Resident Orientation Manual 2018

Département de médecine familiale Department of Family Medicine

med.uottawa.ca/familiale | med.uottawa.ca/family



Table of Contents

i

Where can I find important information?	1
Resources, Important Links, Usernames And Passwords	1
Resident Resilience	2
Crisis Contacts	2
Ottawa Resiliency (ottawaresiliency.org)	2
Timelines	3
Curriculum	4
Overview Of Assessments/Evaluations	5
Academic Day	б
Mandatory Educational Requirements	7
Quality Improvement Project	11
Family Medicine Resident Scholarly Project	12
Electives	13
Rural Rotations	14
Reimbursements	14
2nd Parking Reimbursement	15
Educational Fund Reimbursement	15
Resident Undergraduate Teaching Fund	16
On- Call Stipend	16
Contacts	17
Administration	17
Chair And Directors	17
Family Medicine Units	19



Where can I find important information?

Most information can be accessed through the **DFM Virtual Campus** (uottawa.brightspace.com), which is also accessible through the homepage of the **DFM website** (med.uottawa.ca/family). On the **Virutal Campus**, you will find:

- Orientation presentations
- Request Electives
- Electives Catalogue
- Reimbursement allocations
- Curriculum / objectives / assessments
- Scholarly project and QI projects
- Ottawa Resiliency page
- Crisis contacts
- Mentorship Program
- Academic Day
 - Schedule
 - Presentations
 - Rounds Guidelines
- FMOB presentations and resources
- Global Health Longitudinal and Elective Experiences
- Policies
 - DFM Policies
 - PGME policies

Resources, important links, usernames and passwords

- **DFM Website** med.uottawa.ca/family
- **DFM Virtual Campus** uottawa.brightspace.com
 - Username and password: **Same** as one45, LoA and eField Note
 - Technical difficulties? contact: commsdfm@uottawa.ca
- one45 ottawa.one45.com
- **Resident Portal** (eField Notes, LOA, Electives catalogue/requests, Reimbursements)
 - femoral.med.uottawa.ca/Resident
 - Username and password: **Same** as one45 and DFM Virtual Campus
- DFM Youtube Channel goo.gl/l6HUPi

- Faculty of Medicine med.uottawa.ca
- Health Sciences Library biblio.uottawa.ca/en/ health-sciences-library
- College of Family Physicians of Canada cfpc. ca
- Faculty of Medicine Standards of Ethical and Professional Behaviours www.med.uottawa.ca/ edg/eng/behaviour_standards.html
- **uOttawa Policy on Sexual Harrassment** www. uottawa.ca/administration-and-governance/ policy-67-sexual-harassment
- **CMA Code of Ethics** www.cma.ca/En/Pages/ code-of-ethics.aspx
- CPSO Professional Responsibilities and in
 Postgraduate Medical Education www.cpso.
 on.ca/policies-publications/policy/professional responsibilities-in-postgraduate-medi

Join us on Facebook (facebook.com/uottawadfm) and Twitter (@uofodfm)!



Resident Resilience

What is resilience?

An individual's ability to properly adapt to stress and adversity. Stress and adversity can come in the shape of family or relationship problems, health problems, or workplace and financial stressors, among others. Individuals demonstrate resilience when they can face difficult experiences.

It is important to us that we help each and every resident to cope with the inevitable stresses that will happen during your residency. We have great resources and people to help.

Visit the Ottawa Resiliency Website (ottawaresiliency.org), created by and for uOttawa Family Medicine residents, for helpful links and resources.

Remember that you are never alone.

CI 1515 COIllacts		
The PARO 24 Hour Helpline:	Available to residents, their partners, and family members, as well as medi- cal students. The toll-free number is accessible anywhere in Ontario, 24 hours a day, 7 days a week.	1-866-HELP-DOC (1-866-435-7362) pairo.org/24_HOUR_Helpline
The Physician Health Program	Available to all Ontario Medical As- sociation members	1-800-851-6606 php.oma.org
The Crisis Line	Available 24 hours a day to those 16 years of age and older experiencing a mental health crisis, living in Ottawa, the counties of Prescott & Russell United Counties of Stormont, Dundas & Glengarry and Renfrew County	Within Ottawa: 613-722-6914 Outside Ottawa: 1-866-996-0991 crisisline.ca

Crisis contacts

On the DFM Virtual Campus you will find links to the following resources:

- Your Program Chief, Chief Residents & Representatives
- Resilience Committee contacts
- Code 99
- Mentorship
- Online resources
- Ottawa Resiliency: ottawaresiliency.org

Timelines





Curriculum

The Department of Family Medicine is proud to provide a Triple C Competency-Based Curriculum to prepare our graduates for today's health care environment. Built around societal and patient needs, this comprehensive approach focuses on continuity of education and patient care, and is centred in family medicine. Its focus on outcome abilities is designed to prepare physicians for practice.

