

Postgraduate Medical Education Selection					Class: B
Approved By:	NOSM Postgraduate Education Committee				
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Responsible Portfolio/Unit/Committee:	Postgraduate Medical Education (PGME)				
Responsible Officer(s):	Associate Dean, PGME				

1.0 Purpose

For ethical legal and human rights reasons, selection processes must be (and must be seen to be) fair, transparent and objective. The purpose of the selection policy is to outline processes that will support residency program directors (PDs) and residency program committees (RPCs) in selecting the candidates who have the best chance of succeeding in NOSM residency programs.

This policy outlines processes that all programs should follow in recruiting and selecting applicants for their residency programs.

NOSM's social accountability mandate:

"Innovative Education and Research for a Healthier North"

Values: Collaboration, Innovation, Inclusion, Respect, Social Accountability

Academic Principles: Interprofessionalism, Integration, Community Orientation, Inclusivity, Generalism, Continuity, Dedication to Inquiry (detailed description Appendix A) inform this policy.

2.0 Principles 1

2.1 Selection criteria and processes should be based on the program's goals.

¹ Adapted from Best Practices in Applications and Selection Draft Document prepared by the University of Toronto **Best Practices in Applications & Selection Working Group (BPAS):** Glen Bandiera (Chair)

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2.2 Selection criteria and processes should reflect a balance among all CanMEDS competencies.

- 2.3 Selection criteria used for initial screening and selection of files for review, file review, interviews and ranking should be as objective as possible
- 2.4 Selection criteria and processes should be fair and transparent for all applicant streams.
- 2.5 Selection criteria and processes should promote diversity of the resident body (e.g. race, gender, sexual orientation, religion, family status,) be free of inappropriate bias, and respect the obligation to provide for reasonable accommodation needs, where appropriate.
- 2.6 Programs should choose candidates according to above criteria, and who are most able to complete the specific residency curriculum and enter independent practice.
- 2.7 Multiple **independent**, **objective** assessments result in the most reliable and consistent applicant rankings.
- 2.8 Recognizing that past behaviour and achievements are the best predictors of future performance, efforts should be made to include all relevant information about applicants' past performance in application files. (full disclosure)
- 2.9 Programs should consider and value applicants with broad clinical experiences and not expect or overemphasize numerous electives in one discipline or at a local site.

3.0 Definitions

Definitions of Transparency, Objectivity and Fairness

Adapted from the Office of the Fairness Commissioner https://www.fairnesscommissioner.ca/en/Publications/PDF/OFC WA Glossary.pdf

These definitions and were developed for exams and have been reinterpreted to apply to admissions.

What makes an application/selection process transparent, objective, impartial and fair?

- 3.1 Being transparent
 - 3.1.1 Including detailed information about the criteria used for selection with some description as to how to present material (e.g write a personal letter outlining your reasons for choosing x specialty and what life experiences, education, background and research skills make you suitable for our residency program).

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3.1.2 Including a clear relationship between the goals of the residency program and the selection criteria.

3.1.3 Providing feedback to unsuccessful applicants (currently this is not possible given the volume of applications we receive).

3.2 Being objective

- 3.2.1 Relying on objective measures to consistently determine whether applicants meet selection criteria. i.e. using standardized file assessment and interview questions that are graded consistently and training faculty how to use the tools
- 3.2.2 Ensuring that application/selection processes are valid and reliable through viewing the outcomes of the selection process to see how effectively the process is achieving desired outcomes i.e. selecting residents with a good chance of success in the residency program.

3.3 Being impartial

- 3.3.1 Using marking guides, electronic scoring, or blind assessment to avoid subjectivity
- 3.3.2 Establishing training and qualifying procedures to ensure that exam markers (file reviewers/interviewers) produce consistent and objective assessments

3.4 Being fair

- 3.4.1 Applying all selection criteria to all applicants
- 3.4.2 Ensuring that applicants have reasonable access to interviews, which will be reviewed on a case by case basis.
- 3.4.3 Offering telephone/virtual interviews
- 3.4.4 Offering more than one interview date

4.0 Procedures²

4.1 Transparency

4.1.1 Programs must define the goals of their selection processes and explicitly relate these to overall program goals.

² Adapted from Best Practices in Applications and Selection Draft Document prepared by the University of Toronto **Best Practices in Applications & Selection Working Group (BPAS):** Glen Bandiera (Chair)

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4.1.2 Programs should define explicitly in which parts of the application/interview process relevant attributes will be assessed.

