr. Rob Whyte, Assistant Dean, MD Program, McMaster. Approximately 80 faculty members (including Chairs, decanal representatives and education leaders), 60 students and 12 administrative staff participated in the site visit. The Interim Accreditation Review is a formative, internal review, which will culminate in a report outlining areas that may represent impediments to achievement of full compliance with accreditation standards during the MD Program’s next full survey visit, currently scheduled for 2019-20.

10. **Health Advocate and Leadership Curriculum Review**

The MD Program is planning to establish a Working Group in the late spring 2017 to review its Health Advocate and Leadership curriculum. The Working Group will be chaired by the Vice Dean, MD Program, and will include education leaders from the MD Program, PGME and student representatives, ‘at large’ faculty members, and externally recognized experts in leadership education. The overarching purpose of the review is to ensure that graduating students have successfully mastered the MD Program’s Health Advocate and Leadership competencies. The curriculum will be reviewed in the context of the MD Program’s competency framework, relevant Medical Council of Canada (MCC) objectives, AFMC Entrustable Professional Activities for the Transition from Medical School to Residency, Health Advocate and Leadership curriculum at other national and international medical schools, and student and stakeholder reports. The Working Group will report through its Chair to the MD Program Curriculum Committee, with the deliverable being recommendations regarding the program’s Health Advocate and Leadership curriculum.

11. **Governance and Leadership**

- Dr. Sarah McClennan was appointed as Mississauga Academy of Medicine (MAM) Academy Director effective February 6, 2017 for a five-year term.
- Dr. Tony D’Urzo was appointed as Associate Director, Health Science Research (HSR) effective November 15, 2016 for a one-year term.
- Dr. Ashna Bowry was appointed as Associate Course Director, Concepts, Patients and Communities 1 effective December 1, 2016 for a one-year term.
C. Post MD Education (PGME & CPD)

12. Post MD Appreciation Reception
PostMD Education held its annual Appreciation Reception on March 1\textsuperscript{st}, 2017 to honour and recognize the exceptional work and dedication to postgraduate medical education and continuing professional development this past year. The event also recognized the contributions of Program and Site Directors who have completed their terms.

13. Renovations of the Post MD Area
Renovations of the PostMD area are underway. A new PostMD Reception area will greet visitors, new boardrooms and office space are in development with an anticipated completion time of early May.

Postgraduate Medical Education

14. Director of Resident Wellness
Dr. Julie Maggi is the new Director of Resident Wellness at the University of Toronto. Julie started April 1, 2017 to allow for successful transition and formally take over as Director July 1, 2017. Dr. Susan Edwards, the first Director of Resident Wellness, will be leaving the position on June 30, 2017.

15. Physician Health Symposium
The first Faculty of Medicine Physician Health Symposium, “Building Resilient Medical Communities: Current Innovations, Future Possibilities” will be held on Tuesday May 30, 2017. Dr. Jane Lemaire, Vice Chair of Physician Wellness, Department of Medicine, University of Calgary will deliver the plenary. This half-day symposium will serve as an opportunity to showcase completed research and in-action innovations in physician health and well-being initiatives with University of Toronto colleagues.

The Best Practices in Evaluation and Assessment (BPEA) Working Group for Competency-Based Medical Education (CBME) was established just over a year ago to identify evidence-based best practices for the implementation of CBME, and the implications of CBME for Program Evaluation (e.g. accreditation, internal reviews) and Learner Assessments (e.g. information systems, number/type of assessments, remediation). The Draft BPEA Summary Report was released in February 2017 and can be viewed online [http://pg.postmd.utoronto.ca/wp-content/uploads/2017/02/BPEA-Report_penultimate_17feb13_WEB.pdf](http://pg.postmd.utoronto.ca/wp-content/uploads/2017/02/BPEA-Report_penultimate_17feb13_WEB.pdf)

17. Guidelines for the Evaluation of Postgraduate Trainees
The Guidelines for the Evaluation of Postgraduate Trainees of the Faculty of Medicine at the University of Toronto were revised to accommodate the national change in residency education to a competency-based model, and the anticipated new accreditation standards set out by the Royal College of Physicians and Surgeons of Canada (Royal College) and the College of Family Physicians of Canada (CFPC).

18. U of T Teaching & Learning Platform
New U of T Teaching & Learning Platform - Entrada: PGME at the University of Toronto has joined the Entrada consortium. PGME is working with the Faculty of Medicine information systems leaders at Discovery Commons to pilot the basic functionality of Entrada with the Orthopedic Surgery residency competency based residency program. In parallel, PGME is also working with Discovery Commons and Entrada to develop the assessment and evaluation features and functions to support CBME and CBD at U of T. It is expected that the Entrada CBME application for U of T will be ready to support CBD cohorts for the July 2018 academic year.  http://cbme.postmd.utoronto.ca/

19. CBD (Competency by Design)
CBD (Competency by Design) is a multi-year initiative that will transform specialty education from a time-based system to a hybrid competency-based education and assessment system, across the lifelong learning continuum. Effective July 1, 2017, the residents for the following two disciplines will enter a residency training program that will be based on their competency-based specialty standard documents:
- Anesthesiology
- Otolaryngology – Head and Neck Surgery (OHNS)

A “Perspectives on CBME” event was held March 7, 2017 to discuss various program and school CBME implementation journeys. Dr. Eric Holmboe, Senior VP, Milestone Development& Evaluation, ACGME presented on “Lessons Learned about Implementing CBME for ACGME: When Theory Meets the Reality of Practice”.

20. CaRMS Match
PGME at U of T had a successful 2017 CaRMS PGY1 match. All 407 PGY1 positions filled in the first iteration. For the fifth year in a row, the University of Toronto is the only medical school in Canada to fill all of its positions in the first round. Of the 407 filled positions, 337 were filled by Canadian Medical Graduates and 70 were filled by International Medical Graduates. The breakdown of our filled positions is below:

<table>
<thead>
<tr>
<th>Discipline</th>
<th>CMG Positions</th>
<th>IMG Positions</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>Anesthesia</td>
<td>14</td>
<td>4</td>
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</tr>
<tr>
<td>Dermatology</td>
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<td>5</td>
</tr>
<tr>
<td>Diagnostic Radiology</td>
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<td>1</td>
<td>8</td>
</tr>
<tr>
<td>Emergency Medicine</td>
<td>7</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Family Medicine - GTA</td>
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<td>134</td>
</tr>
<tr>
<td>Family Medicine - Barrie/Newmarket</td>
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<td>Family Medicine - Rural</td>
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<tr>
<td>General Surgery</td>
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<tr>
<td>Internal Medicine</td>
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<tr>
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<tr>
<td>Lab Medicine - Neuropathology</td>
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<td>Medical Genetics</td>
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<tr>
<td>Neurology</td>
<td>5</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>Neurology - Pediatric</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Neurosurgery</td>
<td>4</td>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>
### Obstetrics & Gynecology
- 10

### Ophthalmology
- 3
- 1
- 4

### Orthopedic Surgery
- 7
- 2
- 9

### Otolaryngology
- 4

### Pediatrics
- 17
- 4
- 21

### Physical Med & Rehab
- 3

### Plastic Surgery
- 4

### Psychiatry
- 31
- 4
- 35

### Public Health and Preventive Medicine
- 3

### Radiation Oncology
- 4

### Urology
- 3
- 1
- 4

### Vascular Surgery
- 2

### Subtotal
- 337
- 70
- 407

The 337 U of T PGME positions for LCME Graduates were filled by:

- 119 U of T graduates
- 126 from other Ontario medical schools
- 84 from other Canadian medical schools
- 8 from U.S. LCME accredited schools

### 21. Transitions Think Tank Symposium
A “Transitions Think Tank Symposium” is occurring on April 7, 2017 looking at transitions from the perspectives of undergraduate medicine, postgraduate medicine and continuing professional development. Medical learners face many challenges in their transition from medical school to residency to post-residency and/or practice. Program Directors and selection committees also face challenges in assessing and selecting the best candidates for their programs. Several groups/committees have been struck to examine the issue at a national level. This Symposium will launch the conversation locally.

### 22. The Fellowship Education Advisory Committee (FEAC)

### Continuing Professional Development

### 23. Governance, Staffing
Alison Lind was promoted to the position of Associate Director, CPD on December 1, 2016. Alison joined the CPD Office (then CME) in 1992 and has served in a variety of roles, most recently as Business Development Coordinator. As Associate Director, CPD, Alison will provide leadership to the CPD events team, and will be streamlining event management processes, improving client communications, and enhancing customer relations.
Colin Fleming assumed the position of Senior Financial Officer on February 1, 2017. Colin will play a key role on the CPD leadership team, and will be responsible for providing expert advice and counsel with respect to business modelling, short and long term financial planning, strategic alignment and resource allocation, and evaluating new program and business opportunities. In addition to his work at CPD, Colin continues to oversee financial management of the Standardized Patient Program (SPP) and the Integrated Medical Education Office (IME).

24. CPD Academic

Continuing Professional Development has continued to provide excellence in academic programming. The number of accredited programs continues to grow annually with 400 accredited programs last year. While the majority were live events, increasingly innovative methods of learning are being incorporated into CPD programs and conferences, including web-based and simulation-based learning. CPD continues to be at the forefront of innovation in program development. The CPD annual report (annualreport.postmd.ca/cpd-2016/) highlights just a few of these innovations including ImageSim (imagesim.com), an on-line education system that teaches health care professionals the interpretation of visually diagnosed medical tests using the concepts of deliberate practice and simulation. Another example is creation of the Canadian Transanal Total Mesorectal Excision (TaTME) Proctorship Network to improve training in this innovative technique.

The CPD Office has continued to be active in the development of programs and conferences. The Medical Record Keeping and Safe Opioid Prescribing Programs continue to attract a wide audience with both programs being offered multiple times per year. Dr. Abhimanyu Sud, Academic Program Director for the Safe Opioid Program was acknowledged by the Department of Family and Community Medicine Education with the Award of Excellence in Development and Use of Innovative Instructional Methods, for the creative and scholarly approach to the program’s development. With the looming opioid crisis, CPD was also successful in obtaining funding from the CPSO to update the Safe Opioid Prescribing Program with the release of new national prescribing guidelines. The second annual International Foundations CPD Certificate Program was launched to a growing audience and a new customized blended program was developed for the University of Alberta, Office of Lifelong Learning. CPD was invited to Barcelona, Spain to run the 4th Annual Essential Skills in CPD program for the Association of Medical Education (AMEE) conference attracting participants from across the globe. CPD, with the leadership of Jane Tipping, was also instrumental in development of a CPD Special Interest Group for AMEE which has now been approved as full CPD Committee. CPD will be involved in development of a CPD symposium for AMEE 2017.

The CPD Provincial Collaborative with the 6 Ontario Universities won the Royal College Accredited Providers award for the IDEAS Quality Improvement introductory program. A new 3-year contract for the IDEAS provincial program was approved. The program was rebranded to the IDEAS Foundation Quality Improvement Program with the creation of a blended learning format consisting of a 4-hour online component and a 1-day live session. CPD recently partnered with the Ontario Renal Network to offer the program to 85 interprofessional regional health providers focusing on improving access to renal transplantation.

CPD has been sharing its accreditation expertise through a new mentorship program with the newly created University of Alberta CPD Office. Partnering with the Office of Lifelong Learning at U of A, CPD assisted this new office in developing processes for accreditation of its continuing medical education.
programs. As part of this mentorship, CPD entered into a “buddy” peer review relationship with U of A for joint accreditation of its CPD programs. This will allow the U of A Office of Life Long Learning to fulfill requirements to become an accredited provider as defined by the Committee of Accreditation for Continuing Medical Education (CACME).

CPD embarked on development of strategic plan for 2016-2021. The process involved a 5-year review of CPD activities, creation of a strategic planning committee and engagement of our stakeholders through a needs assessment survey to identify key trends, strength, opportunities and challenges that might influence the future of CPD. A Strategic Planning retreat was held on November 25, 2016 with a theme of evolving CPD across the continuum. Dr. Craig Campbell, Director of CPD for the Royal College of Physicians and Surgeons of Canada presented the keynote address on competency-based CPD, implications and future opportunities. Key stakeholders were engaged to review our strategic priorities and working groups have been engaged to map out goals, objectives and action plans for each priority. The 2015-2016 CPD Award winners were announced as follows:

- Colin Woolf Award for Longterm Contribution to CPD – Ms. Lisa DiProspero and Ms. Kieng Ta
- Colin Woolf Award for Excellence in Course Co-ordination - Dr. Cindy Grief and Ms. Lisa Sokoloff for the Geriatric Mental Health Education Network program
- Colin Woolf Award for Teaching Excellence – Dr. Jonathan Pirie
- CPD Interprofessional Health Care Team Award – Dr. Judith Peranson and team for the SMH New Faculty Program
- Ivan Silver Innovation Award – Dr. Wahid Farhat for the Paediatric Urology Laparoscopy program
- Dave Davis Research Award – Dr. Sanjeev Sockalingam and Dr. David Wiljer
- David Fear Fellowship - Dr. Andrea Waddell and Dr. Karen Devon

Our faculty members continue to have a strong focus on research and scholarship in CPD. Dr. Sanjeev Sockalingam was the 2016 Fox Award Recipient for his outstanding presentation of his study examining the relationship between academic motivation and lifelong learning at the 2016 World Congress of Continuing Professional Development in San Diego, California. This study was also selected as one of the Future of Medical Education in Canada CPD (FMEC-CPD) projects. More examples of the outstanding work of our faculty can be found on the annual report.

Dr. Schneeweiss completed her term as CPD Educator and member of the nominating committee for the Royal College of Physicians and Surgeons of Canada. She will join the Royal College Regional Advisory Committee as the CPD Dean representative for RAC3. She has also been elected to the Academic Board of the Governing Council for the University of Toronto and will begin her term in July 2017.

### 25. CPD Enrolment & Accreditation

The number of accredited course offerings continues to grow. An enrolment report for 2016-2017 will be provided in the next Council report.

### 26. Indigenous and Refugee Health

We are making plans for the North American Refugee Health Conference, which is the largest conference on refugee health globally. In keeping with current world events, our theme will be the
Syrian Refugee crisis. It will take place at the Toronto Sheraton Hotel June 12-14, 2017. We have speakers from the International Organization on Migration in Geneva, CDC Atlanta, Amnesty International, CBC journalist Susan Ormiston, as well as refugee experts across North America. We are expecting 600-700 participants. This year we will have a tropical disease update course in collaboration with the American Society of Tropical Medicine and Hygiene.

27. Standardized Patient Program (SPP)

The Standardized Patient Program is being transferred to the portfolio of the Vice Dean MD Program. The MD Program is the largest client of the program. The administrative restructuring of the Program which began in Spring 2016, is complete and the program is now financial sustainable. The program continues to support teaching and assessment across the medical education continuum, as well as running a number of large licensure exams. The program is taking on new clients and projects, and welcomes requests from all members of the Faculty of Medicine. Please direct inquiries to Jo O’Reilly, Manager of Client Relations and Business Systems (jo.oreilly@utoronto.ca).

D. Graduate and Life Sciences Education (GLSE)

Undergraduate Life Sciences Education

28. GLSE Recruitment Student Group Shadowing Program
The success of our first annual shadowing program during reading week will continue throughout summer school in July for our undergraduate students to be matched up with a graduate student who has volunteered their time.

29. Undergraduate Faculty Teaching Awards
Five awards were adjudicated in four categories.

Excellence in Undergraduate Teaching in Life Sciences
Dr. Paul Yip, Laboratory Medicine and Pathobiology

Excellence in Undergraduate Laboratory Teaching in Life Sciences
Dr. Julie Brill, Molecular Genetics

Excellence in Linking Undergraduate Teaching to Research in Life Sciences
Dr. William Navarre, Molecular Genetics

Sustained Excellence and Innovation in Life Sciences Education
Dr. Christopher Perumalla, Physiology/Division of Teaching Laboratories
Dr. Stavroula Andreopoulos, Biochemistry

30. University of Toronto Excellence Awards (NSERC & SSHRC)
University of Toronto Excellence Award (UTEA) program is funded by the Vice-President Research. The
UTEA program provides eligible undergraduate students with opportunities to conduct summer research projects under the supervision of eligible U of T faculty members. The research term required is 14 weeks.

**NSERC (3)**
- Biochemistry (2)
- Physiology (1)

**SSHRC (2)**
- Speech-Language Pathology (1)
- Occupational Science and Occupational Therapy (1)

31. **GLSE Undergraduate Summer Research Project Studentships**
GLSE awarded 7 annual summer research project studentships per summer to support third or fourth year specialist and/or major students in our Basic Science departments and in Laboratory Medicine and Pathobiology. This is a 12 full week summer program, normally between May 1 and August 31, 2017. The award carries a value of $4,800 each.

32. **GLSE Undergraduate Leadership Award**
Graduate and Life Sciences Education, Faculty of Medicine will award up to three annual Undergraduate Student Leadership Awards in Life Sciences. The purpose of these awards is to provide opportunities for our undergraduate students in the Faculty of Medicine, Arts and Science Programs to be recognized for their leadership and scholarship. The award carries a value of $500 each with certificate. The winners will be announced in April.

33. **GLSE Undergraduate Ambassadors**
As part of our recruitment strategy, we highlight current students (Third year) who have generously volunteered their time to help answer questions for first year students transitioning into their undergraduate studies. It is an important tool for student recruitment into graduate school.

34. **GLSE Talks: One Minute Video Competition**
GLSE video competition is for all undergraduate and graduate students undertaking a research project. The competition invites students to showcase their ongoing (or potential) research project in a brief and creative one-minute video presentation. The competition will start in June.

35. **GLSE Poster Competition**
GLSE Poster Competition will promote student talent for the Sixth Annual Undergraduate Research Information Fair Considering Graduate Studies on November 9, 2017. The competition will start in June.

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**Graduate Education**

36. **Graduate Awards**

   a) **Graduate Faculty Teaching Awards**
Six faculty members were awarded in the following three categories:

- **Early Career Excellence in Graduate Teaching & Mentorship Award**
  - 2016-2017 – Ana Andreazza - Pharmacology and Toxicology
  - 2016-2017 – Julie Claycomb - Molecular Genetics

- **Mid-Career Excellence in Graduate Teaching & Mentorship Award**
  - 2016-2017 – Anthony Gramolini - Physiology
  - 2016-2017 – Krista Lanctot - Pharmacology and Toxicology

- **Sustained Excellence in Graduate Teaching & Mentorship Award**
  - 2016-2017 – Howard Mount - Institute of Medical Science
  - 2016-2017 – Rachel Tyndale - Pharmacology and Toxicology

Each awardee will receive a framed certificate at the Education Achievement Celebration on May 15, 2017 and $1,000 cash prize.

**b) Queen Elizabeth II Graduate Scholarships in Science and Technology (QEII-GSST)**

The 2017-18 QEII-GSST competition deadline for student applications were due on March 31, 2017. There are 68 QEII-GSST awards at up to $15,000 per award available for doctoral-stream Master’s and PhD students and clinician/surgical-scientist trainees. QEII-GSST awards are included as part of the graduate student's total stipend funding package.

**c) Faculty of Medicine GSEF Merit Scholarships for International Students**

The 2017-18 competition deadline for graduate units nominations is May 1, 2017. The GSEF offers merit-based scholarships valued at $5,000 each to international graduate students who have demonstrated the highest degree of academic excellence. Up to 20 scholarships will be funded by the Office of Graduate and Life Sciences Education. Each GSEF will be approved by the Awards Committee chaired by the Vice Dean, Graduate and Academic Affairs, and will be included as part of the student’s total stipend funding package. The GSEF is designed to retain international students by alleviating the cost to the department.

**d) Graduate & Life Sciences Education: OSOTF and Other Endowed Awards Competition**

The 2017-18 OSOTF and Other Endowed awards competition deadline for graduate student applications is May 12, 2017. There is approximately $756,000 available for scholarships for graduate students (primarily M.Sc. and Ph.D.) through this GLSE competition. On average, approximately 110 students are awarded and award value is up to $25,000. OSOTF and Other Endowed awards over $2,000 are included as part of the student’s total stipend funding package.

**e) JJ Berry Smith PhD Supervision Award**

The JJ Berry Smith Doctoral Supervision Award recognizes outstanding performance in the multiple roles associated with doctoral (PhD) supervision. Two awards are offered annually: one in the Humanities and Social Sciences and one in the Physical and Life Sciences. The awards are presented at the Governor General's Medal reception ceremony in the spring. Recipients receive a JJ Berry Smith Doctoral Supervision Award certificate, an SGS Travel or Conference Award to grant a current doctoral student to support conference participation or research travel, and have their name inscribed on a plaque housed
at the School of Graduate Studies. The Faculty of Medicine nominations to the School of Graduate Studies were due on April 1, 2017.

**f) Weston Brain Institute International Fellowships in Neuroscience**
The 2017-18 Weston Brain Institute International Fellowships in Neuroscience Call for Applications closed on March 1, 2017. This is an award that provides $60,000 for each selected student, for up to 3 Canadian graduate students from the University of Toronto conducting translational research in neurodegenerative diseases of aging. Unfortunately, none of the applications received this year were within the scope of the fellowship, which is limited to translational research on neurodegenerative diseases of aging.

37. External Reviews
External reviews for the Department of Immunology and the Department of Radiation Oncology were held on February 1 and 2 and March 30 and 31, respectively. Feedback from both reviews will be available in early summer 2017.

38. Annual Graduate Education Retreat
GLSE will be hosting its second annual Graduate Education Retreat on June 14, 2017 at the Rotman School of Management. This year’s focus will be the outcomes of our graduate programs – where our graduates find employment. Using data collected in the School of Graduate Studies’ study “10,000 PhDs and Counting” we will look at the career paths of graduate students from Medicine and use this as an anchor to explore work trends and the skills needed to ensure their career success.

39. Curricular Changes
The following is a summary of the curricular changes that have occurred in the Faculty of Medicine for 2016/17:

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Courses</td>
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<tr>
<td>Changes to Program Requirements</td>
<td>4</td>
</tr>
<tr>
<td>Changes to Admission Requirements</td>
<td>2</td>
</tr>
</tbody>
</table>

The new Professional Masters program in Medical Genomics continues to move through the governance process in a timely manner. The anticipated start date is September 2018.

40. Course Evaluations
Under the direction of the Susan McCahan, Vice-Provost, Innovations in Undergraduate Education, all FOM graduate departments will be participating in the university’s endeavour to develop and implement online course evaluations. U of T’s Course Evaluation Framework applies a cascaded assessment structure that acknowledges the need for both broad-based and granular assessment across the various levels of the institution.

41. SGS Innovation Fund - Updates
a. Graduate Professional Development Workshops for Faculty

GLSE in collaboration with SGS has implemented a centralized faculty development program that specifically addresses the role of supervisors and Program Advisory Committees in reducing time to completion. It will provide a series of workshops (8) throughout the academic year for faculty, exploring the best practices towards this goal. These workshops will focus on the skills necessary to establish personalized roadmaps to graduation. Faculty are taught best practices for managing scope, establishing clear milestones and setting realistic goals with the early establishment of an Individual Development Plan.

b. Stipendiary Support for Leave of Absence

The Office of Graduate and Life Sciences Education (GLSE), in partnership with the School of Graduate Studies and with support from the SGS Dean’s Innovation Fund, advertised the first Leave of Absence Stipendiary (LOA) Fund for research-stream graduate students. The LOA is available for a one-term leave of absence due to health issues (physical and/or mental health challenges). Funding is available up to $5,000 per student for one term on a one-time only basis. To apply for the LOA Stipendiary Fund, graduate students were asked to submit an information package to the GLSE Office. The deadline for the first call of applications is April 15, 2017.

E. Physician Assistant Program

42. HR Changes

The BScPA Program welcomed Dr. Peter Tzakas into the inaugural role of Program Director, September 2016. This addition allows for the distribution of responsibilities with the Medical Director, Dr. Maureen Gottesman. The Medical Director continues with oversight of the Program and is primarily responsible for fiscal operations; the Program’s relationship with clinical sites (liaison and large site recruitment, faculty/site development); policy compliance; recruitment of Course Directors; support of Course Directors in education scholarship; and representation on various internal and external groups and committees. The Program Director is responsible for oversight of the didactic curriculum and liaising with students.