Curriculum Framework Website is located on the DFM Virtual Campus or at goo.gl/6Uw87E.

Family Medicine Triple C Competency-Based Curriculum Framework



[©] Department of Family Medicine University of Ottawa

Overview of Assessments and Evaluations

The resident is responsible to ensure that all evaluation forms are done in a timely manner. If no evaluation is received for a rotation, the rotation will be considered incomplete, and therefore may have to be repeated. This documentation of satisfactory clinical performance in your various rotations is required in order to complete the program and gain eligibility to the Certification Examinations of the College of Family Physicians of Canada.

Evaluations are to be completed as per the DFM's Mandatory Educational Requirements. They along with the various educational objectives and assessment forms are available on the Virtual Campus.

Tools used to evaluate resident performance:

- Field Notes offer feedback on specific patient encounters and are administered through the online eField Note system accessed through the DFM Virtual Campus or website.
- Interim Rotational Assessment: It is encouraged to measure your progress during the rotation but it is NOT mandatory (for 4 week experiences, an interim evaluation form is automatically sent by one45 to the preceptor prior to the 2-week point; for longer experiences, an interim evaluation is recommended every 4-weeks).
- In Training Evaluation Report (ITER): the final evaluation completed at the end of each rotation. It is distributed to the preceptor through One45 one week before the end of the rotation.

Resident's Role:

- Sit down with your supervisor Learn about their expectations as these will be the basis of your evaluation. Ensure that your on-call schedule is known by both your preceptor, team nurse if you have one and whoever does the schedul-ing if you are in the community. Ask about Field Notes to plan for how and when these will be done.
- Create a learning plan write down your objectives for the rotation and review these with your supervisors at the start of your rotation. Bring out the plan during your midterm and final evaluations to ensure the objectives are being met.
- Schedule a meeting to discuss your midterm and final evaluation times. It is best to do the evaluations when you are face to face and when you are still on the rotation.
- Initiate eField Notes during your rotation, make sure to "share" them in the eField Note system with your preceptor in order to receive feedback
- Complete all mandatory evaluations sent to your One45 To Do box. Residents are expected to complete an evaluation of the rotation they completed and an evaluation of the preceptor in order to view their final rotation evaluation

Instructions for completion of evaluation forms

The Department of Family Medicine uses an electronic evaluations system called One45 – WebEval. The department inputs the master schedule in One45 and based on this schedule, the appropriate evaluations are sent directly to your preceptor, if the preceptor's name was NOT shared with the central office, the resident will be required to distribute the evaluations to their preceptor. You are responsible in monitoring your "To Do" box regularly.

The mid-rotation evaluation is sent 7 days after the start of your rotation.

The final rotation evaluation, evaluation of faculty and evaluation of service is sent 7 days before the end of the rotation. Video Tutorial as well as FAQ's are available on the Virtual Campus.

All final evaluations with an outcome other than "Meets expectations" will be reviewed by the unit resident promotion committee (uRPC) and recommendations will be made to the department RPC (dRPC) for the final status of whether the rotation is considered a pass or otherwise.

Any Concerns? – TALK ABOUT THEM! Speak directly with your supervisor. You may also speak with your family medicine preceptor, your Unit Program Coordinator, Unit Program Director, the Director of Evaluation or the Postgrad Program Director.

Acad<u>emic Day</u>

Residents are expected to attend one full day of academic teaching sessions at the central department. Resident attendance is mandatory. The only legitimate absence is for vacation, conference leave, illness, and out of town rotations/rural rotations (more than 150km one way). Residents are required to attend 100% of these sessions to complete the requirements of the program. To track this you must sign the attendance sheet in the morning and in the afternoon.

We owe a professional courtesy to these faculty and guests, who have made the commitment to present at these sessions, to attend from 8:00 am to 5:00 pm and participate fully. All services have been notified that it is a requirement that you attend these days. They are aware of the dates. If these sessions do not meet your educational objectives, please provide constructive criticism when you complete the evaluation form.

If an academic day is missed without an acceptable excuse listed above, in whole or in part, they may be presented during the next dRPC meeting to discuss professionalism issues.

Agenda, documents and notices are available via email and online within the week of the Academic Day. The resident is responsible in ensuring that he/she has reviewed the agenda and documents in preparation for the day as well as note where the teaching sessions are taking place.



