



New Faculty Orientation

Department of Medicine, Temerty Faculty of Medicine



Medicine
UNIVERSITY OF TORONTO



We would like to begin with an acknowledgment of the land on which we work, study and live.

We recognize that many Indigenous nations have long-standing relationships with the land upon which the work of the University of Toronto's Department of Medicine is conducted. We acknowledge our presence on the traditional territory of many Indigenous Nations, including the Mississaugas of the Credit, the Anishnaabeg, the Chippewa, the Haudenosaunee, and the Wendat peoples. Today, this land is home to many diverse First Nations, Inuit and Metis peoples and we are grateful to have the opportunity to live, work and gather on these territories.

Land Acknowledgements are only a starting point for larger conversations. More concrete acts of restitution and transformation are needed to address underlying inequities and blatant discrimination in the distribution of resources between Canada's first peoples and settlers.





61 new full-time faculty members
& 20 part-time & 83 adjunct (n=164)
(October 2023-October 2024)



Agenda

8:30-9:00	Welcome to U of T & the DoM – Moira Kapral, Chair DoM How things work Getting registered – UTORid, CV Academic Life Cycle – CFAR
9:00-9:45	Teaching Essentials – Tina Trinkaus, Lead, Valuing the Clinician Teacher Responsibilities of Attending Physicians Supervising Learners Giving & Receiving Feedback
9:45-10:00	Break
10:00-10:15	Culture & Inclusion in DoM – Umberin Najeeb, Vice Chair C&I (virtual)
10:15-10:30	Telling Your Story – Brian Wong
10:30-11:15	Move to Groups by Position Description Group Discussions by Position Description - Invited Faculty CT/CE/AC – Arno Kumagai, Tina Trinkaus, Erica Tsang, Wayne Gold CQI – Christine Soong CI/CS – Jane Batt & Kristian Galberg
11:15-12:00	Closing & Lunch



How things work

New Faculty Orientation



You have two appointments*

University faculty appointment

- Position Description & Academic Rank
- Continuing Faculty Appointment Review
- Senior Promotion
- Graduate Appointments
- Trainees – MD, Residents & Fellows



Departmental Division Directors (DDD)

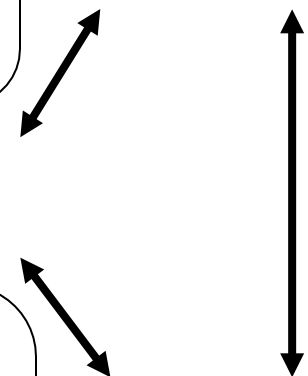
Affiliated hospital appointment

- Hospital divisions / programs
- Practice plan membership
- Clinical activities & associated resources
- Practice management
- Office space
- Research institute appointment & resources



Department
Chair and
Vice Chairs

Physicians in
Chief (PICs)
Chief of EM



Nature Index Annual Tables 2023: first health-science ranking reveals big US lead

The Netherlands punches above its weight in the country list, and a Canadian institution demonstrates the strength of its clinical collaborations.

1	Harvard University, United States of America (USA)
2	National Institutes of Health (NIH), United States of America (USA)
3	University of Toronto (U of T), Canada
4	Johns Hopkins University (JHU), United States of America (USA)
5	University of California, San Francisco (UCSF), United States of America (USA)



Leverage the brand...



Medicine
UNIVERSITY OF TORONTO

Provide hospital & University of Toronto affiliation on all manuscripts and posters & at beginning of all presentations

Power-point template

<http://www.deptmedicine.utoronto.ca/communication-resources>



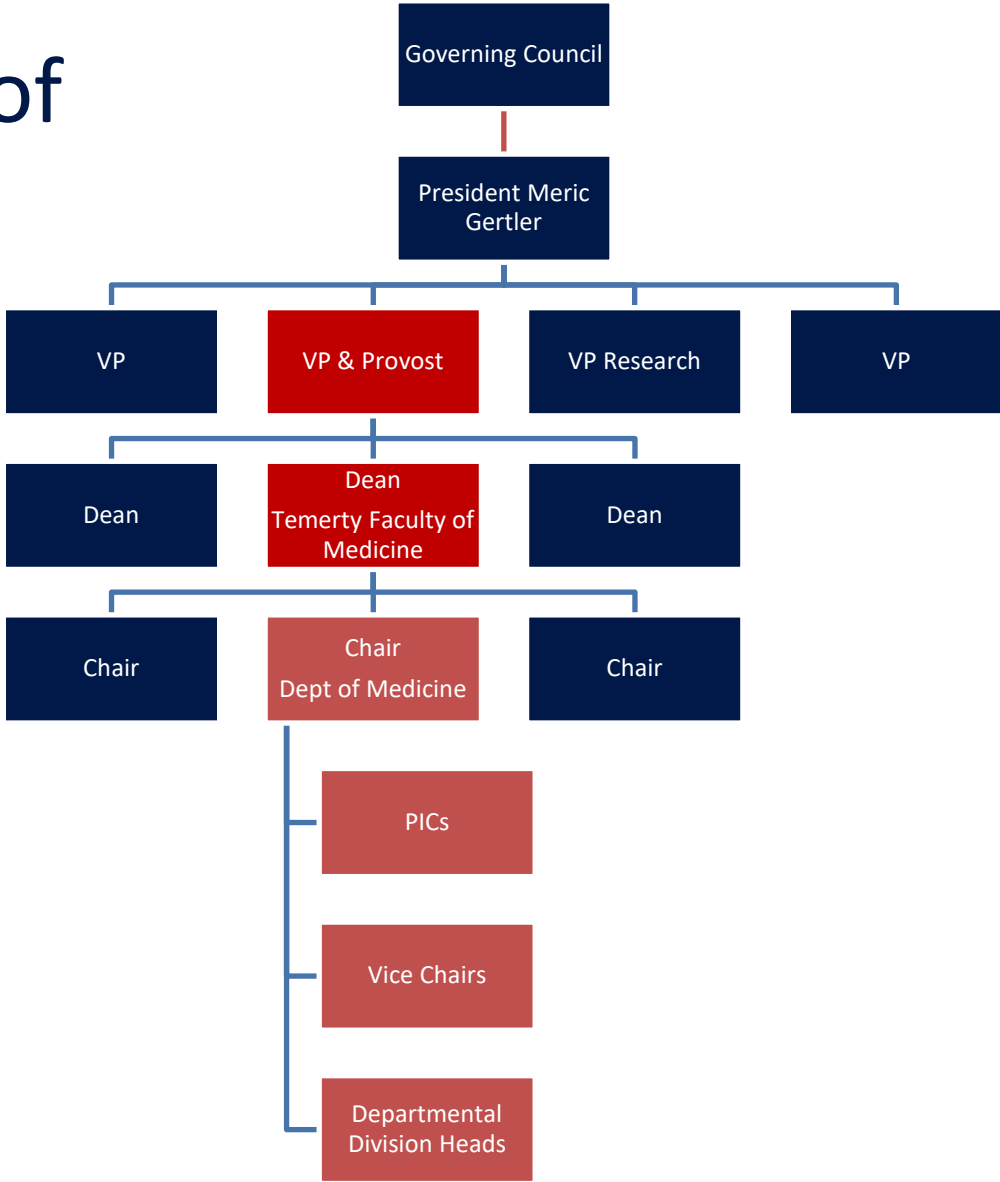
Medicine
UNIVERSITY OF TORONTO



Dr. Moira Kapral
Professor, Division of
General Internal Medicine, Department of
Medicine, University Health Network,
Temerty Faculty of Medicine,
University of Toronto



