
Competence by Design:

Policy Advisory Working Group Communique Series

CBD Policy Advisory Working Group Membership*

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Introduction & Background

The implementation of competency based medical education (CBME) heralds a move from time based to competency based assessment and credentialing. Competence by Design (CBD) is the Royal College initiative to introduce CBME to Canadian specialty education. The CBD Policy Advisory Working Group was struck in order to provide guidance and input regarding the perceived impact of Competence by Design on postgraduate medical education (PGME) policies.

The purpose of this advisory group was to: review existing postgraduate medical education (PGME) policies and identify areas that may be affected by the change to Competence by Design; suggest common language, where possible, for PGME policies; and make recommendations for the revision of PGME policies via suggestions for questions to consider and/or suggestions for modification.

The proposed recommendations are not intended to be prescriptive in nature, but are offered as a means of support to postgraduate faculties in transitioning and adapting existing policies to reflect competency based medical education.

Process and Methods

The CBD Policy Advisory Working Group was struck in March of 2016. In initial meetings the group established a terms of reference and process for its work.

The group established and followed a series of steps to achieve its work:

- Identification of key policy topic areas to address
- Development of templates for topic-specific data extraction
- Execution of individual topic specific environmental scans reviewing current policies
- Gap analysis for each policy topic comparing current policies to a CBME approach
- Development of suggestions for common language, questions for consideration when revising policies and /or recommendations for policy revision
- Documentation of this work in individual policy communiques each addressing a specific key policy topic

During this work, the Policy Advisory Working Group identified policy areas of particular relevance to other audiences – for example, medical regulatory authorities. Those areas are specifically noted in the related documentation.

Identification of Key Policy Topic Areas

The working group identified policies that held implications for time-based training, along with those policies pertaining or related to assessment, progression and supervision of trainees.

- Remediation/Probation/Dismissal
- Assessment, specifically including Educational Handover
- Transfers & Re-entry
- Waiver of Training
- Moonlighting
- Graduated Responsibility/Resident Supervision
- Pathway to licensure **need to flag this area for FMRAC/regulators*

Reporting findings and recommendations

Each of the subsequent chapters addresses an individual key policy area topic, and includes a description of the template headings employed for data extraction. Each chapter also identifies and defines key terms in support of providing a common language for PGME policies. Finally, the chapters conclude with specific guidance for PGME policy reform in the format of recommendations for faculties.

These recommendations are provided to support discussion at individual universities, and for consultation with resident organizations and regulatory authorities as universities work to implement CBME-supportive policies at their individual institutions.

Summary of Key Themes

[to be written fall 2016]

Summary of Recommendations for Post-Graduate Education Faculties

[to be written fall 2016]

Theme	Current policies	Recommendation	Rationale for Change

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