Mandatory Educational Requirements

University of Ottawa, Department of Family Medicine (DFM)

Effective: July 1 2018

At any given time, the resident's progress will be determined based on the current policy (not be applied retroactively)

Educational Requirement	Method of Documentation	Completed?
Rotations: Successful completion of all rotational requirements and attainment of associated competencies. Each rotation evaluation should be submitted to the Department within 28 days of completion of the rotation, through the web-evaluation tool (one45).	In Training Evaluation of Resident (ITER) to show satisfactory completion of each rotation (as ultimately determined by the DFM's Resident Promotion committee).	
 Benchmarks: Documentation of acquisition of the Core FM Benchmarks for PGY1 and PGY2 defined by the program. This includes satisfactory competence in all clinical domains including: Maternity Newborn Skills*, Care of Children and Adolescents*, Care of Adults, Care of the Elderly, Palliative Care*, Procedural Skills* Care of Special Populations* Behavioural Medicine, Mental Health and Ethics* 	Residents are responsible for building a multisource portfolio of Field Notes that demonstrate they are acquiring the expected competencies, and receiving ongoing feedback. Daily documentation with field notes is recom- mended. A minimum of 32 field notes during core FM rota- tions and half days back is required per year. This must include a minimum of 25 direct observations of resident performance with a patient. Field notes (and other formative and summative as- sessments) ¹ are required to document attainment of competence in all the expected: Clinical domains CanMEDS-FM roles Core FM Benchmark Educational Categories	
 Maternity & Newborn skills: Demonstrate competence in the DFM's 21 core maternity & newborn skills including: Intrapartum, including managing obstetrical emergencies. Antepartum and post-partum skills in order to satisfy the "FM Obstetrics Evaluation policy". 	 Demonstrate sufficient² attainment of competence on Maternity Newborn Field Notes to indicate the resident is "fully competent" in a minimum of: 80% (8 of the 10) of intra-partum skills AND 70% (8 of the 11) ante-partum and post-partum skills 	

¹ Attainment of competence will be reviewed regularly during the residency (including at the Structured Progress Reviews). Ultimate decisions about resident acquisition of competence, and decisions for promotion are made by the Departmental Resident Promotion Committee.

² Attainment of competence will be reviewed regularly during the residency (including at Structured Progress Reviews). Ultimate decisions about resident acquisition of competence and determination of whether performance is satisfactory (including decisions about promotion) are made by the departmental Resident Promotion Committee (dRPC). The dRPC will review any deficiencies of the mandatory educational requirements and determine the necessary requirements for remediation to determine eligibility for promotion or graduation. Certification in Family Medicine requires successful completion of the Family Medicine Residency training program in addition to passing the CFPC Certification examination

Mandatory Educational Requirements (cont'd)

Educational Requirement	Method of Documentation	Completed?
Care of Children and Adolescents: Demonstrate competence in the Care of Children and Adolescents in clinical environments and using electronic learn- ing tools.	 a) Demonstrate sufficient¹ attainment of competence on field notes and rotation evaluations. b) Complete 10 iLearnPeds electronic learning modules 5 accomplished during Pediatric emergency room rotation 5 additional modules (minimum) of the resi- dent's choice Monthly report sent from Paediatrics 	
Palliative Care: Demonstrate compe- tence in End-of-Life skills as defined by the performing the DFM's core End-of- Life competencies.	Demonstrate sufficient ¹ attainment of competence on Palliative Care Field Notes and rotation evalua- tions (as required).	
Procedural Skills : Demonstrate ad- equate procedural skills competence in all the Department's "Procedural Skills Common Features" "High Priority Pro- cedures" and "Low Priority Procedures" (defined in the Procedural Skills Cur- riculum)	 Demonstrate sufficient2 attainment of competence on Procedural Skills field notes (or other documen- tation of procedural skills competence including rotation evaluations) to indicate the resident is "fully competent" in a minimum of: 90% (11 of the 12) "Procedural Skills Common Features" 70% (15 of the 21) "High Priority Procedures" 30% (8 of the 28) "Low Priority Procedures" 	
 Behavioural Medicine, Mental Health, Ethics: Demonstrate the following: Effective therapeutic relationships with patients including patient-centred communication skills, and ability to communicate effectively with patients from across the lifespan. Diagnosis and management of health behaviour and mental health issues commonly seen in primary care across the lifecycle including focused family medicine counseling skills. Identify and resolve ethical issues 	 Demonstrate sufficient¹ attainment of competence on Field Notes and rotation evaluations including: Behavioural medicine, specifically patient-cen- tred communication. Diagnosis and management of mental health conditions Identification and resolution of ethical issues Note: resident attendance at the Department of Family Medicine Behavioural Medicine educational sessions is mandatory². 	

