

## CONSENT FOR FILE USE FOR TRAINING PURPOSES

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Dear resident:

We are asking your permission to use your DASH.med portfolio, CBME.med, and DATA.med assessment data for training purposes. As you are already aware, the Royal College has implemented a change in residency education to a CBME (Competency Based Medical Education) model. As such, the affected Departments and the Postgraduate Medical Education office (PGME) will be providing technology training to Program Directors, Competence Committee members, Residency Program Committee members, Program Administrators, and Residents on the new assessment systems (CBME.med and DASH.med).

The purpose of the training is to ensure that the appropriate staff are familiar with the assessment systems being used for Competence by Design (CBD) at the University of Alberta. It would be helpful as part of this training to use a resident file as an example of how to use the technology. At no point will any screenshots or copies of your file be kept or shared.

The use of the resident file is not for review of individual performance and will be treated as confidential material by those in the room. You may withdraw your consent at any time via email to your departmental CBD coordinator, program director, or the PGME office. To comply with FOIPP requirements, we ask that you provide consent by completing the section below. Please check off at which level you consent your file to be used at for training purposes:

- PGME:** *This permission level means your file may be used at PGME-level workshops and meetings, such as implementation meetings, program director meetings, or other faculty- or resident-related training workshops.*
- Department:** *This permission level means your file may be used at departmental-level workshops and meetings, such as program director meetings, program administrator meetings, or other faculty- or resident-related training workshops. This is only for the department your program is a part of, such as the Department of Medicine, the Department of Pediatrics, the Department of Surgery, etc.*
- Program:** *This permission level means your file may be used at program-level workshops and meetings, such as Academic Advisor training, Competence Committee training, RPC training, or other faculty-related training workshops. This does not relate to your individual performance reviews but only those times that your file is used for training purposes.*

### APPROVAL & CONSENT – RESIDENT

Name

Date Range (\*OPTIONAL): Indicate if you prefer a limited consent period (e.g. 2022-2023 academic year, duration of your training, etc.)

Signature

Date (yyyy-mm-dd)