43. Evaluation: Accreditation and Quality Assurance

The BScPA program is currently undergoing accreditation by the Canadian Medical Association (CMA) Conjoint Accreditation Services. Phase I (Self study) was submitted April 3, 2017. Phase II (site visit) is scheduled for October 1-4, 2017.

Maintaining an uninterrupted, national accreditation standard is an essential component of ensuring future viability and success of the PA profession in Canada. Certified PAs must be graduates of an accredited education program. In January 2016, the CMA announced that they will be divesting from accrediting health professional education programs as of February 2018. CAPA (Canadian Association of Physician Assistants) is the national advocacy and professional body that is responsible for recommending a body to accredit the education programs.
CAPA (the Canadian Association of Physician Assistants) supports PACCC, the Physician Assistant Certification Council of Canada, which independently administers the Canadian National Certification exam. We have been collaborating with various stakeholders since early 2016 to explore the options to secure a replacement organization to be responsible for the external accreditation of PA programs in Canada moving forwards after 2018.

While the CMA Conjoint Accreditation Services will no longer be in operation after January 2018, we are committed to the ongoing compliance of the standards, and know that we have documented the policies and processes well. Regardless of the future of the external accreditation of PA education programs in Canada, the BScPA Program is responsible to meet the continuous quality improvement standards of the University, and will undergo UTQAP in 2017 and at subsequent regular intervals. Quarterly reports are provided to the Faculty Council, University of Toronto and an annual comprehensive report is provided to the Education Committee, Faculty of Medicine and to the MOHLTC (regarding clinical placements).
"Integrity is doing the right thing, even when no one is watching."
-British novelist C.S. Lewis

Faculty of Medicine Task Force Report on Research Integrity

I INTRODUCTION

Acting with integrity begins with a commitment to six fundamental values – honesty, trust, fairness, respect, responsibility and courage – even in the face of adversity.¹ As a national and global leader in education and research, the University of Toronto’s Faculty of Medicine (FoM) must ensure this commitment is put into practice as it carries out its mission to develop leaders, contribute to our communities and improve the health of people and populations through the discovery, application and communication of knowledge. Underlying that mission, the FoM embraces the following values², all of which inform how research is conducted:

- Integrity in all endeavors;
- Commitment to innovation and excellence;
- Life-long learning and critical inquiry;
- Promotion of social justice, equity, diversity, and professionalism;
- Effective partnership with all our stakeholders;
- Multi-professional and interdisciplinary collaboration;
- Supportive and respectful relationships;
- Accountability and transparency;
- Responsiveness to local, national, and international health needs.

For the purposes of this report, research is defined broadly to include all fundamental/basic science research; all clinical research, including clinical trials; education research; health policy research; knowledge translation and dissemination; and quality improvement and patient safety. An expanded definition of research can be found in the University’s Policy on Research Administration.³

Research activity at the University is governed by a range of University policies such as the Policy on Ethical Conduct in Research,⁴ and informed by FoM and affiliated hospital harmonized guidelines and procedures, including the statement of Principles and Responsibilities Regarding Conduct of Research.⁵ For a full list of University and FoM policies, guidelines or procedures governing research integrity and misconduct, see Appendix B: University Resources. In addition, the principles outlined in these policies

¹ International Center for Academic Integrity
² Faculty of Medicine, University of Toronto, Vision/Mission/Values, November, 20, 2014, available online at: http://www.medicine.utoronto.ca/about-faculty-medicine/vision-mission-and-values
⁵ Principles and Responsibilities Regarding Conduct of Research, October 11, 2002, available online at: http://medicine.utoronto.ca/sites/default/files/Conduct%20of%20Research.pdf
or guidelines are consistent with the Tri-Agency Framework\(^6\) and other funding agencies’ ethical codes with respect to research.

Research misconduct has many causes and can take many forms, including but not limited to: fabrication/misrepresentation of data, plagiarism, “text recycling” or self-plagiarism, image or statistical manipulation and image fraud. It can also be associated with a lack of supervisory rigor and failure to apply due diligence in the operation of a research study, laboratory or program.

Ensuring the highest ethical standards is essential to the academic research mission and to the FoM’s standing as a national and global leader. The FoM, including its affiliated teaching hospitals, attracts $790M in research funding, with $104M for on-campus research. A breach of research integrity not only damages the credibility of individuals, colleagues and collaborating programs and interferes with future science, but also confers extensive reputational risk to the FoM and University at large. Dissemination of fabricated results also has the potential to cause harm to patients and can negatively impact research conducted by others. The speed and ubiquity of digital media amplify these risks, particularly with the advent of social media savvy organizations such as Retraction Watch.

In 2009, University of Toronto formed the Research Oversight and Compliance Office (ROCO) in response to escalating sponsor and regulatory requirements in research as well as growing financial, legal and reputational risks: “ROCO was the first office of its kind in Canada and signaled important recognition of the need to achieve and sustain a level of distributed oversight and compliance consistent with the University's massive and highly decentralized research enterprise.”\(^7\) Over the last five years, research misconduct involving campus-based researchers across all faculties (as opposed to hospital-based researchers)\(^8\) has been found in a total of five cases: one in 2011; four in 2012; zero in subsequent years.

It is important to recognize that fewer than 10 per cent of full-time faculty members in the FoM (~225 of more than 2,800) work on-campus at the University. Most work in affiliated teaching hospitals and normally engage in research under the hospital auspices. Accordingly, the FoM cannot systematically track research misconduct across all teaching hospitals. However, recent cases involving hospital-based researchers with FoM appointments have certainly attracted public media attention. Any case of research misconduct is important in its own right and also has the potential to damage institutional reputation and cause harm to individuals; therefore prevention must remain an important focus in all the settings in which our faculty conduct their work. Against this backdrop, the Dean of the FoM commissioned the Task Force on Research Integrity to examine the standards of training and practice with regard to the Responsible Conduct of Research among faculty members.

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\(^7\) http://www.dlsph.utoronto.ca/2013/10/professor-lori-ferris-accepts-avp-position-for-research-oversight-and-compliance/

\(^8\) Under the terms of the Research Misconduct Framework Addendum, University of Toronto’s affiliated teaching hospitals have jurisdiction over investigations of alleged misconduct in research conducted at the hospitals.
II TERMS OF REFERENCE

“Responsible Conduct of Research” is a concept which must encompass most of the professional activities that are part of research practice. As defined by the Tri-Council funding agencies, this practice encompasses aspects related to research collaborations, conflicts of interest, data acquisition/sharing, protection of human subjects, lab animal welfare, the responsible mentoring of researchers, publication practices/responsible authorship, and processes to investigate allegations of research misconduct.

The Dean’s Task Force on Research Integrity consulted within the Faculty of Medicine. (see Appendix A). The focus of this Task Force is to examine the current state of the Responsible Conduct of Research in the FoM, with the goal of promoting a culture of ethical research practice among all our faculty members. The following are the specific Terms of Reference for this Task Force:

1. To carry out an internal scan of the FoM to identify the current required and recommended training for faculty members across campus and Toronto Academic Health Science Network hospitals with regard to the Responsible Conduct of Research.
2. To carry out an external scan of relevant training programs within Canada and the U.S. to identify best practices and the highest quality training programs.
3. To clarify reporting processes when questions/concerns related to scientific misconduct are suspected at the University.
4. Based on the information obtained from these scans, to recommend standards of required training for all faculty members who are currently engaged in – or who may in the future engage in – research activities.
5. To recommend actions the FoM should take to help foster a ubiquitous culture of ethical research practice for all faculty members.

The scope of this report focuses on faculty members currently conducting (or in the future, may conduct) research activity across all sectors – basic sciences, clinical, and rehabilitative sciences – associated with the FoM. This report provides the Dean of the FoM with concrete recommendations designed to prevent research misconduct.9

III ENVIRONMENTAL SCAN

The FoM currently does not mandate a centralized training program regarding Responsible Conduct of Research for faculty members. This is due to the decentralized nature of the research enterprise, which involves scholarly activities conducted not only on University of Toronto campuses but throughout the fully-affiliated sites and associate member hospitals of the Toronto Academic Health Sciences Network (TAHSN) and their research institutes, as well as at community-affiliated sites. Research conduct is generally governed by the policies and practices of each site.10 Some research integrity training is

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9 The scope of this report does not address prevention or training specifically aimed at students or trainees.
10 Harmonized research guidelines as between the University and TAHSN sites are detailed in Appendix B.
mandated by University Departments and takes place on campus; other activities takes place at TAHSN sites.

TAHSN has a Research Committee (TAHSNr) co-chaired by Dr. Michael Julius (Vice-President, Research, Sunnybrook Research Institute) and Dr. Richard Hegele (Vice Dean, Research and Innovation, FoM). Membership on TAHSNr includes each VP Research (or equivalent) representing each affiliated site within TAHSN and representatives from the University, including from the Vice-President, Research and Innovation’s portfolio. In the spring of 2016, Drs. Julius and Hegele asked each fully-affiliated and community-affiliated site representative to answer the following questions:

1. Does your Research Institute offer faculty members who do research specific training sessions, didactic lectures, online modules or other learning approaches provided to promote research integrity?

2. How are these materials/sessions offered and by whom?

3. What is communicated to faculty members about the consequences if research integrity is breached and how is that message conveyed?

Eleven of thirteen member sites within TAHSNr responded. Results indicate there are already considerable efforts in place at the majority of TAHSN sites in training faculty members in research integrity, including web-based training and e-learning, orientation activities, in-class training, symposia, rounds and other forums. One VP Research summarized general aspirations as follows: “The focus of training is intended to promote responsible practice by establishing quality standards.”

Although there is variability between sites in the approaches used locally for training faculty members in research integrity, several themes emerged:

- Seven of the affiliated sites alluded to research investigators completing online modules on the Responsible Conduct of Research, of which 12 modules are available via the Collaborative Institutional Training Initiative Canada website (discussed further below). Institutional membership in the Network of Networks (N2) allows these modules to be completed at no cost to the investigator. There is variability between sites as to whether completion of some or all related modules is mandatory, ranging from “strongly recommended” to “Research Ethics Board approval is not given until all applicants have completed the N2 training.”

- Other online resources relevant to clinical research include the International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use (ICH) Good Clinical Practice and Tri-Council Policy Statement 2 (TCPS2)—Ethical Conduct of Research. For investigators doing research involving human subjects, completion of TCPS2 is mandated by all sites.

- In those institutions that mandate refresher training, this ranges from every 2-5 years.
Some institutions have found it useful to separate training for basic science researchers from training for clinical researchers. (See Task Force Recommendation #12, p. 15)

Institutions make their investigators aware of policies and procedures in place for addressing allegations of research misconduct, with revisions and updates communicated electronically.

At least one of the affiliated sites stated that research integrity training should not be made a mandatory requirement, as this would unduly burden the many for the actions of a few.

In addition to online modules, there are other approaches to research conduct training across TAHSN, including:

- Offering free access to online plagiarism detection software;
- Research orientation sessions for new personnel and research investigators; and
- Annual research retreats or periodic research integrity forums and other in-house professional development.

At the national level, the federal Secretariat on Responsible Conduct in Research has, since late 2011, had a policy on “consent to disclosure” for any serious research misconduct for all researchers seeking Tri-Council funding. This policy requires all researchers applying for CIHR, NSERC or SSHRC grant funding to consent to the Agency disclosing any information relevant to the breach that is in the public interest, including the:

- Name of the individual who committed the breach;
- Nature of the breach;
- Institution where the individual was employed at the time of the breach;
- Institution where the individual is currently employed; and
- Recourse imposed by the Agency against the respondent.

Given this regulatory requirement, it is ever more important that institutions that rely on Tri-Council funding for research – including FoM – proactively work to educate faculty members on the Responsible Conduct of Research and foster a culture that rewards and recognizes integrity in research as a key aspect of faculty member recognition, including promotion and awards.

Looking beyond Canada, the Collaborative Institutional Training Initiative (CITI) is a nonprofit organization based at the University of Miami that offers comprehensive training on the Responsible Conduct of Research. Founded in 2000, CITI materials on the Responsible Conduct of Research constitute the most comprehensive and utilized training in elite institutions in the US. Its mission:

“To promote the public’s trust in the research enterprise by providing high quality, peer reviewed, web based, research education materials to enhance the integrity and professionalism of investigators and staff conducting research.”

In 2010, the Network of Networks (N2) in Canada – an alliance of 90+ clinical research entities and institutions including University of Toronto – partnered with CITI to establish a source of high quality, web-based Canadian instruction around safe, responsible, ethical research conduct. Most applicable to the scope of this report are the Responsible Conduct of Research modules (see below under “Recommendations”) offered through N2; written at a general level and suitable to researchers in all disciplines, these modules provide a solid foundation relating to the norms, principles and rules governing responsible research practice in Canada. The N2 member institution may set the number and list of modules required for certification; an administrator receives automated reports of individual training completion and can generate further reports.

The University of Toronto is a N2 member. Anyone with an institutional email account (@utoronto.ca) may sign in and use the CITI modules.

IV Research Misconduct Definitions & Examples

The University of Toronto’s Framework to Address Allegations of Research Misconduct defines research misconduct as:

“...any research practice that deviates seriously from the commonly accepted ethics/integrity standards or practices of the relevant research community and includes but is not limited to intentional fabrication, falsification, and plagiarism as defined by the University’s Code of Behaviour on Academic Matters.....due regard is given for honest errors, honest differences in methodology, interpretation or judgement, or divergent paradigms in science; what is at issue are genuine breaches of the integrity of the research process.”

Research misconduct most often falls into the following three broad categories:

1. **Fabrication**: Making up data or results and recording or reporting them.
2. **Falsification**: Manipulation of research materials, equipment, or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.
3. **Plagiarism**: The appropriation of another person’s ideas, processes, results, or words without giving appropriate credit. This includes self-plagiarism: Recycling or re-using one’s own work without appropriate disclosure and/or citation.

However, other types of research misconduct are also recognized. These include, but are not limited to:

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Impropriety of authorship: Claiming undeserved authorship on one’s own behalf, excluding material contributors from co-authorship, including non-contributors as authors, e.g. ghostwriting, or submitting multi-author papers to journals without the consent of all named authors.

Misappropriation of ideas: Taking the intellectual property of others, perhaps as a result of reviewing someone else’s article or manuscript, or grant application and proceeding with the idea as one’s own.

Violation of generally accepted research practices: This can include the manipulation of experiments to generate preferred results, deceptive statistical or analytical practices to generate preferred results, or improper reporting of results to present a misleading outcome.

Suppression of publication: Failing to publish significant findings due to the results being adverse to the interests of the researcher or his/her sponsor(s).

Inappropriate behavior in relation to suspected misconduct: Failure to cooperate with any claims of misconduct made against a faculty member, failure to report known or suspected misconduct, destruction of any evidence related to any claim of misconduct, retaliation against any persons involved in a claim of misconduct, knowingly making false claims of misconduct.

V UNIVERSITY REPORTING PROCESSES

Addressing Suspicions of Research Misconduct:

Bringing forward concerns about research misconduct may be a daunting prospect for members of the University community. A variety of mechanisms exist within the University and the FoM to alleviate the stress associated with whistleblowing.

The University’s Framework to Address Allegations of Research Misconduct (the “Framework”) permits allegations to be lodged anonymously in limited circumstances. Anonymous complaints should be submitted with enough information to allow the allegations, including supporting facts and evidence, to be assessed by the University, without requiring additional information from the individual who made the complaint. It should be noted that the University may elect not to proceed with anonymous allegations, particularly where there is insufficient supporting material. If the University elects to proceed with an anonymous complaint, the individual who lodged the complaint is not entitled to participate in the process set out in the Framework.

Assurances regarding confidentiality are also an integral element of the University’s Framework, which requires the highest possible degree of confidentiality be maintained regarding the allegations, inquiries and investigations, subject to required disclosures (e.g. pursuant to law or policy). The commitment to confidentiality applies both to the individual bringing forward the complaint, as well as the subject of
the complaint, with the Framework identifying the confidentiality obligations of all involved parties at various stages of the process.

Additionally, there are a number of avenues for individuals concerned about suspected research misconduct to obtain support and advice within FoM, including:

- Contacting the applicable Department Chair(s);
- Conferring with relevant FoM senior leaders based in the hospitals or on campus; and
- Speaking to the Clinical Faculty Advocate.

Initiating a Complaint:

As a preliminary matter, the University’s Framework encourages individuals concerned about a potential case of research misconduct to seek an explanation from the suspected individual, if appropriate, to ensure no misunderstanding.

Complaints should be directed to the University’s Vice-President Research and Innovation portfolio (VPRI) at research.integrity@utoronto.ca. The University’s Associate Vice-President, Research Oversight and Compliance handles the complaints on behalf of the VPRI.

Complaints should be made in writing, set out all relevant information and include supporting evidence, if available. Unless brought forward anonymously, the complaint should identify and be signed and dated by the complainant and provide appropriate contact information. Allegations must be made in good faith and declare any conflict of interest.

Reporting and Responding to Research Misconduct:

The Task Force has developed a high level overview of the Framework’s process to assist faculty members in reporting and responding to allegations of research misconduct. **NB: The following overview should not be used without reference to the corresponding Framework.**

<table>
<thead>
<tr>
<th>Framework Reference¹⁴</th>
<th>Step</th>
<th>Explanation</th>
<th>Responsible University Party¹⁵</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5.1-5.2</td>
<td>File Complaint</td>
<td>Complaints should be directed to VPRI: <a href="mailto:research.integrity@utoronto.ca">research.integrity@utoronto.ca</a>¹⁶</td>
</tr>
</tbody>
</table>

¹⁴ Review for further details.

¹⁵ Responsible party indicated is from the University, unless otherwise indicated.

¹⁶ Reference to “Dean(s)” in this overview means the Dean of the academic division in which the Respondent holds their primary appointment. If the Respondent holds primary appointments in different divisions (e.g. FoM and School of Graduate Studies), the referral is to both Deans, who will decide which will serve as Dean for purpose of the complaint and will keep the other informed of the complaint’s status.
<table>
<thead>
<tr>
<th>Step</th>
<th>Explanation</th>
<th>Responsible University Party</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Complainant.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Determine Jurisdiction</td>
<td>Associate Vice-President, Research Oversight and Vice-Provost, Relations with Healthcare Institutions; Affiliated Hospital’s Vice-President, Research, or delegate.</td>
</tr>
<tr>
<td>3.</td>
<td>Referral to Vice-President, R&amp;I</td>
<td>Individual in receipt of Complaint</td>
</tr>
<tr>
<td>4.</td>
<td>Referral by Vice-President, R&amp;I</td>
<td>Vice-President, R&amp;I</td>
</tr>
<tr>
<td>5.</td>
<td>Administrator Appointed</td>
<td>Dean</td>
</tr>
<tr>
<td>6.</td>
<td>Preliminary Inquiry</td>
<td>Administrator appointed by Dean</td>
</tr>
</tbody>
</table>

### Notes:

1. If complaint falls within hospital’s jurisdiction, the hospital may commence its own inquiry, and may report its findings to the University.

2. Reference to “Dean(s)” in this overview means the Dean of the academic division in which the Respondent holds their primary appointment.

3. If the Respondent holds primary appointments in different divisions (e.g. FoM and School of Graduate Studies), the referral is to both Deans, who will decide which will serve as Dean for purpose of the complaint and will keep the other informed of the complaint’s status.

4. All timelines refer to maximum number of working days allowable.
<table>
<thead>
<tr>
<th>Framework Reference(^{14})</th>
<th>Step</th>
<th>Explanation</th>
<th>Responsible University Party(^{15})</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>proceed to an investigation normally within 60 days of Vice-President, R&amp;I's receipt of complaint.</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>8.2, 8.6</td>
<td>Appointment of Investigation Committee</td>
<td>Dean appoints Investigating Committee normally within 15 days of receipt of Administrator’s recommendation that Investigation should be conducted (composition of which is detailed in Framework).</td>
</tr>
<tr>
<td>8</td>
<td>8.2-8.7</td>
<td>Committee Convenes</td>
<td>Investigating Committee convenes normally within 30 days of appointment.</td>
</tr>
<tr>
<td>9</td>
<td>8.3</td>
<td>Reporting Commencement of Investigation</td>
<td>Dean informs Vice-President, R&amp;I that an investigation of a complaint of research misconduct has commenced.</td>
</tr>
</tbody>
</table>
| 10 | 8.7 | Notice of Committee’s Appointment | Investigating Committee notifies Respondent and Complainant of the investigation process, including their respective rights and obligations, namely:  
• Complainant may provide written materials to supplement complaint;  
• Respondent may comment on any supplementary material from Complainant;  
• Complainant may review the response of Respondent to | Investigating Committee |
<table>
<thead>
<tr>
<th>Framework Reference</th>
<th>Step</th>
<th>Explanation</th>
<th>Responsible University Party</th>
</tr>
</thead>
</table>
|                     | 11   | 8.7 Other Steps in Investigative Process | Investigating Committee:  
  - will set deadline for submission of responses and evidence;  
  - may conduct interviews, which will be summarized and provided to interviewed party;  
  - will provide Respondent with access to documents to enable a fair opportunity to respond to relevant material. | Investigating Committee |
<p>|                     | 12   | 8.6 Interim Findings | Committee will provide interim findings to Dean, if it’s of the view that such must be reported to fulfil University’s obligations to its community or third parties. | Chair of Investigating Committee |
|                     | 13   | 8.2 Investigation Complete | Investigation to be complete normally within 60 days of Committee’s first meeting. | Investigating Committee |
|                     | 14   | 8.8 Final Report | Committee delivers final report to Complainant, Respondent, Dean and Vice-President, R&amp;I normally within 30 days of completed investigation (content of final report detailed in Framework). | Investigating Committee |
|                     | 15   | 8.8 Respondent and Complainant Opportunity to Respond to Final Report | Respondent and Complainant have up to 15 days to make submissions to the Dean regarding the findings, in | Respondent / Complainant |</p>
<table>
<thead>
<tr>
<th>Framework Reference</th>
<th>Step</th>
<th>Explanation</th>
<th>Responsible University Party</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>16</td>
<td>8.9 Report of the Dean</td>
<td>advance of any administrative action recommended to be taken by the Dean.</td>
</tr>
<tr>
<td></td>
<td>17</td>
<td>9.1 Where no Research Misconduct Found</td>
<td>Dean informs Vice-President, R&amp;I of the findings of the investigation and the Dean’s decision about administrative action.</td>
</tr>
<tr>
<td></td>
<td>18</td>
<td>9.2 Where Research Misconduct is Found</td>
<td>Dean sends letter confirming finding of no Research Misconduct to Respondent, with copy to Complainant and, at Dean’s discretion, to other persons.</td>
</tr>
<tr>
<td></td>
<td>19</td>
<td>9.3 Communication about Outcome</td>
<td>Dean decides on remedial/disciplinary action, in consultation with Vice-President, R&amp;I and Provost within 15 days of Dean’s receipt of submissions from Respondent in response to the Final report. For Research Misconduct involving faculty member, action may include proceedings leading to sanctions under University’s <em>Code of Behaviour on Academic Matters or Policy and Procedures on Academic Appointments</em> or other University policies and/or agreements and related procedures.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Vice-President, R&amp;I may communicate outcome of</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Vice-President, R&amp;I</td>
</tr>
</tbody>
</table>
## VI TASK FORCE RECOMMENDATIONS

After thorough consultations and a review of best practices, the Task Force has compiled a series of recommendations designed to ensure the FoM reflects its position as a national and international leader through the highest standards of research integrity. Recognizing the complexity of FoM research – across scientific domains, multiple campuses, hospitals and sites – there are some core strategies recommended for immediate implementation under three categories: data management, training initiatives and facilitating a culture of integrity.

### DATA MANAGEMENT:

To adhere to best practices, faculty members engaged in research should:

1. Follow national guidelines with respect to digital data management, e.g. Tri-Agency Statement of Principles on Digital Data Management.  