¹ Attainment of competence will be reviewed regularly during the residency (including at Structured Progress Reviews). Ultimate decisions about resident acquisition of competence and determination of whether performance is satisfactory (including decisions about promotion) are made by the departmental Resident Promotion Committee (dRPC). The dRPC will review any deficiencies of the mandatory educational requirements and determine the necessary requirements for remediation to determine eligibility for promotion or graduation. Certification in Family Medicine requires successful completion of the Family Medicine Residency training program in addition to passing the CFPC Certification examination

 2 We strive for 100% timely and continuous attendance at these sessions. Residents are required to attend 100% of these sessions to complete the requirements of the program. The only legitimate absence is approved absence for vacation, conference leave, and illness, post-call if released from service after 23:00 hrs. and out of town rotations/rural rotations (more than 150km one way).

Mandatory Educational Requirements (cont'd)

Educational Requirement	Method of Documentation	Completed?
 Special Populations: For vulnerable patients demonstrate social accountability through showing: increased comfort with understanding how social determinants of health affect the health and wellness of vulnerable patients particularly aboriginal /indigenous patients. ability to respectfully address communication challenges which arise 	 Certificate of completion¹ of one electronic learning module (<i>First Nation, Inuit and Métis</i> <i>Culture, Colonization and the Determinants of</i> <i>Health Aboriginal</i>) at a minimum from Cancer Care Ontario's <i>Aboriginal Relationship & Cultur- al Competency Courses</i> (Available online: elearn- ing.cancercare.on.ca) Demonstrate sufficient attainment of compe- tence on Field Notes related to patients from at least two special populations aboriginal/indigenous, immigrant/refugee, disabled including developmentally delayed patients living in poverty/homeless/under- housed, other vulnerable groups 	
Academic Days: 100% attendance ² at Department of Family Medicine Aca- demic Days.	Sign-in sheet at Academic Days. See Academic Day policy for excused absences.	
Resident Confidence Survey: Complete the resident confidence survey (self as- sessment) a minimum of twice a year (July & March)	Completed confidence surveys, reviewed with supervisor.	
ACLS: Successfully complete an advanced cardiac life support (ACLS) course.	Certificate of completion.	D
NRP: Successfully complete a Neonatal Resuscitation Provider course.	Certificate of completion.	
RATS course: Attendance of Resident as Teachers Course (RATS) given by the Faculty of Medicine, Postgraduate Edu- cation Office	Confirmation of Attendance with Faculty of Medi- cine, Postgraduate Medical Education Office	

¹ Should be attained in the PGY1 period.

 $^{^{2}}$ We strive for 100% timely and continuous attendance at these sessions. Residents are required to attend 100% of these sessions to complete the requirements of the program. The only legitimate absence is approved absence for vacation, conference leave, and illness, post-call if released from service after 23:00 hrs. and out of town rotations/rural rotations (more than 150km one way).

Mandatory Educational Requirements (cont'd)

Educational Requirement	Method of Documentation	Completed?
SOOs: Resident attendance at the Department of Family Medicine Practice SOO sessions twice annually is mandatory ¹ . Residents must complete a minimum of 6 DFM Simulated Office Orals (SOOS) over the two years	Completed score sheets for each Practice SOO.	
Scholarly Project, Evidence Based Medicine and Quality Improvement: Residents will develop skills required to:	• Completion of acceptable written Quality Im- provement reports (the Practice Audit Report and the Final Quality Improvement Report) in the first year of residency	
 complete an evidence-based practice assessment and to develop and plan a practice quality improvement project in a primary care setting bring evidence to patient interactions demonstrate the creation, dissemina- tion, application and translation of knowledge 	 Documentation of acceptable participation in the EBM site-specific required activities (i.e. pre- sentation of the case of the week, EBM rounds or journal club) Completion of an acceptable written Resident 	
	Scholarly Project report and presentation of the project at RIO day in the second year of residency	

University of Ottawa, Department of Family Medicine (DFM) Approved by PG Executive Committee June 2, 2016

¹ We strive for 100% timely and continuous attendance at these sessions. Residents are required to attend 100% of these sessions to complete the requirements of the program. The only legitimate absence is approved absence for vacation, conference leave, and illness, post-call if released from service after 23:00 hrs. and out of town rotations/rural rotations (more than 150km one way).

