Integrating CanMEDS and CanMEDS-FM into CPD

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Faculty/Presenter Disclosure

• Faculty: Christie Newton

• Relationships with commercial interests: None
  – Grants/Research Support: None
  – Speakers Bureau/Honoraria: None
  – Consulting Fees: None
  – Other: UBC Employee
Faculty/Presenter Disclosure

• Faculty: Mark Walton

• Relationships with commercial interests: None
  – Grants/Research Support: None
  – Speakers Bureau/Honoraria: None
  – Consulting Fees: None
  – Other: McMaster University employee
OBJECTIVES:

At the end of this session participants will be able to:

1. Evaluate CPD programs to identify opportunities to integrate CanMEDS roles and competencies (beyond the Medical Expert Role).

2. Describe different strategies to integrate intrinsic CanMEDS roles and competencies in CPD programming.
## Session Outline:

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Background/Rationale:

- Competency based education
- Recognition of the importance of the intrinsic roles in patient safety
- Health system changes
- Mainpro+ / Cert+
CanMEDS - Family Medicine

Image adapted from the CanMEDS Physician Competency Diagram with permission of the Royal College of Physicians and Surgeons of Canada. Copyright © 2009.
CanMEDS: An expression of the ideal physician

Resulting 7 broad themes organized as CanMEDS Roles

- Medical Expert
- Communicator
- Collaborator
- Manager
- Health Advocate
- Scholar
- Professional
CanMEDS an evolving Framework

1996
- Medical Expert
- Communicator
- Collaborator
- Manager
- Health Advocate
- Scholar
- Professional

2005

2001

2015
Results: CanMEDS 2015

CBD\textsuperscript{1,2} Competence Continuum

1. Transition out of professional practice
2. Continuing professional development (maintenance of competence and advanced expertise)
3. Transition to practice
4. Core of discipline
5. Foundations of discipline
6. Transition to discipline (orientation and assessment)
7. Entry to residency

\textsuperscript{1} Competence by Design (CBD)
\textsuperscript{2} Milestones at each stage describe terminal competencies
Definition: Medical Expert

As **Medical Experts**, physicians integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional values in their provision of high-quality and safe patient-centred care. Medical Expert is the central physician Role in the CanMEDS Framework and defines the physician’s clinical scope of practice.
Key competencies: Medical Expert

As Medical Experts, physicians are able to...

1. Practise medicine within their defined scope of practice and expertise

2. Perform a patient-centred clinical assessment and establish a management plan

3. Plan and perform procedures and therapies for the purpose of assessment and/or management

4. Establish plans for ongoing care and, when appropriate, timely consultation

5. Actively contribute, as an individual and as a member of a team providing care, to the continuous improvement of health care quality and patient safety
Definition: Communicator

As Communicators, physicians form relationships with patients and their families that facilitate the gathering and sharing of essential information for effective health care.
Key competencies: Communicator

As Communications, physicians are able to...

1. Establish professional therapeutic relationships with patients and their families

2. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families

3. Share health care information and plans with patients and their families

4. Engage patients and their families in developing plans that reflect the patient’s health care needs and goals

5. Document and share written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy
Definition: Collaborator

As Collaborators, physicians work effectively with other health care professionals to provide safe, high-quality, patient-centred care.
Key competencies: Collaborator

As Collaborators, physicians are able to...

1. **Work effectively with** physicians and other colleagues in the **health care professions**

2. Work with physicians and other colleagues in the health care professions to **promote** understanding, manage differences, and resolve conflicts

3. **Hand over** the care of a patient to another health care professional to facilitate continuity of safe patient care
As **Leaders**, physicians engage with others to contribute to a vision of a high-quality health care system and take responsibility for the delivery of excellent patient care through their activities as clinicians, administrators, scholars, or teachers.
Key competencies: Leader

As Leaders, physicians are able to...

1. Contribute to the *improvement* of health care delivery in teams, organizations, and systems

2. Engage in the *stewardship* of health care resources

3. Demonstrate *leadership* in professional practice

4. *Manage* career planning, finances and health human resources in a practice
As **Health Advocates**, physicians contribute their expertise and influence as they work with communities or patient populations to improve health. They work with those they serve to determine and understand needs, speak on behalf of others when required, and support the mobilization of resources to effect change.
Key competencies: Health Advocate

As Health Advocates, physicians are able to...

