



NOV 27 2012

953593

Dr. Gavin Stuart
Dean, Faculty of Medicine
University of British Columbia
317 – 2194 Health Sciences Mall
Vancouver BC V6T 1Z3

Dear Dr. Stuart:

Gavin

On behalf of the Ministry of Health (MoH), I am writing to provide you with information about funding for the Faculty of Medicine (FoM) for the fiscal year 2012/13. The Ministry has approved funding for 1143 postgraduate resident FTEs in 2012/13, based on the Postgraduate Residency Education Program Funding Formula.

The FoM 2012/13 operating grant for Postgraduate Residency Education is \$115,162,313, and a summary of this funding is provided in Appendix 1. This funding includes Health Canada's contribution for this fiscal year of \$2,836,787 to support the *Expansion and Distribution of the IMG-BC Program for Underserved Communities in BC*. The Faculty will be required to repay the Ministry the amount of any overpayment, disallowed expenditures or unclaimed Health Canada funding. The Ministry will deduct the amount from any future payments under this agreement.

Please note \$113,162,313 is the amount the Ministry is expecting to transfer (see Appendix 2), as residents' benefits will be reduced by \$2M for this fiscal year.

As in previous years, for planning purposes, this letter provides the FoM operating grant anticipated for the next fiscal year. This funding is subject to the Ministry of Health having sufficient funds available in the 2013/14 fiscal year. If funding is not available, MoH and FoM will determine jointly the implications of the reduced funding level.

2012/13 Postgraduate Residency Education Operating Grant

Funding of \$113,162,313 for 2012/13 covers 1143 resident FTEs for:

- 276 entry-level positions for Canadian medical graduates.
- 34 entry-level positions for international medical graduates.
 - In response to a 2010 BC Government Throne Speech commitment, there is an expansion and distribution of *IMG-BC Program*. Forty new entry-level positions will be in family medicine - 8 entry-level positions each year over a five-year period. At full implementation in 2016/17, 58 entry-level positions, or 134 IMGs are expected to be in training at any one time.
- 32 FTEs for clinician investigator, family practice enhanced skills, family practice emergency medicine, and podiatry programs.
- 11 postgraduate residency positions for dentistry, of which 5 are community-based.

... 2

Accountability

The Memorandum of Understanding (MoU) between the MoH and the University of British Columbia describes the responsibilities between the parties.

In addition to the responsibilities under the MoU, the Postgraduate Residency Education Program (PGME) will:

- Provide an inventory of all residents, taken in September 2012.
- Provide specific numbers of entry-level positions each year for both family medicine and Royal College specialty streams, and for Canadian medical graduate and international medical graduate entry-level positions. PGME is limited to specific annual numbers of clinical investigator and enhanced family practice positions.
- Be responsible for allocating positions to specific training programs to ensure PGME costs remain within the PGME funding formula revenue.
 - The Medical Human Resources Planning Task Force (MHRPTF) advises MoH and FoM on the allocation of positions to programs. MoH has the option of making more detailed allocation decisions after consulting with FoM and MHRPTF, and increasing the total number of entry-level positions, provided the positions are fully funded.
 - In the absence of written direction from MoH, allocation of positions is at FoM's discretion within the constraint of the PGME operating grant provided by the funding formula.
- Add additional longitudinal or rotational sites to any program with the prior written agreement of MoH, including agreement about the financial implications and the agreement to provide funding, after consultation with MHRPTF.
- Only increase clinical faculty recognition with the prior written agreement of MoH, after providing a business case for the proposed increase.
 - A business case will detail the financial and operational implications for two options: implementing the proposed increase, and keeping the recognition rates at the current level.
 - MoH may ask for an independent review of the business case.
 - If the request to increase recognition rates is not approved, FoM is able to proportionally reduce entry-level positions to address operational implications of not increasing recognition rates in accordance with the business case and any independent review.
- Inform the implementation of any changes to technology or approach that can be done within the funding formula and the agreed number and allocation of resident positions.
 - Changes requiring capital or operating funding may only be made with prior approval by MoH, including approval of the required funding.
- Be responsible for allocating administration positions to ensure PGME costs remain within the PGME funding formula revenue.
 - An increase factor has been built into the funding formula.
- Submit semi-annual financial reports (September and March) to the FoM/MoH Funding Management Committee.