To be completed during PGY1

Quality Improvement Project

On the **DFM Virtual Campus**, you will find:

- Latest News
- QI Project Instructions
- QI Project Summary
- QI Project Detailed Instructions
- QI Surveys
- Pre-survey (Complete July 1-September 1)
- Post-survey (Complete April 1-May 3)
- Resources and Forms
- Examples of QI Projects

Contact Information:

For any questions related to the **Practice Audit Project**, please contact:

- Director of Quality Improvement, Dr. Liz Muggah, emuggah@bruyere.org
- PG Coordinator pgadmindfm@uottawa.ca, 613-562-5800 ext. 6160

QI Project Timelines

Date	PGY1 Practice Audit	Date	PGY1 Quality Improvement
Jul-Sep	 Complete the pre-survey QI teaching session (during FM teaching) 		 Form group and determine roles (optional, maximum 2) Select one gap Review with your clinical supervisor(s)
		Jan-Feb	Identify root cause of gap in careIdentify improvement opportunities
Sep-Dec	 Ask a question Review the literature to find best practice Chart audit (15-20 charts) Identify a gap in care Reflect on how to narrow the gap Meet with your supervisor Academic Day Presentations 	Feb-Apr	 Find stakeholders in the clinic and meet with them Select one improvement opportunity Develop a plan for the improvement idea Meet with your supervisor and/or Unit QI Lead
	Practice Audit Report Form		QI Final Report and QI Final Evaluation due (to be completed by your Unit QI Fac- ulty Lead)
Nov 1	 <u>Practice Audit Report Form</u> <u>Practice Audit Evaluation</u> (to be completed by your supervisor) 	Apr-May	Complete the post-survey
		July	Presentation at the clinic

Each Unit has a primary Quality Improvement Lead that can assistant and support residents during their project:

Site	QI Lead	Email
Bruyère	Dr. Courtney Maskerine	cmask083@uottawa.ca
Civic	Dr. Monica Brewer	mbrewer@toh.on.ca
Community	Dr. Ed Seale	eseal2@uottawa.ca
Montfort	Dr. Manon Denis-Leblanc	manondenis@rogers.com
Pembroke	Dr. Todd Gauthier	tgauthier@nosm.ca
Primrose	Dr. Sharon Johnston	sjohnston@bruyere.org
Riverside	Dr. Peter Kuling	pkuling@toh.on.ca
Winchester	Dr. Mohamed Gazarin	mgazarin@wdmh.on.ca

Family Medicine Resident Scholarly Project

On the DFM Virtual Campus, you will find:

- Latest News
- Latest forms
- FMRSP Design-Specific Guide and Expectations
- Academic Day presentations aimed specifically to help you prepare for the successful completion of your project
 - PGY1 Orientation Presentation September
 - PGY2 How to write your final report October
 - An Introduction to Survey Research February
 - PGY1 Ethics Considerations for your FMRSP Project-November
 - PGY1 Library Resources-November
 - PGY2 RIO Day Presentation March
- Other Resources
 - Avoiding Plagiarism What you need to know
 - 10 Steps to our Resident Scholarly and Research Project
 - Policy: FMRSP Project Reallocation
 - Policy: FMRSP Resident Fund
 - 10 étapes pour réaliser votre projet d'érudition des résidents en médecine familiale
- Examples of Past Projects

FMRSP Timelines

Date	PGY1 FMRSP	Date	PGY2 FMRSP
Dec 1	Question and Timeline Project Form * January 15th ONLY if currently a PGY-1 IMGs/CSAs who started residency in Sep-	Sep 1	Progress Report
	tember Short Written Report Form	Feb 1	Final Written Report FormFMRSP Final Report Evaluation Form
Mar 1	* April 1st ONLY if currently a PGY-1 IMGs/ CSAs who started residency in September		
June	Attend RIO Day	June	RIO Day Presentation

If you are conducting a **literature review** for your FMRSP, please refer to the PRISMA guidelines. We encourage you to try to follow the PRISMA checklist as appropriate. We strongly recommend that you create a flow diagram to illustrate your methodology. More information on the PRISMA guidelines can be found online.

If you are conducting a **Quality Improvement** project for your FMRSP please refer to the SQUIRE Guidelines. We encourage you to try to follow the SQUIRE guidelines as appropriate. More information on the SQUIRE guidelines can be found online.

It is the resident's responsibility to be aware of the project requirements and timelines and to adhere to them. Questions and/or concerns should be directed to the FMRSP Manager fmrspdfm@uottawa.ca (613) 562-5800 ext/poste 6160

Electives

During your residency training, some block time has been reserved for elective experience. This block time is to be used for the attainment of your learning objectives, which may not have been met in the regular core rotations. The completion of identified deficiencies or the strengthening of weaknesses should receive priority.

