

EDUCATION ACCOUNTABILITY FRAMEWORK

Department of Anesthesia



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**DALHOUSIE
UNIVERSITY**
Inspiring Minds
Faculty of Medicine



Capital Health

EXECUTIVE SUMMARY

In 2007/2008 Dalhousie University's Department of Anesthesia engaged all departmental members in identifying the actions necessary to support its vision of excellence. Subsequent sessions in 2008/2009 and in 2009/2010 reaffirmed the educational imperative to such a vision.

As a result and in-keeping with its strategic direction of transparency and accountability, educational faculty undertook the groundbreaking work of developing an *Education Accountability Framework* in the spring of 2010.

The result is a framework that addresses the integrated issues of identifying and measuring/reporting performance and productivity as they relate specifically to education. It serves as an all-encompassing snapshot of the requisite preparation and processes faculty engage in to create a worthwhile experience for all learners. It provides an examination of what constitutes success and it speaks to the criticality of learner/faculty feedback.

Lively, far-reaching discussion was the hallmark of the working sessions as front-line educators worked collaboratively with administrative staff and the department's executive director in determining activities, outputs and indicators (*see Appendix A*).

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WHAT IS AN ACCOUNTABILITY FRAMEWORK?

An accountability framework is a written document that articulates activities and establishes clear standards and expectations against which we can measure achievements and evaluate results. The Department of Anesthesia has used the *Treasury Board of Canada* model and has thus far modified it for use by the Department of Anesthesia Office of Research, Clinical Services and Blood Management Services. It has proven to be an effective tool in identifying, monitoring and tracking salient outcomes and productivity in these three areas.

The uniqueness of the Department of Anesthesia's educational needs and activities once again necessitated the modification of the model. The **Education Accountability Framework**, in keeping with the Office of Research, Clinical Services and Blood Management Service frameworks, has four (4) sections:

- 1. Profile:** In this section, the necessity for an accountability framework is addressed as are its advantages and need within the departmental and university context. In addition, the Office of Education's background is described and a snapshot of departmental functions is provided in the form of an organizational chart.
- 2. Results Chain:** In this section, an overview of a flow chart that logically links **inputs**, or resources devoted to educational endeavours, to department specific educational **activities** to short and long term **outputs/results** and overall **outcomes** is provided. A more comprehensive results chain is included in *Appendix C*.
- 3. Measurement and Reporting Plan:** A key element of any accountability framework is the identification of the most appropriate indicators, which, in this case, relate to educational activity. In this section, the educational indicators are provided as are the more detailed targets necessary to measure an indicator's success. The measurement tools are provided as is the person/office responsible for the measurement.
- 4. Evaluation Strategy:** The purpose of measuring and reporting results is to inform sound decision making and performance management. The evaluation strategy outlines a cyclical, iterative strategy, or life cycle model, for ongoing learning from results and strategy adjustments as required.

The information contained in each of these sections is specific to the educational work being done by the Department of Anesthesia at Capital Health.

APPROACH

In the spring of 2010, Department of Anesthesia educators and the Executive Director of Anesthesia formed a working group (*see contributors, Appendix A*) that met regularly over a four-week period. This group populated the department's accountability framework template with activities and indicators unique to the learning process that is the art and science of anesthesia medicine.

WHY AN ACCOUNTABILITY FRAMEWORK?

The Department of Anesthesia initially identified the need for an education accountability framework during departmental strategic planning sessions in 2007, 2008 and 2009. It is cited as an action in our strategic directions document (10/11).

The accountability framework serves many purposes:

- It supports our values of transparency and accountability by explaining our work, and establishing clear standards and expectations against which performance is reported.
- It enhances the credibility of our academic education program(s) with stakeholders.
- It supports a management culture based on ongoing learning and results while offering the flexibility of regular revision and updating.
- It supports our academic funding plan (AFP) requirements to the Department of Health.

The IWK Health Centre and the QEII Health Sciences Centre AFPs stipulate that the development and implementation of an approved accountability framework is an important component of the respective Agreements.

BACKGROUND/CONTEXT FOR THE OFFICE OF EDUCATION

The Department of Anesthesia is an academic department of the Faculty of Medicine at Dalhousie University. As such, its mandate is to develop “*highly competent, caring and socially responsible physicians, educators and researchers through programs of the highest academic quality, within a diverse clinical and research-rich environment*” (**Faculty of Medicine Mission Statement**).

The department consists of 96 full and part-time anesthesiologists working at the following sites:

- Queen Elizabeth II Health Sciences Centre
- IWK Health Centre
- Dartmouth General Hospital
- Hants Community Hospital
- Saint John Regional Hospital

At present, physicians have protected time to devote to their educational pursuits. Other anesthesiologists have also been supported through protected time on an ad hoc basis to engage in professional development. Core areas of teaching include undergraduate, postgraduate and professional development.

¹ The model for this accountability framework is adapted from Treasury Board of Canada Secretariat, *Guide for the Development of Results-based Management and Accountability Frameworks*, August 2001

To advance the academic agenda of the department in the area of education, the organizational structure of the department was adapted to include the Office of Education in 2009. New positions were developed to facilitate the strategic directions for education, including a managing director and several medical director positions.

