

Trainee Town Hall 2020-04-30 Questions – 134 participants

Q. Can Dr. Aalamian speak to whether if the R3 internal medicine match will be DELAYED from the current posted timelines on the website?

Dr. Aalamian: We don't have the final decision, but it is likely that the matches will not be delayed.

Q. For Visa Fellows approaching the end of our fellowship - any arrangements were made to extend work permit and CMQ license - if we can't leave Canada after 30-6-2020.

Dr. Aalamian: Looking into it, but extensions will not be likely necessary for those graduating. RC document coming out soon for guidance.

Q. For residents who need to be on an extended sick leave (for example 2-3 weeks) due to COVID contracted during their clinical rotation, I heard from the FMRQ that they should be paid by the CNESST from the hospital that they were rotating in - is this accurate? Or will residents continue to be paid by their base hospital (e.g. MUHC)?

Dr. Aalamian: Yes, if COVID was contracted at the work. If community acquired will be paid as a regular sick leave.

Q. Any changes in hiring requirements as academic staff at McGill about doing the fellowships and etc. in light of disruptions happened!

Dr. Aalamian: No changes. Licensing may not be an issue since all can apply for restrictive permit for the cohort finishing on June 30, 2020.

Q. Hello, in the psychiatry department some residents have been sent to do ED shifts in two different hospitals within the same period, what is being done to prevent inter-hospital contagion?

Dr. Tourian: On going concern, being vigilant, some programs is not possible to avoid. Safety measures must be followed.

Q. Hi, I have concerns regarding infection control for consulting services. Specifically, can we please request pictures for consults from the COVID ward should the consult be done via telemedicine (ie a photo) to limit patient contact exposure?

Dr. Tourian: It really depends on the specialty and your service's set up at the hospital. Residents must address this with supervisors. This might be applicable but it may be inevitable to go in the room depending on the situation.

Q. If we have already been redeployed to a COVID ward, can we be redeployed again?

Dr. Tourian: Residents can be redeployed again to a COVID ward. RRH tries to not do so, but there is a possibility.

Q. Any chance PGY5 can have extension until the written exam? Especially for us unable to go start fellowships July 1st.

Dr. Aalamian: At the moment there are no provisions to extend residency training program, can apply to a restrictive license.

Q. If a resident is quarantined because of his/her family member is covid positive, will that resident get paid or not ?

Dr. Tourian: This answer was replied earlier and in previous FAQs. Residents that required to self-isolate should not be penalized. They should follow the process established by their Occupational Health office.

Q. Can hospitals require that residents complete telehealth work “on site” from their offices rather than from home? What recourse do residents have to contest this requirement from their hospital? Of note, residents have concern about unnecessary exposure and lack of access to material such as webcams which forces residents to bring in their own laptops/tablets etc. Thank you.

Dr. Tourian: Residents can discuss this issue with department leaders. Should be addressed locally. Bring this up to TD and PD and if not satisfied with results bring up to Annick. PGME can advocate for residents.

Q. Will PREM’s or PEM’s be waived this year? I.e.: For family medicine and emergency medicine residents soon finishing their training and willing to start work in July 1st in Montreal but unable to without a PREM/PEM?

Dr. Aalamian: No.

Q. Is there a rough estimate re: how long redeployment will be in place? It seems as though we will continue to have high numbers of hospitalized covid-19 patients, potentially for months.

Dr. Tourian: In discussion with DPSs, RRH and PGME, we don’t have an answer right now, but it is a main and recurrent topic of discussion.

Q. Restricted permits: what if we were going to do our Royal College and graduate in October. Can we still apply for restricted permits in order to do dépannage?

Dr. Aalamian: Residents graduating on June 30, 2020 can apply for restrictive permit. Must meet the requirements established by the CMQ.

Q. Will residents be reimbursed for costs related to redeployment? For example: travel to/from work, meals at hospitals

Dr. Tourian: Residents are asked to keep their receipts for a possible reimbursement.

Q. Is there a general policy about ED consults such as returning non-urgent cases home with phone follow-up instead of seeing the patients in person such as what the JGH has been doing for many weeks already.

Dr. Aalamian: Each institution is free to make their own policy.

Q. For residents that are leaving McGill/Quebec after this academic year, we were told that we would only be paid 50% for the vacation that were not taken. Is this true and why?