University of Toronto



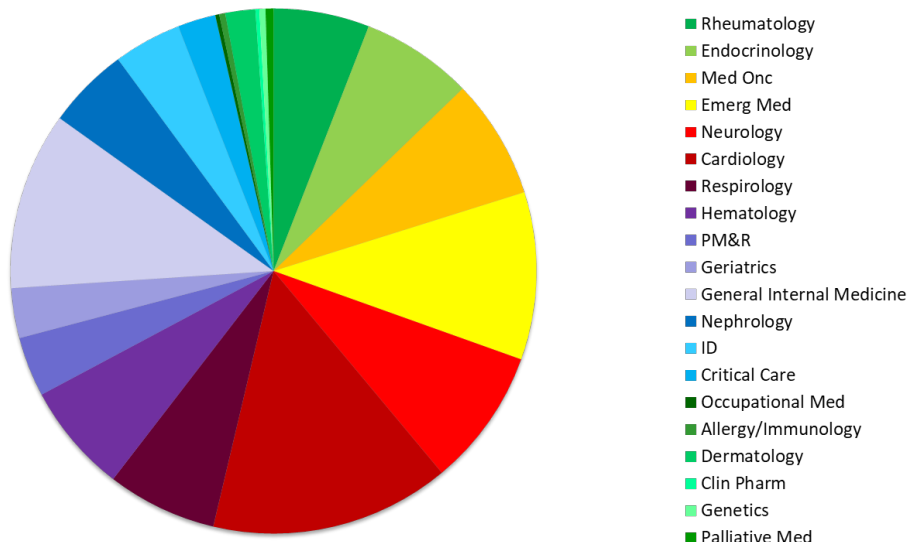
Department of Medicine

1,000 postgraduate trainees (residents and fellows)

1 in 3 of Canada's internal medicine specialists trained here

1,871 faculty, 946 full-time (~27% of Temerty)

20 divisions



Toronto Academic
Health Sciences
Network





You'll find us at the **C. David Naylor Building (Naylor Building)** on the University of Toronto campus @ **6 Queen's Park Crescent West** (*NW corner of Queen's Park and College Street*)





Colin Gibson

Dom.cultureandinclusion@utoronto.ca



Culture & Inclusion

Umberin Najeeb

Education

Arno
Kumagai



Sarah Jung & Asia Ferrara

Sarah.jung@utoronto.ca
Asia.Ferrara@utoronto.ca



Kristian Galberg

dom.research@utoronto.ca



Research

Jane Batt

Quality & Innovation

Kaveh
Shojania



Christian.base@utoronto.ca

Vice Chair Portfolios



PICs / EM Chief



Natalie Wong
Unity/ St. Michael's



Paula Harvey
Women's College



Kathryn Tinckam
UHN



Erin O'Connor
Emergency Medicine



Michelle Hladunewich
Sunnybrook



Gary Naglie
Baycrest



Chaim Bell
Sinai Health System



DDDs



Susanna Mak
Cardiology



Stephen Betschel
Immun & Allergy



Peter Wu
Clin Pharm



Laurent Brochard
Critical Care



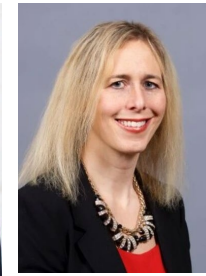
Vincent Piguet
Dermatology



Erin O'Connor
Emergency



Jackie James
Endocrinology



Laura Targownik
GI/Hepatology



Brian Wong
GIM



Barbara Liu
Geriatrics



Michelle Sholzberg
Hematology



Jennie Johnstone
ID



Eitan Amir
Med Onc



Heather Reich
Nephrology



David Tang-Wai
Neurology



Joan Saary
Occ Med



Ebru Kaya
Palliative



Mark Bayley
PMR



Chung-Wai
Chow
Respirology



Heather
McDonald-Blumer
Rheumatology

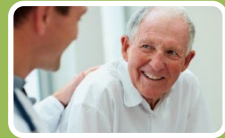


Your Academic Position Description

Department specific

Allocation of professional time to each activity

% FULL-TIME FACULTY



Patient care



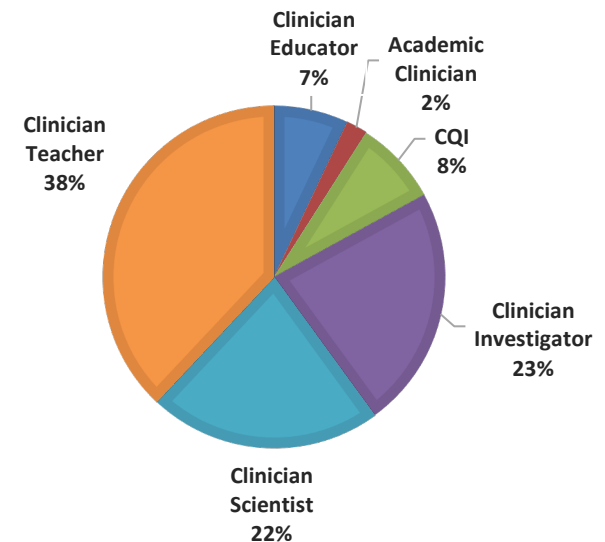
Teaching (clinical, formal)



Scholarship



Administrative service

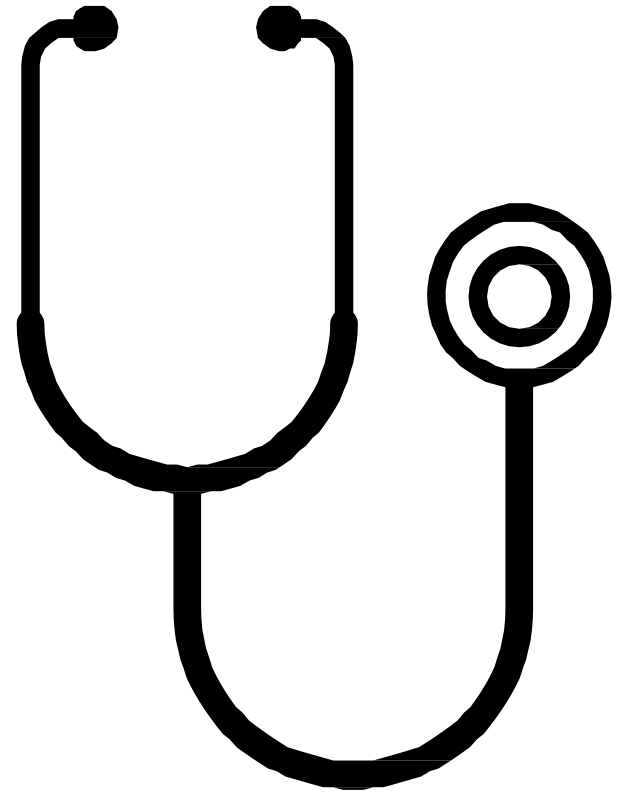


A few important points



You are members of a Practice Plan (PP)