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2. Consult international guidelines on clinical trial protocols, clinical trials registration and reporting of trials, cohort studies, systematic reviews, etc. according to the relevant recommendations, e.g. the Consolidated Standards of Reporting Trials (CONSORT) Statement.\(^{22}\)

3. Outline hypotheses and data analysis plan prior to conducting a research study in order to guide the responsible collection, formatting, preservation and sharing of data throughout the entire lifecycle of a research project and beyond.\(^{23}\)

4. Use electronic data systems wherever possible for data collection and management, e.g., use of computer assisted data entry, such as through use of a data management system like REDCAP\(^{24}\). Funding to cover the costs of a data management system should be incorporated into grant applications.

5. Ensure data collection/data entry is not performed by the investigator (e.g. instead, a research assistant or data entry clerk); funding for this should be incorporated into grant applications.

6. Put into place a formal plan for data quality control (e.g. double data entry, source document comparisons, etc.). Data quality control should not be performed by the investigators. Funding for this should be incorporated into grant applications.

7. In cases where there are no laws, regulations, policies or REB requirements mandating it, still consider, consider using a Data Safety Monitoring Board (DSMB) as an independent review/advisory committee for clinical research where human subjects are being recruited, in trials and even possibly cohort studies.\(^{25}\)

8. Ensure the project raw dataset is stored securely as per the data retention requirements (by either the PI or by research institute, as appropriate).

9. Provide the analysis dataset to a statistician responsible for analysis (post coding of variables and quality control using raw data).

10. Provide an opportunity for other members of the research team to review coding, analytic output and/or redo modelling to ensure consistency of findings prior to dissemination and publication.

TRAINING INITIATIVES:

11. The Task Force strongly recommends that for all faculty members engaged in research the N2 modules should be completed every 3 years (see below). For faculty involving human subjects, N2 modules 1-11 should be completed\(^{26}\) every 3 years. For all faculty engaged in animal research, modules 1-4 and 6-12 should be completed every 3 years.

\(^{22}\) CONSORT Statement and resources are found available online at: http://www.consort-statement.org/

\(^{23}\) See Tri-Agency Statement of Principles on Digital Data Management, supra note 22.

\(^{24}\) Found online at: https://projectredcap.org/

\(^{25}\) A DSMB complements the role of a Research Ethics Board (REB) and has a much broader scope for oversight of data.

\(^{26}\) Any faculty member can access the N2 modules by registering as a user on the CITI site: https://www.citiprogram.org/ and click on the “Register” button under “Create an account”. As long as the individual has a UTOR email address, s/he should be able to create the account and access the modules.
12. This training recommendation should be part of the applicable annual faculty member review process (i.e. credentialing, or reappointment or review).

Faculty members who have no expectation of engagement in any aspect of research may be exempt from the recommended training modules. The FoM should aim to collaborate with affiliated sites to review annually the activities of exempted faculty members, and remove exemptions for those who may be engaged in research, as broadly defined previously.

FACILITATING A CULTURE OF INTEGRITY:

13. Institute formal and encourage informal mentoring programs for undergraduate students, trainees and fellows to ensure the next generation of researchers is fully versed in research integrity principles

14. Create educational opportunities to promote integrity values among faculty members through ongoing in-person engagement and communication on these issues, for example:
   a. Training in appropriate practices for supervisors of research in the FoM;
   b. Review of principles of data management and training obligations for all faculty;
   c. Recurring key messages in speaking remarks to appropriate research audiences;
   d. Annual research integrity forum with external speakers and case discussions;
   e. Ensuring any faculty members funded through national funding agencies are aware of all policies they are subject to, e.g., Tri-Council-funded faculty members are aware of the Tri-Council Framework, including mandatory consent to disclosure policy for serious RCR breaches.

15. Remain current on national issues related to responsible conduct of research by nominating the FoM Vice Dean, Research and Innovation (or delegate) to attend quarterly teleconference meetings of a national “community of practice” group piloted in 2015 by the Secretariat for Responsible Conduct of Research.
16. Review current research award criteria across FoM Departments and Units to ensure criteria relating to an individual’s values, professionalism and citizenship are included in adjudication.

17. Ensure support and protection for those who bring forward suspicions of research misconduct and communicate the FoM’s expectation that, consistent with University policy, any retaliation against complainants will be dealt with accordingly.

18. Demonstrate the FoM’s commitment to transparency through encouraging the University to publicly report, e.g. posting an annual anonymized update summarizing findings of misconduct and sanctions across the FoM.

19. Seek increased coordination between University and affiliated hospitals and clinical sites with respect to administrative procedures to ensure appropriate and timely communication regarding research misconduct investigations and findings, as permitted by applicable law, policy and agreements.

20. Consider whether Framework may be interpreted to allow early and timely notification of the Dean and Vice-Dean, Research & Innovation, FoM, upon complaint submission.

21. Encourage strengthened communications between the VPR&I, Dean and Department Chairs to ensure Chairs have appropriate information regarding candidates for faculty appointments or promotions with respect to research misconduct.

22. Develop an annual ethics scorecard as an internal tracking tool under the auspices of the FoM’s Vice Dean, Research and Innovation.

Although a complex matter, the Responsible Conduct of Research at the institutional level requires an ongoing commitment to facilitate a culture of integrity and provide access to resources that enable best practices in the conduct of research. The Task Force believes that the adoption of the foregoing recommendations will significantly foster the ability of FoM faculty members to conduct research to the highest ethical standard, underscoring the University of Toronto’s position as a national and international leadership in education and research. The FoM is committed to collaborating with its faculty members and affiliated institutions in disseminating these recommendations, and providing faculty development and other supports to facilitate their adoption.
APPENDIX A: Task Force membership and stakeholders consulted

Allan S. Kaplan, MSc., MD, FRCPC (Chair)  
Vice Dean Academic and Graduate Affairs, Faculty of Medicine; Professor, Department of Psychiatry, University of Toronto

Richard Hegele, MD, FRCPC, PhD  
Vice Dean Research and Innovation, Faculty of Medicine; Professor, Department of Laboratory Medicine and Pathobiology, University of Toronto; Chief, Department of Paediatric Laboratory Medicine, SickKids

Lynn Wilson, MD, CCFP, FCFP  
Vice Dean, Partnerships, Faculty of Medicine; Associate Vice Provost, Relations with Health Care Institutions; Professor, Department of Family and Community Medicine, University of Toronto

John Bohnen, MD  
Senior Advisor to the Dean on Clinical Affairs; Professor, Department of Surgery, University of Toronto

Gillian Hawker, MD, MSc., FRCPC  
Sir John and Lady Eaton Professor and Chair, Department of Medicine, University of Toronto

James Rutka, MD, PhD, FRCSC, FACS, FAAP, FAANS  
RS McLaughlin Professor and Chair, Department of Surgery, University of Toronto

Sara Gottlieb  
Legal Counsel, Faculty of Medicine/Office of the Vice Provost, Relations with Health Care Institutions, University of Toronto

Linda Quattrin  
Executive Director, Office of Communications, Faculty of Medicine, University of Toronto

Stakeholders consulted:

Basic Science Chairs Committee  
Clinical Chairs Committee  
Dean’s Executive Committee, Faculty of Medicine  
Dean’s Advisory Group, Faculty of Medicine  
Graduate Chairs Committee  
Rehab Science Chairs Committee  
TAHSN Research Committee (VPs of hospital-based research institutes and University representatives)

Professor Lori Ferris, Associate Vice-President for Research Oversight and Compliance  
Professor Sioban Nelson, Vice Provost Academic Programs  
Professor Vivek Goel, Vice President Research and Innovation  
Professor Jay Rosenfield, Vice Dean, MD Program (prior to July 1, 2016)  
Professor Sal Spadafora, Vice Dean, Post MD Education
APPENDIX B: University Resources

<table>
<thead>
<tr>
<th>Core University Policies and Framework Relating to Research Integrity</th>
<th>Application</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Research Administration Policy</strong> (University)</td>
<td>Defines “Research” and sets out University’s general principles and procedures for research proposals and agreements and the roles and responsibilities of relevant parties.</td>
</tr>
<tr>
<td><strong>Policy on Ethical Conduct in Research</strong> (University)</td>
<td>Establishes institutional commitment to “highest standards of ethical conduct in every aspect of research including applications, proposals, the research itself, reports and publication.”</td>
</tr>
<tr>
<td><strong>Framework to Address Allegations of Research Misconduct</strong> (University)</td>
<td>Sets out process under which University responds to allegations of research misconduct.</td>
</tr>
<tr>
<td><strong>Research Misconduct Framework Addendum, Procedures for Determining Jurisdiction in Complaints Involving Certain Non-University Institutions</strong> (University)</td>
<td>Clarifies whether University or hospital institution has jurisdiction over a research integrity complaint involving individual with an appointment at, or conducts research in a fully or community affiliated teaching hospital.</td>
</tr>
<tr>
<td><strong>Code of Behaviour on Academic Matters</strong> (University)</td>
<td>Defines forms of research misconduct, including intentional fabrication, falsification, and plagiarism and reviews and procedures for addressing such, including appeal rights.</td>
</tr>
<tr>
<td><strong>Policy on Research Involving Human Subjects</strong> (University)</td>
<td>Sets out University’s principles relating to research projects involving human subjects undertaken or under auspices of University, regardless of whether project funded or administered by University.</td>
</tr>
<tr>
<td><strong>Publication Policy</strong> (University)</td>
<td>Sets out qualifications for publication of research undertaken at the University.</td>
</tr>
<tr>
<td><strong>Policy on Conflict of Interest - Academic Staff</strong> (University)</td>
<td>Sets out what constitutes a conflict of interest, describes procedures to follow when faculty members engage in professional work for supplementary income, and establishes procedures for other situations which could give rise to an apparent conflict of interest.</td>
</tr>
<tr>
<td><strong>Statement on Conflict of Interest and Conflict of Commitment</strong> (University)</td>
<td>Provides a number of principles affirming the commitment of the University to the identification and management of real and perceived conflicts of interest and conflicts of commitment.</td>
</tr>
<tr>
<td><strong>Policy and Procedures on Academic Appointments</strong> (University)</td>
<td>Sets out grounds and procedures for terminating employment of tenured faculty for faculty members charged with academic offences.</td>
</tr>
<tr>
<td><strong>Guidelines for Research</strong></td>
<td>Sets out principles to be followed in University research where</td>
</tr>
</tbody>
</table>
Involving Possible External Pressure to Disclose Participant Data (University)

External pressure to disclose is reasonably foreseeable.

Statement of Protection for Intellectual Freedom and Publication Rights (FoM and Affiliated Institutions)

Details the University and hospital commitment to principles of intellectual freedom, including agreement to prohibit practices with sponsors or otherwise that negatively impact integrity of pursuit of academic freedom.

Policy on the Offer and Acceptance Of Finders Fees or Completion Fees In Research Involving Human Subjects (FoM)

Addresses the issue of finders' fees and completion fees in research involving human subjects.

Standards of Professional Behaviour for Medical Clinical Faculty (FoM)

Articulates expectations for the standards of professional behavior and ethical conduct of clinical faculty members in carrying out professional duties, including in research practices.

Statement of Principles and Responsibilities Regarding Conduct of Research (FoM)

Provides Faculty of Medicine’s principles, as of 2002, for preventing research misconduct and outlines the responsibilities of faculty members in conducting their research.

Relationships with Industry and the Educational Environment in Undergrad and Postgrad Medical Education (FoM)

Sets out standards of best practices between Faculty of Medicine and industry, including disclosure measures.

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**Relevant External Policies Relating to Research Integrity**

<table>
<thead>
<tr>
<th>Policy /Framework</th>
<th>Application</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>International Committee of Medical Journal Editors Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals</strong></td>
<td>The ICMJE provides recommendations regarding best practice and ethical standards in the conduct and reporting of research and other material published in medical journals, and are intended primarily for use in submissions to ICMJE member journals.</td>
</tr>
<tr>
<td><strong>TCPS 2 (2014) – latest edition of Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans</strong></td>
<td>Developed by the three federal granting agencies (CIHR, NSERC and SSHRC), this document sets out the University’s obligations to comply with requirements for review, oversight and conduct of research involving human participants and/or personal information.</td>
</tr>
<tr>
<td><strong>CONSORT Statement</strong></td>
<td>Comprises a 25-item checklist to report how trial was designed, analysed and interpreted and flow diagram to display progress, to assist reporting of trial findings in a transparent and critical manner.</td>
</tr>
<tr>
<td><strong>Tri-Agency Statement of Principles on Digital Data Management</strong></td>
<td>Outlines funding agencies’ expectations for research data management and responsibilities of researchers, research communities, institutions and funders in meeting such expectations.</td>
</tr>
</tbody>
</table>

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**Access to N2 Training Module**

[https://www.citiprogram.org/](https://www.citiprogram.org/) and click on the “Register” button under “Create an account”. Enter UTOR email address to create the account and access the modules.

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**Questions Involving Research Integrity**

<table>
<thead>
<tr>
<th>Type of Question</th>
<th>Contact</th>
</tr>
</thead>
</table>

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19
<table>
<thead>
<tr>
<th>General Research Policies / Questions</th>
<th>Vice Dean Research and Innovation, Faculty of Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application of <strong>University Framework to Address Allegations of Research Misconduct</strong></td>
<td>Associate Vice-President, Research Oversight and Compliance</td>
</tr>
</tbody>
</table>
| Other Applicable Guidelines, Policies, Frameworks | **Office of Research and Innovation**  
Research Office, Faculty of Medicine |
OPERATIONS MANUAL OF THE FACULTY APPOINTMENTS ADVISORY COMMITTEE (FAAC)

Revised August 2017

Approved by Dean Trevor Young on September 19, 2017.
FACULTY APPOINTMENTS ADVISORY COMMITTEE, FACULTY OF MEDICINE

The Faculty Appointments Advisory Committee (FAAC) advises the Dean on (1) initial appointments at professorial ranks for full-time clinical (MD) and status-only faculty where a University approved search has not been carried out, and (2) on full-time clinical (MD) faculty promotions from lecturer to assistant professor. The FAAC reviews applications from the three sectors of the Faculty of Medicine:

- Basic Sciences
- Clinical
- Rehabilitation Sciences

This document describes the FAAC in two sections:

- **Section A:** FAAC terms of reference
- **Section B:** Procedures and key processes related to the FAAC, including application requirements and standards for rank

FAAC is administered by Human Resources, Faculty of Medicine, University of Toronto.
SECTION A
TERMS OF REFERENCE

Purpose of the FAAC
The FAAC advises the Dean on:

1. Appointments of full-time clinical (MD) faculty and status-only faculty to professorial ranks where a formal search was not carried out as constituted under University of Toronto and Faculty of Medicine policies and guidelines (Note Appendix A: Formal Search and Hiring procedures). Applications must clearly indicate if a formal search was held or not.
2. Academic rank of candidate for appointment;
3. Promotion of full-time clinical (MD) faculty from lecturer to assistant professor
4. Academic appointment and promotion processes and standards;
5. Appointments and promotions referred to FAAC by the Dean or Dean’s delegate where the FAAC opinion is requested;
6. Category change at professorial rank from part-time or adjunct clinical (MD), to full-time clinical (MD).

Appointments Not Reviewed by FAAC
All other clinical (MD) appointment applications (i.e., following a search; at lecturer rank; and/or part-time clinical academic and adjunct clinical academic appointments) are submitted to the Dean or Dean’s designate directly for review and approval, without being submitted to the FAAC for review.

Promotions not reviewed by FAAC
All part-time and adjunct clinical (MD) faculty applications for promotion from lecturer to assistant professor are submitted to the Dean or Dean’s designate directly for review and approval, without being submitted to the FAAC for review.

Authority
Clinical (MD) academic appointments are governed by the Policy for Clinical Faculty and Procedures Manual, available at: http://medicine.utoronto.ca/faculty-staff/clinical-affairs

All other appointments are governed by the University of Toronto Policy and Procedures on Academic Appointments, available at: http://www.governingcouncil.utoronto.ca/policies/phoct302003i.htm

Tasks
The FAAC performs a review of each application submitted by the department chair or applicable academic head, applying faculty and sector-specific contexts to judge fairly and consistently the merits of the application. Members do not simply approve applications that meet a set of minimum standards; they must draw on their knowledge and experience to evaluate meritorious scholarship, consistent with principles expressed in this and other documents related to academic appointments and
promotions. Decisions to accept or reject applications, achieved by consensus or vote, are recommended to the Dean. If the FAAC requires further information, the application is deferred and a request for new information is made to the department chair. A deferred application will be kept open for a maximum of two months, after which the file is closed unless there are extraordinary circumstances communicated to Human Resources. After the file has been closed, the department chair may submit a new application with updated information, for full review by the FAAC.

Each FAAC member should declare any conflict so that Committee members understand the relationships. Members who have published, or received or written grants in the previous five years, or had a supervisory and/or mentorship relationship at any time with the candidate should not participate in the FAAC deliberation or decision about that application. A FAAC member who feels that he/she has a conflict for other reasons should withdraw from participation when the file is discussed.

Appointment Review - Appeals
The department chair or applicable academic head may submit an appeal to the Dean on the FAAC’s recommendation on an application. A full-time clinical (MD) appointee may appeal a rejection of promotion from Lecturer to Assistant Professor, according to the procedures set out in the Faculty of Medicine Promotions Manual and Procedures Manual for Policy for Clinical Faculty. This must be done within two months of the FAAC’s recommendation to the Dean.

Members
The Dean appoints seven senior faculty members at the rank of associate or full professor to the FAAC, including a Chair, with representation from each of the three sectors (Basic Sciences, Clinical and Rehabilitation Sciences).

Each Committee member normally serves a three-year term, with appointments staggered to ensure consistency and continuity over time. The Chair of the FAAC is appointed by the Dean. The Faculty of Medicine Human Resources and Clinical Affairs offices provide support to the FAAC.

Meetings
The FAAC meets approximately once per month, usually in person. Electronic deliberation on line may be used instead, as warranted. The Chair and the FAAC members determine meeting dates and agenda items for discussion in consultation with Human Resources.

Human Resources staff in the Faculty of Medicine set the deadlines for submission of material from the departments for each FAAC meeting. When urgent unforeseen circumstances arise, FAAC will review an appointment application off cycle on a case by case basis at the discretion of the FAAC Chair.

All documents, deliberations and decisions of FAAC are strictly confidential. Anyone seeking information on FAAC may consult Human Resources or the FAAC chair.
Review of Terms and Procedures
The FAAC reviews the FAAC Terms of Reference and Procedures normally every three years, and revises where necessary, in consultation with the All Chairs and Clinical Relations Committees as appropriate. The Dean approves revisions and these are reported to Faculty Council for information.

Reporting
1. After each FAAC meeting, recommendations on each request for appointment or promotion are reported to the Dean.
2. Annual aggregate reports of appointment approvals/deferrals is reported to the Clinical Relations Committee, All Chairs Committee, Faculty Council, and Toronto Academic Health Sciences Network (TAHSN) Medical Affairs Subcommittee.
3. When an initial Status Only appointment at the rank of full professor is recommended by FAAC and approved by the Dean it must be reported to the Provost for approval.

SECTION B
PROCEDURES, APPLICATION REQUIREMENTS AND STANDARDS FOR RANK

1. Clinical (MD) Appointments and Promotions

Clinical (MD) faculty appointments: definition and categories
Clinical (MD) faculty refers to an individual (or individuals) licensed to practice medicine in Ontario, who holds a medical staff appointment in a Hospital or other clinical site affiliated with the University; or, less often, in a community clinic, industry or private practice; and has a University appointment in a clinical department in the Faculty of Medicine. The categories of clinical faculty appointment are:

- Full-time clinical – participates in a practice plan or equivalent arrangement; engages in academic activities\(^1\) for at least 80% of professional time; holds an active medical staff or equivalent appointment at an affiliated site.
- Part-time clinical – engages in academic activities for at least 20% but less than 80%, of professional time; holds a medical staff appointment at an affiliated site.
- Adjunct clinical – engaged in academic activities for less than 20% of professional time; or does not hold a medical staff appointment at an affiliated site.
- Visiting – a physician from another university or research institute who holds a continuing appointment at his/her home institution.

\(^1\) Academic activities: teaching (including provision of clinical care that may involve supervision of trainees), research, creative professional activity, and academic administration or work that supports directly academic work by other clinical faculty [Procedures Manual for Policy for Clinical Faculty, 2013].
Note: Clinical (MD) faculty appointed in the full-time clinical academic and part-time clinical academic appointment categories must have an academic position description.

**Initial Appointment at the Rank of Assistant Professor**

An initial appointment at the rank of Assistant Professor requires the successful completion of a recognized graduate program or an advanced training experience deemed to be equivalent to a Master’s level program. In some cases, one to two years of fellowship training, including secondary level resident training will be considered the equivalent to an advanced degree. Normally, the degree program must have been completed as documented by a successful defense of a thesis and awarding of the degree before submission of the request for appointment. Normally the thesis results in at least one first authored scholarly publication in a high quality peer reviewed journal. In some cases in which the candidate is enrolled part-time in graduate studies, the FAAC may advise an exception to the requirement for completion of the degree program, if the Department Chair includes a justification for special consideration as part of the application.²

It is expected that the candidate will have at least one or two published (or accepted) first authored peer-reviewed publications in well regarded journals in their field at the time of request for appointment, excluding case reports, editorials, letters to editor, book reviews, **OR** documentation clearly demonstrating educational accomplishments that includes convincing evidence of one or more of the following:

1) Sustained teaching excellence (i.e., a summary of a strong teaching dossier that includes: i) analysis of student/trainee evaluations with comparisons against peer teachers; ii) numbers and types of trainees and evidence that the candidate has taught in a variety of teaching environments; and iii) teaching awards).

2) Design and development of curricula, educational offerings and/or educational materials.

3) Creative Professional Activity (CPA) in teaching/education (such as the setting of practice standards). Evidence and impact of CPA must be provided.

Impact of scholarship at local or regional levels should be demonstrated.

Generally, advanced training and publications should be sufficiently recent and related to current work, to show some continuity of academic accomplishment to the present. Other evidence of academic achievement, such as research funding, academic positions, patents and invited lectures are considered.

In situations where the applicant has completed fellowship training deemed to be equivalent to a Master’s level program, and is enrolled currently in a graduate studies

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² E.g. the FAAC may approve an applicant with a previously-completed Master’s or equivalent, and sufficient scholarly achievement, to have met the assistant professor standard without completion of further graduate study.
program, the appointment normally will be as lecturer until completion of that degree program, though the FAAC may grant an exception as described above.

Enrolment in full-time graduate studies normally precludes initiation of a full-time clinical academic appointment, irrespective of rank.

The applicant’s academic position description will be reviewed for appropriateness and to ensure sign-off by the department chair, hospital chief, and applicant. As a statement of expectation rather than past achievement, generally the academic position description does not influence the standard for academic rank (e.g. the standard for assistant professor is equivalent for a clinician scientist and a clinician teacher).

**Lateral Transfer of Assistant Professor Rank**

Applications from candidates who hold an appointment at the rank of assistant professor at another university will be reviewed by FAAC to ensure that they meet Faculty of Medicine standards for appointment at the rank of assistant professor. If the candidate does not meet the required standards, appointment will be made at the rank of lecturer.

**Initial Appointment or Lateral Transfer at Rank of Associate or Full Professor**

Applications from candidates, who hold appointments at ranks of associate or full professor at other universities, or appointments at universities that use different ranking systems, will be reviewed by the FAAC to ensure that they meet the Faculty of Medicine standards for the requested rank. An outline of the criteria can be found in the Faculty of Medicine’s *Manual for Promotion*, available at: [http://medicine.utoronto.ca/sites/default/files/ManualforAcademicPromotion2015.pdf](http://medicine.utoronto.ca/sites/default/files/ManualforAcademicPromotion2015.pdf)

**Promotion at Time of Initial Appointment**

At initial appointment, the FAAC will not approve a request for promotion in rank above an applicant’s highest rank held currently or previously at another university or the University of Toronto. Applications for promotion at the time of initial appointment must be directed by the Department Chair to the Dean on the recommendation of the Department Promotions Committee. If the applicant comes from a university that uses a different terminology to identify rank that differs from the University of Toronto, the application should be directed to the FAAC.

**Resumption of Former Rank**

On resumption or re-institution of a faculty appointment, the applicant’s rank will not be lower than the rank held formerly.