- Support the Ministry's reporting obligations to Health Canada for the *Expansion and Distribution of the IMG-BC Program for Underserved Communities in BC*, an initiative which receives funding through Canada's Health Care Policy Contribution Program.
- Participate with the Ministry, the Evaluation Studies Unit, and the Centre for Health Education Scholarship to:
 - Continue with program evaluation to demonstrate distributed medical education improves the distribution, recruitment, and retention of physicians. The Ministry and FoM will review work to date and agree on a work plan for 2013/14, prior to funds being released for this activity next fiscal year.
 - Provide an annual progress report which reviews the strategic directions the FoM has underway to advance distributed medical education and enhance its impact on the distribution, recruitment and retention of physicians.
 - The report is due at the end of each fiscal year.
 - MoH will withhold 30 percent of this funding component and release the holdback when it receives the report.
 - Continue new work which leads to a different assessment of international medical graduates. BC wants to attract the right residents to train in family medicine in a health region which has underserved/rural communities.

The collaborative will develop a roles and responsibilities document and assign leadership.

MoH is responsible for fully funding all increases in compensation of residents.

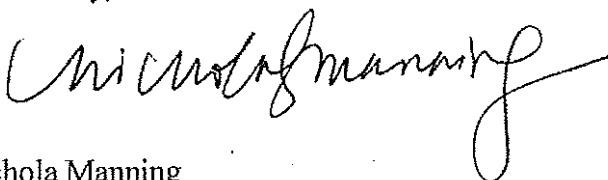
- If MoH does not adjust the funding formula to deal with an increase to the cost of resident compensation, FoM is able to proportionally decrease entry-level positions to ensure costs and funding formula revenues remain in balance.

Clarification of roles and responsibilities in this section is drawn from the *Postgraduate Medical Education Funding Review Final Report, July 2010*.

During the fiscal year, Kevin Brown, A/Executive Director, Health Human Resources Planning (telephone 250-952-1107), and Ted Boomer, Director, Financial Corporate Services (telephone 250-952-2053), are available to answer questions regarding funding and accountability.

I appreciate your continued commitment to excellence in postgraduate medical education.

Yours truly,



Nichola Manning
Assistant Deputy Minister

Attachment (2)

pc: Manjit Sidhu, Assistant Deputy Minister, Financial & Corporate Services, Ministry of Health
Ted Boomer, Financial & Corporate Services, Ministry of Health
Betty-Anne Brazier, Financial & Corporate Services, Ministry of Health
Kevin Brown, Health Human Resources Planning (Physicians), Ministry of Health
Shelley Moen, Director, Capital Services, Ministry of Health
Aureleo Reyes, Regional Grants and Decision Support, Ministry of Health
David Snadden, Executive Associate Dean Education, Faculty of Medicine
Roger Wong, Postgraduate Medical Education, Faculty of Medicine
Mark Vernon, Resources & Operations, Faculty of Medicine