PPs pool income/revenue & then redistribute it to support non-remunerative academic activities, e.g., classroom teaching & research
~85% \$\$ come from MOH (billings, AFP)



Your finances are **your responsibility**

You are NOT an employee of the hospital or the university

Get advice from an expert re. your finances

Benefits – check with your PP

Get disability insurance

Pay taxes (CRA)



Expectation of professional behaviour

Breaches of professionalism may include:

Creation of a hostile work environment;

Harassment, intimidation, discrimination;

Failure to disclose and manage conflicts of interest;

Inappropriate conduct with industry;

Violations of boundaries;

Failure to fulfill professional duties, incl. supervision;

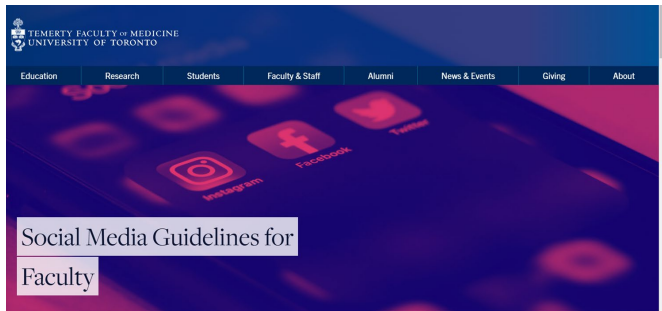
Research misconduct

*Assessed **by DoM** at CFAR, Awards & Senior Promotion*



Faculty expectations and code of conduct

Standards of Professional Behaviour for Clinical (MD) Faculty



Be respectful

Anything you post in your role as a faculty member reflects on the institution. Be professional and respectful at all times on your social media channels. Do not engage in arguments or extensive debates with naysayers on your channels.

Online is forever

Think before you post, remembering that anything you share within social media, even within a closed network, is not private. It can and will be shared, stored and spread globally. Don't post anything online you wouldn't feel comfortable seeing on the front page of a newspaper.

Policy

General



Physicians have been given the privilege and responsibility of profession-led regulation. This policy primarily focuses on physicians' behaviour in the professional context.

"Professional context" is a broad term that refers to any environment where a physician interacts with patients, colleagues, learners, and others in the workplace (whether in person or virtually). The professional context also includes any situation where a physician actively identifies themselves as a physician and/or represents the profession (e.g., public appearances, printed media, and social media).



Relationships with industry

Acceptable (*standardized disclosure slide*):

Unrestricted educational grants (clear accountability for spending; no strings attached re use)

Scientific collaborations

Meetings with reps by appointment in your admin office/space (value?)

Unacceptable:

Gifts (e.g. dinner, travel, fellowships)

Speaking engagements organized by/funded by industry where you do *not* have control of topic, slides, audience

Industry reps in clinical space (ONLY if demonstrating equipment use)

Providing trainee emails to industry reps

Industry reps interacting with residents / trainees *without faculty present* (even then ...)

Marketing related work for/with industry, including CME and potentially advisory boards

<https://www.deptmedicine.utoronto.ca/professionalismcode-conduct>



Faculty of Medicine resources

<https://temertymedicine.utoronto.ca/concern-and-grievance-pathways-clinical-md-faculty>

concern-and-grievance-pathways-clinical-md-faculty

Clinical & Faculty Affairs	Suite 204 - 701 Sheppard Ave East
Faculty Appointments >	Toronto, ON M2K 2Z3
Faculty Promotions >	Telephone: (416) 546-1350
	Fax: (647) 349-1870
	E-mail: abrown@nygh.on.ca
Named Chairs and Professorships	
Clinical Affairs >	
Awards >	
Faculty Supports v	
Educational Services and Support	Expand All
Pathways for Faculty Concerns & Grievances	I am concerned about my safety +
Professional Values	I have a concern about the decision made by a University leader +
Social Media Guidelines for Faculty	I feel my academic freedom has been breached +
Wellness Resources for Faculty	I have a concern about another faculty member's research integrity +
Human Resources	I have a concern about another faculty member's professional conduct +
	I have been discriminated against +
	I have been affected by sexual violence and/or sexual harassment +
	The Office of the University Ombudsperson (OUO) +

Clinical Faculty Advocate

- Appointed by TAHSN Medical Staff Associations
- Helps individual physicians interact with administrative & academic leaders, hospitals & the University, in difficult situations.
- Can listen, provide information & advice, help with written submissions, & accompany physicians to meetings

<https://temertymedicine.utoronto.ca/social-media-guidelines-faculty>



Getting registered

Your UTORid

Access to UofT Library

My Research (MR)

Elements (will replace Web CV)

Which emails to use & why



UTORid needed for library access, Zoom account, Elements, etc.



UTORid

Page 1 of 6

Activate Your UTORid

New faculty and staff

Your UTORid and Secret Activation Key can be found on the online services letter provided to you by Human Resources. Enter your UTORid and SAK below.

Others

Should go to [UTORid Creation](#).

Please note: All your accounts should be under **only one UTORid. To avoid future problems, please do not proceed to activate if you have been issued another UTORid in the past - active or not, and contact the person or department who issued you your UTORid.**

Enter your JOINid or UTORid:

Enter your Secret Activation Key:

Validate

If you don't know your Secret Activation Key or need help activating your UTORid, please contact the [Help Desk on your campus](#).



Medicine
UNIVERSITY OF TORONTO

Please log in to identify yourself.

UTORid / JOINid

Password

Log in 

[Forgotten Password?](#)

Alert: Completely exit your web browser when you are finished.

Steps you can take to protect your account:

- ✔ Before you begin, make sure the weblogin page (URL) starts with:
<https://weblogin.utoronto.ca/...>
- ✔ Check your browser for a valid University of Toronto security certificate:
    « Select your browser to see how
- ✔ When using a public computer, [close all windows](#) and exit the browser.
- ✔ Keep your password a secret at all times
Tip: U of T will **never** ask for your password or other personal information by e-mail.