Step 1	Find an elective of your choice and contact the preceptor directly to obtain verbal confirmation that he/she will take you for the rotation. Ask the preceptor if an application for hospital privileges or any specific documentation is required. If so, attend to this as soon as you book the rotation.
Step 2	If you would like to view choices and locations, you may refer to the Electives Catalogue found on the Resident Portal at femoral.med.uottawa.ca/Resident
Step 3	Complete the Elective Request Form on-line on the Resident Portal and submit to your Unit Coordina- tor for approval by the Unit Program Director. Electives are not confirmed until approval is received . * <i>Letters of Good Standing can be requested by</i> <i>forwarding the approved leave request to either the PGY1 or PGY2 coordinator.</i>

PLEASE NOTE:

- Elective rotations must be booked at least 3 rotation blocks, prior to the start of the elective and must be approved by the Unit Program Director
- A resident may request to do certain rotations in sites not directly affiliated with the University of Ottawa. In considering requests for off site rotations, the department must balance the resident's academic standing, the commitment to continuity of care for the residents practice and the educational balance of the residency. Should a resident request an off site rotation, the department must ensure that a fair and unbiased process is followed and the result is beneficial to all stakeholders involved. The postgraduate program will review every file on a case by case basis in accordance with the policy on the DFM Virtual Campus. This policy helps the program in fulfilling its clinical teaching responsibilities within the medical affiliated units while ensuring a commitment to the University of Ottawa program.

On the **DFM Virtual Campus**, in the "Programme d'études | Curriculum" and "Politiques et ressources | Policies and Resources" course spaces, you will find:

- Overview
- Link to Elective Request Form
- Link to Catalogue
- Global Health Elective Information
- Research Elective Policy and Procedure

On the **Resident Portal**, you will find the Electives catalogue and request form. **femoral.med.uottawa.ca/Resident**

Rural Rotations

We hope you will enjoy your Family Medicine Rural Rotation (FMR). All residents must complete two core rotations (typically one in each year of residency).

Winchester, Pembroke and Montfort residents: Some residents choose to complete their FMR rotation in an urban setting if their clinic is considered to be in a rural setting. Be sure to speak with your Unit Coordinator about this option.

Contact Information:

Andrea Rawley, Community Coordinator communitydfm@uottawa.ca, 613-562-5800 ext 7667

All residents must register online	Residents will receive an automated email by June 1st with instructions on how to register online for the upcoming academic year. Be sure to read through the various site descriptions on the Virtual Campus and check out the site map. Please note that place- ment changes are difficult to make given the varying availability of each physician.
Considering an alternate site?	If you are considering completing your Family Medicine rural rotation outside of the areas listed on this page and/or will be organizing your own rural placement, you must inform Andrea Rawler arawley@uottawa.ca by e-mail as soon as possible . When registering, residents must choose the OTHER from the list of options for preceptors. Be sure to complete all information requested (ie. preceptor name, contact information, etc.).

Reimbursements

Rural Reimbursement

Residents may be reimbursed a maximum of \$800/core rural rotation for expenses related to their core rural rotation according to the Department of Family Medicine's policy. Please note that this only applies to mile-age and/or accommodation (policy available on the DFM Virtual Campus).

Choosing to commute or find accommodation

When registering, residents must identify if they will require accommodation for the rotation. It is important to note that **you cannot claim both** mileage and accommodation (exception is for Moose Factory). **Maximum of \$800/family medicine rural rotation**

If you choose accommodations	Details will be forwarded to you about your stay and you will only be able to claim your mileage for one round trip (ie. the 1st trip to your rural placement from Ottawa and then claim the return trip back to Ottawa).
If you choose to commute	You can request mileage reimbursement for each day you commuted.

Reimbursements (cont'd)

How to request reimbursement

For mileage	Complete the Rural Rotation Reimbursement form on the Resident Portal (femoral. med.uottawa.ca/Resident) for the days you commuted. This must be done no later than 60 days after the completion of your rural rotation; failure to do so means you will be unable to claim for these expenses later during the year. Please note that you will receive your reimbursement payment only once your rural rotation evaluations on ONE45 have been completed (including the Faculty Evaluation by Resident and the Evaluation of Service).
For accommodation	If your accommodations were organized through the Department, an invoice will be sent directly to the Department for payment. Otherwise, the original receipt (scanned copies will not be accepted) must be sent to Andrea Rawley (see contact information on page). NB Residents going to Moose Factory must submit original receipts for travel/accommoda- tion to/from Kingston.

2nd Parking Reimbursement

Residents can submit their parking receipts for reimbursements as per item 19.7 of the PARO & OCOTH contract.