- 4.1.3 Programs should explicitly and publicly state the processes and criteria they use to filter and rank candidates, including on program and CaRMS websites. (e.g. "The program will consider undergraduate performance, professionalism, communication skills).
- 4.1.4 Programs should maintain records that will clearly demonstrate adherence to process (for example, for audit purposes).

4.2 Fairness

- 4.2.1 Application scores should be based solely on information contained in the application and interview assessment/ratings only on information gathered during the application/interview process.
- 4.2.2 Programs should follow the NOSM PGME Program Selection Data Retention, Return and Disposal Process and ensure compliance with the NOSM PGME Records

 Retention Schedules, the NOSM Records Retention Policy and FIPPA.

4.3 Selection Criteria

- 4.3.1 Programs must establish a comprehensive set of program-specific criteria that will allow thorough assessment of all candidates.
- 4.3.2 Selection criteria must include elements specific to each specialty that are validated to predict success in that field (for example, hand-eye coordination for procedural disciplines).
- 4.3.3 Selection criteria must also be established to identify applicants who can reasonably be expected to fit well into a northern, distributed residency program. This should include explicit criteria for "Do not rank" decisions.

4.4 Process

- 4.4.1 Criteria, instruments, interviews and assessment/ranking systems must be standardized across applicants and assessors within each program.
- 4.4.2 Criteria instruments, interviews and assessment/ranking systems should be established in advance of the selection processes and reviewed annually prior to the CaRMS file review opening.
- 4.4.3 Assessments should be based on demonstrable skills or previous behaviours, both of which are known to be predictive of future behaviours.

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4.4.4 Applicant assessment should be based on multiple independent samples and not on the opinion of a single assessor.

4.4.5 Programs should regularly assess the outcomes of their process to determine if program goals and Best Practices in Application and Selection principles (e.g. social accountability) are being met.

4.5 Assessors

- 4.5.1 Selection teams must be comprised of individuals with a breadth of perspectives that reflect program goals. Resident representatives should be included in the selection process at all stages and should be members of the interview teams.
- 4.5.2 Assessors should be trained in all aspects of the process, including the program goals, selection process, assessment criteria, and assessment/ranking systems.

4.6 Assessment Instruments

4.6.1 Programs should strive to incorporate objective assessment strategies proven to assess relevant criteria.

4.7 Knowledge Translation

4.7.1 Best practices should be shared among different specialities and programs.

4.8 Ranking

- 4.8.1 Ranking should be done using pre-defined and transparent processes and driven solely by information that is available in the application file and acquired during the interview process.
- 4.8.2 Programs should rank candidates in the appropriate order based on assessment³
- 4.8.3 Other recommended practices:
 - Use a predetermined, set percentage for the interview score and the file review score in preliminary ranking.
 - Identify in advance the criteria that can be used in deciding how to rank applicants with equal scores or in moving applicants up or down the list.

³ Ranking should not be based on how committee members think a candidate will rank the program as this is impossible to predict and not in any way objective

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- 4.8.4 Programs should establish clear criteria for determining 'do not rank' status.
- 4.8.5 An individual site may establish a rank order list that differs from the program ranking as long as:
 - The site establishes the criteria prior to the opening of the file review at the annual program review of selection criteria
 - The rationale for the site rank order list is brought to the selection committee for discussion and approved by the selection committee

5.0 Related Documents

In support of this policy, the following [related policies/documents/companion/forms] are included:

- NOSM Academic Principles
- Summary of Thomson Recommendations (page 49-53)
- Best Practice in Application and Selection

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1.0	2013 12 13	Approved by NOSM Postgraduate Education Committee.		
2.0	2018 07 23	Reformatted in new policy template.		
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