◀ Protect Your Account

[What is weblogin?](#)

[Need a UTORid?](#)

[How to Log Out](#)

[Forgotten Password](#)

[Login Problems](#)

[Finding Help](#)

[Protect Your Email](#)

Email accounts

Your hospital email is secure (use for patient care)

Your UofT email is *not secure* for patient care (*name@utoronto.ca*)

In order to ensure you receive important & time- sensitive notices to faculty members' @utoronto.ca addresses, ***please forward your @utoronto email to your hospital email account***



CV

Previously used WebCV; this is ending

In the process of moving to Elements; full platform use in 2025

The screenshot displays the SYMPLECTIC Elements user interface. At the top left is the SYMPLECTIC Elements logo. A dark blue sidebar on the left contains navigation icons for home, profile, and analytics. The main content area is titled 'Homepage' and features a 'MY ACTIONS' section with a notification: 'Claim your scholarly & creative works. You have 1 pending scholarly & creative work waiting to be claimed or rejected. Claiming it will add it to your 'My scholarly & creative works' list. Claim now »'. To the right is a user profile for Moira Kapral, Temerty Faculty of Medicine, with an ORCID ID (0000-0002-3444-9928) and email (moira.kapral@uhn.ca). At the bottom, there are four tabs: 'Scholarly & creative works', 'Grants & contracts', 'Professional activities', and 'H-Index'.



Full-time faculty perks



Library access

Scholarship program for dependants

<https://future.utoronto.ca/dependants-scholarship-program/>

Outlook, Sharepoint, OneDrive, MS Office & other licensed software:

Note that these are not installable software, they are accessed through the portal and by using your UTORid <https://oneseach.library.utoronto.ca/ic/licensed-software>

Discount on open access publications and fees through the UofT library

<https://oneseach.library.utoronto.ca/copyright/oa-agreements-apc-discounts>

UofT Zoom account

No time limits, up to 300 participants <https://utoronto.zoom.us/>

Joint membership

Hart House, Athletic Centre, Faculty Club \$61/month

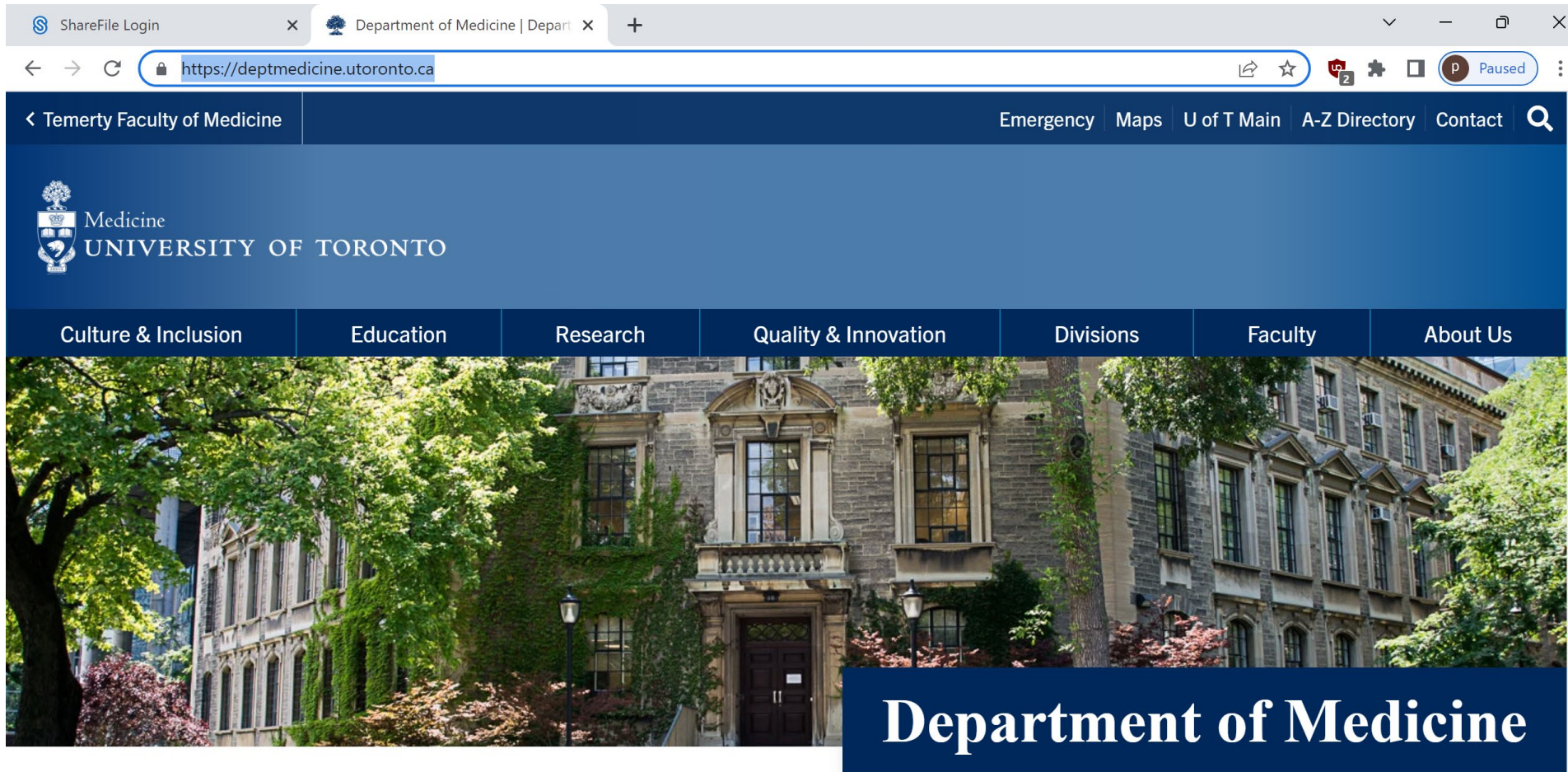
For more information:

<https://dfcm.utoronto.ca/sites/default/files/assets/files/benefits-full-time-full-time-equivalent-clinicians0.pdf>



Look here first...

<https://deptmedicine.utoronto.ca>



The image shows a screenshot of a web browser displaying the homepage of the Department of Medicine at the University of Toronto. The browser's address bar shows the URL <https://deptmedicine.utoronto.ca>. The page features a dark blue header with navigation links: "Emergency", "Maps", "U of T Main", "A-Z Directory", and "Contact". Below the header is the University of Toronto logo and the text "Medicine UNIVERSITY OF TORONTO". A horizontal menu contains the following categories: "Culture & Inclusion", "Education", "Research", "Quality & Innovation", "Divisions", "Faculty", and "About Us". The main content area features a photograph of a historic stone building with a central entrance, surrounded by lush green trees. A dark blue banner at the bottom right of the image contains the text "Department of Medicine" in white serif font.



New Faculty Orientation

THE ACADEMIC LIFE CYCLE & CONTINUING FACULTY APPOINTMENT REVIEW (CFAR)



Medicine
UNIVERSITY OF TORONTO

Our job is to enable you to thrive.