Dr. Aalamian: This is related to FMRQ negotiation and the ministry of health. Dr. Fortin added that the 50% applies for those that can’t carry over. There is a provision that for those finishing their training it is allowed to get up to 30 days of paid vacation.

Q. For non-accredited sites rotations, when will PGME start processing them again? We were initially told nothing until p3 but some residents in other programs got an email yesterday saying we are allowed going away again starting p1-2.

Dr. Aalamian: Rotations to non-accredited sites can be scheduled as of P1. Conditions apply. Other QC universities do not accept until P4. Exceptions can be reviewed. For more information you can contact your Residency Coordinator at PGME.

Q. What happens if reassignment is refused?

Dr. Tourian: If residents can be assigned other clinical activities in their program it can be accepted, otherwise resident can be placed on an unpaid leave of absence and will have training extended.

Q. In terms of redeployments, thus moving across sites, how do we insure that we do not cross-contaminate at risk patients populations when we come back to our usual rotation (for example: if I do oncology or geriatric inpatient population) ? Should we arrange through our program directors?

Dr. Tourian: Yes, if working with vulnerable populations, your department and PD to decide how to reduce risk of contamination.

Q. Parking fee was waved for everyone. but IMG resident already paid ~1300 for the year at the beginning of the year. Can we issue a refund?

Dr. Tourian: Recommend residents contact hospital education office to ask for reimbursement.

Q. Could you speak to the decision of having only 7 shifts in 2 weeks for redeployment? That way, we are only working the equivalent of one week but missing 2 weeks of a core rotation or elective. + we are unable to go back to our rotation on our off days since we are not supposed to move between sites

Dr. Tourian: Resident wellness was considered in order to propose the schedule as is. There is no clear consensus on this topic.

Q. Treating teams from the COVID wards have denied photo requests despite consultations are able to be conducted via photo. Residents have had the need to assess patients on the covid ward unnecessarily given that the consultation can be done at a distance. iPads have been provided to the COVID wards, however they are apparently restricted for use only to allow patients speak to their family members. Given we have this technology for use on the COVID ward, is it possible to advocate for iPads to be used to take pictures for consulting services when requested.

Dr. Aalamian: We will discuss with DPSs at our next meeting.

Q. What are the current recommendations on the use of surgical masks rather than N95 masks when in touch with COVID19 positive patients?

Dr. Aalamian: All should go to their institution for this information, PGME cannot answer this question.

Q. For residents completing their residency training this year but staying at McGill for subspecialty fellowship, will we be able to carry our remaining vacation over to next year even though it would be technically a transition to a different program at the same institute ?

Dr. Fortin: if you are in IM and going to Cardiology all banked leaves and vacation remains, ensure programs communicate and keep proper track. The same if you are changing programs. From residency to fellowship doesn't carry over.

Q. As a suggestion, to mitigate issues with consultants not being on the same page (i.e. sending their residents to see COVID patients, not agreeing to phone/picture consults etc.), perhaps MUHC wide

policies should be developed to address what to do in situations where residents are being unnecessarily exposed to COVID (or locked down) wards. We get MUHC emails multiple times a day when a new message or document is published on their website (which all employees and residents get notifications for) and using this method would at least ensure its a policy that has been published and the resident can refer to it when dealing with their attending.

Q. Can residents refuse getting redeployed to a specific site e.g CHLDS and ask for redeployment to another site like ICU that's more valuable for their clinical experience?

Dr. Tourian: No one has being redeployed by the RRH to the CHSLDs. Please discuss with your PDs since they can add comments where you would prefer to be redeployed.

Q. How would the leaves be dealt with for IMGs who were not able to take it this year and will not be paid for their leaves. Can they take all of their leaves to next year?

Dr. Fortin: will confirm with FMRQ how to proceed. If questions about this please contact him or the FMRQ directly.

Q. If a resident contract COVID as part of redeployment or their usual clinical rotation and needs to take sick leave, does this mean that there should not be an extension to their training?

Dr. Aalamian: The PPC/CC will make a decision depending on the extension of the sick leave. If quick recovery shouldn't extend. Dr. Aalamian added that training could be extended, and waiver of training could apply. Please refer to this policy.