**Promotion from Lecturer to Assistant Professor**

The FAAC reviews applications for promotion to assistant professor for full-time clinical faculty (for part-time and adjunct clinical faculty promotions, see Section A, above).

Clinical (MD) faculty members who hold an appointment as lecturer may be considered for promotion at any time that they meet the requirements as set out above for an
initial appointment at the rank of assistant professor. Promotion on the basis of sustained contribution to the academic mission may occur in the absence of meeting the requirements for initial appointment at assistant professor. There is no set timeline, but generally, for the criterion of sustained contribution to the academic mission, the application should demonstrate sustained contributions and scholarship in the Faculty of Medicine for at least three years.

Documents Required for Application for Initial Clinical Appointment

Initial requests for a full-time clinical (MD) appointment require the following documents to be submitted to the FAAC:

- application for clinical (MD) academic appointment form signed by the department chair
- updated curriculum vitae
- teaching dossier (if appropriate, see Appendix B)
- academic position description
- Certificate of Professional Conduct from the College of Physician and Surgeons of Ontario
- draft offer of academic appointment letter (unsigned)
- letter of support from the department chair
- letter of support from the chair of the Department Appointments Committee (DAC), or explanatory excerpt from DAC meeting minutes (including evaluation of teaching dossier and the rationale to justify request for rank which must be stated clearly and explicitly rather than assumed)
- intra-departmental letters of reference (2-3), where applicable
- extra-departmental letters of reference (2-3) where applicable. In some cases only intra-departmental letters may be available, then 3-4 letters will be required (extra-departmental letters are those from departments other than the university department where the candidate holds the appointment)

Documents Required for Application for Promotion of a Current Full-Time Clinical (MD) Faculty Member from Lecturer to Assistant Professor:

- lecturer to assistant professor promotion application form
- updated curriculum vitae *see footnote 3
- updated teaching dossier including teaching scores and evaluations (see Appendix B)
- academic position description
- copy of the initial offer of academic appointment letter
- letter of support from the department chair/if applicable letter of support from cross appointed chair

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3 Preferably in the Faculty of Medicine standard CV format available at: [http://medicine.utoronto.ca/faculty-staff/faculty-appointments-and-promotions](http://medicine.utoronto.ca/faculty-staff/faculty-appointments-and-promotions). CV must be in chronological order. Education section must distinguish accurately Royal College or equivalent residency from fellowship training. All claims that grants or articles are “peer-review” must be accurate. CV, Department Chair letter or DAC Chair letter must explain teaching award significance e.g. size of competition pool, and explain journal article significance, such as journal impact factor, citations.
• letter of support from the chair of the Department Appointments Committee or Department Promotions Committee, or excerpt from minutes of meeting (including evaluation of the teaching dossier)
• intra-departmental or extra-departmental letters of reference (2)

2. Status Only –Appointments

Definition
Status-only University appointees are employed outside of the University, usually by an academic/research institution and normally receive no remuneration from the University of Toronto (http://www.aapm.utoronto.ca/status-only-adjunct-and-visiting-professors). Such appointments are made to allow an individual faculty member to participate more fully in a university department’s teaching or research program. Status-only appointments do not fall under the Faculty of Medicine’s Policy for Clinical Faculty. Individuals being considered for a status-only appointment normally hold full-time employment arrangements with another institution with a job description that is primarily academic (research and/or teaching).

Generally, for those in hospitals and research institutes, status-only appointees hold qualifications and fulfill academic responsibilities similar to those of other professorial faculty at the University. FAAC considers the type of appointment at the institution, the type of employment arrangement with the institution and the availability of independent space and resources to carry out research. The appointment is for independent scientists and those who have regular and on-going involvement in the teaching and evaluation of learners. Research associates are not eligible for status only professorial appointments to the Faculty of Medicine.

In the rehabilitation sector, status-only faculty may also be appointed for the main purpose of participating in the provision of teaching and education.

Appointment at the Rank of Instructor/Lecturer
Initial status-only appointments at the rank of Instructor/Lecturer are not subject to review by the FAAC, but are submitted to the Dean for approval; status-only appointments at those ranks are unique to the Faculty of Medicine. A status only faculty appointed at the rank of Lecturer cannot be considered for promotion. Instead, should a department chair determine that an individual has become qualified for appointment at the rank of Assistant Professor, the department must submit a new application to the FAAC.

Appointment at the Rank of Assistant Professor
An initial status-only appointment at the rank of Assistant Professor requires the successful completion of a doctoral program or other scholarly or professional work deemed to be equivalent.
Applicants with a PhD must show evidence of scholarly productivity. Scholarship would often include a post-doctoral fellowship and should include first-authored peer-reviewed publications. In addition, national speaking engagements, invited lectures, and sustained excellent contributions to a teaching program, including curriculum development will be considered.

Individuals in health care settings who have completed a Master’s level program will be considered for an appointment at the rank of Assistant Professor where there is clear documented evidence of a strong record of scholarly achievement and/or creative professional activity in line with departmental norms such as:

- a history of relevant experience involving graduate level teaching;
- coordination of a significant component of a curriculum including any of the following; classroom lectures, presentations, small group facilitation, supervision of graduate research projects, and involvement in the organization or planning of the evaluation components of the curriculum;
- positive evaluations from students;
- published work including monographs, reports, articles and reviews in which the candidate has contributed to the advancement of knowledge as a result of his/her work;
- contributed innovations (with documentation) in techniques or concepts that have an important influence on the discipline’s practice including teaching;
- presentation of peer reviewed scholarly papers or posters at professional and/or scientific meetings or participating as a panel member at such meetings;
- principal or co-investigator/co-supervisor for a research project;
- involvement in the planning of major research initiatives – e.g. planning or coordinating research symposia;
- collaborative research with faculty members;
- evidence of instructional innovation and/or creative excellence;
- registrant in good standing of a provincial/national regulatory body.

**Lateral Transfers**

Applications from candidates who hold an appointment at the rank of Assistant Professor at another university will be reviewed by FAAC to ensure that they meet Faculty of Medicine standards for the rank of Assistant Professor.

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4 This would include individuals working in the rehabilitation sector and those performing teaching and research in specific Master of Science Programs, for example, Genetic Counseling. It does not include physicians covered under the Policy for Clinical Faculty.
Initial Appointment at Rank of Associate or Full Professor
Applications from candidates who hold an appointment at the rank of Associate or Full Professor at another university will be reviewed by FAAC to ensure that they meet the Faculty of Medicine standards for the requested rank. An outline of the criteria can be found in the Faculty of Medicine’s Manual for Promotion, available at: http://medicine.utoronto.ca/sites/default/files/ManualforAcademicPromotion2015.pdf

Promotion on Appointment from Another University
Requests for promotion at the time of initial status only appointment must be directed by the Department Chair or applicable academic head to the Dean on the recommendation of the Department Promotions Committee. The Dean will consult with the Chair of the Decanal Promotions Committee who will review the application with selected members of the decanal committee. This is done to ensure equity in promotion between existing and new faculty. This review takes place electronically.

Application Requirements
Initial requests for a status only appointment require:
- application for Status-Only (non-MD) Academic Appointment Form signed by the Department Chair
- updated Curriculum Vitae – preferably in the Faculty of Medicine standard CV format available at: http://medicine.utoronto.ca/faculty-staff/faculty-appointments-and-promotions
- statement of research or teaching, if available
- draft offer of status-only University appointment letter (unsigned)
- letter of support from the department Chair, which must include deliberations of the Department Appointments Committee, as well as clear rationale for the appointment and the rank requested, supported by documentary evidence, such as teaching dossier
- intra-departmental letters of reference (2-3), where applicable
- extra-departmental letters of reference (2-3) where applicable, in some cases only intra-departmental letters may be available, then 3-4 letters will be required (extra-departmental letters are those from departments other than the university department where the candidate holds the appointment).
- letter from employing institution permitting status-only academic appointment at the University of Toronto. If the candidate has PhD Scientist designation5, or equivalent this letter must come from the appropriate VP at the hospital or research institution where the scientist is employed, confirming that the hospital or research institution will provide salary and lab facilities for the duration of the faculty appointment

5 PhD Scientist is a specific type of status-only appointment designed to identify status-only faculty who hold a PhD (or equivalent) and is employed in a research/scientist role at an affiliated hospital or research institute. Not all PhD Scientists are research scientists; some are clinical scientists for example clinical biochemistry. Employer letter must come from VP at Hospital or Research Institute.
if the request for an initial appointment is at the rank of associate or full professor, extra-departmental referee letters (3) assessing the candidate’s national and international scholarly impact must be submitted.

APPENDIX A: Formal Search and Hiring Procedures

This is for information purposes only as appointments with a formal search are sent by Human Resources directly to the Dean and are not reviewed by the FAAC.

Definition of a Formal Search for Clinical (MD) and Status Only Faculty
Applications for an appointment at the rank of full-time clinical (MD) assistant professor or above, or a status-only appointment at the rank of assistant professor and above, do not require review by FAAC where there is a formal search. A formal search includes a search committee with at least one University of Toronto representative at a professorial rank, broad advertising to reach potential applicants and effective interviewing and evaluating techniques as outlined in the Academic Appointments Procedures Manual http://www.aapm.utoronto.ca/recruitment#_Toc309136693 Applications that involve a formal search are sent directly to the Dean of the Faculty of Medicine for approval. Applications at the rank of full professor (status only) also require provostial approval.

SEARCH PROCESS

Search Committee
The creation of the search committee for full-time clinical academic appointments should be a joint effort between the affiliated hospital and the University of Toronto. The composition of the search committee is extremely important because it sets the tone for the search and the success of the recruitment process. It also presents the face of the University department and hospital. The search committee should strive for diversity in membership. Members should be knowledgeable about the future direction of the department; have a proven track record of good judgment about people; and be representative of the breadth and depth of the discipline.

When initiating the search process, the search committee must determine the general scope of the position and identify the skills, experience, qualifications, knowledge and attributes a candidate will need to successfully perform in the position. The search committee should determine the criteria that prospective candidates need to meet in order to be considered for the shortlist, the interview, and the position.

Advertising
The purpose of the advertisement is to reach the largest possible pool of qualified applicants and fulfill the requirement by Employment and Social Development Canada
(ESDC) that academic positions be advertised in such a way that qualified Canadians and permanent residents have the opportunity to learn of the vacancy. The Faculty of Medicine HR Office reviews and approves all positions posted on the University’s career site which includes an automatic posting in Inside Higher Ed. Additional advertising mediums include national and international disciplinary journals and corresponding medical schools in other Canadian universities. It is also good practice to use personal and professional networks, contacts, and recommendations to seek leads to candidates from designated groups (women, visible minorities, aboriginal peoples, and persons with a disability); and encourage all members of the department to make recruitment part of their activities at conferences and national and international meetings.

When drafting the advertisement, the search committee should try to use inclusive language, advertise for excellent scholarship, identify a range of disciplines or inter-discipline areas and include emerging areas of scholarship. Details should include position, rank, responsibilities and summary of essential duties, degrees required or preferred, experience or qualifications required or preferred, date of appointment, location of work, application materials, closing date (which is at least one month after publication), and contact details. All advertisements must contain the following statements:

*The University of Toronto is strongly committed to diversity within its community and especially welcomes applications from visible minority group members, women, Aboriginal persons, persons with disabilities, members of sexual minority groups, and others who may contribute to the further diversification of ideas.*

*All qualified candidates are encouraged to apply; however, Canadians and permanent residents will be given priority.*

The posting may also include a description of the University of Toronto department and hospital. It is important to advertise broadly within the applicable specialty area. Ideally, the search process should not be closed until a candidate pool of sufficient diversity has been attained.

Please refer to the ESDC site to ensure that all federal government advertising requirements are also met:


**Interviewing and Evaluating**

It is important to remember that the interview visit has a dual purpose: the candidate is being assessed by the search committee; and, the candidate is assessing the department/hospital as a potential place of academic employment. Once the department begins to receive applications for the position, a record of potential candidates should be prepared and reviewed to create a short-list of applicants to be invited for an interview and campus/hospital visit. The goal is to find the best candidate for the position. In preparation for the interview, the search committee should organize
a set of questions that assesses the applicants against the selection criteria. Prior to the interview, the chair of the search committee should decide on the order of questions and allocate specific questions to each committee member. At the beginning of the interview, the search committee chair should introduce the applicant to each of the members and take the time to explain the purpose and structure of the interview. The search committee chair is responsible for ensuring that candidates are not asked questions that could be considered discriminatory (for example, those relating to the individual’s marital or family status, gender, nationality, religion, health or physical ability), and that sufficient information is obtained from the candidates for an accurate decision to be made. Before concluding the interview, the candidate should be allowed to ask questions and/or provide information that may not have emerged in response to the core questions. After the interview, committee members should be encouraged to complete their assessment on the candidate.

If a candidate is currently not eligible to work in Canada, the hospital or research institute is responsible for handling all immigration matters.

**College of Physicians and Surgeons of Ontario [CPSO] Documentation for International Education**

In order to work in Ontario, international medical graduates who obtain a clinical (MD) academic appointment require an academic certificate of registration with the College of Physicians and Surgeons of Ontario (CPSO). The university department liaises with the faculty HR office and Clinical Affairs to complete the necessary documents to obtain medical licensing in Ontario.

**ADDITIONAL SUPPORTING DOCUMENTATION**

The Chair’s letter to the Dean should contain the following information on the search:

- a clear statement that a formal search has occurred
- a list of all members of the search committee and the identity, rank and department of the University of Toronto representative
- a list of the advertising sites/locations and at least one copy of a broad reaching advertisement
- the number of candidates that were interviewed and a brief summary of the rationale for the selection of the successful candidate. Any known demographic information of the candidates (i.e. number of Canadians, number of men and women, etc.) should also be included in the Chair’s letter
**APPENDIX B: Components of a Teaching Dossier**

The preparation and submission of Teaching Dossier is required when applying for promotion of academic rank in the Faculty of Medicine, University of Toronto. In some cases, it is also appropriate and contributes to a stronger application for an initial academic appointment requiring Faculty Appointments Advisory Committee (FAAC) review.

A Teaching Dossier is prepared as part of or in addition to the individual’s *curriculum vitae*, as appropriate. It summarizes the candidate’s educational and teaching activities and demonstrates the candidate’s teaching effectiveness and contributions to the field of teaching and education.

In the Faculty of Medicine, teachers and educators can include contributions at one or more of the following levels:

a. Undergraduate medical education  
b. Graduate education  
c. Postgraduate medical education  
d. Post-doctoral training  
e. Continuing education and faculty development  
f. Patient/public education

**Contents**

The Dossier should include components the candidate feels best displays his/her teaching effectiveness and contributions to the field of teaching and education. Below are a few examples of what can be included in the Dossier. **Not all components will be relevant for all candidates but it is strongly encouraged that the candidate includes the bolded components:**

- A statement of the candidate’s approach to teaching, including an assessment of the impact of teaching activities
- A listing of all teaching and assessment activities, with number of hours and audience numbers involved
- Supporting documentation related to the assessment of teaching. **Summaries of all evaluations, results of peer assessments of teaching effectiveness, solicited and unsolicited letters from colleagues and students, letters from senior members of the Faculty of Medicine who have made personal observations at national meetings, continuing education courses and/or seminars and symposia**
- Supporting documentation related to teaching and education. Photocopies of all course and lecture outlines, bibliographies, and letters of invitation to teach at other centres
- A listing of all activities related to the administration, organizational and developmental aspects of education (organized by level) with a description of the nature and extent of the candidate’s involvement and level of responsibility
- Documentation of participation in educational research activities (for example, publications, abstracts, presentations and/or grants) as well as scholarly writing relating to education
- Documentation of participation in national and international organizations whose activities relate to education research and development
- Documentation of participation at national and international conferences and workshops relating to education research and development
- Documentation of external consultancies relating to education research and development
- Documentation of effectiveness in mentoring or advising in education and teaching
- A listing of honours and awards related to teaching and education

A Tip for Reporting Course Evaluations
Reams of course evaluation materials can be difficult to read and the ‘important’ question varies in the different formats used across different evaluations. In order to simplify matters, it is recommended that a summary plot is provided that identifies the overall evaluative question, provides details of scale and gives a summary of candidate’s scores over time. The Centre for Teaching Support & Innovation can assist in the preparation of summary charts. An example is provided below.

![Graph](image)

Sources
- Manual for Academic Promotion to Associate and Full Professor (July 2017)
- Guidelines for the Assessment of Effectiveness of Teaching in Promotion and Tenure Decisions in the Faculty of Medicine
- Policy and Procedures on Academic Appointments (June 26, 2015)
- Academic Administrative Procedures Manual: Reviews
Council of Education Vice Deans
Faculty Council Report

October 16, 2017

Submitted by:

Patricia Houston, Vice-Dean, MD Program
Allan S. Kaplan, Vice-Dean, Graduate and Academic Affairs
Salvatore Spadafora, Vice-Dean, Post MD Education (PGME & CPD)
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A. Education Vice-Deans, Integrative Activities

1. External Education and Teaching Awards | Call for Nominations

Each spring and fall, the Faculty's Teaching and Education Awards Committee recognizes individuals who are making significant contributions to medical education. We are currently accepting nominations for the following awards:

- **STHLE 3M National Teaching Fellowship**
- **AAMC Alpha Omega Alpha Robert J. Glaser Distinguished Teacher Award** and the
- **AAMC Abraham Flexner Award for Distinguished Contribution to Medical Education**

Nominations should be made online by Monday, November 20, 2017.

It is strongly recommended that the nominee’s Department Chair be in support of the nomination. For more information, contact the Office of the Education Vice-Deans at medicine.awards@utoronto.ca or at (416) 946-8067.

2. Education Development Fund

**Funded Projects:**
The Education Vice-Deans and the EDF Adjudication Committee Chair, Dr. Risa Freeman, are pleased to announce the recipients of the 2017 Education Development Fund competition:

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<td>Dr. Jory Simpson, Surgery</td>
<td>Humanism Education in Surgery: Developing a Patients as Teachers Initiative In Surgery for Clerkship Students</td>
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<td>Dr. Kate Hayman, Medicine</td>
<td>Teaching undergraduate medical students to “go upstream” and advocate on social determinants of health using case-based learning</td>
</tr>
<tr>
<td>Drs. Batya Grundland and Jeremy Rezmovitz, Family and Community Medicine</td>
<td>Caring, Not Just Curing: Using Digital Storytelling to Understand the Teaching and Learning of Compassionate Care in a Canadian Family Medicine Residency Program</td>
</tr>
<tr>
<td>Dr. Anna Nowacki, Medicine</td>
<td>Laying the Groundwork: entitled The Addis Ababa Toxicology Curriculum Project: Educational Needs Assessment for the Toxicology Modules of an Emergency Medicine Training Program</td>
</tr>
<tr>
<td>Dr. Megan Landes, Family and Community Medicine</td>
<td>Laying the Groundwork: Developing a Global Health Emergency Medicine Fellowship at the University of Toronto</td>
</tr>
<tr>
<td>Dr. Elise Hall, Psychiatry</td>
<td>PsychEd: a learner-driven, educational psychiatry podcast</td>
</tr>
<tr>
<td>Dr. Michael Neszt, Psychiatry</td>
<td>Better Together: A Mixed-Methods Study to Guide a Continuing Professional Development and Faculty Development Curriculum in Integrated Mental Health Care</td>
</tr>
<tr>
<td>Drs. Fok-Han Leung and Milena Forte, Family and Community Medicine</td>
<td>Reflections on Remediation Through a Graduate’s Lens</td>
</tr>
</tbody>
</table>
2018 EDF Cycle | Timeline
The Education Development Fund 2018 cycle has commenced with an initial call for applications in October. The application site is expected to open on November 1 and applications will be due on February 16, 2017 at 5 PM.
For further information, please refer to the Education Development Fund website.

3. Annual Education Achievement Celebration | SAVE THE DATE
The Faculty of Medicine’s 16th Annual Education Achievement Celebration will be held on Wednesday, May 9th from 5:30–7:30pm in the Great Hall at Hart House.
Doors will open at 5:00 pm. The event itself will get underway at approximately 5:30 PM.

B. MD Program

4. Admissions

<table>
<thead>
<tr>
<th>MD Program</th>
<th>2014 Entry</th>
<th>2015 Entry</th>
<th>2016 Entry</th>
<th>2017 Entry</th>
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<td>Full file review</td>
<td>1990</td>
<td>1777</td>
<td>1934</td>
<td>2107</td>
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<td>Interviews</td>
<td>600</td>
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<td>Offers</td>
<td>336</td>
<td>326</td>
<td>319</td>
<td>310 2</td>
</tr>
<tr>
<td>Acceptances</td>
<td>259</td>
<td>260</td>
<td>259</td>
<td>261 3</td>
</tr>
<tr>
<td>Acceptance of Offers</td>
<td>77.1%</td>
<td>79.8%</td>
<td>81.2%</td>
<td>84.2%</td>
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</table>

<table>
<thead>
<tr>
<th>MD/PhD Program</th>
<th>2014 entry</th>
<th>2015 Entry</th>
<th>2016 Entry</th>
<th>2017 Entry</th>
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<tbody>
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<td>Applications</td>
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<tr>
<td>Full file review</td>
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<tr>
<td>Interviews</td>
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<td>Offers</td>
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<tr>
<td>Acceptances</td>
<td>8</td>
<td>13</td>
<td>6</td>
<td>14</td>
</tr>
</tbody>
</table>

In addition to the 2017 entry numbers for domestic applicants:
1 9 international applicants were interviewed
2 Offers were made to 3 international applicants
3 Offers were accepted by 2 international applicants

To improve the MD/PhD applicant experience, the Ontario universities agreed on a common response date (March 15, 2017) for 2017 entry. Thanks to this harmonized response date, MD/PhD applicants were able to attend all admissions interviews and were better positioned to make informed selections.

A full report regarding admissions for 2017 entry to the MD Program and MD/PhD Program will be provided to the Faculty Council Education Committee later in the 2017-18 academic year.
5. Interim Accreditation Review

The MD Program’s Interim Accreditation Review (IAR) culminated in a site visit held over March 28-29, 2017. The external reviewer was Dr. Rob Whyte, Assistant Dean, MD Program, McMaster University. Approximately 80 faculty members (including Chairs, decanal representatives and education leaders), 60 students and 12 administrative staff participated in the site visit.

The following program strengths were identified:
- Bold, value-based and innovative leadership.
- National leader in medical education, with the program’s diversification efforts and Foundations curriculum being two highlights.
- The concepts behind, planning of and implementation of the Foundations curriculum, including the attentive responsiveness of the curriculum planners and leaders, was particularly notable.
- The Longitudinal Integrated Clerkship (LINC) was also seen as innovative, particularly in a large urban clinical setting, running concurrently with a traditional, block clerkship.

Of the 93 accreditation elements, approximately 35 require further analysis in order to determine next steps. Some of the areas identified as being particularly vulnerable include curriculum mapping and program evaluation as well as career advising. The internal review team and external reviewer also noted the importance of monitoring the Foundations curriculum, especially since much of the data normally used to assess curriculum outcomes (i.e. student satisfaction on the Canadian Graduate Questionnaire) will not be available in time for the program’s next full accreditation survey.

The MD Program Executive Committee is responsible for oversight of the IAR process, including the assignment of individual elements to relevant faculty and staff for follow-up and monitoring steps taken to address the IAR findings. Work is underway to address the potential areas concern identified as part of the IAR process.

Patricia Houston, Vice Dean, MD Program, has taken on the role of accreditation coordinator, a role previously held by Martin Schreiber both for the MD Program’s full accreditation in 2012 and the program’s interim review in 2016-17. Many thanks to Dr. Schreiber for his tireless dedication to helping ensure that the MD Program remains fully accredited.

6. Curriculum

Update – Foundations Curriculum
Year 2 of the MD Program’s new Foundations Curriculum, which covers the first two years of medical school, was successfully launched for the 2017-18 academic year. This follows the successful launch of the new Year 1 curriculum in 2016-17. The development of an evaluation framework is underway, which will enable the program to identify and evaluate whether the new curriculum is helping us achieve the goals and objectives that informed the development of the Foundations Curriculum.