Clinical care

Transition from resident to faculty can be challenging

Have clinical mentors who can advise on patient care, operations

It's normal to need to ask for help

Identify pathways for continuing education – rounds, conferences, workshops



Your work community

You'll enjoy your job more if you are part of a community

Attend your divisional and departmental meetings, rounds, and social events

Come to the office



Citizenship

Provide at least 5% of professional time to administrative service to hospital or department

Join committees that are of value to you

Be a helpful colleague



The first years (the probationary period)

Irrespective of academic rank at appointment, new faculty appointments are *probationary* for **three to five years**

Continued appointment beyond this time is contingent upon a successful *Continuing Faculty Appointment Review (CFAR)*



Timing of CFAR

Must complete a minimum of 3 full years (36 months) on faculty before review

Review conducted in Feb-Mar – appointments up to December 31 will be considered finished three years

We notify you Sept of the prior year

May be delayed if "clock stopped", e.g., parental leave, illness, COVID

<https://www.deptmedicine.utoronto.ca/process-timeline-and-expectations>



DoM check-in at 1.5 years

(DoM Vice-Chair and/or Chair)

Academic Plan – are you on track?

Wellbeing – how are you doing?

Proactively identify issues

- Balance of time (time management)

- Teaching – type, quality, quantity

- Completion of graduate training / MTP?

- Research – focus, grants, publications, etc.

- CPA statement – what is your story?

- Mentorship



What are we looking for?

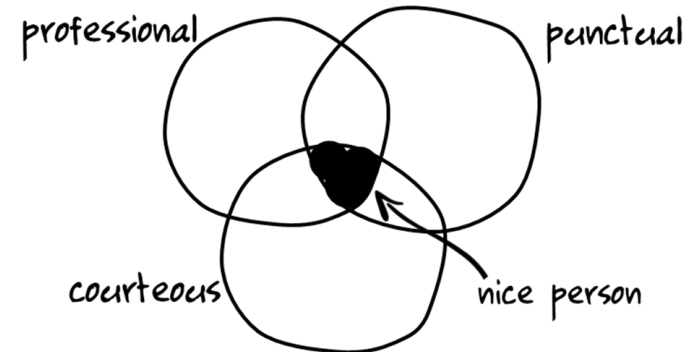
Advancing as expected? If not, why not?

Demonstrated teaching effectiveness?

Behaviour consistent with codes of conduct?

Career Development:

Are we and you doing everything in our collective power to ensure your academic success?



ALL faculty members

Citizenship

A small division with few CTs may need CS faculty to participate in UGME even though not REQUIRED for CFAR

Professional conduct

Consistent with codes of conduct (UofT, CPSO, CMA, etc.)

Formal teaching consistent with APD (see website)

Hours per year

Level of trainees

Informal Teaching consistent with APD – in context of clinical care

Effective teacher striving for excellence

Teaching evaluations – scores and comments

Teaching awards



Scholarship

Progressing as per academic plan and APD

Teachers – demonstration of teaching effectiveness

CQI – participating in teaching in QI; engaged in QI projects

CE/CI – demonstration of scholarly output ... generally a publication or two...that would not have happened without you

CS – evidence of potential as a PI (grants submitted, papers published or in press)

AC – effective clinical care, professionalism, 360⁰ review

Since 2018: 199 reviews of 190 faculty
- success rate 99%



The first years

Enjoy your start to independent practice

Opportunities to

- Teach and work with trainees

- Do interesting and rewarding scholarly work

- Demonstrate expertise in the care of complex patients

- Be part of a community of smart, accomplished, and caring people

We are here to support you!



Our “doors” are open



moira.kapral@utoronto.ca

arno.kumagai@wchospital.ca

umberin.Najeeb@sunnybrook.ca

kaveh.Shojania@sunnybrook.ca

jane.batt@utoronto.ca

dom.chair@utoronto.ca

dom.academicappointments@utoronto.ca





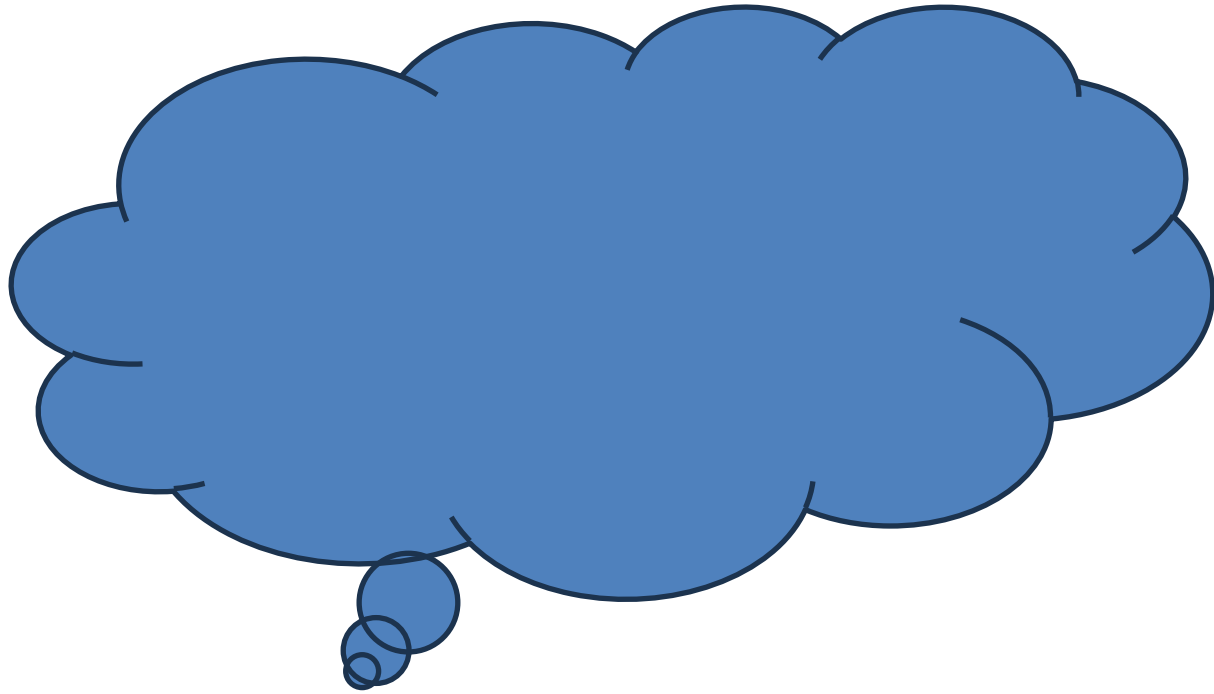


Teaching Essentials

Dr. Tina Trinkaus
Associate Professor, UofT
Lead, Valuing the Clinician Teacher



What traits made your supervisors excellent teachers?



What the evidence says...

“The mediocre teacher tells. The good teacher explains. The superior teacher demonstrates. The great teacher inspires” – William Arthur Word.

Clinical and technical skills/ competence, clinical reasoning

Extends to the non-cognitive skills that foster **relationship building** with our learners

- Allows for a stimulating and enthusiastic environment
- Engenders respect and approachability
- Adaptable in teaching
- Provides feedback and direct supervision
- Serves as a professional role model
- Incorporates Empathy



Clinical Teaching & Learning



Forming strong, trusted relationships between teachers & learners.