In academia in general, there is little consensus on the best way to measure educational productivity. There are generally no indicators reported for educational activity other than hours engaged in teaching. The education accountability framework developed for the Department of Anesthesia attempts to address this gap by recognizing the value of the full scope of educational activities, from engaging in the process of curriculum development, to teaching a course, to providing feedback to learners, to influencing clinical best practice.

GOVERNANCE STRUCTURE

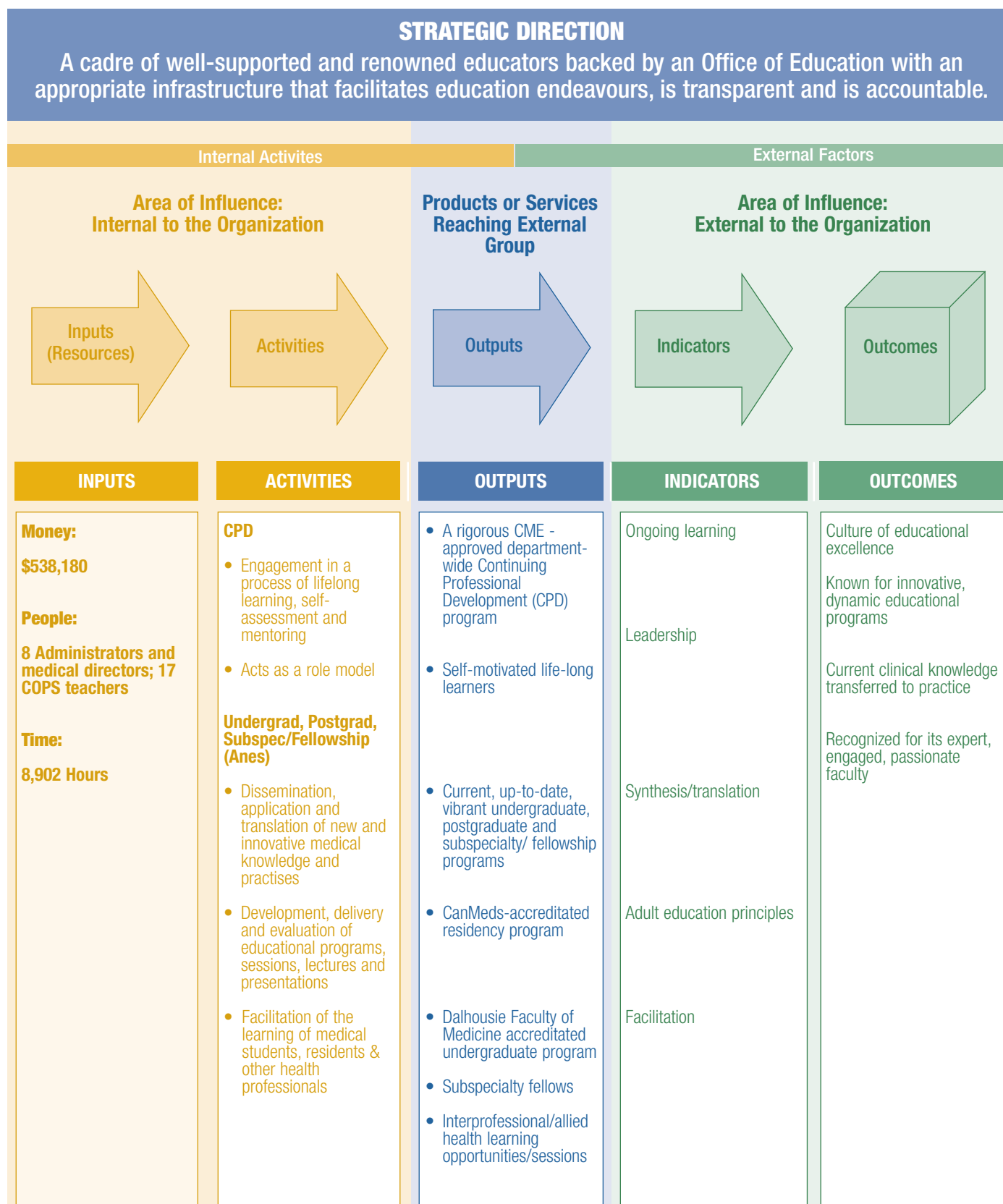
The Head of the Department of Anesthesia has overall accountability for the academic mandate of the department and reports to the Dean of the Faculty of Medicine. Concurrently, the Head also serves as the Chief of the Department of Anesthesia for the Capital District Health Authority. In these roles, the Head/Chief is responsible to the provincial government through the academic funding plan agreement between the QEII Health Sciences Centre and the Nova Scotia Department of Health to manage, among others, the educational deliverables outlined therein.

The department has constituted an Anesthesia Education Advisory Committee responsible to advise the Executive Director and the Office of Education on matters related to education. The advisory committee consists of representatives of the provincial government, other clinical departments and anesthesiologist educators.

Currently, educators are accountable to the Head on academic matters and communicate through the Office of Education on administrative matters (e.g. budget, staff, annual reporting) (*see Appendix B for an organizational chart for the education infrastructure*).

Reporting through the Executive Director, the Managing Director of Education manages the day-to-day operations and operationalizes the Office of Education strategic plan. The Education Coordinator reports to the Managing Director and is responsible for assisting educators to organize and ensure the successful delivery of a wide variety of educational programs.