7. Events

Announcement – 2017 Medical Psychiatry Alliance Annual Conference
Registration is now open for the 2017 Medical Psychiatry Alliance Annual Conference, which scheduled
to take place at the Chelsea Hotel on Friday, October 6th, 2017. This year’s conference is titled *A Matter of Life: New Approaches to Care for Patients with Physical and Severe Mental Illness*. It is hosted by the Centre for Addiction and Mental Health (CAMH).

The conference is open to everyone with an interest in collaborative approaches to care for patients with physical and severe mental illness. Attendance from all health disciplines is encouraged. We also welcome participation from all students/residents, policy makers, health administrators and others that wish to attend.

8. Governance & Leadership

- Oversight of the Standardized Patient Program (SPP) has transitioned from the portfolio of the Vice Dean, Post MD Education to that of Vice Dean, MD Program. An important part of the transition was the recruitment of a new Director for the SPP, Delon Pereira, who assumed the role June 15, 2017. The SPP has been a long standing education unit in the Faculty Medicine that provides simulated standardized patients to support the teaching and assessment needs of the Faculty of Medicine, its hospital partners, other Faculties at the University of Toronto, and community partners. The MD Program is the largest client of the SPP, and the addition of the program to the MD Program portfolio will allow for enhanced opportunities for cross-team collaboration and curriculum development synergies. Thanks to the efforts of Salvatore Spadafora, Vice Dean, Post MD Education and Trevor Cuddy, Director of the CPD Portfolio, including their leadership of the SPP over the past several years, the transition was completed in August 2017.
- David Latter has been appointed Director, MD Admissions and Student Finances for a five year term, effective July 1. This follows Dr. Latter’s success as Interim Director in 2016-17.
- Katina Tzanetos has been appointed as the Wightman-Berris Academy Director effective June 1, 2017 for a five-year term.
- Pier Bryden has been appointed as Director, MD Program Integration effective September 1, 2017. This is a new role developed to help ensure curricular, thematic and student assessment coherence and integration across all four years of the MD Program.
- Martin Schreiber has been appointed Faculty Advisor, MD Program Curriculum Map, and will work along with Pier Bryden in support to MD Program’s curriculum mapping initiatives. Dr. Schreiber has also been appointed to direct our Adapted Concepts, Patients and Communities 2 (ACPC2), which was developed to facilitate reintegration of MD/PhD students who are transitioning back from full-time graduate studies to full-time MD studies.
- Glendon Tait’s role as Director of Foundations Student Assessment has been reconfigured as Director of Student Assessment. In this reconfigured role, Dr. Tait is responsible for the overall strategic planning, design, implementation, and ongoing improvement of the student assessment framework across all four years of the MD Program.
- James Owen has been appointed the MD Program Lesbian, Gay, Bisexual, Transgender, Queer and 2-Spirited (LGBTQ2S) Education Theme Lead effective September 1, 2017.
- Fok-Han Leung has taken on a leadership role with respect to the MD Program’s Health in Community (HC) curriculum, which covers the program’s covers our community-engaged educational activities, in conjunction with his role as co-director of the Integrated Clinical Experience (ICE) component of the Foundations curriculum.
• Laurence Biro was appointed as Associate Director, Integrated Clinical Experience (ICE) – Clinical Skills effective September 1, 2017.

• Barbara (Dee) Ballyk has transitioned from co-course director of Brain and Behaviour to a new role, Faculty Lead, Anatomy Foundations.

• Sian Patterson’s role as clinical co-course director of Metabolism and Nutrition has been reconfigured as Faculty Lead, Biochemistry, Foundations, effective August 1, 2017.

C. Postgraduate Medical Education

9. Governance & Staffing

Rebecca Saunders started in June as Assistant to Dr. Susan Glover Takahashi in the Education Integration Group.

Dr. Julie Maggi was appointed on July 1st as Director of Resident Wellness.

Charlene Sturge joined in July as the Executive Assistant to Dr. Glen Bandiera, Associate Dean, PGME.

Dr. Allan Peterkin started in the role of Faculty Lead, Humanities. Providing support in arts and humanities-based programming for learners in both residency and continuing professional development programs by creating humanities-based content for elective and research opportunities, promoting physician well-being, and liaising with community partner agencies to create arts-based/medically themed programs. His email addresses are allan.peterkin@utoronto.ca and allan.peterkin@sinahealthsystem.ca

Shannon Spencer started in September as International Relationship Manager, a newly-created position to ensure strategic alignment of recruitment and program training capacity and developing orientation, ‘on-boarding’ and mentoring programs for new international learners.

10. Competency Based Medical Education (CBME)

Competency Based Medical Education is a major, multi-year project to be rolled out for approximately 80 specialties in 7 cohorts over the next decade. This new model for medical residency education is oriented to outcomes rather than time in training.

The Education Integration Group, under the direction of Dr. Susan Glover Takahashi, meets with programs according to the cohort schedule coordinated with the RCPSC. The estimated time frame from initial meeting with the program to launch of the new CBME model in the specialty is one year, which includes mapping the competencies and EPAs, development of the assessment tools, organizing faculty development sessions, setting up the learner and site schedules, and program evaluation.

Anesthesia and Otolaryngology – Head and Neck Surgery were launched along with their national cohorts on July 1, 2017. Many other programs have implemented elements of CBME to test concepts.
and acculturate faculty and residents to upcoming changes. We are working diligently with the Royal College and our programs on identifying the next cohort for the July 2018 launch.

11. Accreditation & Internal Reviews

In the past year national changes have been implemented with regards to Residency Education Accreditation in Canada. The Royal College of Physicians and Surgeons of Canada and the College of Family Physicians of Canada have agreed to new accreditation standards for programs and institutions and the length of the accreditation cycle will be changing from 6 years to 8 years. The next external survey visit for the University of Toronto which was previously scheduled for 2019, will now be in the Fall of 2020. A new process to carry out the survey visit and conduct interim monitoring of program activities will also be implemented. Key members of the U of T PGME community have been involved in developing the new models and will be involved in external reviews leading up to the Toronto review in 2020.

The Internal Review Committee, a standing committee of the Postgraduate Medical Education Advisory Committee, has conducted internal reviews on all of its regular stream residency training programs and family medicine programs and training sites as part of our mandated quality assurance process. The next task for the accreditation unit is to do a comparison between the previous accreditation standards and the new standards, in order to identify which new standards were not focused on in the internal review process so that these can be addressed. We continue to work with programs to ensure that all of the accreditation standards are being met.

12. Conferences, Workshops, Leadership, Faculty Development

Two faculty development sessions were held in June on BOE & Remediation and Effective Teacher Evaluations. On May 26th the All Program Directors meeting provided updated information on recent trainee awards, Guidelines for the Assessment of Postgraduate Residents and Best Practices on Evaluation & Assessment (BPEA) with over 90 faculty members and staff in attendance.

On May 30th, the first annual Physician Health & Wellness Symposium, was held with over 85 faculty, postgraduate and undergraduate medical trainees in attendance to share research and innovations in resident wellness.

The Chief Resident Leadership Forum: Effective Communication Skills was held on May 9th and on August 15th the 12th Annual Chief Resident Leadership Workshop was held with over 90 chief residents in attendance, with a keynote from Dr. Gillian Hawker and sessions on Resident Wellness, Teaching Residents to Teach and the PARO-CAHO contract.

The annual New Residents Welcome Reception with over 350 new residents was held on June 29th and provided access to helpful information from PARO, MD Financial Management, OMA, Alumni Relations and PGME Office of Resident Wellness.

PGME’s Program Administrator Information series ran sessions on: PGCorEd, Royal College credentialing, the PARO-CAHO contract, CBME implementation, Effective Communication and a year-end appreciation event.
13. CaRMS

The Pediatric Subspecialty Match took place on May 31, 2017. All 23 of our MOHLTC funded positions were filled with an additional 6 non MOHLTC positions filled.

The Medical Subspecialty Match is currently underway with a match date of November 8, 2017.

The PGME Quotas Allocation Committee met over the summer to identify a recommended distribution of positions including the 407 positions for the CaRMS R1 Match in March 2018. The recommended distribution includes a rotating schedule of reductions of 9 entry positions for Canadian Medical Graduates, first reduced in 2016. Prior to 2016, the intake quota was 416 positions.


Dr. Robert H. Sheppard Award for Health Equity and Social Justice
PGME established a new award in 2016 to recognize the late Dr. Robert H. Sheppard, former dean of postgraduate medicine in the Faculty from 1977 to 1988. He was also the Director of the University’s Office of International Relations from 1988 to 1989 and the inaugural Chair of the Canadian Post-MD Education Registry (CAPER). Post-retirement, Dr. Sheppard worked with Horizons of Friendship, the outreach committee at Trinity United Church, as well as Amnesty International. The faculty award winner in the inaugural year of this award is Dr. Lee Ford Jones who created the Social Pediatric elective rotation in 2008, coordinating a network of faculty and community workers to mentor the education of medical students and residents on the effects of poverty and disadvantage on children’s health and development. To review all of the PG award winners for 2016-17, please see http://pg.postmd.utoronto.ca/about-pgme/awards/

15. New Medical Humanities Education Grant Funding

Post MD Education initiated a grant to support projects in Medical Humanities Education. The grants support projects to encourage engagement in the medical humanities which will further enhance humanism, compassionate care, clinical competencies and deliverables which closely aligned with the ongoing priorities of postgraduate medical education and the CanMEDS roles.

There are two calls for grant submissions annually and the winners are notified in May and November. The inaugural grant winners for the May 2017 component were:

- Dr. Caitlin Gillan and Dr. Meredith Giuliani, Department of Radiation Oncology
- Dr. Sophie Soklaridis, Department of Psychiatry
- Dr. Catherine Yu, Department of Medicine

16. Publications & Presentations

PGME staff and faculty prepared a number of papers and posters at conferences and symposiums this year, including leading or facilitating at workshops. A complete list of the topics and authors of the 10 papers, 24 workshops and presentations and 4 posters for 2016-17 can be viewed at http://pg.postmd.utoronto.ca/about-pgme/pgme-reports/2016-17-pgme-scholarly-activities/
17. Global Health

Global Health at Postgraduate Medical Education led by Dr. Barry Pakes and Judy Kopelow develops and delivers coordinated education and programming via initiatives reflecting our commitment to local and global social responsibility and accountability. It also supports resident trainees interest in global health education, research and practice. (gh.postmd.utoronto.ca)

The program supports residents in GH Electives. It also administers the GH Education Initiative (GHEI); now in its 9th year; a 2-year certificate curriculum, includes 25 modules, 100+ participants, 100+ faculty, active alumni and variety of continuing global health education and leadership opportunities. The program is also responsible for the Annual GH Day held this year on June 8.

18. Projects, Initiatives, Events

Transitions Think Tank Symposium

On Friday, April 7, 2017, the Faculty of Medicine hosted a “Transitions Think Tank” with approximately 40 participants. The forum brought together learners and faculty from the MD program, Postgraduate Medical Education and Continuing Professional Development sectors to have honest conversations and share ideas about transitions within medical education, with consideration of ongoing activities at the provincial and national level.

Many long-standing concerns were discussed including the CaRMS selection process, true residency program requirements, medical school academic records, alternative careers, timing of residency program choices and system inflexibility, the importance of research, and readiness for practice. Possible action items emanating from the forum were a plan to standardize UG learner reports, limitations on elective rotations, improved health workforce data, and clarity from programs on the need for research experience.

In response to the findings that emerged from this forum, and from other discussions, both the National Postgraduate and Undergraduate Deans have formed a Working Group on Electives Chaired by Glen Bandiera, Associate Dean, PGME.

For more information on the discussion points of the forum, please download the PDF.

19. Voice of the Resident Surveys

In April 2017, the second annual Voice of the Resident (VotR) reflection survey of all residents was fielded and in June 2017, the second annual VotR Entrant survey of new incoming PGY1s was fielded.

The findings of the VotR surveys have been presented to many audiences: within PGME, in the Faculty of Medicine broadly, at conferences, at various committees of TAHSN (Toronto Academic Health Science Network) and to PARO.

Diversity, Equity, and Inclusion is a core module of every VotR survey. We are working closely with the Office of Diversity to explore the feasibility of implementing Diversity, Equity, and Inclusion surveys of Faculty of Medicine staff, faculty, clinical associates, graduate students and postdoctoral fellows.
20. PostMD Strategic Plan

The PGME office has embarked on a process to renew the current 2012-2017 strategic plan in alignment with the recently developed CPD strategic plan. The two will be integrated into a cohesive PostMD strategic plan, aligned with the faculty.

D. Continuing Professional Development

21. Governance & Staffing

Dr. Shiphra Ginsburg has been appointed CPD Academic Director and will provide leadership in the area of CPD research and scholarship. Dr. Ginsburg is a Professor in the Department of Medicine and a Scientist at the Wilson Centre. She completed medical school at McGill, followed by postgraduate training in Internal Medicine (at U of T), Respiratory and Critical Care (at McMaster) and a Master of Education at OISE, and a PhD in Health Professions Education at Maastricht University. Her program of research involves two inter-related areas. The first explores how clinical supervisors conceptualize, assess and communicate about the performance and competence of their learners, with a focus on the language used in workplace-based assessment. The second area explores the construct of professionalism in medical education, from the perspective of learners, faculty and practicing physicians.

Morag Paton has joined the CPD portfolio as Education Research Coordinator. In this role, Morag is responsible for working with faculty and staff interested in CPD-related research and scholarship and is also the coordinator of the CPD Research and Development Grant, which provides grants of up to $5000 to scholarly projects related to CPD. Morag holds a MEd in Health Professions Education from the University of Toronto, and is currently enrolled at OISE as a flex-time PhD student in Higher Education. She is also a Fellow at the Centre for Ambulatory Care Education at Women's College Hospital. Morag brings to CPD extensive experience in the Faculty of Medicine that spans the continuum of health professions education in the Faculty, including experience coordinating education grant processes, education awards and research planning.

We have also added two new staff to our Conference and Program Management team. Samantha Smith has been appointed to the position of Lead Planner, Conference Services. Samantha joins CPD from the Munk Centre of Global Affairs at the University of Toronto, where she served as Manager, Conference Facilities and Events. Prior to her role at the Munk Centre, Samantha worked in the Office of the President. Zelene Ni joins CPD in the position of Conference and Event Planner. Zelene has worked for the past 7 years at the Harvard School of Business, where she was the Program Manager at the Harvard University Centre in Shanghai. Prior to joining Harvard, Zelene served as Events Manager, Conference Services at the Pudong Shangri-La Hotel in Shanghai.

22. CPD Enrolment & Accreditation

In the 2016-2017 academic year there were 384 CPD programs, conference and workshops accredited by the CPD Office. Faculty-wide there were a total of 40,574 learners who participated in U of T accredited CPD programming. All of our departments are active contributors to the development of
CPD activities. While the majority were live events, increasingly innovative methods of learning are being incorporated into programs and conferences, including web-based and simulation-based learning. Our faculty continue to be at the forefront of innovation with development of programs such as the hands-on oncoplastic one-day workshop developed by the Canadian Breast Surgery Innovations Group and ImageSim, an online modular platform developed to aid health professionals’ accuracy in interpretation of visually diagnosed tests.

Over the past year, CPD worked with the University of Alberta, Office of Lifelong learning providing coaching and accreditation services for this newly formed office over the past year. CPD also developed and delivered a customized certificate program in CPD Foundations for this group. This program consisted of 4- webinars and a 1.5-day live program held in Edmonton, Alberta in February 2017.

23. CPD Strategy Development

Over the past year CPD has engaged key stakeholders to develop a flexible and adaptable 5-year strategy https://www.cpd.utoronto.ca/about-us/strategic-plan-2017-2022/. Following the strategic planning retreat in the fall of 2017, strategy development working groups were created to synthesize ideas, develop goals, objectives and action plans. Results of our strategy development have been disseminated to our stakeholder in the faculty of medicine.

CPD also is in the midst of preparation for the Committee on Accreditation for Continue Medical Education (CACME) accreditation which will take place in March 2018. With a renewed academic focus, we look forward to highlighting our strengths and future directions for our office.

24. CPD Academic Program Development

Safer Opioid Prescribing
In the spring of 2017, new national guidelines for use of opioids for chronic non-cancer pain were released by the Michael G DeGroote National Pain Centre. CPD collaborated with the CPSO for funding to update the program based on the new guidelines. CPD was able to rapidly integrates these guidelines within two months of release ensuring that all participants in our Safer Opioid Prescribing program had access to up-to-date information. Additional program sessions have been added in keeping with the demand.

CPD has also entered into a partnership with Canadian Medical Protective Association’s (CMPA) recently launched subsidiary Saegis, which will make the Safer Opioid Prescribing program available to all clinicians in Canada. Planning is underway to deliver this program across Canada in 2018. At present, we are also partnering with Fédération des Médecins Spécialistes du Québec (FMSQ) to deliver this program in French in Quebec in the fall 2017.

IDEAS Foundation Program
A new blended-learning version of the IDEAS foundation program in quality improvement was launched in the spring of 2017. The new blended program has been very well received and consists of a 3-hour online component and 1-day live program. CPD successfully delivered 4 programs in the spring 2017 with a total of 295 participants. Partnerships with a variety of groups, including the Ontario Renal Network, the Toronto Central LHIN’s Regional Quality Table and Local Collaborative and the Central
West LHIN have led to development of customized programs. Plans are underway to deliver 4 more programs in the fall/winter. CPD is collaborating with the Ontario Longterm Care Association, CAMH, Toronto Central Palliative Care Network and the Collaborative Academic Practice (CAP) fellowship program to develop customized programs for these groups.

**Essential Skills in Continuing Professional Development (ESCPD)**

Associate Dean Schneeweiss and Jane tipping, Educational Consultant at CPD, led the 5th Annual Essentials Skills in Continuing Professional Development (ESCPD) master class took place in Helsinki, Finland in conjunction with the Association of Medical Education in Europe Conference (AMEE). This program provides an overview of current best practices, evidence and theory of effective CPD, and practical approaches for implementing CPD within different settings. Participants of this program were from diverse backgrounds and countries. This year there were 30 participants from 15 different countries: Ethiopia, Lebanon, Qatar, Finland, Sweden, Denmark, Switzerland, Singapore, Thailand, USA, Australia, Netherlands, Chile, and Argentina. CPD has also played an integral role in promoting CPD at this conference, advocating for the development of a CPD Committee and Special Interest Group. Jane tipping co-chaired a CPD symposium at the AMEE conference and is currently serving as the co-chair of the CPD Committee.

**25. CPD Education and Scholarship**

**CPD Environmental Scan**

Under the leadership of Associate Dean Schneeweiss and Dr. Ginsburg, CPD will soon be reaching out to department education/CPD leads as we launch a scholarly environmental scan of CPD activities across the Faculty of Medicine.

The project’s objectives are threefold:

a) To identify CPD-related education scholarship networks and activities within the Faculty of Medicine at the University of Toronto with a focus on the past five years of activity to the present,
b) To understand how best to support the development of an education scholarship community of practice in CPD, and
c) To identify potential opportunities to deliver education scholarship-related programming to enhance the professional development of our CPD community.

We know that your engagement and input will be important to the success of our study and we look forward to sharing our progress and results with you.

**26. CPD Awards**

CPD is proud to congratulate Mark Feldman MD, FRCPC, Oshan Fernando PhD, Michelle Wan MA, Tina Martimianakis PhD, and Mahan Kulasegaram PhD as recipients of the 2017 Royal College Accredited CPD Provider Innovation Award for their study on Test-Enhanced Learning (TEL) in Continuing Education. Dr. Susan Deering of Sunnybrook Health Sciences Centre received the 2017 Department of Family and Community Medicine Sustained Excellence in Teaching Award. This award acknowledges individuals or groups whose contributions go well beyond what is expected in advancing the department’s mission. Dr. Deering serves as Attending Physician in the Veterans Centre at Sunnybrook and Lecturer at the University of Toronto. She is also the Academic Director of the acclaimed Medical Record Keeping
program offered through CPD.

Dr. Rene Wong, as well as a team lead by Drs. Sanjeev Sockalingam and David Wiljer were honoured at the Society for Academic Continuing Medical Education (SACME) conference held in May in Scottsdale, Arizona. Dr. Rene Wong was the recipient of the Fox Award presented to the author of an original research project that links theory, methodical rigor and makes an important contribution to CPD literature. Drs. Sockalingam and Wiljer and their team were awarded the Phil R. Manning Research Award in Continuing Medical Education for their project Data and Lifelong learning (LLL): Understanding Cultural Barriers and Facilitators to Accessing and Using Clinical Performance Data to Support Continuing Professional Development (CPD). This distinguished and highly competitive award is granted only every two years and this project was selected out of 24 submissions from across North America.

27. Indigenous and Refugee Health

The biennial North American Refugee Health Conference was successfully held in Toronto, June 16 – 18, 2017. Attendance reached an all-time high of 632 with the more than 50% of our participants residing in the USA. The event provided participants with access to the most recent research, best practices in refugee health, and a great opportunity for networking. Attendee comments and evaluation feedback were highly positive.

Dr. Peter Polatin, a world expert in psychiatry, opened the conference with a talk on PTSD in refugees. Programming included eight keynote lectures, 12 concurrent plenaries, 52 workshops, 88 oral presentations, and over 100 poster presentations covering the latest research and best practices in refugee integration, education and mental health. Other topics included: Updates in refugee health policy in North America and overseas; Global Challenges for LGBTQ Refugees; Recommendations for Future Humanitarian Action; and the migrations of vulnerable populations from American to Canada, and from Latin America.

The personal stories of those who witnessed or experienced the refugee crisis stood out. Susan Ormiston, a journalist with the Canadian Broadcast Corporation gave her accounts of reporting as the Syrian crisis unfolded and following the challenges and successes of a young Syrian family on their journey to Canada. Courageous individuals who lived the perilous refugee journey, shared their stories of loss, resilience and success. Dr. Vanig Garabedian a Syrian gynaecologist, described what it was like to continue to work in Syria despite the hospital being bombed and conducting procedures without electricity; Nevzat Keskin a Kurdish television journalist, in a heart-wrenching account, showed pictures of his house before and after it was bombed in Turkey; Wanes Moubayed, a Syrian violinist, is now playing with the Toronto Symphony Orchestra.

We are making plans for the biennial Indigenous Health Conference, which will be held May 24 – 26, 2018 at the Hilton Meadowvale in Mississauga. The theme will continue to examine the TRC findings from the lens of Indigenous patient health and increased awareness of all Canadians; there will also be a strong focus on the environment.

28. Standardized Patient Program (SPP)

The transfer of the Standardized Patient Program to the portfolio of the Vice Dean MD Program is now complete. Ms. Delon Pereira has been appointed the new Director of the SPP, and assumed the role
June 15, 2017. Delon joins the University of Toronto from the Canadian Alliance of Physiotherapy Regulators (CAPR) where she was the Manager of Operations (Examinations). She has significant experience in the management of national licensure exams, standardized patient programs, health education and business operations. Delon is a Credentialing Specialist from the Institute of Credentialing Excellence, a certified Project Management Professional, and holds BSc and an MBA degrees.

E. Graduate and Life Sciences Education (GLSE)

I. Undergraduate Life Sciences Education

29. Events

Sixth Annual Undergraduate Research Information Fair Considering Graduate Studies
Sixth Annual Undergraduate Research Information Fair considering Graduate Studies will be held on November 2, 2017, Medical Sciences Building (10:30 am to 2:00 pm). Exhibitors in attendance will include our undergraduate and graduate units, as well as hospitals, Life Sciences Career Development Society and the School of Graduate Studies. Approximately over 1000 students visit this fair.

Special Session for Undergraduate International Students Considering Professional Master’s Programs
We have a captive audience of undergraduate international students at UofT (across 3 campuses) and would like to invite them to a special event to meet representatives from our course based and professional programs that are offered in the Faculty of Medicine.

This recruitment session will start with Dr. Allan Kaplan, Graduate and Academic Affairs and Dr. Lynn Wilson, Vice-Dean of Partnerships, giving opening remarks, followed by a representative from SGS to talk about services for international students at UofT. Each department will get a chance to present course-based/professional program and field questions.