During a rotation, some residents are required to pay parking at the hospital and then at the unit/community practice, therefore, the residents must pay twice for parking in the same day. Residents will need to pay for their parking at the hospital and at the unit/community practice. These residents can submit their parking receipts and/or monthly parking pass for the unit/community practice with a signed receipt from the parking attendant, for reimbursement. These receipts need to be submitted at the end of every month for reimbursement.

Residents are required to submit their parking receipts for both parking sites at the end of every month (within a month of actual date of parking) for reimbursement. These receipts are remitted to the PGY1 and PGY2 Coordinator. The amount to be reimbursed will be included with your pay cheque, therefore check your pay stubs for the details.

Please note: Parking receipts for attending the monthly Academic Days will not be reimbursed.

Educational Fund Reimbursement

In accordance with current PAIRO regulations you are entitled to 7 days of Educational Leave per year.

Residents are allowed the sum of \$300.00 per year up to a maximum of \$600.00 over the two years. Unspent funds are not claimable after the two years.

Reimbursements (cont'd)

The money must be used for continuing medical education activities during the two academic years, including the purchase of educational materials (i.e. textbooks, journal subscriptions. The purchase of hardware will not be permitted.

- For registration fees and required course material, an official receipt is needed. If not available, the registration form and copy of a credit card statement (if paid by credit card) will serve as the receipt.
- Original receipts are required for all transportation expenses. Boarding passes are to be submitted with original receipts.

A request for reimbursement must be submitted within 20 working days of the return of the conference.

The reimbursement form is available on the DFM eField note/LOA Portal page under reimbursements and must be sub mitted with all original receipts to the PGY1 or PGY2 coordinator.

Resident Undergraduate Teaching Fund

This fund was created on behalf of the Family Medicine residents who contribute to undergraduate medical education teaching. A stipend is offered in recognition for the resident's time and effort invested towards the educational mission of the Faculty of Medicine.

The funds are transferred to the Department and the guidelines for those residents who have participated in the undergraduate medical education activities are as follows:

- Exam fees, elective expenses, etc. can be claimed up to 50% of the total contribution to the fund by the resident
- Medical textbooks and journal subscriptions (100% can be claimed)
- Medical software (100% can be claimed)
- Courses, Workshops etc. (100% can be claimed)
- Computer, PDA or other medical equipment (100% can be claimed)

* *Receipts must be dated after the teaching has been completed.* Original receipts are required for all expenses. Funds are to be spent before completion of your residency.

For transportation, the airline/train/bus ticket serves as the original receipt and should show the method of payment and the amount paid. If your airline ticket is an E-ticket, submit the Boarding Passes and receipt showing the method of payment and the amount paid. The hotel receipt should show a balance of zero or the method of payment.

The reimbursement form is available on the eField Note/LOA Portal page under reimbursements or the Virtual Campus and must be submitted with all original receipts to the PGY1 or PGY2 coordinator.

On-Call Stipend

The on-call system is designed to reimburse residents eligible for a call stipend, as outlined in the PARO-CAHO Collective Agreement found at www.myparo.ca. All information is available at http://med.uottawa. ca/postgraduate/tools-and-resources/call-stipend

Contacts

Administration

Postgraduate Program Manager	Kim Rozon 613-562-5800 x 2056 pgmgrdfm@uottawa.ca
PGY1 and PGY3 Coordinator	Andrea Rawley 613-562-5800 x 7667 yr1dfm@uottawa.ca
PGY2 Coordinator	Brigitte Mannseicher/ Michelle Day 613-562-5800 x 3816 pgy2dfm@uottawa.ca
Postgraduate Program Administrator	Chandra Landry 613-562-5800 x 6160 pgadmindfm@uottawa.ca
Community Coordinator	Andrea Rawley 613-562-5800 x 7667 communitydfm@uottawa.ca

Chairs and Directors

Chair, Department of Family Medicine	Dr. Dianne Delva 613-562-5800 x 2982 chairdfm@uottawa.ca
Postgraduate Program Director	Dr. Ed Seale 613-562-5800 x 6160 eseal2@uottawa.ca
Program Director of Enhanced Skills for Family Practice	Dr. Avik Nath 613-562-5800 x 7667
Director of Operations and Strategic Planning	Cynthia Mar 613-562-5800 x 2738 directordfm@uottawa.ca
Finance Department	613-562-5800 x 3546 financedfm@uottawa.ca

Contacts (cont'd)

Chairs and Directors (cont'd)