RESULTS CHAIN: A SNAPSHOT



RESULTS CHAIN: A SNAPSHOT

INPUTS	ACTIVITIES	OUTPUTS	INDICATORS	OUTCOMES
Money: \$538,180 People: 8 Administrators and medical directors; 17 COPS teachers Time: 8,902 Hours	<ul style="list-style-type: none"> Completion of an assessment/ evaluation process which includes learner & faculty feedback Utilization of a variety of innovative learning methodologies Preparation of learners for exams Administrative <ul style="list-style-type: none"> Participation in the administrative functions/processes necessary to support learners All Learners <ul style="list-style-type: none"> Ethical decision-making processes and practices Leadership development 	<ul style="list-style-type: none"> Collaborative partnerships/practises Competent practitioners Vibrant curriculum and engaged educators Successful learners and competent, safe practitioners An infrastructure that contributes to an efficient, effective learning experience Appropriate candidate selection Leaders external to and within the department 	Competence Innovation Mentorship Management Leadership	Culture of Educational Excellence Known for innovative, dynamic educational programs Current clinical knowledge transferred to practice Recognized for its expert, engaged, passionate faculty

Refer to *Appendix C* for complete Results Chain

MEASUREMENT AND REPORTING PLAN

A comprehensive list of departmental educational activities and indicators identified in the *Results Chain* have been categorized in the *Measurement & Reporting Plan* according to the various educational functions to be found within the department. These are: continuing professional development (CPD); postgraduate (anesthesia); postgraduate (non-anesthesia); undergraduate; subspecialty; interprofessional/allied health; postgraduate (anesthesia residency); other university/clinical departments and administrative functions.

The measurement tools to be used and the person/office responsible for gathering the relevant data are also identified in the *Measurement & Reporting Plan*.

A preliminary report based on the indicators/targets identified will be provided to the Head of the department in April of each year with a final report in September/October of each year. This will serve to inform the Department of Anesthesia strategic planning process and be consistent with CDHA's business planning cycle. Key stakeholders for reporting purposes include the Faculty of Medicine Department Head, the Executive Director, the Nova Scotia Department of Health and the public through the Department of Anesthesia's Annual Report.

Category/Activity	Indicator	Target	Measurement Tool	Responsibility
ALL LEARNERS				
<ul style="list-style-type: none"> Design, prepare, deliver, evaluate & provide feedback to learners 	<ul style="list-style-type: none"> Adherence to adult learning principles Facilitation Learner satisfaction Synthesis/translation 	<p>90% of learners are satisfied with their learning experience</p> <p>90% of learners indicate ability to apply material to their work environment</p>	<p>Questionnaires at three (3), six (6), and nine (9) months post learning experience</p>	Office of Education
<ul style="list-style-type: none"> Engage in ethical decision-making processes and practices 	<ul style="list-style-type: none"> Ethical practice Personal values/beliefs examined Maintenance of privacy & confidentiality Conflict of interest situations avoided Learners work within their scope of practice 	<p>Two (2) rounds conducted with focus on ethical considerations</p> <p>Two (2) case studies presented with focus on ethical considerations</p> <p>One (1) ethical decision-making workshop delivered</p>	<p>Office of Education annual activity report & audit</p>	
<ul style="list-style-type: none"> Develop leaders 	<ul style="list-style-type: none"> Leadership Mentorship 	<p>An active, formalized mentorship program exists</p> <p>One (1) faculty per year attends leadership development program</p> <p>One (1) national symposium on airway management to be followed by one (1) national meeting to establish airway standards</p> <p>85% of anesthesia-specific learners assume leadership roles internal to the department eg. chief resident</p> <p>15% of anesthesia-specific learners assume leadership roles external to the department</p>	<p>Mentorship Program/annual report audit</p> <p>CVs</p>	
<ul style="list-style-type: none"> Complete assessment (evaluation) process inclusive of learner feedback 	<ul style="list-style-type: none"> Formative & summative evaluations 	<p>80% of all internal evaluation forms are completed on time</p>	<p>Bimonthly audits</p> <p>One 45 audit</p>	
<ul style="list-style-type: none"> Utilize a variety of innovative learning methodologies 	<ul style="list-style-type: none"> Innovation 	<p>Innovative methodologies are evident in needs assessments, curriculum designs, e.g. simulation, presentations/lectures & feedback processes</p>	<p>Annual audit and survey</p>	

