Competence Committee Terms of Reference
Pediatric Emergency Medicine Subspecialty Residency Program

Principles

The competence committee (CC) makes decisions and recommendations using highly integrative data from multiple EPA and milestone observations, as well as feedback from clinical practice. A CC allows for an informed group decision-making process where patterns of performance can be collated to reveal a broad picture of a resident's progression toward competence.

A regular review of residents' progress facilitates a developmental approach, supporting resident learning over time. Competence committee will also help identify residents who are not meeting their milestones, and can help to arrange support and coaching for the resident before the resident gets too far off their trajectory. This support can mean, for example, assigning special mentors, extra readings or modified rotations.

In CBD, promotion recommendations are made by the CC away from the individual teacher-learner interactions. By shifting broader promotion discussions to the competence committee, interactions between individual residents and observers can focus on coaching feedback to help improve residents' performance (i.e. assessment for learning).

The committee's purpose is to determine if residents have met the appropriate standard, or are on an appropriate trajectory, to move between stages on the competence continuum and to determine when residents are ready for the Royal College examinations, as well as Certification upon completion of their transition to practice.

The committee is expected to exercise judgement in making progress decisions, i.e., the defined EPAs (Entrustable Professional Activities which are observed and assessed clinical tasks in the ED) and the expected number of observations as a guideline but are not bound to a specific number of assessments. In addition to using milestones and EPAs, the committee decisions will be based on all assessment tools and relevant evidence uploaded into the resident file. Individual committee member experience can only be introduced with appropriate documentation in the resident file. The committee must feel it has adequate information to make holistic judgements on the progression of the resident.

All committee discussions are strictly confidential and only shared on a professional need to know basis. This principle is equivalent to patient confidentiality in clinical medicine.

All committee decisions are to be made in a spirit of supporting each trainee in achieving their own individual progression of competence. The CC has a responsibility to make decisions in the spirit of protecting patients from harm, including weighing a trainee's progress in terms of what they can safely be entrusted to perform with indirect supervision. Some committee discussions must be shared to provide focused support and guidance for the trainee.

The committee has the responsibility to identify the trainees who have can be promoted to the next stage of training, who are progressing within their current stage of training, or not progressing as expected, failing to progress, and who are advised to withdraw form residency after unsuccessful probation.
**See the U of C PGME Remediation, Probation and Dismissal Policy*

Decisions on the achievement of readiness to progress between stages must be documented and presented to the Residency Program Committee (RPC), Program Directors, and resident file.

Members
The competence committee is chaired by a member of the clinical teaching faculty and someone other than the Program Director. This allows the Program Director, as a member of the Committee, to participate fully in discussions without having to balance multiple roles during the review process. The Program Director and academic advisor for the trainee being reviewed are recommended to be in attendance.

Chair:
The chair will set the agenda, in conjunction with the Program Director or their delegate, and maintain order of the meetings. The chair will welcome members, present the agenda and orient the members to the decisions that will be made at the meeting. The chair will remind members of the confidentiality policy prior to the start of the meeting and ensure the meeting is run efficiently and that all trainees on the agenda are discussed. The chair will direct discussion, keeping reviewers on task, and moving toward consensus. When consensus of the members cannot be reached, the chair can move to postpone the decisions (see guideline below on process for the meeting). On completion of the meeting, the chair will ensure that documentation of the status of the trainee is shared with the RPC, Program Director and resident file.

Academic Advisor:
Each trainee selected for discussion at the competence committee meeting is assigned a designated Academic Advisor (AA). The AA is responsible for completing a detailed review of progress of the trainee based on all assessment tools, observations, completed EPAs and preceptor feedback documented in the resident file. The AA will provide a succinct synthesis and impression of the trainee's progress to the competence committee. The AA will then propose a resolution on that trainee's status going forward. If there is concern raised about resident performance by the AA or if they are unsure what status to propose to the committee, they may request a second review by another member of the committee. They will then jointly present the trainee at the PEM CC meeting. (See separate document Academic Advisor Terms of Reference for details).