Appendix 1: All Residents

				Residents FTE Open	1089		1143
				Resident FTE Additions	54		57
				Residents FTE Close	1143		1200
				12/13		13/14	
	Cost	Per	Unit	Total	Unit	Total	
Academic Component							
Clinical Teaching (Didactic)	1,833	Resident	1143	2,095,119	1,200	2,199,600	
Clinical Teaching (With Patient Care)	5,002	Resident	1143	5,717,286	1,200	6,002,400	
Clinical Teaching (With Patient Care) IMG PGY1	2,501	Resident	34	85,034	42	105,042	
Clinical Teaching (With Patient Care) IMG PGY2	1,251	Resident	26	32,526	34	42,517	
Program Director Stipend & Administration Support	6,478	Resident	1143	7,404,354	1,200	7,773,600	
Distributed Training	2,500	Resident	1143	2,857,500	1,200	3,000,000	
Site Directors - Distributed Training-	370,000	Site (SP)	4	1,480,000	4	1,480,000	
Site Directors – FP Distributed Training	5,500	FP Resident	264.8	1,456,400	289.6	1,592,800	
IMG Assessment	390,500	Year	1	468,600	1	546,700	
Administration - PGME Office	1,700,000	Year	1	1,725,500	1	1,751,383	
Support for Faculty of Medicine	4,071,000	Year	1	4,071,000	1	4,071,000	
Returning Residents @ 1%	767,547	Year	1	806,610	1	846,815	
IMG-BC Evaluation	306,000	Year	1	306,000	1	306,000	
Clinical Placement Liaison Office	216,000	Year	1	216,000	1	216,000	
AVIT Maintain/Refresh	3,722,000	Year	1	3,722,000	1	3,722,000	
Weighted Average Salary, Benefits, Stipends	71,413	Resident FTE	1,129.5	80,660,984	1,185.8	84,681,535	
Resident Activity	1,800	Resident	1143	2,057,400	1,200	2,160,000	
Total Funding				115,162,313		120,497,392	

Appendix 2: Reconciliation

Fiscal Year	2011/12	2012/13
Previous Year Reconciliation	N/A	n/a
PGME Operating Grant	\$110,006,991	\$115,162,313
Less Resident Benefits	\$2,000,000	\$2,000,000
PGME Funding Letter	\$108,006,991	\$113,162,313
Less Health Canada Funding	\$1,695,304	n/a
Amount Flowed from MoH to UBC	\$106,311,687	\$113,162,313
Add Health Canada Funding flowed to UBC	\$901,008	
Amount Due	\$107,212,695	\$113,162,313

- 2012/13 Health Canada Funding of \$2,836,787 is included in Amount Flowed from MoH to UBC.

**PROVINCE OF BRITISH COLUMBIA
MINISTRY OF HEALTH**

**MEMORANDUM OF UNDERSTANDING - Postgraduate Residency Education Program
Ministry of Health & University of British Columbia, Faculty of Medicine**

THIS AGREEMENT dated for reference the 28th day of September, 2006.

BETWEEN:

HER MAJESTY THE QUEEN IN RIGHT OF THE PROVINCE OF BRITISH COLUMBIA, represented by the
Minister of Health

(the "Ministry", the "Province")

AND:

UNIVERSITY OF BRITISH COLUMBIA – FACULTY OF MEDICINE
Vancouver, BC V0X 1Y6

(the "Faculty")

PREAMBLE

- A. In British Columbia, there is a Postgraduate Residency Education program (the "Residency Program") for Canadian Resident Matching Service ("CaRMS") postgraduates, International Medical Graduates, and Dentistry and Podiatry postgraduates (referred to jointly as "Postgraduates").

The Residency Program consists of:

- a) the academic component of the program known as the Postgraduate Medical Education program (the "Academic Component"), which is provided by the Faculty; and
- b) the employment of Postgraduates by third party health care agencies to enable Postgraduates to obtain specialized clinical training in a clinical setting. (the "Employment Component")

- C. The Province will provide funding to the Faculty for the Residency Program, and the Faculty will utilize that funding as outlined in this Agreement.

The Province and the Faculty agree to the following:

1.00 OBLIGATIONS OF THE FACULTY

- 1.01 The Faculty will operate and manage the Academic Component in a manner consistent with the Postgraduate Medical Education - Overall Statement:

POSTGRADUATE MEDICAL EDUCATION - OVERALL STATEMENT

Postgraduate education at the University of British Columbia is dedicated to providing the highest standard of resident training in Family Medicine and Royal College specialties and sub-specialties. The programs are devised to include all of the elements listed in the College of Family Physicians of Canada Residency Program Accreditation and Certification, and in the Royal College Guidelines, Requirements, and Objectives for training.