Programs:
Applied Immunology
Occupational Science and Occupational Therapy
Applied Clinical Pharmacology
Physical Therapy
Speech-Language Pathology
Translational Research

Discussion in Best Practices in Applying to Summer Research, Jobs and Graduate schools
The GLSE Seminar will be presented by Dr. Nana Lee. Students will learn how to construct a research-focussed resume or CV and enhance their academic career perspectives – for grad school, research opportunities, and beyond on January 16, 1:00pm – 2:00pm at the McLeod Auditorium.
Teaching Seminar Series
In collaboration with Dr. Michelle Arnot (Pharmacology and Toxicology), Dr. Michelle French (Physiology), Dr. Stavroula Andreopoulos (Biochemistry), they initiated a Lunchtime Seminar Series for interested Faculty at the Faculty of Medicine in the Basic Medical Sciences (BMS) that teach/coordinate undergraduate and/or graduate courses. It is an opportunity to learn and share experiences and best-practices/strategies on topics associated with teaching once a month during a lunch time seminar (12-1pm Fridays).

Topics:
Best Practices for Assisting Students in Crisis
Course Management: Accessibility
Medical Notes and Missed Exams
How to Design a Course
Online and inverted Teaching-Best Practices
Education Grants
Student Assessment

Graduate and Professional Schools Fair
GLSE will be attending the University of Toronto Mississauga (September 20, 2017), and University of Toronto Scarborough (September 28, 2017). We will provide support to the 14 graduate departments.

30. GLSE Recruitment Student Group Shadowing Program

The success of our first annual shadowing program during reading week will continue throughout 2017-2018 reading week and summer school (July) for our undergraduate students to be matched up with a graduate student who has volunteered their time.

31. Undergraduate Faculty Teaching Awards

Five awards were adjudicated in four categories. Deadline: January 31, 2018

Excellence in Undergraduate Teaching in Life Sciences
Excellence in Undergraduate Laboratory Teaching in Life Sciences
Excellence in Linking Undergraduate Teaching to Research in Life Sciences
Sustained Excellence and Innovation in Life Sciences Education

32. GLSE Talks: One Minute Video Competition

GLSE video competition is for all undergraduate and graduate students undertaking a research project. The competition invites students to showcase their ongoing (or potential) research project in a brief and creative one-minute video presentation. The competition winners Joanne Plahouras, Human Biology and Immunology (Undergraduate), Antara Chatterjee, Physiology (Masters).

33. GLSE Poster Competition

GLSE Poster Competition will promote student talent for the Sixth Annual Undergraduate Research
Information Fair Considering Graduate Studies on November 2, 2017. The competition winner Siheng Xie, Cell and Systems Biology Animal Physiology (Undergraduate).

II. Graduate Education

34. Creating Mentorship Impact: Graduate Student Mentorship Program

The GLSE team is excited to introduce the Graduate Mentorship Program for mentees in year 1 and 2 to be mentored by a PhD graduate student in years 3, 4, or 5 commencing this Fall 2017. The program aims to give mentees an opportunity to appreciate the innovative research conducted in the Faculty of Medicine and a senior colleague’s perspective in graduate life, developing as a whole scientist and career preparation. With this end in mind, we will be pairing graduates across the 14 different graduate programs offered in the Faculty of Medicine. There will be a mandatory information session on October 16, 12:00pm-1:00pm in the MSB 4279 presented by Dr. Nana Lee, GLSE’s newly appointed Director of Mentorship and GPD, and Anita Balakrishna, Faculty’s new Diversity Strategist.

35. Establishing Best Practices for Graduate Supervisors Aimed at Reducing Time to Completion (TTC): A Faculty Development Program

To optimize supervisory mentorship in graduate student research progress and professional development aimed at reducing times to completion.

Target Audience:
1) Faculty who currently have or are planning to train graduate students.
2) Faculty who are interested in establishing their own graduate professional development workshop series, course, or program for their department.

This Innovative Graduate Faculty Development Program is being coordinated by Dr. Nana Lee, GLSE’s newly appointed Director of Mentorship and GPD, Director of Graduate Professional Development, Departments of Biochemistry and Immunology. She is also a Co-Author of Success After Graduate School 2016 with Dr. Reinhart Reithmeier.

Topics:
- Mentorship Matters
- Best Practices in Reducing Times to Completion
- Tools for Student Engagement
- Conflict Management and Student Wellness
- Entrepreneurship
- Highlights of Graduate Professional Development (GPD) in One Workshop

36. Graduate Awards

a) Faculty of Medicine (FoM) OSOTF, GSEF, PPEF, Departmental Endowed Awards and Expendable Awards
25 FoM-wide OSOTF, Expendable and Other Endowed Funds were adjudicated by the FoM Graduate Awards Committee chaired by the Vice Dean, Graduate and Life Sciences Education (GLSE) in June and July 2017 with over $725,000 awarded to graduate students for the 2017-18 academic year.

250 OSOTF, GSEF, PPEF, Departmental Expendable and Endowed Funds with over $16.8 million was distributed to 20 graduate units and centres, 11 clinical departments, and 8 affiliated hospitals (total 39) for distribution for the 2017-18 academic year.

A total of $3,713,735 University of Toronto Fellowships was distributed in May 2017 to 10 graduate units for 2017-18 graduate students funding.

68 QEII-GSST (49 doctoral-steam awards and 19 clinician/surgical-scientist trainee awards) at $15,000 each were distributed for the 2017-18 academic year (total $1,020,000).

$176,000 Doctoral Completion Award (DCA) has been allocated to 10 graduate units for 2017-18 academic year. The DCA is to support full-time PhD students who are beyond the funded cohort and within time-limit for the degree.

$210,378 plus additional $310,000 (in lieu of the UTAPS program) will be distributed to 5 graduate units with professional masters programs and 3 graduate units with new course based masters in early-Fall 2017. Effective July 1, 2017, the Professional Master’s programs (not including course based) in the Faculty of Medicine has phased out of the University Advanced Planning for Students (UTAPS) and transitioned to a divisionally managed program. Continuing students in their second year of their program will still be maintained under the UTAPS program.

b) FoM GSEF Merit Scholarships for International Students

The Office of the Vice-Dean, GLSE, adjudicated the third year of merit-based scholarships valued at $5,000 each to international graduate students entering their second year of studies in 2017-18. Twenty scholarships were awarded.

c) External Studentships

Over 20 graduate studentships, including CIHR CGS D and other external doctoral research awards are paid through GLSE via ROSI to doctoral-stream students with Principal Investigators affiliated with the Faculty of Medicine.

d) Graduate Faculty Teaching Awards

The Graduate Faculty Teaching Award Competition deadline will be December 1, 2017. Six awards will
be adjudicated by the FoM Graduate Awards Committee in three categories:

- Early Career Excellence in Graduate Teaching & Mentorship
- Mid-Career Excellence in Graduate Teaching & Mentorship
- Sustained Excellence in Graduate Teaching & Mentorship

Each awardee will receive a framed certificate and $1,000 cash prize.

e) Postdoctoral Fellowships

The FoM Postdoctoral Fellowships Review Committee adjudicated the 2017 Banting Postdoctoral Fellowships in early-August 2017 and forwarded 7 nominations to the University for submission to the CIHR and NSERC agencies for nation-wide review. Each Fellowship is worth $70,000 per year for two years. The Vanier-Banting Secretariat will notify applicants of the results of their application in February 2018.

f) JJ Berry Smith Doctoral Supervision Award: Honorable Mentions

The JJ Berry Smith Doctoral Supervision Award recognizes outstanding performance in the multiple roles associated with doctoral (PhD) supervision in the University of Toronto. Two awards are offered annually, one in the Humanities and Social Sciences and one in the Physical and Life Sciences. The FoM Graduate Awards Committee reviewed 6 applications and forwarded 2 nominations, Dr. Dina Brooks (Rehabilitation Sciences Institute; Physical Therapy) and Dr. Dr. Ori Rotstein (Institute of Medical Science) to the Dean of Graduate Studies and Vice-Provost, Graduate Education. Although Dr. Brooks and Dr. Rotstein were not selected by the School of Graduate Studies this year, their nomination acknowledges their outstanding contribution to the doctoral supervision and graduate education in the Faculty of Medicine.

g) Graduate Education Management System (GEMS). Formerly known as Graduate Student Information System (GradSIS)

The Office of Graduate and Life Sciences Education (GLSE) launched GEMS, the new application solution for graduate student, supervisor and graduate unit agreement and financial tracking system on July 4, 2017. All doctoral-stream Master’s and Ph.D. students in 12 graduate units in the Faculty of Medicine will annually complete an on-line Agreement. Data will be entered into GEMS by students, supervisors and administrators in the Faculty’s graduate units.

GEMS is rebuilt on new technology platform through the Discovery Commons, FoM, replacing GradSIS which is at the end of its life cycle.

GEMS design solution includes additional and new functions, in the following ways:

- Responsive design, fully functional on mobile devices
- Optimized for modern high resolution smartphones and tablets
- Optimized for several desktop browsers: Chrome, Firefox, Safari, within the most recent 2 versions, and IE10+
- Secure with the U of T web-based Single Sign-on (SSO) system: UTORid
• Robust search capabilities
• Responsive and intuitive and easy to use

37. Curricular Changes 2016/2017

a) Major and Minor modifications

Below is a summary of the major and minor curricular changes that were approved in the 2016/17 academic year

<table>
<thead>
<tr>
<th>Type of Curricular Change</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Courses</td>
<td>4</td>
</tr>
<tr>
<td>Changes to Programs (e.g. change in admission, change course codes)</td>
<td>9</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
</tr>
</tbody>
</table>

b) New Program – MHSc in Medical Genomics

This program has completed the governance process at the university and is currently being reviewed by the Ministry of Advanced Education and Skills Development (formally known as the Ministry of Training, Universities and Colleges). We anticipate to hear a final decision by November 2017. The first cohort of 15 students are scheduled to start Fall 2018.

c) New Program – Graduate Diploma in Health Research

This program is designed exclusively for undergraduate medical students wishing to complete graduate training in Health Research. This is a joint endeavour between the Physician Scientist Training Program (under the umbrella of UME) and the Institute of Medical Science. The proposal is currently making its way through the governance process, followed by government approvals. We anticipated this process will conclude by August 2018. The program is scheduled to take in its first cohort of 15 students in January 2019.

38. New Graduate Initiatives 2017/2018

a) Online Course Evaluations

Course evaluations are part of an overall teaching and program evaluation framework that includes regular peer review, instructor self-assessment, cyclical program review and other forms of assessment, as appropriate. As part of this framework, course evaluations are a particularly useful tool for providing students with an opportunity to provide feedback on their own learning experiences.

Starting Fall 2017, the Faculty of Medicine (FOM) will be conducting a pilot study to test the implementation and administration of the centralized online course evaluation and online delivery
system. Graduate courses in FOM range from didactic lectures to modules to seminars. Given the variance in how curriculum is delivered across 13 graduate units and 4 types of degree programs (i.e. doctoral, masters research stream, masters course based stream and professional programs), the pilot study will allow us to identify challenges and provide opportunities in finding solutions for a more fuller implementation in the next 2 years.

b) SGS Innovation Fund Initiatives

- Leave of Absence Stipendiary Fund for Medical/Mental Health Leave- in place
- Graduate Professional Skills Training for Faculty- in place
- Online Supervisor Evaluation System- to be developed in 2017/2018

c) Funding for Professional Graduate Programs for International Students

Effective Fall 2017, all international professional graduate students will be funded by the Faculty of Medicine, in a similar manner as the domestic students. This has been true for international graduate students in the PhD and MSc – research stream since 2015. Our hope is to encourage professional programs to take more international students without compromising admission standards

39. Graduate Enrollment

Below is a summary of the anticipated enrolment for 2017/2018 based on data acquired from the School of Graduate Studies on September 18, 2017. Please note that offers for Winter 2018 (January 2018) have not been sent out and therefore we anticipate a slight increase in PhD and/or MSc offers and acceptances.

<table>
<thead>
<tr>
<th>Domestic Students</th>
<th>Target</th>
<th>Actual</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PhD</td>
<td>90</td>
<td>93</td>
<td>+3</td>
</tr>
<tr>
<td>MSc (Research and Course based)</td>
<td>374</td>
<td>350</td>
<td>-24</td>
</tr>
<tr>
<td>PMAS</td>
<td>304</td>
<td>299</td>
<td>-5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>768</strong></td>
<td><strong>742</strong></td>
<td><strong>-26</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>International Students</th>
<th>Target</th>
<th>Actual</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>PhD</td>
<td>20</td>
<td>21</td>
<td>+1</td>
</tr>
<tr>
<td>MSc (Research and Course based)</td>
<td>22</td>
<td>23</td>
<td>+1</td>
</tr>
<tr>
<td>PMAS</td>
<td>6</td>
<td>2</td>
<td>-4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>48</strong></td>
<td><strong>46</strong></td>
<td><strong>-2</strong></td>
</tr>
</tbody>
</table>

40. Graduate Expansion in the Rehabilitation Sector

Graduate Expansion over the course of the next 3 years, starting in 2017/18, in all three professional programs in the Rehabilitation Sectors. Below is a summary:
a) Occupational Science and Occupational Therapy
   - Expansion to UTM, starting Fall 2018
   - Incoming class of 40 students, steady state of 80 each year
   - Maintain enrolment of 90 students at 500 University

b) Physical Therapy
   - Along with Speech-Language Pathology, extensive renovations are underway at 500 University Ave to accommodate the proposed expansion of 20%
   - A target of 108 incoming students for Fall 2019 (baseline of 90) has been established
   - Currently for Fall 2017, Physical Therapy is at 100 students

c) Speech-Language Pathology (SLP)
   - Along with Physical Therapy, extensive renovations are underway at 500 University Ave to accommodate the proposed expansion of 20%
   - A target of 60 incoming students for Fall 2019 (baseline of 50) has been established
   - Currently for Fall 2017, SLP is at 62 (above proposed expansion)
CONSTITUTION
FACULTY OF MEDICINE
Revised 06/02/2014

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CONSTITUTION OF THE COUNCIL OF THE FACULTY OF MEDICINE

I. Authority from the U of T Act

The Council of the Faculty of Medicine exercises its duties and powers under the provisions of the University of Toronto Act 1971, as amended.

II. Option to report to Governing Council

Subject to the provisions of the University of Toronto Act 1971, as amended, Council shall report on such matters as it may determine to Governing Council.

III. Definitions

In this Constitution and the accompanying By-laws:

“Faculty” means the Faculty of Medicine and “Council” means the properly composed Council of the Faculty of Medicine of the University of Toronto.

“Teaching Staff” means a member of the Faculty of Medicine who holds an academic appointment of 50% or more in the Faculty of Medicine and who holds the title rank of Professor, Associate Professor, Assistant Professor, Professor, Teaching Stream; Associate Professor, Teaching Stream; Assistant Professor, Teaching Stream; Senior Lecturer, Lecturer, Senior Tutor; or Tutor; Assistant Professor (conditional); or Assistant Professor, Teaching Stream (conditional).

“Other Academic Appointee” means a member of the Faculty of Medicine who is involved in the delivery of Faculty programs and a) who holds a part-time academic appointment of less than 50% in the Faculty and who holds the rank title of Professor; Associate Professor; Assistant Professor; Professor, Teaching Stream; Associate Professor, Teaching Stream; Assistant Professor, Teaching Stream; Senior Lecturer; Lecturer; Senior Lecturer; Senior Tutor; or Tutor; or Senior Tutor or b) is a Sessional Lecturer I, II, or III.

"Undergraduate Student" means any student registered in a program of study leading to a degree, post-secondary diploma, or for credit certificate in the Faculty of Medicine who is not registered in the School of Graduate Studies.

"Postgraduate Trainee" means any trainee registered in a residency or fellowship training program in the Faculty of Medicine who is not registered in the School of Graduate Studies.
“Graduate Student” means any student registered in the School of Graduate Studies in a program of study leading to a degree, post-secondary diploma, or for credit certificate in the Faculty of Medicine.

“Alumni” means anyone who has received a degree, post-secondary diploma, or for credit certificate from the Faculty, or who has completed one year of full-time studies while registered in the Faculty, who is no longer registered as a student and who is not a member of the teaching or administrative staff of the University.

“Administrative Staff” means an appointed staff member of the Faculty of Medicine who is not a member of the Teaching Staff and who holds an appointment of 50% or more.
IV. Council to determine its rules and regulations

Council shall determine rules and regulations for governing its proceedings and those of its committees, including provisions for quorum at meetings.

V. Council to pass by-laws

Council shall pass by-laws regulating the exercise of its powers, the calling and the conduct of its meetings, and the method of appointment or election of its members.

VI. Council to establish committees

Council shall have the power to establish, alter, or disband its committees as deemed necessary and to determine their composition, authority, quorum, and method of appointment of their members and chairs. Council has authority over recommendations brought forward by such committees, be that in its decision-making capacity or in its advisory role.

VII. Authority for Academic Policy

A. Council has authority for the academic policies of the Faculty and recommends for approval to the appropriate body of Governing Council, amendments to divisional academic policies as required. Academic policy sets out the principles for, the general directions of and/or priorities for the teaching and research activities of the Faculty. Decisions on academic policy shall be referred to Council for discussion, advice and approval.

B. Without limiting the generality of the foregoing, among the specific powers, duties and responsibilities of Council are the following:

i) Academic Programs

Council shall consider the content, quality, and requirements of the academic programs and courses of study that lead to degrees, diplomas, certificates, credit and non-credit courses over which the Faculty has authority; Council it shall consider proposals for the closure of any such programs or courses of study; and Council it shall monitor the quality and standards of the programs and courses of study.

Council shall recommend for approval to the appropriate body of Governing Council proposals for new academic programs.

Council shall have delegated authority to approve proposals for major and minor modifications to existing academic programs, diplomas, and certificates. All major modifications shall be reported annually for information to the appropriate body of Governing Council.

1 Definitions of major modifications of existing programs, minor modifications, and new academic programs are provided in the University of Toronto Quality Assurance Process and are subject to change. Guidance from the Office of the Vice-Provost, Academic Programs, should be sought prior to the development of any such proposal.
Council shall have delegated authority to approve proposals for the establishment and closure of Category 1 and Category 2 for credit certificates in accordance with the Policy on Certificates (For Credit and Not-for-Credit). These approvals shall be reported annually for information to the appropriate body of Governing Council.

The modification of existing diploma and certificate programs, pursuant to the University's Policy on Diploma and Certificate Programs. An annual report on such actions as required by the Policy, shall be provided for information to the appropriate body of Governing Council.

ii) Academic departments and units

Council shall consider and recommend for approval to the Governing Council proposals to create or terminate academic departments and units of the Faculty. Council shall also review and approve or recommend for approval to the Governing Council proposals concerning Extra-Departmental Units in the Faculty, pursuant to the Policy on Interdisciplinary Education and Research Planning. When such proposals have significant implications for other Faculties and Schools of the University, their advice shall be sought.

iii) Delegation of authority over teaching programs

Subject to the provisions of A, B i), and ii), Council may delegate its authority over teaching programs and their component courses of study to its Standing Committees, to make minor changes. All such changes shall be reported for information to Council. Major changes to any program require the approval of Council. The decision of whether a matter is major or minor may be made by the Committee Chair in consultation with the Speaker of Council, and/or the Dean or his/her designate, and/or the Vice-President and Provost or his/her designate.

iv) Review of academic programs and units

Council may be one venue in which consideration and discussion of a review report of an academic program and/or unit may occur, consistent with the protocol outlined in the University of Toronto Quality Assurance Process.

v) Transcript notations

Council shall have delegated authority to approve transcript notations within existing degree programs, in accordance with University policy. An annual report on such actions, as required by policy, shall be provided for information to the appropriate body of Governing Council.

vi) Admissions

Council shall determine the standards of admission of students to the Faculty. New admissions policies and practices or amendments to existing ones which affect the whole Faculty are recommended to the appropriate body of Governing Council for approval.
vii) Awards

Council shall award scholarships, bursaries, prizes and other awards in the gift of the Faculty and may delegate this responsibility to committees or officers of the Faculty.

viii) Petitions and Appeals

Council shall establish policies and procedures with respect to petitions and appeals by undergraduate students in connection with the application of academic rules and regulations by officers of the Faculty or by instructors in connection with academic standing in the Faculty. A Committee of Council shall make rulings on all such appeals and such rulings shall be final and binding, subject to an appeal to the Governing Council.

Procedures for academic appeals by graduate students are determined by the School of Graduate Studies in accordance with the Policy on Academic Appeals within Divisions.

ix) Advisory Role

Council plays an advisory role, tendering advice to the divisional administration.

VIII. Membership of Council

All members are voting unless otherwise noted.

<table>
<thead>
<tr>
<th>Constituency</th>
<th>Title</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Speaker and Deputy Speaker</td>
<td>2 Speaker is non-voting</td>
</tr>
<tr>
<td>2</td>
<td>All Chairs of Standing Committees*</td>
<td>9</td>
</tr>
<tr>
<td>3</td>
<td>Elected Teaching Staff Representatives of Basic Science Departments</td>
<td>16 2 per department</td>
</tr>
<tr>
<td>4</td>
<td>Elected Teaching Staff Representatives of Clinical Science Departments</td>
<td>24 2 per department</td>
</tr>
<tr>
<td>5</td>
<td>Elected Teaching Staff Representatives of the Rehabilitation Departments</td>
<td>8 2 per department</td>
</tr>
<tr>
<td>6</td>
<td>Elected Teaching Staff Representatives of the Faculty at Large</td>
<td>10</td>
</tr>
<tr>
<td>7</td>
<td>Elected Student Representatives</td>
<td>2335 [Undergraduate Medicine (12), Undergraduate Medical Radiation Sciences Program (2), Postgraduate Trainees (5), Graduate (15), BScPA (1)]</td>
</tr>
<tr>
<td></td>
<td>Alumni Representatives</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>------------------------</td>
<td>---</td>
</tr>
<tr>
<td>8</td>
<td>Toronto Academic Health Sciences Network Representative</td>
<td>2</td>
</tr>
<tr>
<td>9</td>
<td>Administrative Staff</td>
<td>5</td>
</tr>
<tr>
<td>10</td>
<td>President of the University or designate</td>
<td>4</td>
</tr>
<tr>
<td>11</td>
<td>Vice-president and Provost or designate</td>
<td>4</td>
</tr>
<tr>
<td>12</td>
<td>University Librarian or designate</td>
<td>4</td>
</tr>
<tr>
<td>13</td>
<td>Deans of Arts and Science, Dentistry, School of Graduate Studies, Lawrence S. Bloomberg Faculty of Nursing, Leslie Dan Faculty of Pharmacy, Kinesiology and Physical Education and Factor-Inwentash Faculty of Social Work, Dalla Lana School of Public Health</td>
<td>8</td>
</tr>
<tr>
<td>14</td>
<td>Dean of the Faculty of Medicine</td>
<td>4</td>
</tr>
<tr>
<td>15</td>
<td>All Vice-Deans</td>
<td>6</td>
</tr>
<tr>
<td>16</td>
<td>All Associate Deans</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Departmental Chairs &amp; Directors</td>
<td>9</td>
</tr>
<tr>
<td>18</td>
<td>Chief Administrative Officer</td>
<td>4</td>
</tr>
<tr>
<td>19</td>
<td>Director, Office of the Dean</td>
<td>4</td>
</tr>
<tr>
<td>20</td>
<td>Faculty Affairs Officer</td>
<td>4</td>
</tr>
</tbody>
</table>

*If not otherwise on Council, shall be members ex officio

**Officers**

**Speaker and Deputy Speaker**

The Council normally shall elect at its final meeting of the year, by and from among its members for that year, a Speaker and a Deputy Speaker for the succeeding three years. The Speaker shall be a non-voting member of Council.

**Presiding Officer**

The Speaker shall preside at all meetings of Council. In the absence of the Speaker, the Deputy Speaker shall preside. In the absence of both the Speaker and the Deputy Speaker, any member of the Executive Committee may convene the meeting and a Speaker shall be chosen from the Executive Committee members present by a majority of the voting members present for the meeting.

**Secretary**
The Secretary of Council shall be appointed by the Dean in consultation with the ChairSpeaker. The Secretary shall be a non-voting ex-officio member of Council and all its Standing Committees.