DOM is Committed to Supporting Teachers & Teaching



Master Teacher Program

Masters in Medical Education



Stepping Stones & Education Scholars Program (ESP)

OISE
Dalla Lana SPH
Wilson Centre, UHN
Maastricht, UIC, Dundee, etc.

The Teaching & Learning Climate

We are working to create a community in which all of us—learners, faculty, staff, and patients—can flourish.



IM Accreditation

ROYAL COLLEGE EXTERNAL REVIEW: **NOVEMBER 7-9, 2023**

IM program was put on “intent to withdraw accreditation” in the spring of 2021 if we did not adequately address two major concerns:

Resident feedback
without fear of
retaliation

Attending supervision
to ensure safe, high-
quality care

**Optimizing Teaching Effectiveness
and the Learner Experience**

Department of Medicine, University of Toronto

December 2022

**Standard for Supervision of Learners
by DoM Physicians**

University of Toronto, Department of Medicine

December 2022



Supervision for Optimal Patient Care

Standard for Supervision of Learners by DoM Physicians

University of Toronto, Department of Medicine

December 2022



Goal: To optimize the learning environment by demonstrating a consistent and mutual understanding of roles and responsibilities.



Supervision of Learners in the Clinical Environment

- **Goal:** to optimize the learning environment by demonstrating a consistent and mutual understanding of roles and responsibilities.
- Supervising Physicians must **ALWAYS**
 - **Be identified & available** to assist Learners in providing optimal patient care
 - Degree & means of availability (by phone, pager, or in-person) depends on volume & acuity of patients, case mix, compliment of Learners (types, levels), and time of year
- To enable the above, Supervising Physicians should adjust their schedules when attending on in-patient or consult service to ensure residents are:
 - Adequately supported throughout the day & able to consistently complete their workday by 6 pm
 - *If for any reason* you cannot be unavailable for something, you **MUST** designate an eligible **Acting Clinical Supervisor** and ensure Learners are notified and aware.

Review these principles with Learners at the beginning of all clinical rotations – invite questions like: “What can you expect from me?” and “What do I expect from you?”



Expectations – Teaching

(Informal = in context of clinical care; formal = outside of clinical care)

Introduce and Orient

Stating the obvious: learn and use names

Orient to service and expectations

Provide ways to contact MRP, e.g., after hours and on weekends

Be present and available

Provide appropriate level of clinical & procedural supervision to ensure safety in learning and in patient care

Limit other activities (procedures, meetings, etc.) when in-patient attending (consults & ward)

Answer calls / pages promptly



Expectations – Teaching

(Informal = in context of clinical care; formal = outside of clinical care)

Help out when needed

Assume primary care for patients when clinical workload exceeds what learners can safely manage.

Provide constructive, timely feedback

Address learners in difficulty:

Please do so with compassion and understanding. **If you don't know what to do, seek help.**

Follow PARO rules & policies

e.g., duty hour restrictions, end-of-shift/end-of-day dismissal



CPSO Professional Responsibilities in Medical Education

- Supervision of MD Students & Postgraduate Trainees
- Availability of MRP &/or supervisor
- Involvement in in-patient care
- Professional behaviour
- Violence, harassment & discrimination
- Professional relationships/boundaries
- Reporting responsibilities

Optimizing Teaching Effectiveness and the Learner Experience

Department of Medicine, University of Toronto

September 2022



Teaching at Different Levels

Pre-clerkship

Clerkship

Post-graduate residents

Post-graduate clinical fellows

Continuous Faculty Development (CPD)

Other health care professionals



Giving & Receiving Feedback from Learners

Optimizing Teaching Effectiveness and the Learner Experience

Department of Medicine, University of Toronto

December 2022



<https://www.gse.harvard.edu/news/uk/17/11/making-student-feedback-work>

Goal: To provide transparency & guidance re how we:

- Prepare, support, and recognize teaching excellence
- **What we do with learner feedback & how that has evolved over time**
- How faculty can access their evaluations
- What faculty can do if they wish to appeal an evaluation
- How we collaborate with TFOM to ensure the safety & well-being of our learners



Evaluations as “Social Capital:”

What’s at stake?

For DoM Leaners

ITARs

EPAs

Specialty CaRMS match

Fellowships

Faculty appointment



For DoM Faculty

Annual Reviews

CFAR

Awards

Merit \$\$

Senior Promotion



Teaching Evaluations

Teachers evaluating Learners

Through **MEDSIS** for UGME (e.g., clerkships and electives)

Through **POWER** for PGME

ITERS and ITARS (evaluations of stage-, context-specific performance or performance in CanMEDS roles separate from EPAs)

Elentra currently used to for Entrustable Professional Activities (EPAs) in Competence By Design



Teacher Evaluations

Learners evaluating Faculty

Current form: LACT (Learner Assessment of Clinical Teaching)

- POWER (postgraduate learners, including fellows)—available quarterly
- MEDSIS (undergraduate learners)—quarterly/biannually
- Must have a **minimum of 3 evaluations** to appear; otherwise, evaluations are aggregated over time.

Seek feedback on your teaching

- Review your evaluations (scores, comments)
- Appeal mechanism if you feel the evaluation is retaliatory or otherwise unfair
- Seek help if consistent pattern of feedback indicating need for improvement



MyTEprof.com

- Can be used towards Promotion and CFAR



myTE

Email

Password

[Forgot Password?](#)

Sign In

Evaluate Anonymously



Evaluations

Take the time to evaluate your learners and give them time to evaluate you.



Some Challenges with Evaluations...



Not Enough!!!



Some Challenges with Evaluations...



Poor quality...

Unprofessional...



Deflating...



What if I get a horrible evaluation?



Take a moment to reflect:

Does this make sense?

Is it specific enough to act on?

Is it accurate or fair?



Appeals

Possible reasons for appeals:

Filed on the wrong faculty member;

Criticism of rotation rather than faculty member;

Inverted scores: All 1s and 2s out of 5 but with all laudatory comments;

Possible retaliation by learner in response to constructive but critical feedback

No comments provided

To appeal: *write to Vice Chair Education (Arno Kumagai)—online form in development.*

Process: DoM Appeals Committee—meets quarterly.



Get Involved!



E. Kyeyune *The Conversation*, 1963





Culture and Inclusion Portfolio

Dr. Umberin Najeeb,

Vice Chair Culture and Inclusion, &

Co-director Master Teacher Program

Dept. of Medicine, University of Toronto



Medicine

UNIVERSITY OF TORONTO

Objective

- Provide a brief overview of Culture and Inclusion Portfolio in the Department of Medicine (DoM)
- Share resources to facilitate your journey as an early career academic physician



What's with the name?