1. Respond to the individual patient’s health needs by **advocating with the patient** within and beyond the clinical environment

2. Respond to the needs of the communities or populations they serve by **advocating with them** for system-level change in a socially accountable manner
Definition: Scholar

As Scholars, physicians demonstrate a lifelong commitment to excellence in practice through continuous learning and by teaching others, evaluating evidence, and contributing to scholarship.
Key competencies: Scholar

As Scholars, physicians are able to...

1. Engage in the continuous enhancement of their professional activities through ongoing learning

2. Teach students, residents, the public, and other health care professionals

3. Integrate best available evidence into practice

4. Contribute to the creation dissemination of knowledge and practices applicable to health
Definition: Professional

As **Professionals**, physicians are committed to the health and well-being of individual patients and society through ethical practice, high personal standards of behaviour, accountability to the profession and society, physician-led regulation, and maintenance of personal health.
Key competencies: Professional

As **Professionals**, physicians are able to...

1. Demonstrate a commitment to patients by applying best practices and adhering to **high ethical standards**

2. Demonstrate a **commitment to society** by recognizing and responding to social expectations in health care

3. Demonstrate a commitment to the profession by **adhering to standards and participating in physician-led regulation**

4. Demonstrate a commitment to **physician health** and well-being to foster optimal patient care
Implications

Foundation of CanMEDS Framework

+ National standards for patient safety and quality improvement for residency

+ Integration of hand over competencies in training

+ Realignment to account for eHealth and technology, and their influence on practice now and in the future

+ Emphasis on lifelong learning

= Better patient outcomes
Individual and Team Exercise:

1. Take 1 minute and think about some of the ways the intrinsic CanMEDS roles are currently covered in CPD programming in your context.

2. Spend 2 minutes, discussing these strategies with a partner. What made the programs successful? What were the challenges?

3. Be prepared to report back to the entire group.
Group Feedback
‘...as medical experts we integrate all of the CanMEDS roles,...’

CanMEDS with its overlapping petals clearly highlights role integration; the competent physician draws upon various roles simultaneously.

Explicit integration of different roles within clinically focused CPD can demonstrate the practical relevance of all of the roles.
A Stepwise Approach:

1. **What is the clinical (Medical Expert) topic?** What intrinsic CanMEDS role(s) align with this topic in practice?

2. **What format is the CPD program?** Some roles lend themselves to different formats. Is the format conducive to intrinsic role integration?

3. **What learning objective(s) do you want to cover for the different CanMEDS roles?** Role integration is formalized by an explicit learning objective(s).

4. **What participant interactivity will you use to achieve the learning outcomes chosen?** Some competencies work better with certain activities.

5. **How will you assess the intrinsic role learning outcomes of the CPD program?** How will you assess the program?
Example 1: Large Group Multisession Learning

Title: Update on PSA and Prostate Cancer Screening
Format: didactic session 20 minutes with 10 minutes Q&A
Learning Objectives: By the end of the session participants will be able to:
1. Outline the current evidence for PSA testing in the context of prostate cancer screening (Medical Expert)
2. Describe the quality gaps in Prostate Cancer screening and what improvement strategies could address those gaps? (Scholar)
3. Access shared decision making resources in communicating risk/benefit to patients (Collaborator/Communicator)
A Stepwise Approach: Special considerations

6. Patient safety is intertwined into many of the intrinsic roles, how would you highlight this need? Some programming themes lend themselves to the integration of more than one intrinsic role; patient safety is one example. What might be some others?

7. When MD’s get into ‘trouble’ it is often with professionalism issues, how would you include this content into CPD programming? Some intrinsic roles are more challenging to integrate.
Work at your tables:

Take some time to consider integrating intrinsic roles into a CPD program new or existing. Use the questions as a guide. Work independently or in small groups. Be prepared to share your program with the group.
Group Feedback
Wrap up

You should now be able to:

1. Evaluate CPD programs to identify opportunities to integrate CanMEDS roles and competencies (beyond the Medical Expert Role).

2. Describe different strategies to integrate intrinsic CanMEDS roles and competencies in CPD programming.
Questions?