- 1.02 The Faculty will expend funds received pursuant to this Agreement solely for the purposes of:
- a) operating and managing the Academic Component; and

b) transferring funds for the Employment Component to third party agencies that employ Postgraduates to enable those agencies to fulfill their obligations to Postgraduates, including without limitation, their obligations as employers of Postgraduates.

- 1.03 The Faculty will cooperate with the Province in making public announcements regarding the Residency Program and the details of this Agreement.
- 1.04 The Faculty will provide the Province with full and complete details of funding received for, or in respect of, the Residency Program, from any other source. The Faculty will provide such details to the Province within sixty days of the Faculty receiving the funding.
- 1.05 The Faculty will establish and maintain books of account, and retain invoices, receipts and vouchers for all expenses incurred, in the form and content satisfactory to the Province.
- 1.06 The Faculty will, upon reasonable notice at any time during normal business hours, permit the Province to enter any premises used by the Faculty with respect to the Residency Program or used to keep any documents or records pertaining to the Residency Program, in order for the Province to copy or audit, or both, any or all of the books of account.
- 1.07 If the Faculty conducts, or causes to be conducted, an audit with respect to the Residency Program, the Faculty will provide the Province with copies of any audit reports within 30 days of receipt of those reports by the Faculty.
- 1.08 For greater certainty, the parties acknowledge that nothing in this Agreement creates an employee/employer relationship between the Faculty and any Postgraduate.

2.00 POWERS AND OBLIGATIONS OF THE PROVINCE

- 2.01 The Province will provide funding to the Faculty for the operation and management of the Academic Component and for transfer to third parties for the Employment Component in accordance with the Postgraduate Residency Education Program Funding Formula (Funding Formula) detailed in Schedule A.
- (2 Prior to calculating the annual funding to be provided to the Faculty, the Province will consult with the Dean of Medicine and the Faculty of Medicine & Ministry of Health Funding Management Committee ("the Committee").
- 2.03 The Province will approve the number of positions for Postgraduates that will be funded in each year.
- 2.04 The Province will provide the Faculty with an annual funding letter outlining the approved number of Postgraduate positions and the total funding to be provided, and containing a bi-weekly payment schedule.
- 2.05 The Province will consider changes to the Funding Formula, based on recommendations of the Committee. However, the Province will ultimately determine the amount of funding to be provided to the Faculty.

3.00 EFFECTIVE DATE

- 3.01 Notwithstanding its date of execution, this Agreement is effective as of April 1, 2005, and remains in force until terminated.

4.00 TERMINATION

- 4.01 Either party may terminate this Agreement by providing ninety days written notice to the other party.
- 4.02 Notwithstanding section 4.01 in the event that either party shall commit any breach of or default in any of the terms or conditions of this Agreement, and also shall fail to remedy such default or breach within fourteen (14) days after receipt of written notice thereof from the other party, the party giving notice may, at its option and in addition to any other remedies which it may have at law or in equity, terminate this Agreement by sending notice of termination in writing to the other party to such effect and such termination shall be effective as of the date of the receipt of such notice.
- 3 Upon the termination of the Agreement, the Province has no further obligation to provide payment to the Faculty pursuant to this Agreement other than any payments accrued and outstanding for services provided by the Faculty pursuant to this Agreement up to and including the date of termination.

4.04 Upon termination of the Agreement, the Faculty has no further obligation to carry out its obligations pursuant to this Agreement.

5.00 NOTICE

5.01 Any written communication between the parties is to be mailed, delivered or faxed to the following addresses:

(a) For the Province:
Libby Posgate, Director
Physician Human Resource Management
Ministry of Health
3-1, 1515 Blanshard Street
Victoria, BC V8W 3C8

(b) For the Faculty:
Dr. Gavin Stuart, Dean
Faculty of Medicine
University of British Columbia
317 – 2194 Health Sciences Mall
Vancouver, BC V6T 1Z3

5.02 Any written communication from either party will be deemed to have been received by the other party on the third business day after mailing in British Columbia; on the date of personal delivery if delivered; or on the date of transmission if faxed.