Organizational Culture:

“The shared patterns of feeling, thinking, talking, and accomplishing that underpin local practice”

Russell Mannion & Huw Davies, 2018



CULTURE

Organizational - shared assumptions and values that bind individuals within an organization

Identity - the power of communal narratives to shape how individuals see themselves within particular cultural worlds

Practice - emphasizes what actually occurs in practice - privileging activity and human-material networks or arrangements

Watling, CJ, Ajjawi, R, Bearman, M. Med Educ. 2020; 54: 289–295



CULTURE

Organizational - shared assumptions and values that bind individuals within an organization – [Dept. of Medicine](#)

Identity - the power of communal narratives to shape how individuals see themselves within particular cultural worlds – [Faculty / Learners](#)

Practice - emphasizes what actually occurs in practice - privileging activity and human-material networks or arrangements – [Clinical & Learning Spaces](#)

Watling, CJ, Ajjawi, R, Bearman, M. Med Educ. 2020; 54: 289–295



Governance and Structure

WELLNESS

MENTORSHIP

EQUITY



Governance and Structure

WELLNESS: Simron Singh

MENTORSHIP: Catherine Yu

EQUITY: Umberin Najeeb



Governance and Structure

WELLNESS: Simron Singh

MENTORSHIP: C. Kramer

EQUITY: Christine Soong



WELLNESS & MENTORSHIP:

Faculty Lead Valuing Clinician Teacher: Dr. Martina Trinkaus

MENTORSHIP & EQUITY:

Faculty Lead, Black and Indigenous Resident Application and Mentorship Program: Dr. Mireille Norris

EARLY CAREER FACULTY REPRESENTATIVES: (advisors)

Drs. Yayi Huang & Erica Tseng



My major goal is to advance the department's Culture and Inclusion strategic priorities.

To enhance sense of **belonging, fulfillment, and worth** among our faculty – to bring joy back.

To create cohesiveness and align the vision and mission of the DoM around the constructs of EDI, mentorship and wellness within our learning and clinical spaces (teaching hospitals).



Starting a career... Transition

- You are trying to get a career off the ground
- Finances
 - Toronto isn't cheap!
- Young families or starting young families
- Caregiver

- Major Sources of stress
 - *Lack of control*
 - *Unpredictability*
 - *Intense sense of responsibility*
 - *Finances and regulations*



WORK LIFE INTEGRATION IS SOMETHING YOU/WE NEED TO WORK ON!!



The Domains of Well Being

PERSONAL RESILIENCE

- Individual skills, behaviors, and attitudes that contribute to physical, emotional, and professional well-being
- Try to determine what *fills your bucket* and do it *at least 20% of the time*
- Physicians who spent at least 20% of their time in the aspect of work that was most meaningful to them had a rate of burnout roughly half that of those who spent less than 20% effort.



Stanford Professional Fulfillment Model

Shanafelt TD, West CP, Sloan JA, et al. Career Fit and Burnout Among Academic Faculty. *Arch Intern Med.* 2009;169(10):990–995. doi:10.1001/archinternmed.2009.70



What can I do?

- Think about your own wellness and how it affects you and your work
 - recognize symptoms of burnout
- Take care of yourself
 - physically and emotionally
- Manage your time
 - guilt of saying no
 - meeting and emails
- Discuss a realistic, manageable workload
- Don't neglect your support system
 - family, friends, other people



What can I do?

- Take breaks, take your vacations
- Pick your battles
- Talk about how you are feeling
 - Peers
 - division heads
 - Mentors
 - others
- Give yourself a break
 - We are often our own worst enemies
 - Perfectionism, over-commitment, self-critical



The Domains of Well Being

EFFICIENCY OF PRACTICE

- Workplace systems, processes, and practices that promote safety, quality, effectiveness, positive patient and colleague interactions, and work-life ~~balance~~ integration

CULTURE OF WELLNESS

- Shared values, behaviors, and leadership qualities that prioritize personal and professional growth, community, and compassion for self and others



Stanford Professional Fulfillment Model



What are we doing at DOM?

- *We've got your back....*



We are in this together...

- Peer support is important
- Professionalism and civility
- Watch out for social media
- Create a **culture of inclusion - wellness**



9/20/2021



What are we doing at DOM?

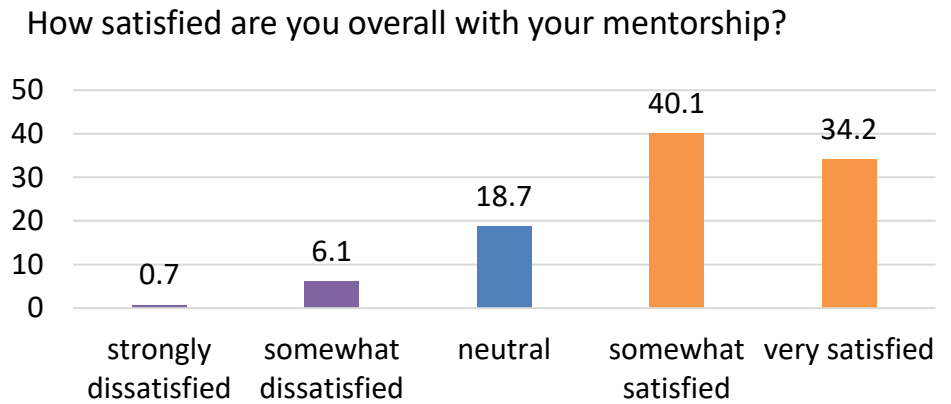
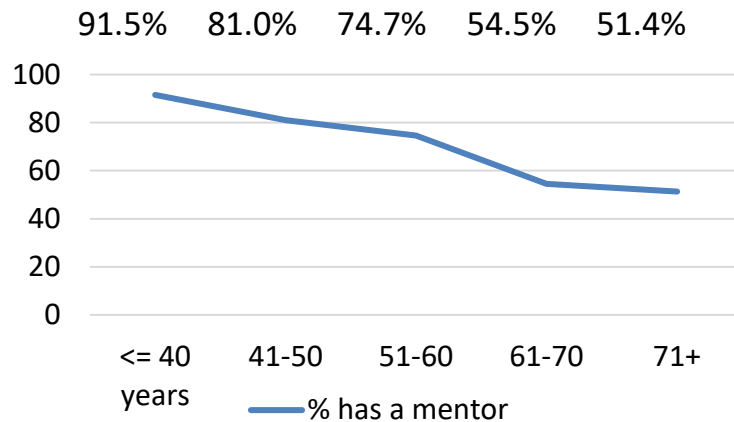
Resources & Information

- Educational Resources
- Mentorship resources



Faculty Mentorship

76.3% reported having ≥ 1 mentor vs 47% in 2017

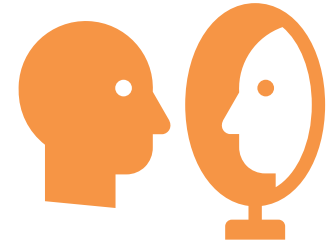
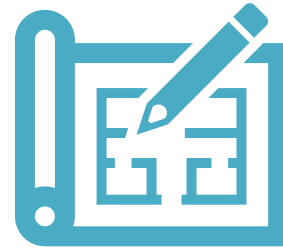


74.3% somewhat or very satisfied vs. 65.8% in 2017*



Satisfaction with mentorship associated with degree to which mentor helped with:

- Career planning
- Networking
- Self-reflection
- Navigating university culture



What are we doing at DOM?