Category/Activity	Indicator	Target	Measurement Tool	Responsibility
ALL LEARNERS (CONT'D.)				
<ul style="list-style-type: none"> • Prepare learners for exams • Engage in administrative functions/ processes 	<ul style="list-style-type: none"> • Competence • Management 	<p>100% success rate on exams</p> <p>80% attendance at meetings, e.g. RTC, Education Advisory, etc.</p> <p>100% of requests for reference letters are processed within 3 business days (form letters)</p> <p>100% face to face ITER feedback</p> <p>90% of learners satisfied with registration, orientation & mentorship processes</p> <p>100% of faculty participate in various processes when requested, e.g. CARMS, medical school interviews</p> <p>CARMS deadlines are met 100% of the time</p> <p>100% of faculty maintain up-to-date teaching dossiers</p> <p>15% of faculty are Professors</p> <p>30% of faculty are Associate Professors</p> <p>10% of faculty hold cross-appointments</p> <p>40% of faculty are Assistant Professors</p> <p>15% of faculty are Lecturers</p>	<p>College of Physicians & Surgeons pass rate</p> <p>Biannual monitoring of attendance sheets</p> <p>Annual audit</p> <p>Annual satisfaction surveys/questionnaires</p> <p>Annual audit; department head's file entitled "FoM Annual Calendar"</p>	Office of Education
CONTINUING PROFESSIONAL DEVELOPMENT				
<ul style="list-style-type: none"> • Engage in process of life-long learning, self-assessment and mentoring 	<ul style="list-style-type: none"> • Ongoing lifetime learning • Realistic self appraisal • Intellectual/personal growth 	<p>An active CPD program inclusive of Grand Rounds, Journal Club, internal workshops and seminars etc. exists</p> <p>90% of available staff & learners attend Grand Rounds; 80% of target audience attend applicable sessions eg. thoracics attend thoracic-related journal club</p> <p>90% of planned CPD sessions occur</p>	<p>Office of Education annual activity report</p> <p>Biannual attendance sheets</p> <p>Annual audit files</p> <p>Annual satisfaction surveys</p> <p>Post-session evaluations</p> <p>Annual audit</p>	Office of Education

Category/Activity	Indicator	Target	Measurement Tool	Responsibility
CONTINUING PROFESSIONAL DEVELOPMENT (CONT'D.)				
<ul style="list-style-type: none"> Disseminate, apply and translate new and innovative medical knowledge & practices 	<ul style="list-style-type: none"> Learner satisfaction 	95% of all faculty within the department are compliant with CME requirements 90% of participants indicate satisfaction with CPD sessions 100% of faculty attend a feedback workshop within the first two (2) years of employment 100% of faculty maintain current ACLS certification	Office of Education Annual Activity Report	Office of Education
POSTGRADUATE ANESTHESIA RESIDENCY PROGRAM				
<ul style="list-style-type: none"> Ensure safe patient care practices Develop, deliver and evaluate educational programs Facilitate the learning of students, residents & other health professionals in an atmosphere of respect for diversity 	<ul style="list-style-type: none"> Safe care Synthesis/translation Learner satisfaction Learner success Learner demand Faculty engagement 	100% of patients cared for by learners suffer no adverse events directly related to learner-provided care 100% of residents are engaged in or have completed a research project 75% of available residents attend scheduled seminars, workshops etc. 100% of residents complete required clinical rotations 100% of faculty guide and teach residents when asked An active Simulation Program is available Accreditation is maintained 80% of residents indicate satisfaction with their program inclusive of Wed. afternoon sessions Curriculum is reviewed and updated every two (2) to three (3) years 95% of ITERs are completed with learner face-to-face feedback within 60 days of rotation completion End of rotation ITERs are provided during a face-to-face feedback session	Biannual Report (April/October) Monthly quality assurance report Satisfaction surveys after each unit Annual residency research coordinator report Monthly attendance Evaluation forms Monthly One 45 audits Annual satisfaction surveys/focus group Annual audits Bimonthly One 45 audits Bimonthly audits	Office of Education

Category/Activity	Indicator	Target	Measurement Tool	Responsibility
POSTGRADUATE ANESTHESIA RESIDENCY PROGRAM (CONT'D.)				
		100% exam success rate	Annual College of Physicians & Surgeons results	Office of Education
		Successful completion of pre/post tests	Audit	
		100% of residents maintain a procedure log	Annual audit	
		90% of residents complete the program	End of program results	
NON-ANESTHESIA RESIDENTS				
<ul style="list-style-type: none">• Ensure safe patient care practices• Develop, deliver and evaluate educational programs• Facilitate the learning of students, residents & other health professionals in an atmosphere of respect for diversity	<ul style="list-style-type: none">• Synthesis/translation• Learner satisfaction• Learner success• Learner demand• Faculty engagement	<div>80% of learners are satisfied with their rotation</div> <div>100% of mandatory rotations are filled</div> <div>60% of elective rotations are filled</div> <div>100% of ITERs are completed within 60 days of rotation completion</div>	<div>Satisfaction surveys at the end of each rotation</div> <div>Biannual audit</div> <div>One 45</div> <div>Biannual audit</div>	Office of Education
UNDERGRADUATES				
<ul style="list-style-type: none">• Ensure safe patient care practices• Develop, deliver and evaluate educational programs• Facilitate the learning of students, residents & other health professionals in an atmosphere of respect for diversity	<ul style="list-style-type: none">• Synthesis/translation• Learner satisfaction• Learner success• Learner demand• Faculty engagement	<div>One (1) to two (2) studentships recruited per summer</div> <div>100% of available rotations are filled with a waiting list of interested students</div> <div>80% of undergraduate students indicate satisfaction with their Anesthesia educational experience</div> <div>Sufficient resources (money, people, time) necessary to deliver on mandate are available</div> <div>Trend indicates maintenance and/or change in faculty teaching hours</div> <div>55% of undergraduates who complete an elective apply for an Anesthesia position with Dal (depends on availability of CARMS data)</div>	<div>Annual audit</div> <div>Annual One 45 audit</div> <div>CARMS data if available</div> <div>Satisfaction surveys/ questionnaires</div> <div>Monitor COPS budgetary support</div> <div>Annual tracking of COPS teaching hours</div> <div>Annual audit</div>	Office of Education