5.03 Either party may, from time to time, notify the other party in writing of a change of address, and following receipt of such notice, the new address will, for the purposes of section 5.01(a) or (b) of this Agreement, be deemed to be the address of the party that gave notice.

6.00 GENERAL

6.01 Notwithstanding any other part of this Agreement, the Province's obligation to pay money to the Faculty under this Agreement is subject to the *Financial Administration Act* which makes that obligation subject to an appropriation being available in the fiscal year of the Province during which payment becomes due, and to the Treasury Board, not having controlled or limited expenditure under any appropriation.

6.02 This Agreement is governed by and is to be construed in accordance with the laws of British Columbia.

6.03 No modification of this Agreement is effective unless it is in writing and signed by the parties.

6.04 The Schedules to this Agreement are part of this Agreement.

6.05 If there is a conflict between a provision in a schedule to this Agreement and any other provision of this Agreement, the provision in the schedule is inoperative to the extent of the conflict unless it states that it operates despite a conflicting provision of this Agreement.


6.06 This Agreement may be entered into by each party signing a separate copy of this Agreement (including a photocopy or faxed copy) and delivering it to the other party by fax.

The parties hereto have executed this MEMORANDUM OF UNDERSTANDING as at the day and year as set out above.

SIGNED by the Faculty.

Dr. Gavin Stuart, Dean, Faculty of Medicine

(Print Name)


(Signature)

THE UNIVERSITY OF BRITISH COLUMBIA

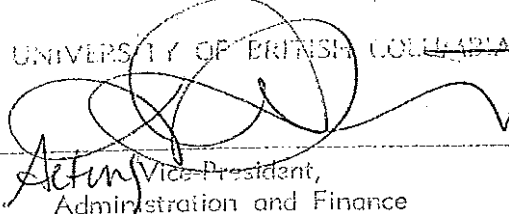
per

(Signature)

University Counsel

THE UNIVERSITY OF BRITISH COLUMBIA

per


Acting Vice-President,
Administration and Finance

SIGNED on behalf of the Province.

Gordon MacAtee, Deputy Minister of Health

(Print Name)


(Signature)

SCHEDULE A

Postgraduate Residency Education Program Funding Formula - 2005/06 – Effective April 1, 2005

The Province will provide funding to the Faculty of Medicine for the Residency Program based on the following funding formula components:

FUNDING FOR THE ACADEMIC COMPONENT

Program Director Stipend & Administration Support:

Program Directors provide direction for Faculty and Residents on Academic Component requirements. Administration includes Secretarial Support.

Manage 58 specialty programs (9 different sizes of program)

Manage faculty wide programs through the Office of Postgraduate Medical Education to link residents with the University, the Health Authorities, the Medical Licensing Authority, the Royal College of Physicians and Surgeons of Canada (RCPSC) and the College of Family Physicians of Canada (CFPC).

Program Director Stipends based on BC Public Service Agency Salaried Physicians Salary Schedule. Salaried Physician L3 effective April 1, 2001- Min \$127,498 - Max \$146,340.

Calculation: (Average of Physician L3 Min and Max) plus 2.25% of Average = \$136,919 + 2.25% of \$136,919 = \$140,000; Administration Support cost - \$41,666 plus 20% benefits = \$50,000

The number of Program Directors and Admin Assistants required is determined by applying the September 10, 2003 inventory of residents and programs to the Table – UBC Program Director/Admin Support Requirements table:

UBC Program Director/Admin Support Requirements

<u>#Residents</u>	<u>\$140K/FTE Director FTE</u>	<u>\$50K/FTE Admin FTE</u>
less than 5	0.15	0.3
5 - 09	0.2	0.5
10 - 14	0.25	0.8
15 - 19	0.3	1
20 - 24	0.4	1.4
25 - 29	0.45	1.8
30 - 34	0.5	1.8
35 - 39	0.55	1.8
40 and more	0.6	2

Program Director Requirement 13.05 FTE at \$140,000; Administration Support Requirement 35.10 FTE at \$50,000 = \$3,582,123.