Academic Day Director	Dr. David Tobin 613-562-5800 x 6160 dtobin@uottawa.ca
Director of Behavioral Medicine Curriculum	Dr. Alan Ng 613-562-5800 x 6160 ang@bruyere.org
Director of Community Teaching Practices	Dr. David Tobin 613-562-5800 x 7667 dtobin@uottawa.ca
Director of Curriculum (interim)	Dr. Denice Lewis 613-562-5800 x 6899 dlewis@uottawa.ca
Director of Evaluations	Dr. Gary Viner 613-562-5800 x 6160 gviner@toh.on.ca
Director of the Family Medicine Hospital Teaching Service (General)	Dr. Neel Chadha Dr. Elizabeth Gottman 613-562-5800 x 2056
Co-Directors of the Family Medicine Hospital Teaching Service (Civic)	Dr. Margaret Gluszynski and Dr. Jason LeClair 613-562-5800 x 2056
Director of Family Medicine Obstetrics Teaching Service	Dr. Kristine Whitehead 613-562-5800 x 6160 kwhitehead@toh.on.ca
Director of Remediation and Academic Support	Dr. Carol Geller 613-562-5800 x 2056 cgeller@centretownchc.org
Director of Women's Health Curriculum	Dr. Christiane Kuntz 613-562-5800 x 6160 docjock@rogers.com
International Medical Graduate Director	Dr. Dorota Szczepanik 613-562-5800 x 6160 dorotas@dorcia.ca

Family Medicine Units

Unit	Contact Information	Administration
Bruyère Family Medicine Centre	75 Bruyère Street Ottawa, Ontario K1N 5C8 Phone: (613) 241-3344 Fax: (613) 241-1971	 Dr. Jay Mercer – Family Medicine Unit Director Dr. Martha Holt – Unit Program Director Ms. Madona Buffet – Unit Program Coor- dinator Ms. Nathalie LeSaulnier– Unit Program Administrator
Civic Family Health Team	210 Melrose Avenue Ottawa, Ontario K1Y 4K7 Phone: (613) 761-4334 Fax: (613) 761-4453	 Dr. Farhad Motamedi – Unit Director Dr. Deidre Young– Unit Program Director Mr. Pascal Laliberté – Unit Program Coordinator Ms. Veronica Juneau – Unit Program Administrator
Community Unit	Department of Family Medicine 43 Bruyere, 3rd Floor Ottawa, Ontario K1N 5C8 Phone: (613) 562-6335 ext. 1610 Fax: (613) 562-6336	 Dr. David Tobin –Director Community Teaching Practices Ms. Brigitte Mannseicher – Community Coordinator
Riverside Family Health Team	1967 Riverside Drive Ottawa, Ontario K1H 7W9 Phone: (613) 761-8219 Fax: (613) 761-8217	 Dr. Madeleine Montpetit – Unit Director Dr. Margaret Gluszynski - Unit Program Director Ms. Julia Testa - Unit Program Coordina- tor
Primrose Family Medicine Centre	35 Primrose Ave Ottawa, Ontario K1R 0A1 Phone: (613) 230-7788 Fax: (613) 230-7778	 Dr. Paul Crabtree - Unit Director Dr. Jolanda Turley – Unit Program Director Ms. Karen Hopkins – Unit Program Coordinator
Montfort Unit	Montfort Hospital 713 Montreal Road Ottawa, Ontario K1K 0T2 Phone: (613) 746-4621 Fax: (613) 748-4939	 Dr Luis Rivero-Lopez – Directeur de l'Unité de médecine familiale Dre Marjorie Pomerleau – Directrice du programme de résidence Montfort Mlle Diane Lachapelle – Coordonnatrice du programme de résidence
Pembroke Program	705 MacKay Street Pembroke, ON K8A 1G8 Phone: (613) 732-3422	 Dr. Heather Castillo - Program Director Ms. Christine Caron-Goulet - Program Coordinator
Winchester Program	566 Louise Street Winchester, ON K0C 2K0 Phone: (613) 774-2420 ext. 6323	 Dr. Vikas Bhagirath - Program Director Ms. Catherine O'Neill - Program Coordinator

19

Department of Family Medicine

600 Peter Morand Cresc., Suite 201 Ottawa, ON K1G 5Z3 Phone: 613-562-5800 ext 2982 med.uottawa.ca/family

Ғ facebook.com/uOttawaDFM

🛛 @UofODFM

Postgraduate Medical Education

Health Sciences Building 451 Smyth Road, Room 2046 Ottawa, Ontario K1H 8M5 Phone: (613) 562-5413 Fax: (613) 562-5420 pgme@uottawa.ca med.uottawa.ca/postgraduate





uOttawa

Progresser la formation et la recherche en **MÉDECINE FAMILIALE**

Advancing Education and Research in **FAMILY MEDICINE**