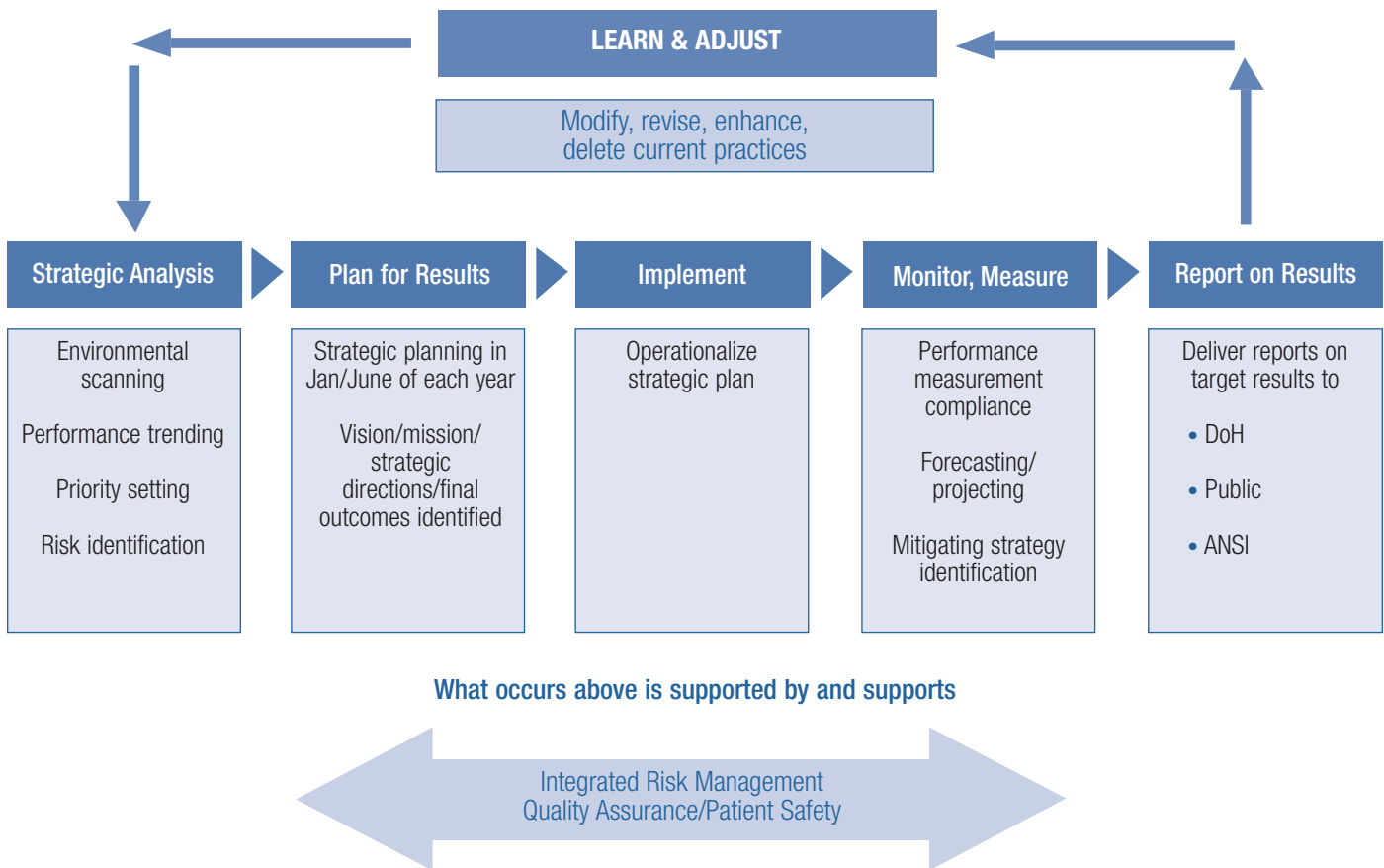
Category/Activity	Indicator	Target	Measurement Tool	Responsibility
SUBSPECIALTY/FELLOWSHIP				
<ul style="list-style-type: none"> • Ensure safe patient care practices • Develop, deliver and evaluate educational programs • Facilitate the learning of students, residents & other health professionals in an atmosphere of respect for diversity 	<ul style="list-style-type: none"> • Fellowship demand/recruitment • Learner satisfaction 	<p>Trend demonstrates increase in # of applicants year over year</p> <p>100% of fellows indicate satisfaction with their learning experience</p>	<p>Office of Education annual report</p> <p>Satisfaction survey completed midway through and at end of Fellowship program</p>	Office of Education
INTERPROFESSIONAL ALLIED HEALTH				
<ul style="list-style-type: none"> • Ensure safe patient care practices • Develop, deliver and evaluate educational programs • Facilitate the learning of students, residents & other health professionals in an atmosphere of respect for diversity 	<ul style="list-style-type: none"> • Learner satisfaction 	<p>90% of learner satisfaction with the educational experience provided</p> <p>100% of employer-sponsored learners are satisfied that the educational experience meets workplace needs</p>	<p>Satisfaction survey completed at end of learning activity</p> <p>Focus group conducted every two (2) years</p>	Office of Education
GRADUATE STUDENTS				
<ul style="list-style-type: none"> • Ensure safe patient care practices • Develop, deliver and evaluate educational programs • Facilitate the learning of students, residents & other health professionals in an atmosphere of respect for diversity 	<ul style="list-style-type: none"> • Graduate demand/recruitment • Learner satisfaction 	<p>One (1) to two (2) graduate students supervised by faculty per year</p>	<p>Track & include in Office of Education annual report</p>	Office of Education
OTHER UNIVERSITY/CLINICAL DEPARTMENTS				
<ul style="list-style-type: none"> • Ensure safe patient care practices • Develop, deliver and evaluate educational programs • Facilitate the learning of students, residents & other health professionals in an atmosphere of respect for diversity 	<ul style="list-style-type: none"> • Recognition of faculty expertise 	<p>10 or more requests per year to facilitate/present to other Dalhousie departments and at forums external to Dalhousie</p>	<p>Annual audit of teaching dossier</p>	Office of Education