Secondary Reviewer:
All other committee members are responsible for reviewing all trainees on the agenda and are required to come prepared to discuss the trainee's progress.

Resident Advocate:
The Resident Advocate is a junior staff member and secondary reviewer on the CC who is a recent graduate of a Royal College accredited PEM training program who serves as a voice to advocate for potential challenges that the resident may face due to program related issues. They can also act as an unbiased representative voice for any given resident should the resident choose to reach out to the Resident Advocate CC member. The Resident Advocate should be within their first 2-5 years of practice.

Term of Office:
The PEM CC members will be invited to participate at the discretion of the Program Director. Appointments are typically for a three-year term, renewable once. At the discretion of the Program Director and CC Chair, a third term may be considered in cases of close proximity to accreditation. The chair will be determined yearly and may be delegated to another committee member for an individual meeting.

Meetings

The competence committee meets every quarter. Every trainee in the program is discussed during the meeting, even if they are not up for review. During the meeting, each trainee is considered in turn, with the AA presenting their review, displaying relevant reports and sharing important quotes from comments recorded in the trainee's file. The AA concludes by proposing a *status* for the trainee going forward in the program. The status can be any of the following:

- Full promotion to next stage of training.
- Progressing as expected within a stage of training
- Monitor progress within this stage of training
- Not progressing as expected with minor concerns noted (learning plan required)
- Failure to progress with major concern noted (formal mediation required)
- Failure to progress to next stage of residency training following unsuccessful remediation process
- Advised withdrawal from the residency training program following unsuccessful probation process
- Ready to challenge the Royal College Examination
- Ready to enter independent Practice.
- Progressing as expected, minor concern noted - advise more purposeful observation of a specific milestone or personal learning plan (PLP).
- Not progressing as expected – formal remediation recommended.
- Failure to progress to next stage of residency – this can only be advised after an unsuccessful remediation process.
- Advise withdrawal from the residency training program – this can only be advised after a formal unsuccessful probation process.

If another committee member seconds the proposed status of the trainee, all members are invited to discuss the motion. The Chair will call a vote to the proposed recommendation of the primary reviewer. If the recommendation is not seconded or the motion does not achieve a majority of votes, the Chair will then request another motion regarding the trainee. This process will continue until a majority of the PEM CC members support the status motion. If a member is a longitudinal preceptor or resident coach for a trainee, they will not participate in the status vote.
A status decision can only be deferred if additional information is required. The deferred decision must be revisited within 4 weeks.

Agenda Development

Trainees are selected for a planned competence committee meeting by the chair of the committee, the program director or their delegate. This scheduling occurs in advance of the committee meeting so that assigned reviewers (see below) have sufficient time to review the resident file prior to the meeting.

Trainee Selection for the Meeting

Trainees may be selected for review based on:

- A regularly timed review.
- A concern has been flagged.
- Completion of stage requirements and eligible for promotion or completion of training.
- Readiness for the Royal College exam.
- A significant delay or acceleration in the trainee's progress or academic performance.

Quorum

There should be at least 50% attendance from the members of the competence committee to achieve quorum. The program director is present for all discussions but a non-voting member.

Reporting

The competence committee reports outcomes of discussions and decisions to the RPC and Program Director as soon as possible after the committee decision. The status decision for the trainee must be communicated to the Program Director and trainee and must be documented in the resident file. The primary reviewer/academic advisor assigned to a resident will meet with them after the CC meeting recommendations have been ratified by the RPC. Changes to the trainee's learning plan, assessments, or rotation schedule will be developed with the resident, the PD, and academic advisor and implemented as soon as is feasible.

Appeals Process

Resident appeals should comply with the U of C PGME Resident Appeals Policy. An appeal of the PEM CC will be made to the RPC.