Divided by 553 residents = \$6,477.62 per resident round to \$6,478 per resident FTE.

Distributed Training Residents:

Each resident may train for 6 months at a distributed training facility, during the course of residency. Cost of travel and accommodation is \$1,500 per month, total for 6 months \$9,000. Each CaRMS PGY1 seat is funded \$9,000 to cover a 6 month distributed training posting during the residency term. **\$9,000 per CaRMS PGY1 Resident.**

Each Community Dentistry PGY1 seat is funded \$9,000 to cover a 6 month distributed training posting during the residency term. \$9,000 per PGY1 entry level residency position. **\$9,000 per Community Dentistry PGY1 Resident.**

Site Directors - Distributed Training Facilities:

Each distributed training facility requires 9 Site Directors [0.15FTE each at \$140,000 per FTE] plus \$9,000 per annum for travel and Administration Support of 1 Administration FTE [\$50,000 per FTE] for 3 Site Directors.

3 Distributed Training facilities: Prince George, Victoria, Royal Columbian Hospital.

Calculation: Site Director 0.15 x 9 = 1.35FTE at \$140,000 = \$189,000 + 9 x \$9,000 = \$81,000 total of \$270,000 per Site. Calculation: Admin Support 3 Admin Support for the 9 Site Directors at \$50,000 per FTE = \$150,000 per site

Cost per site is \$270,000 [site directors] + \$150,000 [Admin Support] = \$420,000 per Distributed Site.

Clinical Teaching - Scheduled:

Academic half-day of formal instruction for all residents in all programs. Residents are typically taught in small groups of 4. \$2,600 per resident

Clinical Teaching - With Patient Care:

The academic year runs from July 1 to June 30 [thirteen 4-week blocks, one of which is a vacation block]. During the clinical blocks, residents are involved in caring for patients but must work under the supervision of a senior licensed physician. The attending physician is legally liable for the work of the resident. Preceptors must complete formal written evaluations of the resident's performance on the clinical rotation. These evaluations of the resident's medical skill and professional behaviours are used to determine if the trainee will be promoted each year and ultimately, if they are ready to take their final certifying examinations and become fully licensed physicians capable of independent medical practice. 35 hrs per week clinical supervision required not including On-Call supervision = \$3,400 per resident FTE.

International Medical Graduates - Pre-Residency Training & Evaluation and IMG Distributed Training:

Pre-Residency Training & Evaluation: Prior to taking up resident positions IMGs must complete a 7 week Evaluation, cost \$500/week [9 pre-residents] and 24 weeks of Pre-Residency Training, cost \$500/week [6 PGY1 pre-residents]. While taking Pre-Residency Training, pre-residents receive a Stipend of \$500/month for 6 months [6 PGY1 residents]. Calculation [7 x \$500 x 9 = \$31,500] + [24 x \$500 x 6 = \$72,000] + [6 x \$500 x 6 = \$18,000] total cost is \$121,500

\$121,500 divided by 12 IMG Residents = \$10,125 per IMG Resident

IMG Distributed Training: IMGs PGY2 Travel and Accommodation for 2 months at \$1,500 per month.

Calculation: [\$1,500 x 2 months x 6 PGY2 = \$18,000 divided by 12 IMG Residents = \$1,500 per IMG Resident Total per IMG Resident = \$10,125 + \$1,500 = \$11,625 per IMG resident FTE.