EVALUATION STRATEGY: LIFE CYCLE MODEL

The life cycle approach to evaluation aims to establish a culture rooted in results, ongoing evaluation and learning.

The life cycle approach to evaluation and delivering results supports:

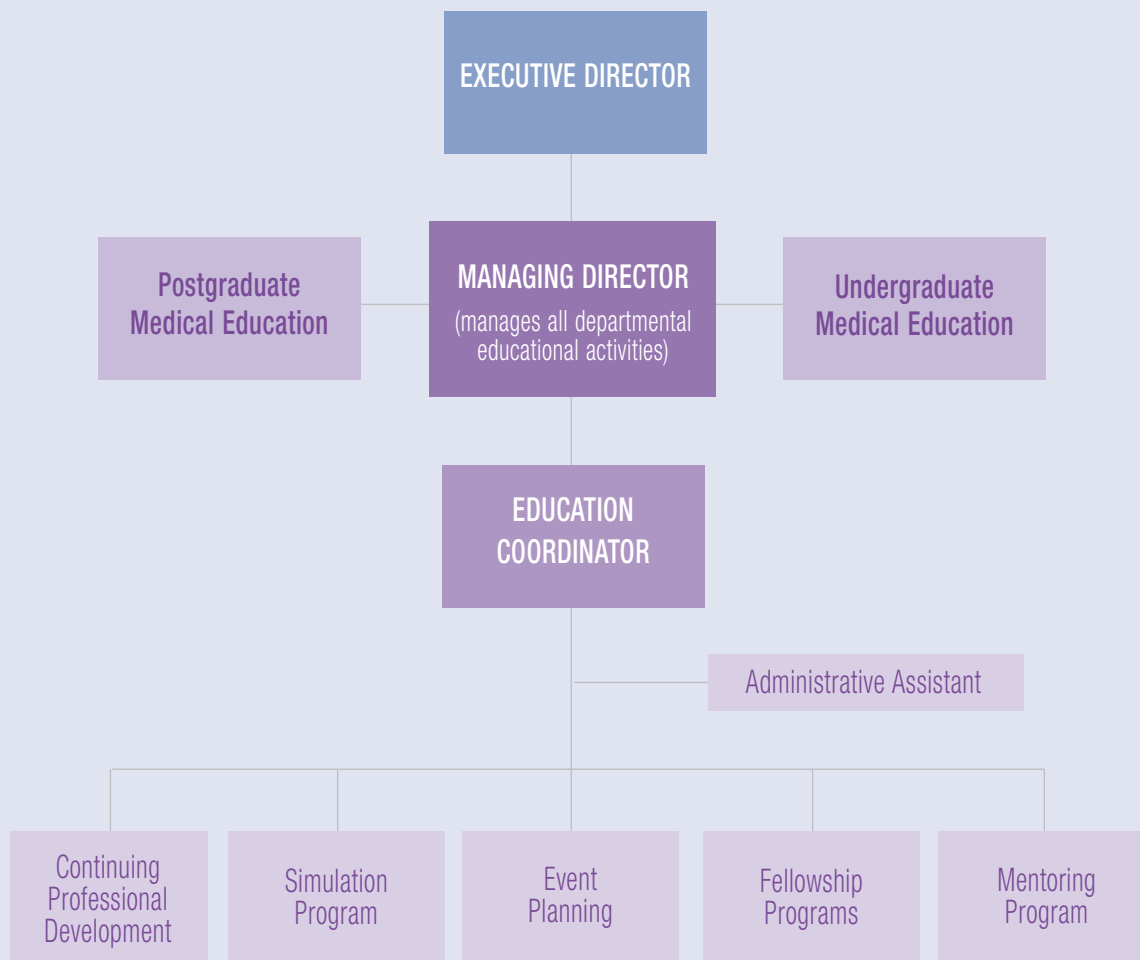
- Results that are clearly defined and aligned with departmental priorities
- Early detection of variances requiring adjustment/modifications
- Clear reporting of results
- Use of data/results to inform strategic analysis and priority setting



Contributors

Dr. Ian Beauprie	Medical Director of Fellowships
Megan Chipp	Education Coordinator
Dr. Janice Chisholm	Associate Residency Program Director
Laura Harris Buffett	Managing Director
Marilyn Girouard	Executive Director (<i>Facilitator</i>)
Kim Lake	Education Administrative Assistant
Dr. Adam Law	Medical Director of Simulation
Dr. Peter MacDougall	Medical Director of CPD
Dr. Ben Schelew	Undergraduate Program Director
Dr. Narendra Vakharia	Residency Program Director
Dr. Patty Livingston	Medical Director, Global Health