IX. Meetings

A. Regular Meetings

There shall normally be 3 regular meetings of Council in each academic year. Notice of each meeting, including a proposed agenda, shall be given to members at least two weeks in advance of the meeting.

Meetings of Council shall be open to the public except when matters of a confidential nature may be discussed. The Faculty Council will then move in camera.

B. Special Meetings

A special meeting may be called by the Speaker of the Council, the Dean of the Faculty, or upon the written request of 10 members of the Council, and shall be convened within 30 days to consider the matter(s) requiring the meeting. Notice of such a meeting shall be given at least two weeks in advance.

C. Term and Quorum of Council

The term of office of members of Council shall be from July 1 to June 30, with the term of Student members beginning in September.

A quorum shall be 20% of the members from constituencies 2-10, 11, and 15-19.

D. Voting

Each voting member of Council has one vote on any question. Motions pass with a simple majority unless otherwise stated in the rules of procedure of the Council.

X. Powers, Duties and Responsibilities of the Dean

A. Dean is Chief Executive Officer

Council recognizes that the Dean exercises powers under the authority of the "Policy on Appointment of Academic Administrators" which states that "the Dean of the Faculty is the chief executive officer of the Faculty and reports directly to the Vice-President and Provost."
B. Overall direction of the Faculty

While the Dean may elect to delegate authority to other academic administrators in the Faculty, the Dean retains responsibility for the overall direction of the Faculty and in particular for authority over the budget and other financial matters, personnel matters including appointments and promotions and extra-Faculty relationships. In this respect, Council recognizes that the Dean has ultimate authority for the allocation and management of the Faculty's resources.

C. Seeking Council’s advice concerning academic policy

The Dean shall consult with members of the Faculty on matters of policy and practice but is ultimately responsible for all administrative decisions that are within his/her jurisdiction and authority.

The Dean shall advise Council of the resource implications of proposed academic policies.

The Dean shall consult with Council on administrative proposals that may have a significant impact on the academic programs of the Faculty.

D. Concerning teaching under the authority of another Council

Recognizing that Faculty of Medicine teaching staff are responsible for certain teaching programs and courses of study leading to degrees, diplomas, certificates, credit and non-credit courses under the authority of the Councils of other Faculties and Schools of the University, the Dean of the Faculty of Medicine shall seek the advice of the Council of the Faculty of Medicine whenever it is proposed to initiate, terminate or make changes to such programs of instruction, courses of study or academic departments or units that will have major implications for the Faculty of Medicine.

XI. By-Laws

The procedures of Council will be set forth in the By-Laws of Council.

The composition, powers, duties, and procedures of Standing and Special Committees shall be set forth in the By-Laws of Council.

XII. Parliamentary Authority

The rules contained in the most recent edition of Bourinot’s Rules of Order, shall govern the Council in all cases to which they are applicable and in which they are not inconsistent with the By-Laws and any special rules of order the Council may adopt.

XIII. Amendment of the Constitution

The Constitution of the Council may only be amended with the approval of the Faculty Council and the Governing Council of the University of Toronto. The process is initiated at
the Council of the Faculty of Medicine by notice of motion being presented to Council two
weeks before the matter will be considered. After debate on the amendment is complete,
an affirmative vote by two-thirds of the members present and voting is required. Following
approval of the amendment by the Council, the amendment is forwarded to Governing
Council for approval.

XIV. Amendment of the By-Laws of the Council

The By-Laws of the Council may be amended with the approval of a two-thirds majority
of Council members present and voting. Voting shall take place at a regularly constituted
meeting to which there has been two weeks’ notice of the proposed amendment.

Amended and approved by Faculty Council on November 10, 2003 and approved by the Academic Board
on April 8, 2004 and confirmed by the Executive Committee of the Governing Council on April 15, 2004.

Amended and approved by Faculty Council on February 27, 2012 and approved by the Academic Board
on March 14, 2012 and confirmed by the Executive Committee of the Governing Council on March 29,
2012.

Amended and approved by Faculty Council on April 29, 2013 and approved by the Academic Board on

Amended and approved by Faculty Council on May 5, 2014 and approved by the Academic Board on
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1. **RULES OF PROCEDURE FOR THE ELECTION OF MEMBERS TO FACULTY COUNCIL**

1.1. **Time of Elections**

Elections for Constituencies 3, 4, 5, 6 (teaching staff representatives), Constituency 8 (alumni representatives) and Constituency 10 (administrative staff representatives) will be completed and reported to the Faculty Affairs Officer before the end of April of each year. Elections for Constituency 7 (student representatives) and 8 (postdoctoral fellows) will be completed and reported to the Faculty Affairs Officer by the end of September of each year.

1.2. **Election/Appointment Procedures**

Members who are acclaimed or elected for Constituencies 3-6 to Council after the second meeting of each year will be considered to begin their three-year term as of July 1 of the succeeding year. Members may be acclaimed or elected to successive terms.

1.2.1. **Teaching Staff Representatives**

1.2.1.1. **Departmental Representatives** - Constituencies 3, 4, and 5.

Each Department will have two (2) representatives elected to serve a three year term. The Departmental Chair will be responsible for the conduct of such an election. All Teaching Staff (except the Departmental Chair) with a primary appointment in the appropriate Department of the Faculty of Medicine will be eligible for nomination and will be eligible to participate in the departmental election.

1.2.1.2. ** Representatives of Faculty at Large** - Constituency 6

Nominations for a three year term will be solicited from all Teaching Staff in the Faculty of Medicine for those positions whose incumbents are completing their terms. Valid nominations must bear the signatures of three (3) members of the Teaching Staff, a statement from the nominee indicating that he/she is prepared to serve, and a brief statement of relevant experience. The Faculty Affairs Officer will be responsible for the conduct of an election should the number of nominees exceed the number of positions available.

1.2.2. **Student Representatives** - Constituency 7

Student representatives from the Undergraduate Medicine, Radiation Sciences, Postgraduate Medicine, Graduate and Physician Assistant Professional Degree Programs shall be elected by and from among the student bodies for a one-year term. The Presidents of the Medical Society, PARO, the Undergraduate Medical Radiation Sciences Student Society, the Physician Assistant Professional Degree Program will forward the names of those students elected to the Faculty Affairs Officer each year.

Graduate student representatives will be elected by and from among the graduate students for a one-year term. The Presidents of the departmental Graduate Student Unions will forward names of those students elected to the Faculty Affairs Officer. Each sector should be represented.
1.1.1. **Postdoctoral Fellow Representatives** - Constituency 8

Nominations for a one year term will be solicited from all Postdoctoral Fellows in the Faculty of Medicine for those positions whose incumbents are completing their terms. Valid nominations must bear the signatures of three (3) Postdoctoral Fellows, a statement from the nominee indicating that he/she is prepared to serve, and a brief statement of relevant experience. The Faculty Affairs Officer will be responsible for the conduct of an election should the number of nominees exceed the number of positions available.

1.1.2.1.1.1. **Alumni Representatives** - Constituency 98

The President of the Medical Alumni Association will forward the names of the two alumni elected by their association to represent them on Council for a three–year term to the Faculty Affairs Officer.

1.1.3.1.1.2. **Administrative Staff** - Constituency 4110

Nominations from members of the administrative staff of the Faculty of Medicine will be solicited for three-year term positions on Council. Valid nominations must bear the signatures of three (3) members of the administrative staff, a statement that the nominee is prepared to serve, and a brief statement of relevant experience. The Faculty Affairs Officer will be responsible for the conduct of an election should the number of nominees exceed the number of positions available.

1.1.4.1.1.3. **Vacancies**

In the case of retirement, resignation or death of any elected member of Council, the person responsible for the conduct of the election in the member’s constituency will name an *ad hoc* representative for the remainder of the electoral year. The seat will be declared open for election at the next electoral period.
2. RULES OF PROCEDURE OF THE COUNCIL OF THE FACULTY OF MEDICINE

2.1 Suspension of the Rules of Order

The following Rules of Order, contained in sub-sections 2.2–2.22 inclusive below, shall not be suspended at any meeting if any member present expresses objection to such suspension.

2.2 Meetings

a) Council shall meet a minimum of three times per academic year (July 1–June 30) at 4:00 p.m. on Mondays.

b) Special meetings shall be convened by the Speaker in either of the following circumstances:

   i. upon the request of no fewer than ten members, or
   ii. upon the request of the President or the Dean.

c) At all regular or special meetings, 20% of the members from constituencies 2-14, 16-19 shall form a quorum.

d) Ex-officio members of Council from Constituencies 12, 14, shall not count toward a quorum.

e) All meetings shall be open. Council may, by a simple majority vote, decide to consider any particular issue in camera. At the discretion of, or by pre-arrangement with the Speaker, or on a motion from the floor, a non-member may be invited to address Council.

2.3 Presiding Officer

The Speaker shall preside at all meetings of Council. In the absence of the Speaker, the Deputy Speaker shall preside. In the absence of both the Speaker and the Deputy Speaker, any member of the Executive Committee may convene the meeting and a Speaker shall be chosen from the Executive Committee members present by a majority of the voting members present for the meeting.

2.4 Duties of Speaker

At all meetings of the Council of the Faculty of Medicine, the Speaker shall, in addition to her/his duties as a member of Council, maintain order and decorum and exercise such authority as may be necessary to conduct the meeting in conformity with the By-Laws of Council.

2.5 Speaker to rule on points of order

The Speaker shall rule on all points of order. The ruling may be appealed by any member, who may briefly indicate the reason for the appeal, but otherwise the appeal is not subject to amendment or debate. Council shall decide the appeal by majority vote. If the Speaker considers that a successful appeal of the ruling would constitute a suspension of the rules of order, he/she shall may rule that section 1 hereof applies to the appeal. Thus if any member supports the ruling, the appeal shall be deemed to be defeated. A ruling by the Speaker that section 1 applies shall be conclusive and not subject to further appeal.

2.6 Agenda

The agenda for each regular meeting shall be prepared by the Executive Committee and shall set forth items of business to be discussed at the meeting.

2.7 Order of business on agenda

The order of business at a meeting shall be the order set out in the agenda unless varied or added to according to 2.8 and 2.9 below.
2.8 Vary the order of business

A motion to vary the order in which the items on the agenda are to be taken up will be in order at any time except when another motion is being debated or voted upon. The mover shall briefly indicate reasons why the order should be varied, but otherwise the motion is not debatable.

2.9 Add to the agenda

No matter not on the agenda may be introduced at a regular meeting unless the introduction thereof is agreed to by two-thirds of the members present and voting. The mover shall briefly indicate reasons why the matter should be introduced, but otherwise the motion shall not be debatable.

2.10 Notice of Motion

A notice of motion is a request by a member to have an item included in the agenda of the meeting. Except in the case of special meetings, a notice of motion shall be delivered to the Faculty Affairs Officer in time for consideration by the Executive Committee at its meeting which is normally held three-eighth (38) weeks prior to a forthcoming meeting of Council. Additional motions may be introduced in Council meetings only in relation to items included in the agenda.

2.10 Member to be recognized

Any member desiring to speak during the meeting of Council shall signify her/his intention to the Speaker. No member shall speak until recognized by the Speaker, and when so recognized, shall stand and address the Speaker.

2.11 Interruptions

The Speaker may at any time call to order any member, including the member who is speaking, but otherwise, no member shall interrupt any other member. A member called to order by the Speaker shall sit down.

2.12 Speaking more than once to a motion

A member is entitled to speak only once to a motion but at the discretion of the Speaker may be permitted to speak again on the same motion.

2.13 Length of speeches

No member or other person invited to address the Council shall speak to a motion for more than five minutes at any one time. At the discretion of the Speaker, this rule may be waived if in her/his opinion the matter is complex enough that further time should be allotted.

2.14 Statement of question

Any member may require the question under discussion to be stated at any time during the debate, but not so as to interrupt a member.

2.15 No speaking after the question is put

No member shall speak to a question after it has been put to a vote by the Speaker.
2.16 Motions to be seconded

All motions, except those for adjournment of the meeting or of a debate, shall be seconded before being debated or put by the Speaker. The Speaker may at her/his discretion require that a motion be put in writing before being debated or put by the Speaker.

2.17 Question period

After the mover and seconder have spoken to a motion presented to the Council for debate, the Speaker may, at her/his discretion, allow members to ask questions to obtain information regarding the motion. Such questions shall be directed to the Speaker who may request an answer from any member or person present. The Speaker shall determine and declare when the period of questioning is ended and upon such declaration shall call for further formal debate on the motion.

2.19 Voting procedure

When a question is put to a vote by the Speaker, members shall indicate their vote in such manner as the Speaker may direct. The Speaker shall declare the result of the vote and such declaration shall be conclusive. If, prior to the time when the Speaker has undertaken to determine the vote, any three members require that the count of votes be recorded, then the number of votes for and against the question shall be counted and this count recorded in the minutes of the meeting. If any member wishes to record her/his abstention from voting on any question, the member must do so immediately following declaration by the Speaker.

2.20 E-Mail Notification

Communications to members of the Faculty and to members of Faculty Council shall be considered to constitute official notice whether in printed or electronic format.

2.21 Dispute of a Motion Passed or Rejected

The mechanisms set out below are intended to provide a formal channel to allow motions passed or rejected by Council to be challenged by full time teaching staff. Obviously, in the tradition of open debate of the University, teaching staff, students, and administrative staff all remain free to pursue the usual processes for making matters of concern to them known within the University and academic communities.

If 50 or more members of the full-time teaching staff\(^1\) of the Faculty of Medicine, who may or may not be members of the Faculty Council of Medicine, wish to dispute a motion passed or rejected by Council, these members should state their concerns in writing in one petition which has been signed by the 50 or more dissatisfied members of the teaching staff. This petition must identify a representative individual who shall be designated the contact person for communication. The petition shall be addressed and delivered within 21 calendar days of the results of the motion to the Speaker and to the Dean who shall attempt to resolve the issue(s) in whatever manner they consider appropriate given University and Faculty policies. The Speaker and the Dean shall also reply in writing to the contact representative and make a report to Faculty Council. The signed petition shall be distributed to Council.

If two-thirds or more of the original petitioners are not satisfied after the Speaker and Dean have tried to resolve the issue raised in their petition, then a Special Meeting of Faculty Council shall be called as soon as is reasonably possible to discuss the issues raised by the petitioners. Petitioners may be present and may contribute to the debate. The aim of the Special Meeting shall be to recommend that the contentious motion is either to be subjected to another Council vote as it was originally framed or the

\(^1\) Petitioners must hold a University or Faculty full-time appointment on the date they sign the petition
original motion is to be referred back to a duly constituted committee of Council for possible amendment having regard for the petitioners’ concerns.

If two-thirds or more of the original petitioners are not satisfied with the result of that Special meeting, then the petitioners may forward their original petition to the Vice President and Provost and to the Chair of the Academic Board of Governing Council along with a separate letter outlining their reasons for their continuing dissatisfaction. The Speaker and Dean shall write a letter outlining their attempts to resolve the issue(s).

The Vice President and Provost and the Chair of the Academic Board may either address the issue(s) themselves or appoint designates to address them. In the event that the Vice-President and Provost and/or the Chair of the Academic Board were present at the Special Meeting, then the President will appoint an individual to act in their places as necessary.

The decision of the Vice-President and Provost and the Chair of the Academic Board (or their designates) shall be final.

2.22 Dean to Convey Approvals to Governing Council

Following approval by Council, the Dean or designate will convey motions, as required, to the Office of the Provost for approval at Governing Council.
3. COMMITTEES OF COUNCIL

3.1. Standing Committees

The Standing Committees of Council are:

Appeals Committee
Board of Examiners – Medical Radiation Sciences Program
Board of Examiners – Postgraduate Programs
Board of Examiners – Undergraduate Medical Program
Continuing Professional Development Committee
Education Committee
Executive Committee
Research Committee
Striking Committee

3.2. Special Committees

From time to time Council may find it useful to establish Special Committees to consider particular issues. Special Committees are normally formed on the recommendation of the Executive Committee, when one or more of the following conditions exist:

a) An issue cannot be accommodated easily within a Standing Committee’s schedule – either intense scrutiny is required in a relatively short time or thorough examination of complex issues is necessary over a relatively long period of time;

b) An issue does not fall readily under an existing Standing Committee; or

c) There is need for the participation of experts not represented on the relevant committee.

A recommendation from the Executive Committee to establish a Special Committee shall include terms of reference, an outline of membership, the anticipated reporting date, and the proposed date of disestablishment.

3.3. General Procedures of Committees of Council

3.3.1. Rules and regulations that guide Council shall also apply to committees of Council, unless specified otherwise.

3.3.2. Elections shall be held annually for all Standing Committees in accordance with the functions of the Striking Committee. The Speaker will inform the new Council of the results of the election at the earliest opportunity. Changes in the membership of Standing Committees shall occur at the beginning of the academic year, i.e., July 1st, except changes in the membership of the Boards of Examiners – Medical Radiation Sciences, Undergraduate Medical Education, and Physician Assistant Professional Degree Program which shall take effect on the following October 1st.

3.3.3. The term of membership of all Standing Committees shall normally be three years renewable once (renewable twice for members of the Appeals Committee). If a member becomes the committee Chair or Vice Chair, this position may be held for a maximum of two additional 3-year terms (three additional terms for the Appeals Committee).

3.3.4. The Chairs of all Standing Committees who are not otherwise members of Council shall become ex officio, voting members of Council.

3.3.5. With the exception of the Appeals Committee, the Dean is, ex officio, a member of all Standing Committees.
3.3.6. All members of all committees and sub-committees, including *ex officio* members have voting privileges unless otherwise noted in the terms of reference of the committee.

3.3.7. All Standing Committees shall report to Council on their deliberations, recommendations and decisions.

3.3.8. Records of all Standing Committees shall be maintained by the Faculty Affairs Officer.

3.3.9. Each Standing Committee shall meet at the call of its Chair. When the position of a Chair of a Standing Committee becomes vacant during the session, the Speaker will consult with the members of the Committee concerned and make an appointment of a new chair from among the members of the Committee, who will hold that office for the remainder of the session.

When a vacancy occurs during the session among the members of a Standing Committee, the Chair of the Committee concerned, in consultation with the Speaker, shall appoint a replacement for the remainder of the session.

3.3.10. The Speaker, at the request of the Chair of a Standing Committee, may declare any elected position on the committee vacant if the member is absent for two consecutive meetings of the committee or of a subcommittee of which he/she is a member. In the event that a Standing Committee Chair is deemed absent or delinquent in his/her responsibilities the Speaker has the authority to remove them from their position.

3.3.11. Unless otherwise stated, the Chair and 50% of other members shall constitute a quorum.

NOTE: Meetings with a duly constituted quorum that temporarily falls below that number because of other requirements of these by-laws (e.g., recusal for conflict of interest or request that student members be excused) will be deemed to retain quorum provided at least four members remain.

3.3.12. The Appeals Committee and the Boards of Examiners always meet *in camera*. The meetings of the other Standing Committees are open unless otherwise stated.

3.3.13. Sub-committees may be created by Standing Committees on *an ad hoc* basis whenever a clear need arises. The membership of such sub-committees shall be established by the parent committee.

3.3.14. At the discretion of the Chair, a committee meeting may be held by such means of telephone, or other communication facilities that permit all persons participating in the meeting to communicate with each other simultaneously and instantaneously. A person(s) participating in such a meeting by such means is (are) deemed to be present at the meeting. For meetings, or portions thereof, held in closed session or *in camera*, it is expected that members will ensure that the necessary standards of confidentiality are maintained and that their participation is conducted in a setting that ensures such confidentiality.

3.3.15. At the discretion of the Chair, a committee may be asked to consider a matter outside of a committee meeting and to determine the matter by means of an electronic vote. Such matters would, in the judgement of the Chair, be time-sensitive and delay until the next regularly scheduled meeting would have an adverse effect. Such matters would also, in the judgement of the Chair, normally require little, if any, discussion prior to voting. Matters considered in this manner shall be reported at the next regular meeting of the committee and recorded in the report of that meeting.
3.4. **Appeals Committee**

3.4.1. **Membership**

Council shall approve the membership of the Appeals Committee composed of the following:

Chair: elected by Council  
Two Vice-Chairs: elected from the membership  
Eleven Teaching Staff of whom at least 1 shall be designated by the Michener Institute for Applied Health Sciences after consultation with the Speaker  
Four student members nominated by students and approved by Council, of whom 1 shall be from the Undergraduate medical program, 1 from Postgraduate programs, 1 from the Undergraduate Medical Radiation Sciences program, and 1 from the Physician Assistant Professional Degree Program.

Ex-officio:  
Faculty Affairs Officer (non-voting)

3.4.2. **Functions**

a) To hear appeals of Undergraduate students, Postgraduate students, students in the Undergraduate Medical Radiation Sciences Programs and students in the Physician Assistant Professional Degree Program of the Faculty of Medicine against decisions of Council and its Standing committees and Boards, and to make rulings on such appeals that are binding and final, subject to an appeal to the Governing Council.  
b) To recommend to Council changes to policies and procedures with respect to petitions and appeals by students.  
c) To generate and disseminate recommendations arising from appeals.  
d) To report to the Council at least annually on its decisions.

3.4.3. **Procedures**

3.4.3.1. **Quorum**

The Chair or a Vice-Chair and 7 members shall constitute a quorum, of which at least 1 shall be a student.

3.4.3.2. **Term**

The Chair and Vice-Chairs shall be elected for a term of 3 years, which may be renewed twice. Faculty members shall be to three year terms, but their terms may be renewed twice. Student members shall be appointed annually.

**Note**

When the Chair is present and presiding at a hearing, a Vice-Chair present will be considered a regular member of the committee. A Vice-Chair shall exercise all the Chair’s powers and duties if the Chair is absent or has disqualified herself/himself.

3.4.3.3. **Conflict of Interest**

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A Committee member must declare a potential conflict of interest with any case presented to the Appeals Committee. The concern will be disclosed by the member to the Chair, who will decide on the appropriate course of action.

3.4.3.4. Confidentiality

The Committee shall meet in camera. The documents provided to the Committee at meetings shall be retained by the Faculty Affairs Officer. All deliberations of the Committee and all information received by the Committee shall be confidential except for such disclosure as is necessary for the Committee’s Report.

N.B. The “Guidelines for Procedure” of the Appeals Committee are available on the Faculty of Medicine website.

3.4.3.5. In hearing appeals the Committee may:

- Uphold an appeal in whole or in part;
- Reject an appeal; or
- Refer the case back to the body concerned.

3.5. Board of Examiners – Medical Radiation Sciences Program

3.5.1. Membership

Council shall approve the membership of the Board of Examiners – Medical Radiation Sciences Program Committee composed of the following:

Chair: elected by Faculty Council
Vice-Chair: elected by and from among the members
Eight faculty members elected by Council, three of whom shall be nominated by the Michener Institute for Applied Health Sciences after consultation with the Speaker, and, of the remaining five, no more than two shall be associated with the Medical Radiation Sciences Program and no more than two shall be associated with the Radiation Physics Residency Program
One Two student members of the Undergraduate Medical Radiation Sciences Program

Ex officio:
Vice Dean, MD Program
Chair, Department of Radiation Oncology (or designate)
Vice-President, Michener Institute (or designate)
Faculty Affairs Officer (non-voting)

3.5.2. Function

In relation to the Medical Radiation Sciences Program and the Radiation Physics Residency Program, and on behalf of Council:

a) At the request of the Vice Dean (or her/his designate) Academic Director (or designate) to review the cases of students in academic difficulty and to determine or give advice (as requested) concerning the course(s) of action.

b) After receiving and considering recommendations from the Vice Dean (or her/his designate) Academic Director (or designate) for the progression of students through the Program, to determine in relation to each student, the appropriate course of action, which may include promotion, remediation, failure, suspension, and dismissal.
c) To review the marks/grades of all students in all courses of each year of the Program as recommended by the Academic Director (or designate) and, review, adjust and approve as appropriate.
d) To oversee the general consistency of grading procedures.
e) To review and approve grades and non-grade course reports.
f) To report to Council its deliberations, recommendations and decisions.

