Anatomical Pathology
TERMS OF REFERENCE FOR ACADEMIC ADVISOR

PREAMBLE:
Residency is a time of many changes and life-altering decisions for residents. New residents have to adjust to their new roles and responsibilities, while adapting to new living and working environments. Junior residents have to learn to integrate into the workflow of pathology and start to choose a practice model and/or subspecialty of practice. More senior residents have to start applying for fellowships and preparing for the Royal College exam. Residents in the transition to practice stage need to begin networking for jobs and planning for continuing medical education.

In the new CBD program, the following EPAs all address the concept of developing a learning and career plan:

- Transition to discipline D-4 (one observation),
- Core C-17 (six observations), and
- Transition to practice TTP-4 (one observation).

The milestones for these EPAs address the following major topics:

1. **Time management**: Integrating practice and personal life
2. **Career counseling**: Personal interests, expectations for practice, job opportunities, workforce needs, etc.
3. **Self-directed learning and continuing medical education**:
   a. Define knowledge gaps, create learning plans, identify resources and adjust educational experiences to implement learning plans
   b. Demonstrate a commitment to maintaining and enhancing competence

4. **Self-awareness and response to feedback**

In order to fulfill these EPAs, PGY1 residents are matched with a pathologist, who serves on the Clinical Competence Committee (CCC) to act as an academic advisor (AA) to help guide the trainee through self-reflection and provide advice and feedback when needed.

**INTRODUCTION**: Academic Advisors (AA) are CCC faculty members who are responsible for coaching and guiding their assigned resident(s) during their progress through residency training. This role will involve regular meetings with assigned resident(s) at regular intervals to conduct summative reviews of progress and facilitate the creation and implementation of individualized learning plans with timely completion of assessments on the Elantra electronic platform. These learning plans should document areas of strengths and weaknesses and
identify priority areas/skills/competencies for the residents. The AAs are required to present resident progress summaries at the CCC meetings and/or to act as primary presenters to the CCC.

RESPONSIBILITIES AND ACCOUNTABILITY: The AA will be accountable to the Program Director (PD).

The AA will be responsible to the residency program for the following:

1. Coach and support residents throughout their residency training
2. Review individual resident electronic portfolios and meet on a suggested quarterly basis, with a mandatory minimum of once per stage of training with each assigned resident
3. Guide the assigned residents in creating their own learning plans which should be shared by residents with supervisors in upcoming rotations or alternative learning experiences. These learning plans should document areas of strengths and weaknesses and identify priority areas/skills/competencies residents should focus upon
4. Generate reports on resident progress for the CCC
5. Participate in faculty development relating to the AA role
6. Participate in the process of developing enhanced learning plans, remediation and probation plans for residents in difficulty in consultation with the PD.
7. Remain up to date with the evolving CBD literature regarding the AA role.
8. AAs will recuse themselves from the CCC’s decision making about their assigned resident/s or if there is another conflict of interest.
9. AAs will be given access to all formal documented resident evaluations and assessments.
10. Confidentiality and protection of residents’ professional interest must be maintained.
11. An AA will sign a formal confidentiality agreement (see below).

APPOINTMENT: The AAs would ordinarily be selected by the Program Director (or delegate). It is suggested that they should have a minimum 3-5 year renewable term which will facilitate continuity of coaching and support for assigned residents. Residents may have the option to choose their own advisors in consultation with the PD.

MEETINGS: It is suggested that AAs meet with their assigned resident(s) on a quarterly basis, and more frequently when needed/requested. The meetings must be recorded using the Elantra linked to relevant EPA. Residents in difficulty will likely require additional support from their AA.
**RESOURCE REQUIREMENTS:** The PD and the AA will serve as resources for each other and the two are expected to work in close collaboration. The program may choose to assign only one resident to each AA; in cases where more than one resident is assigned to any given AA, a ratio of 2 residents to 1 AA is recommended.

**PLANNED REVIEW:** A formal review of this role description will occur in no more than 2 years’ time by the Program Director, while the review of resource requirements might occur sooner.

**CONFIDENTIALITY AGREEMENT:** Academic Advisor I understand that the Academic Advisors, involved in the guidance and monitoring of postgraduate trainees, are subject to the provisions of the applicable privacy legislation and related University policies on privacy and have an obligation to ensure that information is used for purposes consistent with the reasons for its collection. I accept the responsibility to ensure that any information (verbal, written, or electronic) to which I am given access will be kept confidential and will only be used for its intended purpose. I will ensure that I do not knowingly or carelessly allow such information to be misused, both during and after my engagement as the Academic Advisor.

Name: (print)___________________________________
Signature:_________________________________
Date:__________________________________

*July 9 2019*