DEPARTMENT OF ANESTHESIA OFFICE OF EDUCATION



COMPREHENSIVE RESULTS CHAIN

INPUTS	ACTIVITIES	OUTPUTS	INDICATORS	OUTCOMES
Money: \$538,180 People: 8 Administrators and medical directors; 17 COPS teachers Time: 8,902 Hours	<p>Engage in process of lifelong learning, self assessment and mentoring</p> <p>Disseminate, apply and translate new and innovative medical knowledge & practises</p> <p>Develop, deliver and evaluate educational programs</p> <p>Facilitate the learning of students, residents and other health professionals in an atmosphere of respect for diversity</p> <p>Ensure safe patient care practises</p>	1) Continuous Professional Development <ul style="list-style-type: none"> • Grand Rounds scheduling, facilitation and presentations • Internal workshops, conferences, seminars • Resuscitation workshops • Journal Club scheduling, facilitation and presentations • Knowledge translation workshops/teaching • Needs assessment completion • Mentor/precepting junior faculty, residents and medical students • Delivery of interprofessional pain conferences X two (2) • Delivery of blood management conferences (2), workshops (1) & lunch speaker series (4-6) • Delivery of global outreach conference • Annual CAS Atlantic Regional Meeting • Pain Network Speaker Series • Pain rounds • Collaborative Pain Care Network • Simulation sessions • ACLS certification 	<ul style="list-style-type: none"> • An active CPD program inclusive of Grand Rounds, Journal Club, internal workshops and seminars, etc. exists • 90% of available staff & learners attend Grand Rounds; 80% of target audience attend applicable sessions, e.g. thoracics attend thoracic-related journal club • 90% of planned CPD sessions occur • 95% of all faculty within the department are compliant with CME requirements • 95% of participants indicate satisfaction with CPD sessions • 100% of faculty attend a feedback workshop within the first two (2) years of employment • 100% of faculty maintain current ACLS certification 	<ul style="list-style-type: none"> • Culture of educational excellence • Known for innovative, dynamic educational programs • Current clinical knowledge transferred to practice • Recognized for its engaged, passionate faculty of experts

INPUTS	ACTIVITIES	OUTPUTS	INDICATORS	OUTCOMES
Money: \$538,180 People: 8 Administrators and medical directors; 17 COPS teachers Time: 8,902 Hours	<p>Engage in process of lifelong learning, self assessment and mentoring</p> <p>Disseminate, apply and translate new and innovative medical knowledge & practises</p> <p>Develop, deliver and evaluate educational programs</p> <p>Facilitate the learning of students, residents and other health professionals in an atmosphere of respect for diversity</p> <p>Ensure safe patient care practises</p>	2) Postgraduate a) Residency Program (Anesthesia) <ul style="list-style-type: none"> • Preparatory work • Clinical (OR) teaching • Conduct seminars • Supervise resident research projects • Complete daily ITERs • Teach in simulation centre • Pain specialty curriculum • Critical Incident Stress Debriefing sessions • Global health residency opportunities • Career counseling • "Anesthesia in Challenging Environments" Workshop • Grand Rounds • On-line programs • Canadian patient safety seminars • Drug error session(s) 	<ul style="list-style-type: none"> • 100% of residents are engaged in or have completed a research project • 75% of available residents attend scheduled seminars, workshops, etc. • 100% of residents complete required clinical rotations • 100% of faculty guide & teach residents when asked • An active simulation program is available • Accreditation is maintained • 80% of residents indicate satisfaction with their program inclusive of Wed. afternoon sessions • Curriculum is reviewed and updated every 2-3 years • 95% of ITERs are completed with learner face-to-face feedback within 60 days of rotation completion and at end of rotation • 100% exam success rate • Successful completion of pre/post tests • 100% of residents maintain a procedure log • 90% of residents complete the program 	<ul style="list-style-type: none"> • Culture of educational excellence • Known for innovative, dynamic educational programs • Current clinical knowledge transferred to practice • Recognized for its engaged, passionate faculty of experts

INPUTS	ACTIVITIES	OUTPUTS	INDICATORS	OUTCOMES
Money: \$538,180 People: 8 Administrators and medical directors; 17 COPS teachers Time: 8,902 Hours	Engage in process of lifelong learning, self assessment and mentoring Disseminate, apply and translate new and innovative medical knowledge & practises Develop, deliver and evaluate educational programs Facilitate the learning of students, residents and other health professionals in an atmosphere of respect for diversity Ensure safe patient care practises	b) Non-Anesthesia Residents) <ul style="list-style-type: none"> Airway seminars Clinical (OR) teaching Pain Clinic rotation ITER completion 	<ul style="list-style-type: none"> 80% of learners are satisfied with their rotation 100% of mandatory rotations are filled 60% of elective rotations are filled 100% of ITERs are completed within 60 days of rotation completion 	<ul style="list-style-type: none"> Culture of educational excellence Known for innovative, dynamic educational programs Current clinical knowledge transferred to practice Recognized for its engaged, passionate faculty of experts
		3) Undergraduate <ul style="list-style-type: none"> COPS teaching Clinical (OR) teaching Resident-taught airway courses; seminars ITER completion Research-related support/guidance FoM career planning session; career night participation Clerkship development Pain week curriculum Summer studentship Med I & II preceptors 	<ul style="list-style-type: none"> One (1) to two (2) studentships recruited per summer 100% of available rotations are filled with a waiting list of interested students 80% of undergraduate students indicate satisfaction with their anesthesia educational experience Sufficient resources (money, people, time) necessary to deliver on mandate are available Trend indicates maintenance and/or increase in faculty teaching hours 55% of undergraduates who complete an elective apply for an Anesthesia position with Dal (depends on availability of CARMS data) 	
		4) Subspecialty/ Fellowship <ul style="list-style-type: none"> Clinical/research teaching & guidance Fellowship curriculums Journal Club scheduling/facilitation Pain specialty curriculum 	<ul style="list-style-type: none"> Trend demonstrates increase in # of applicants year over year 100% of fellows indicate satisfaction with their learning experience 	

