



CanMEDS Best Practices Submission Form

Category:

- Curriculum – a design for education around the CanMEDS competencies.
- Teaching Tool – a submission that will assist the teaching the specific CanMEDS competencies
- Assessment Tool – a submission that will assist in the assessment/evaluation of the CanMEDS competencies.

Type of Tool:

- | | | |
|---|--|---|
| <input type="checkbox"/> ITER | <input checked="" type="checkbox"/> Workshops | <input type="checkbox"/> Rotation |
| <input type="checkbox"/> FITER | <input type="checkbox"/> Facilitated Discussions | <input type="checkbox"/> Manual or Module |
| <input type="checkbox"/> OSCE | <input type="checkbox"/> Portfolios & Logbooks | <input type="checkbox"/> Website |
| <input type="checkbox"/> Rotation specific objectives | <input type="checkbox"/> Group exercise | <input type="checkbox"/> Other: _____ |

CanMEDS Role:

- | | |
|--|--|
| <input type="checkbox"/> Medical expert | <input type="checkbox"/> Health Advocate |
| <input checked="" type="checkbox"/> Communicator | <input type="checkbox"/> Scholar |
| <input type="checkbox"/> Collaborator | <input type="checkbox"/> Professional |
| <input type="checkbox"/> Manager | |

Title:

INCORPORATING COMMUNICATION SKILLS TRAINING IN GENERAL SURGERY TRAINING PROGRAMS.

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Abstract:

Since the release of RCPSC CanMEDS 2000 Report, residency programs have been searching for ways to explicitly incorporate the non-Medical Expert core competencies into their curriculum. Communication skills training addresses one of these core competencies: physician as Communicator is one of these core competencies that requires increased attention.

We developed one approach to meet the communication skills needs of General Surgery residents - incorporating content lectures with specific communication skills teaching. Twenty-four University of Ottawa and Queens University General Surgery residents were invited to take part in a Breast Cancer Education Day in Ottawa. Residents received lectures on breast cancer diagnosis and management (content to communicate). Also, they participated in a revised version of the *Talking Tools* workshop, a communication skills program developed by Health Canada to assist students, physicians and surgeons in their interactions with women diagnosed with cancer. This workshop was facilitated by an experienced instructor, and integrated into the day.

Residents then participated in 6 communication practice stations with a trained standardized patient. The content of the practice stations was developed with the assistance of a senior faculty in General Surgery. The stations included a discussion of treatment options (shared decision making), breaking bad news (handling emotions) and negotiating a difficult treatment plan (effective closure following a difficult interaction). Residents provided feedback on the process which was generally very positive.

We present a potential option available to General Surgery programs combining content specific lectures with targeted communication skills teaching and practice using an existing teaching module modified for residents. General Surgery program directors may be able to modify and incorporate an existing communication skills program into their curriculum. In doing so, local content experts would be able to work with individuals interested in communication skills training to develop an appropriate and applicable program for their residents.

References:

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2. Kurtz, S et al. *Teaching and learning communication skills in medicine* 2nd edition. Oxford: Radcliffe. 2005
3. Frank JR, Lee C, Keely E, Dojeiji S. Report of the Health Canada Talking Tools Evaluation Study Group. Ottawa: RCPSC. 2005.

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