Resources & Information

- Educational Resources
- Mentorship resources
- Guidelines of Inclusivity
- Guidance on email communications, meetings
 - Emailing Wisely
- Social media guidelines (CPSO & TFOM)
- Learner and Faculty Mistreatment

<https://deptmedicine.utoronto.ca/culture-inclusion>



What are we doing at DOM?

- Webinars, rounds, peer support
 - Culture and Inclusion Faculty development series
 - Early Career Faculty forum
 - Story Slam: Sharing your stories
 - WAM PLUS
- Trying to make your life easier with CFAR
- Advocating for you at the institutional and system level
- Listening.... (Faculty Survey, Listening circles)

Creating a culture of wellness and inclusion with mentorship and EDI principles



Selected Resources

- Dept. of Medicine Culture & Inclusion Webpage:
<https://deptmedicine.utoronto.ca/culture-inclusion>
- <https://www.deptmedicine.utoronto.ca/covid-19-wellness-resources-faculty-and-trainees>
- CPSO Social Media Policy: <https://www.cpso.on.ca/en/Physicians/Policies-Guidance/Policies/Social-Media>
- TFOM Social Media Guidelines: <https://temertymedicine.utoronto.ca/social-media-guidelines-faculty#policies>
- CPSO policy on professional responsibilities in Medical Education:
<https://www.cpso.on.ca/Physicians/Policies-Guidance/Policies/Professional-Responsibilities-in-Medical-Education>
- Guidelines for Inclusivity:
<https://deptmedicine.utoronto.ca/sites/default/files/assets/files/guidelines-inclusivity-full-rigsa-06032022.pdf>
- Learner Mistreatment:
<https://meded.temertymedicine.utoronto.ca/learner-mistreatment>



"I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel"

Maya Angelou, American author and poet



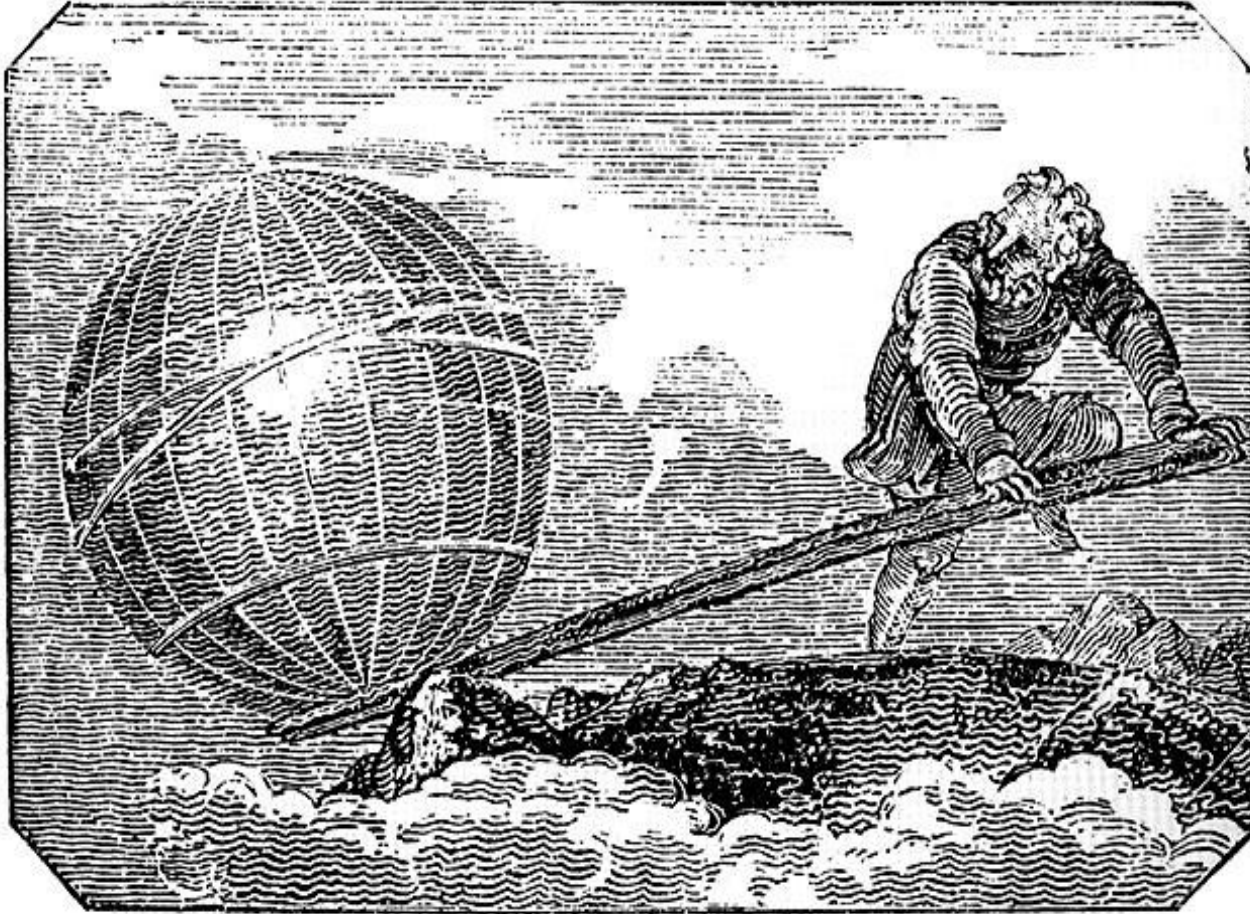


Telling Your Story

Brian M. Wong

September 24th 2024





Telling Your Story

1. Bring the audience into your world
2. Tell the audience why it matters
3. No jargon



Telling Your Story – Problem-Gap-Hook

Problem: what is the problem you are interested in?

Gap: what is missing in current knowledge or delivery of care?

Hook: convince the reader that the gap is important

Lingard L. *Perspect Med Educ* (2015) 4:252–253



Problem

- Transfers to hospital from long-term care (LTC) expose residents to harms due to hospitalization, contribute to emergency room overcrowding, and add significant cost to the healthcare system.

Gap

- Healthcare providers working in the LTC setting lack timely access to the necessary resources, such as specialist consultation and diagnostic testing, to provide the necessary care to avoid emergency room transfers.

Hook

- My scholarly focus is to design, implement and evaluate new models of care to provide better care for residents living in LTC to decrease the need for transfer to the emergency room.



Problem

- Physicians need to develop specific skills to improve the quality-of-care patients receive

Gap

- Most training programs lack curricula to teach quality improvement skills to students and residents

Hook

- My scholarly focus is to design and deliver new curricula to teach quality improvement and patient safety to students, residents and practicing physicians and evaluate their effectiveness.



What Is Your Scholarly Focus?

2-3 sentences

2 minutes