INPUTS	ACTIVITIES	OUTPUTS	INDICATORS	OUTCOMES
Money: \$538,180 People: 8 Administrators and medical directors; 17 COPS teachers Time: 8,902 Hours	Engage in process of lifelong learning, self assessment and mentoring Disseminate, apply and translate new and innovative medical knowledge & practises Develop, deliver and evaluate educational programs Facilitate the learning of students, residents and other health professionals in an atmosphere of respect for diversity Ensure safe patient care practises	5) Interprofessional/ Allied Health (RTs, AAs, nurses, paramedics) <ul style="list-style-type: none"> Clinical (OR) teaching A.T. program teaching Teach & evaluate AAs Mentor as needed Pain clinic rotation Pain Resource Program (nurses) 	<ul style="list-style-type: none"> 90% learner satisfaction with the educational experience provided 100% of employer-sponsored learners are satisfied that the educational experience meets workplace needs 	<ul style="list-style-type: none"> Culture of educational excellence Known for innovative, dynamic educational programs Current clinical knowledge transferred to practice Recognized for its engaged, passionate faculty of experts
		6) Graduate Students (Masters, PhD) <ul style="list-style-type: none"> Committee member/supervisor Thesis supervision Mentor/advise/coach as needed 	<ul style="list-style-type: none"> One (1) to two (2) graduate students supervised by faculty per year 	
		7) Other University/Clinical Departments <ul style="list-style-type: none"> Seminar facilitation Invited lectures/talks/presentations 	<ul style="list-style-type: none"> 10 or more requests per year to facilitate/present to other departments 	
Money: \$538,180 People: 8 Administrators and medical directors; 17 COPS teachers Time: 8,902 Hours	Engage in process of lifelong learning, self assessment and mentoring Disseminate, apply and translate new and innovative medical knowledge & practises Develop, deliver and evaluate educational programs Facilitate the learning of students, residents and other health professionals in an atmosphere of respect for diversity Ensure safe patient care practises Engage in ethical decision-making processes and practises Develop leaders	8) All Learners <ul style="list-style-type: none"> Rounds that focus on ethical considerations, e.g. use of case studies Use of simulation to illustrate ethical issues, e.g. case studies/ simulated patient Ethical decision-making workshop Attendance at leadership programs, e.g. Physician & Management Program Mentorship Program Development of leadership track in residency program Schedule national symposium on airway management Convene a national Canadian Airway Standards meeting 	<ul style="list-style-type: none"> Two (2) rounds conducted with focus on ethical considerations Two (2) case studies presented with focus on ethical considerations One (1) ethical decision-making workshop Mentorship program has a minimum of two (2) mentor/mentee pairings One (1) person per year attends a leadership program 	<ul style="list-style-type: none"> Culture of educational excellence Known for innovative, dynamic educational programs Current clinical knowledge transferred to practice Recognized for its engaged, passionate faculty of experts

INPUTS	ACTIVITIES	OUTPUTS	INDICATORS	OUTCOMES
Money: \$538,180 People: 8 Administrators and medical directors; 17 COPS teachers Time: 8,902 Hours	<p>Complete assessment (evaluation) process inclusive of learner feedback</p> <p>Utilize a variety of innovative learning methodologies</p> <p>Prepare learners for exams</p> <p>Engage in administrative functions/processes</p>	<ul style="list-style-type: none"> • ITER completion • Formative and summative feedback provided • Simulation delivered training sessions • Exam preparation sessions • Mock orals sessions • Language training • Stress management sessions • Meeting attendance, e.g. RTC • Letters of reference • Participation in CARMS, career night, med school interviews, Fellowship recruitment • Collaboration with community college re: ATS, and School of Health Professions re: AAs • Exchange of fellows • Orientation program • Mentorship program • Faculty Development Day 	<ul style="list-style-type: none"> • 80% of all internal evaluation forms are completed on time • Innovative methodologies are evident in needs assessments, curriculum designs, e.g. simulation, presentations/lectures and feedback processes • 100% success rate • 80% attendance at meetings, e.g. RTC, education advisory, etc. • 100% of reference letters are processed within three (3) business days of request (form letters) • 100% of ITER feedback is provided face-to-face • 90% of learners are satisfied with the registration, orientation & mentorship process • 100% of faculty participate in various processes when requested, e.g. CARMS, medical school interviews • CARMS deadlines are met 100% of the time • 100% of faculty maintain up to date teaching dossiers 	<ul style="list-style-type: none"> • Culture of educational excellence • Known for innovative, dynamic educational programs • Current clinical knowledge transferred to practice • Recognized for its engaged, passionate faculty of experts