N.B. The assessment of a student's performance includes not only the evaluation of performance in the courses of the Program but also the evaluation of the student's behavioural, ethical and professional performance in the Program.

3.5.3. Procedures

A student whose performance is being considered by the Board may make a written submission to the Board through the Faculty Affairs Officer.

3.5.3.1. Quorum

Chair (or Vice-Chair) and 50% of the members of the Board of whom one must be a student except as noted below.

Student members
Student members shall be voting members of the Board, but will be excluded from such deliberations upon request of any student whose case is being considered or if their own case is being considered.

Non-Member Attendees
The Vice Dean (or designate), with the agreement of the BOE Chair, will invite those academic and administrative staff who are not members of the Board to attend each meeting only as necessary for the full presentation of information concerning each case. Such visitors may be asked to leave after the presentation of their material.

3.5.3.2. Conflict of Interest

A Board of Examiners member must declare a potential conflict of interest with any case presented to the Board of Examiners. The concern will be disclosed by the member to the Chair, who will decide on the appropriate course of action.

3.5.3.3. Appeal of Decisions

Decisions of the Board are final and binding on the Faculty and the Michener Institute but students may appeal the decision of the Board to the Faculty of Medicine Appeals Committee.

3.5.3.4. Confidentiality

The Board shall meet in camera. The documents provided to the Board at meetings shall be retained by the Faculty Affairs Officer. All deliberations of the Board and all information received by the Board shall be confidential except for such disclosure as is necessary for the Board’s Report.
3.6. **Board of Examiners – Postgraduate Programs**

3.6.1. **Membership**

Council shall approve the membership of the Board of Examiners – Postgraduate Programs Committee composed of the following:

Chair, elected by Faculty Council Vice-Chair: elected by and from among the members Nine Teaching Staff none of whom should concurrently be a Director of a residency training program. Teaching Staff are elected by Council and commit to a full 3-year term, with the option to renew once for an additional three years. Of the nine members, at least one should be from each of Family Medicine, Internal Medicine and Surgery. Three postgraduate trainees who commit to a one year term, with the option to renew for a second term

Ex officio:  
Vice Dean, Post MD Education  
Faculty Affairs Officer (non-voting)

3.6.2. **Function**

In relation to the Postgraduate Programs, and on behalf of Council:

a) At the request of the Vice Dean (or her/his designate), to review the cases of trainees in academic difficulty and to determine the appropriate course(s) of action, which may include remediation, remediation with probation, probation, suspension, and dismissal.

b) The assessment of a trainee’s performance may include the evaluation of the trainee’s academic, behavioural, ethical and professional performance in the Program, or the evaluation/recommendation from an independent process.

c) After receiving and considering recommendations from the Vice Dean (or her/his designate), make recommendations on the progression of trainees through the Program

a) To oversee the general consistency of grading procedures.

b) To review and approve grades and non-grade course reports.

c) To report to Council its deliberations, recommendations and decisions.

3.6.3. **Procedures**

The procedures of this Board and of the evaluation of postgraduate trainees are detailed in the document “Guidelines for the Evaluation of Postgraduate Trainees of the Faculty of Medicine at the University of Toronto” (February 2007).

A trainee whose performance is being considered by the Board may make a written submission to the Board through the Faculty Affairs Officer.

3.6.3.1. **Quorum**

Chair (or Vice-Chair), and 4 of the members of the Board of whom one must be a trainee (except as noted below). The Vice Dean is included in the count towards quorum and is allowed to vote.

**Trainee members:**  
Trainee members shall be voting members of the Board but will be excluded from such deliberations at the request of any trainee whose case is being considered or if their own case is being considered.
Non-Member Attendees:
The Vice Dean (or designate), with the agreement of the BOE Chair, will invite those academic, administrative staff and appropriate health professional staff who are not members of the Board to attend each meeting only as necessary for the full presentation of information concerning each case. Such visitors may be asked to leave after the presentation of their material.

3.6.3.2. Conflict of Interest

A Board of Examiners member must declare a potential conflict of interest with any case presented to the Board of Examiners. The concern will be disclosed by the member to the Chair, who will decide on the appropriate course of action.

3.6.3.3. Appeal of Decisions

Decisions of the Board are final and binding on the Faculty, the Residency Training Program Committees and the Program Directors. Decisions of the Board may be appealed by postgraduate trainees to the Faculty of Medicine Appeals Committee.

3.6.3.4. Confidentiality

The Board shall meet in camera. The documents provided to the Board at meetings shall be retained by the Faculty Affairs Officer. All deliberations of the Board and all information received by the Board shall be confidential except for such disclosure as is necessary for the Board’s Report.

3.7. Board of Examiners – Undergraduate Medical Program

3.7.1. Membership

Council shall approve the membership of the Board of Examiners – Undergraduate Medical and Physician Assistant Professional Degree Programs composed of the following:

Chair: elected by Faculty Council
Vice-Chair: elected by and from the members.
Nine Teaching Staff elected by Council (at least one member must be from the Department of Family and Community Medicine)
Two undergraduate medical students (normally the President and past-President of the Medical Society)
Two student members of the BScPA Program
Representative from the Michener Institute named by its President
Representative from the Northern Ontario School of Medicine named by its Dean

Ex officio:
Vice Dean, MD Program
Vice Dean, Partnerships
Faculty Affairs Officer (non-voting)

3.7.2. Function

In relation to the Undergraduate Medical Program, and on behalf of Council:
a) At the request of the Vice Dean, MD Program (or her/his designate), to review the cases of students in academic difficulty and to determine or give advice (as requested) concerning the course(s) of action.

b) After receiving and considering recommendations from the Vice Dean, MD Program (or her/his designate) for the progression of students through the Program, to determine in relation to each student, the appropriate course of action, which may include promotion, remediation, failure, suspension, and dismissal; and

c) To review the marks/grades of all students in all courses of each year of the Program as recommended by the Vice Dean, MD Program (or designate), adjust and approve as appropriate.

d) To oversee the general consistency of grading procedures.

e) To review and approve grades and non-grade course reports.

f) To report to Council its deliberations, recommendations and decisions.

N.B. The assessment of a student's performance includes not only the evaluation of performance in the courses of the Program but also the evaluation of the student's behavioural, ethical and professional performance in the Program.

3.7.3. Physician Assistant Professional Degree Program Standing Sub-Committee

3.7.3.1. Membership

All members of the UME Board of Examiners are *ex officio* members of the Physician Assistant Professional Degree Program Standing Sub-Committee

Representative from the Michener Institute named by its President
Representative from the Northern Ontario School of Medicine named by its Dean

3.7.3.2. Function

In relation to the Physician Assistant Professional Degree Program, and on behalf of Council:

a) At the request of the Vice Dean, Partnerships (or her/his designate), to review the cases of students in academic difficulty and to determine or give advice (as requested) concerning the course(s) of action.

b) After receiving and considering recommendations from the Vice Dean, Partnerships (or her/his designate) for the progression of students through the Program, to determine in relation to each student, the appropriate course of action, which may include promotion, remediation, failure, suspension, and dismissal; and

c) To review the marks/grades of all students in all courses of each year of the Program as recommended by the Vice Dean, Partnerships (or designate), adjust and approve as appropriate.

d) To oversee the general consistency of grading procedures.

e) To review and approve grades and non-grade course reports.

f) To report to Council its deliberations, recommendations and decisions.

N.B. The assessment of a student's performance includes not only the evaluation of performance in the courses of the Program but also the evaluation of the student's behavioural, ethical and professional performance in the Program.
3.7.4. Procedures

A student whose performance is being considered by the Board may make a written submission to the Board through the Faculty Affairs Officer.

3.7.4.1. Quorum

UME Board of Examiners
Chair (or Vice-Chair) and seven of the members of the Board of whom one must be a UME student except as noted below under Student Members.

Physician Assistant Professional Degree Sub Committee
Chair (Vice-Chair) and five of the members of the Board of whom one must be a Physician Assistant Professional Degree student except as noted below under Student Members.

Student members
Student members shall be voting members of the Board, but will be excluded from such deliberations upon request of any student whose case is being considered or if their own case is being considered.

Non-Member Attendees
The Vice Dean, MD Program and/or the Vice Dean, Partnerships, with the agreement of the BOE Chair, will invite those academic and administrative staff who are not members of the Board to attend each meeting only as necessary for the full presentation of information concerning each case. Such visitors may be asked to leave after the presentation of their material.

3.7.4.2. Conflict of Interest

A Board of Examiners member must declare a potential conflict of interest with any case presented to the Board of Examiners. The concern will be disclosed by the member to the Chair, who will decide on the appropriate course of action.

3.7.4.3. Appeal of Decisions

Decisions of the Board are final and binding on the Faculty but students may appeal the decision of the Board to the Faculty of Medicine Appeals Committee.

3.7.4.4. Confidentiality

The Board shall meet in camera. The documents provided to the Board at meetings shall be retained by the Faculty Affairs Officer. All deliberations of the Board and all information received by the Board shall be confidential except for such disclosure as is necessary for the Board’s Report.
3.8. Continuing Professional Development Committee

3.8.1. Membership

Council shall approve the membership of the Continuing Professional Development Committee composed of the following:

Chair: elected by Council
Seven Teaching Staff elected by Council representing constituencies of continuing professional development such as:

- Research in CPD/Knowledge Translation/Patient Safety/Quality Improvement
- CPD Program Development
- Centre for Faculty Development
- Simulation and eLearning
- Global and Indigenous Health CPD
- Rehabilitation Science
- Clinical Sciences

One post-professional trainee
An alumnus/alumna of the Faculty
Director, Office of CPD

Ex officio:
- Vice Dean, Post MD Education
- Associate Dean, Continuing Professional Development
- Faculty Affairs Officer (non-voting)

3.8.2. Function

In relation to the Continuing Professional Development Programs of the Faculty, the role of the Committee is to safeguard the standards and quality of the courses and programs offered, certificates and diplomas awarded, and teaching awards. The Committee also reviews and recommends to Council policies pertaining to research in professional development.

3.8.2.1. Courses and Programs Offered

a) To receive and accept on behalf of Faculty Council annual reports from the Dean or her/his designate clarifying the extent to which the goals and objectives are being met in all aspects of the delivery of professional development courses and programs, including the faculty development program, patient and public education programs and international professional development programs.

b) To review and recommend to Faculty Council major changes proposed by the Dean or his/her designate, in the goals and objectives of all aspects of the delivery of a program and courses prior to their implementation or any other proposals assigned to the Continuing Professional Development Committee by the Executive Committee.

c) The Committee will receive and approve on behalf of Faculty Council proposals for minor changes in the goals and objectives of all aspects of the delivery of all programs and courses prior to their implementation.

3.8.2.2. Research Policy
The Committee will review and make recommendations to Faculty Council issues of policy concerning research in professional development and knowledge translation.

3.8.2.3. Certificates and Diplomas

a) To review and approve on behalf of Faculty Council minor changes proposed by the Dean or his/her designate in the requirements for the certificates and diplomas offered in continuing professional development.

b) To review and recommend to Faculty Council major changes proposed by the Dean or his/her designate in the requirements for the certificates and diplomas offered in continuing professional development.

c) To approve the awarding of certificates and diplomas to continuing professional development students on behalf of Faculty Council.

3.8.2.4. Teaching Awards

a) To receive and accept on behalf of Faculty Council annual reports from the Dean or her/his designate detailing the extent to which the goals and objectives are being met in the implementation of teaching award policies.

b) To review and approve on behalf of Faculty Council the terms and conditions of new awards and changes in existing awards upon the recommendation of the Dean or her/his designate, except for significant changes that would be brought to Faculty Council for approval.

c) The Committee, on behalf of Faculty Council, will approve the awardees.

3.8.2.5. External Reviews

The Committee will consider and report back on issues arising from the External Reviews of Departments and Extra Departmental Units referred to it by the Executive Committee or the Speaker.

3.8.3.7.5. The Committee will advise Faculty Council on any matters related to the professional development activities of the Faculty.

3.9.3.8. Education Committee

3.9.1.3.8.1. Membership

Council shall approve the membership of the Education Committee composed of the following:

Chair: elected by Faculty Council
Eight Teaching Staff (four from Clinical Science, three from Basic Science, one from Rehabilitation Science) elected by Council
Three Undergraduate Medical students (1 each from of years 1, 2 & 3, with one alternate)
Two Graduate students
One Postgraduate Medical trainee (alternate permitted)
One Radiation Science student
One Physician Assistant Professional Degree student

Ex officio:
Vice Dean, MD Program
Vice Dean, Post MD Education
Vice Dean, Graduate and Academic Affairs
Associate Dean, Postgraduate Medical Education (non-voting)
Associate Dean, Health Professions Student Affairs (non-voting)
Associate Dean, Continuing Professional Development (non-voting)
Chief Diversity Officer (non-voting)
Director, Undergraduate Admissions and Student Finances (non-voting)
Director, Medical Radiation Sciences Program (non-voting)
Medical Director, Physician Assistant Professional Degree Program (non-voting)
Faculty Affairs Officer (non-voting)

### 3.9.2.3.8.2. Function

In relation to the Undergraduate and Postgraduate Medical Programs, Graduate Education, the Undergraduate Medical Radiation Sciences Program and the Physician Assistant Professional Degree Program, the role of the Education Committee is to safeguard the standards and quality of the programs with regard to Admissions, Awards, Financial Aid, and Curriculum and Evaluation.

The reports noted in the Admissions, Awards, Financial Aid and Curriculum and Evaluation sections below will form part of the annual reports to Faculty Council and the Governing Council.

In relation to the Continuing Professional Development Programs of the Faculty, the role of the Committee is to safeguard the standards and quality of the courses and programs offered and the certificates and diplomas awarded. The Committee also reviews and recommends to Council policies pertaining to research in professional development.

### 3.9.2.4.3.8.2.1. Admissions

a) To receive and accept on behalf of Council annual reports from each program outlining the extent to which the goals and objectives are being met in the implementation of the admission policies and targets.

b) To review and recommend to Council major changes in the admissions policies recommended by the Dean or his/her designate or any other proposals assigned to the Education Committee by the Executive Committee.

c) The Committee will be informed of minor changes in the admissions policies prior to their implementation.

d) To make recommendations to Council on undergraduate and graduate admissions policy.

e) To approve, on behalf of Council, minor changes to admission requirements. All such changes shall be reported for information to Council.

f) To report to Council its deliberations, recommendations, and decisions

### 3.9.2.2.3.8.2.2. Student Awards

a) To receive and accept on behalf of Council annual reports from each program detailing the extent to which the goals and objectives are being met in the implementation of the awards policies.

b) To review and recommend to Council the terms and conditions of new awards and award policies recommended by the Dean or his/her designate and award policies prior to their implementation or any other proposals assigned to the Education Committee by the Executive Committee.
c) To approve on behalf of Council minor changes to the terms and conditions of awards and award policies. All such changes shall be reported for information to Council.

3.8.2.3. Teaching Awards

a) To receive and accept on behalf of Faculty Council annual reports from the Dean or her/his designate detailing the extent to which the goals and objectives are being met in the implementation of teaching award policies.

d) To review and approve on behalf of Faculty Council the terms and conditions of new awards and changes in existing awards upon the recommendation of the Dean or her/his designate, except for significant changes that would be brought to Faculty Council for approval.

3.9.2.3.8.2.4. Financial Aid

a) To receive and accept on behalf of Council annual reports from each program detailing the extent to which the goals and objectives are being met in the implementation of the financial aid policies.

b) To review and recommend to Council major changes in the financial aid policies recommended by the Dean or his/her designate or any other proposals assigned to the Education Committee by the Executive Committee.

c) To be informed of minor changes to the terms and conditions of financial aid policies prior to their implementation.

3.9.2.4.3.8.2.5. Curriculum and Evaluation

It is recognized that all the programs under the jurisdiction of this Committee, where applicable, are subject to the direction of external professional accreditation bodies.

a) To receive and accept on behalf of Council annual reports from each program outlining the extent to which the goals and objectives are being met in the delivery of the courses of study, the program content, the grading and evaluation system and the requirements for graduation.

b) To make recommendations to Council on all matters of curriculum policy.

c) To review and recommend to Council for approval, subject to the approval of the appropriate body of Governing Council, proposals for new academic programs, proposals for the closure of any academic programs, and proposals for major modifications to existing academic programs, diplomas, and certificates, or any other proposals assigned to the Education Committee by the Executive Committee.

d) To review and approve, on behalf of Council, proposals for minor modifications to academic programs, diplomas, and certificates. All such approvals shall be reported for information to Council.

d) To review and approve, on behalf of Council, proposals for Category 3 certificates. All such approvals shall be reported for information to Council.

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1 Definitions of major modifications of existing programs, minor modifications, and new academic programs are provided in the University of Toronto Quality Assurance Process and are subject to change. Guidance from the Office of the Vice-Provost, Academic Programs, should be sought prior to the development of any such proposal.

2 Proposals for creation or closure of Category 1 certificates will follow the protocol for major modifications, as stated in the Policy on Certificates (For Credit and Not-for-Credit).

3 Proposals for creation or closure of Category 2 certificates will follow the protocol for minor modifications, as stated in the Policy on Certificates (For Credit and Not-for-Credit).
e)—To report to Council its deliberations, recommendations, and decisions.

### 3.8.2.6. Continuing Professional Development Courses and Programs

a) To receive and accept on behalf of Faculty Council annual reports from the Dean or her/his designate clarifying the extent to which the goals and objectives are being met in all aspects of the delivery of professional development courses and programs, including the faculty development program, patient and public education programs and international professional development programs.

b) To review and recommend to Faculty Council major changes proposed by the Dean or his/her designate, in the goals and objectives of all aspects of the delivery of a programs and courses prior to their implementation or any other Continuing Professional Development proposals assigned to the Education Committee by the Executive Committee.

c) The Committee will receive and approve on behalf of Faculty Council proposals for minor changes in the goals and objectives of all aspects of the delivery of all programs and courses prior to their implementation

### 3.8.2.7. External Reviews

The Committee will consider and report back on educational issues arising from the External Reviews of Departments and Extra-Departmental Units referred to it by the Executive Committee or the Speaker.

### 3.8.2.8. New Initiatives

The Committee will review and recommend to Council, new initiatives, such as joint inter-faculty programs, proposed by the Dean or his/her designate or any other proposals assigned to the Education Committee by the Executive Committee.

### 3.8.2.9. External Reviews

The Committee will advise Council on any matters related to the Undergraduate and Postgraduate Medical Programs, Graduate Education, the Undergraduate Medical Radiation Sciences Program, and the Physician Assistant Professional Degree Program of the Faculty.

### 3.8.3. Procedures

The Committee shall meet in open session. Meetings where confidential matters of an individual are discussed shall be held in camera.

### 3.9. Executive Committee

### 3.9.1. Membership

Council shall approve the membership of the Executive Committee composed of the following:

The Speaker of Council (Chair)
Eight Members of Council, elected by Council:
Three Five Teaching Staff, one from each sector (basic science, clinical science, and rehabilitation) and two at large members
Three Students (1 UME student, 1PGME trainee and 1 graduate student)
One member from the administrative staff
Ex officio:
The Dean or designate
The Deputy Speaker of Council
The Chairs of the following Standing Committees: Continuing Professional Development Committee, Education Committee, and Research Committee
The Chief Administrative Officer (non-voting)
The Faculty Affairs Officer (non-voting)

3.10.2.3.9.2. Functions

a) To set the agenda for each Council meeting.
b) To ensure that adequate documentation is provided for consideration of each agenda item and to refer back to the originating administrator/governance body for further preparation any item deemed not ready for submission to Council.
c) To direct items of business to Council or the appropriate Standing Committee(s), or to recommend to Council the creation of special committees.
d) To consider notices of motion given to Council.
e) To approve, in principle, urgent items arising outside of Faculty Council’s regular meeting schedule. No item approved in such manner is formally binding until approved by Faculty Council.
f) To review and advise Council on all proposed Constitution and By-Law changes, whether these be brought to Council or initiated by Council.
g) To review and advise Council on the effectiveness of the Constitution and By-Laws.
h) At periodic intervals of not more than five years, to establish a review of the Constitution and By-Laws and recommend to Council any changes deemed appropriate.
i) To review on behalf of Council, reports of and responses to External Reviews of Departments and Units, inquiring into issues as necessary and reporting to Council its findings.
j) To monitor the functioning of Council and its Committees.
k) To report to Council its deliberations, recommendations and decisions.

3.10.3.9.3. Procedures

The Committee shall meet in closed session.

3.11.3.10. Research Committee

3.11.1.3.10.1. Membership

Council shall approve the membership of the Research Committee composed of the following:

Chair: elected by Council
Eight Teaching Staff elected by Council (with at least one member from each sector of the Faculty)
Two research trainees, of whom at least one must be registered in the School of Graduate Students

Ex officio:
Vice-Dean, Research and Innovation
Faculty Affairs Officer (non-voting)

3.11.2.3.10.2. Function
3.11.2.1. To identify and recommend to Council general research priorities/initiatives for the Faculty.

3.11.2.2. To review and recommend to Council the establishment, continuation and termination of Departments and Extra-departmental Units or any other proposals assigned to the Research Committee by the Executive Committee.

3.11.2.3. In accordance with University policies, to review and recommend to Council Faculty policies and procedures regulating the conduct of research, including those regarding the conduct of research in compliance with regulatory and statutory authorities.

3.11.2.4. To advise Council on any other matters relating to research in the Faculty.

3.11.2.5. To consider and report back on issues arising from External Reviews of Departments and Extra-Departmental Units referred to it by the Executive Committee or the Speaker.

3.11.3. Procedures

The Committee will submit an annual report to Faculty Council concerning its deliberations and recommendations of the preceding year. The Committee shall meet in open session.

3.12.3.11. Striking Committee

3.12.1. Membership

Council shall approve the membership of the Striking Committee composed of the following:

Chair: the Speaker of Faculty Council
All members of the Executive Committee excluding student members
All Standing Committee Chairs not on the Executive Committee

Ex officio:
The Dean
Faculty Affairs Officer (non-voting)

Non-member, advisors to the striking process:
Three Departmental Chairs, one from each sector as appointed by the Dean

3.12.2. Function

3.12.2.1. The Striking Committee shall be convened annually, or from time to time as may be deemed necessary.

3.12.2.2. Recognising that the terms of appointment are normally for three years, the Faculty Affairs Officer, on behalf of Faculty Council, will seek suggestions and nominations to fill anticipated vacancies in the roles of Speaker and Deputy Speaker and in the membership of the Standing Committees. Before making nominations, members will obtain the concurrence of nominees to stand for election. The Faculty Affairs Officer, on behalf of the Striking Committee, will request all nominees to forward to her/him brief biographies
concerning their experience to hold the position for which they have been nominated.

3.12.2.3.3.11.2.3. The Striking Committee will meet to prepare a slate of candidates following receipt of nominations and suggestions from members of the Faculty. The Committee will ensure that there is at least one nominee for every anticipated vacancy. The Committee may add further nominees to vacancies for which nominations have already been received from the process in 3.13.2.2 above, but may not remove any nominees from the list. The Faculty Affairs Officer, on behalf of the Striking Committee, will obtain the concurrence of nominated candidates to stand for election as proposed, and will request all nominees to forward to her/him brief biographies concerning their experience to hold the position for which they have been nominated.

3.12.2.4.3.11.2.4. The slate of candidates prepared by the Striking Committee containing both those nominated through process 3.13.2.2 above and those added by the Committee in process 3.13.2.3 above, together with the brief biographies of nominees, will be presented to a meeting of Faculty Council. At this meeting of Council no further nominations will be accepted. Council will vote by secret ballot on motions to establish those nominees who will hold positions in the forthcoming session.
4. **DATES OF AMENDMENT**

   Amended and approved by Faculty Council on June 23, 2008.
   Amended and approved by Faculty Council on June 22, 2009.
   Amended and approved by Faculty Council on September 13, 2010.
   Amended and approved by Faculty Council on February 27, 2012.
   Amended and approved by Faculty Council on October 22, 2012.
   Amended and approved by Faculty Council on April 29, 2013.
   Amended and approved by Faculty Council on February 9, 2015.
   Amended and approved by Faculty Council on October 19, 2015.
   Amended and approved by Faculty Council on April 25, 2016.