Postgraduate Office and Other Administration:

Administration of Postgraduate Office and Other PGME Administration

Postgraduate Office:

Postgrad Deans Salary and Benefits \$130,356 each = \$260,712

Support Staff Average Salary/Benefits \$49,657 each = \$297,942

Travel 3 trips per year each dean at \$2,000 per trip [6 x \$2,000] = \$12,000

Total Postgraduate Office = \$570,654

Other Administration:

Financial Administration & Payroll Processing \$150,000

Audit Fees and Reporting \$10,000

IMG Administration \$50,000

Curriculum Development \$75,000

Pr George Family Practice = \$364,530

Administration & Supplies Community Dentists \$68,195

Total Other Administration = \$649,530

Postgrad Office \$570,654 + Other Administration Funded at \$717,725 = \$1,288,379 annually

Clinical Clerkship Stipends:

3rd year undergraduate medical students are paid a stipend while they are doing hospital training. The Ministry expects to transfer responsibility for Clinical Clerkship Stipends to the Ministry of Advanced Education during the 2005/06 Budget Process. \$841,746 annually

FUNDING FOR THE EMPLOYMENT COMPONENT

Weighted Average Salary, Benefits, Stipends:

Weighted average salary based on PAR BC negotiated rates of pay and the resident population distribution by year of residency. Benefits and Stipends calculated at 21.5% of the Weighted Average Salary Calculation: Weighted Average Salary at **September 10, 2003**, \$51,920 + 21.5% Benefits [\$11,163] total \$63,083 per resident FTE

Resident Activity:

Residents present research, attend regional and national conferences and meetings - 1 to 2/year. Because of the number of medical specialties, (58 as of Sept 03) there are often small numbers of physicians in the more specialized areas of practice. Attending professional meetings is an important mechanism to allow residents to meet and interact with the senior clinicians in their fields. This ensures that the trainees are current with up to date research and scientific advances in their field. This is important when they are in training but even more important to establish a pattern of life long learning that they will need to continue throughout their medical careers. In-service examinations - national and international. International specialty courses, e.g. radiology. \$1,800 per resident FTE.

CAPACITY DEVELOPMENT 2005/06 – One-Time Funding Faculty Of Medicine:

Faculty of Medicine's capacity development essential activities:

Capacity Development	390,000
Evaluation and Research	300,000
Special Populations	1,100,000
Operations/Department/Division Head Contributions.. ..	1,100,000
Clinical Faculty committee participation	251,000
Office of Clinical Faculty Affairs	229,000
Continuing Medical Education	430,000
Community liaison	200,000
Total	4,000,000

RESIDENCY PROGRAM 2005/06 - SUMMARY

			Residents Open	611	
			Resident Additions PGY 1-6	53	
			Community Dentistry Residents	5	
			Approved Residents	669	
					05/06
ACADEMIC COMPONENT	Cost	Per	Unit	Total	
Program Director Stipend & Administration Support	6,478	Resident FTE	664	4,301,392	
Distributed Training - CaRMS PGY1 + Community Dentists PGY1	9,000	CaRMS PGY1 ComDentists PGY1	185	1,665,000	
Site Directors - Distributed Training Facilities PG, Van Isle, Royal Columbian	420,000	Site	3	1,260,000	
Clinical Teaching (Didactic)	2,600	Resident FTE	664	1,726,400	
Clinical Teaching (With Patient Care)	3,400	Resident FTE	664	2,257,600	
IMG Pre-Residency Training/Evaluation & Distributed Training	11,625	IMG Resident FTE	12	139,500	
Administration - UBC Medical School and Postgraduate Medical School	855,654	Year	1	855,654	
Administration - PG Family Practice transfer from NHA to PGME	364,530	Year	1	364,530	
Administration - Community Dentistry Administration & Supplies	68,195	Year	1	68,195	
Clinical Clerkship Stipends	841,746	Year	1	841,746	
Total Academic Component				13,480,017	
EMPLOYMENT COMPONENT					
Weighted Average Salary, Benefits, Stipends	63,083	Resident FTE	664	41,887,112	
Resident Activity	1,800	Resident FTE	664	1,195,200	
Total Employment Component				43,082,312	
Total Residency Program Funding				56,562,329	
CAPACITY DEVELOPMENT – One-Time Funding Faculty Of Medicine	4,000,000	Year	1	4,000,000	
Total Funding				60,562,329	