

This document applies to those who begin training on or after July 1st, 2013.

DEFINITION

Adolescent Medicine is a Pediatric subspecialty that focuses on the assessment, diagnosis, and management of complex health issues within the context of the major biopsychosocial events that define the transition to adulthood. The subspecialty of Adolescent Medicine generates and disseminates new knowledge and best practices in adolescent health care.

GOALS

Upon completion of training, a resident will be an expert in Adolescent Medicine capable of assuming a consultant's role in the subspecialty. The resident must acquire an expert knowledge of the theoretical basis of the subspecialty, including its foundations in the basic medical sciences and research.

Residents must demonstrate the requisite knowledge, skills and attitudes for effective adolescent and family-centred care and service to a diverse population. In all aspects of subspecialty practice, the graduate must be able to address issues of gender, sexual orientation, age, culture, ethnicity, and ethics in a professional manner.

Only candidates certified by the Royal College of Physicians and Surgeons of Canada in Pediatrics may be eligible for subspecialty certification in Adolescent Medicine. A maximum of one year of training in Adolescent Medicine may be undertaken at the fourth year residency level during training for certification in Pediatrics.

ADOLESCENT MEDICINE COMPETENCIES

At the completion of training, the resident will have acquired the following competencies and will function effectively as a:

Medical Expert

Definition:

As Medical Experts, Adolescent Medicine subspecialists integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional attitudes in their provision of adolescent-centred care. Medical Expert is the central physician Role in the CanMEDS framework.

Key and Enabling Competencies: Adolescent Medicine subspecialists are able to...

1. Function effectively as consultants, integrating all of the CanMEDS Roles to provide optimal, evidence-based, ethical and adolescent-centred health care

- 1.1. Perform a consultation effectively, including the presentation of well-documented assessments and recommendations in written and/or verbal form in response to a request from another health care professional
- 1.2. Demonstrate use of all CanMEDS competencies relevant to Adolescent Medicine
- 1.3. Identify and appropriately respond to relevant ethical issues arising in patient care
- 1.4. Prioritize professional duties effectively and appropriately when faced with multiple demands
- 1.5. Demonstrate compassionate adolescent-centred care and family-centred care as appropriate
- 1.6. Recognize and respond to the ethical issues in medical decision-making
- 1.7. Demonstrate medical expertise in situations other than patient care, such as providing expert legal testimony or advising governments, as needed

2. Establish and maintain clinical knowledge, skills and attitudes appropriate to Adolescent Medicine

- 2.1. Apply knowledge of the biological, psychological and social sciences that are clinically relevant to Adolescent Medicine. The following are considered core knowledge for Adolescent Medicine:
 - 2.1.1. Normal and abnormal adolescent physical growth and development
 - 2.1.1.1. Physical changes of puberty and the underlying hormonal influences
 - 2.1.1.2. Disorders of puberty and growth
 - 2.1.2. Normal and abnormal psychological, emotional, and cognitive development in adolescence
 - 2.1.2.1. The impact of normal and abnormal growth and development on adolescent health and well-being
 - 2.1.3. Pharmacokinetics and toxicology in adolescence, and how growth and development impact on drug dosing and metabolism
 - 2.1.4. Theoretical frameworks in adolescent care
 - 2.1.4.1. Evolving theoretical frameworks, including but not limited to developmental context of risk behaviours, harm reduction, trans-theoretical model of change, motivational model, positive youth development and resilience
 - 2.1.5. Sex and gender-specific aspects of adolescent care

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 2.1.5.1. Sex and gender-specific medical conditions and concerns
- 2.1.5.2. Sex and gender differences in the presentation of medical and psychiatric conditions
- 2.1.5.3. Sex and gender differences in utilization of health care services

- 2.1.6. Nutrition and exercise
 - 2.1.6.1. Nutritional requirements for optimal adolescent growth and development
 - 2.1.6.2. Nutritional disorders in adolescents
 - 2.1.6.3. Positive and negative impact of physical activity on physical and mental health

- 2.1.7. Eating disorders
 - 2.1.7.1. The spectrum of presentations of children and adolescents with eating disorders
 - 2.1.7.2. Etiology, pathogenesis, prevention of, and risk factors
 - 2.1.7.3. The impact of eating disorders on growth, development, health and well-being
 - 2.1.7.4. The developmentally-appropriate and evidence-based treatment modalities for children and adolescents with eating disorders

- 2.1.8. Obesity
 - 2.1.8.1. Etiology, pathogenesis, prevention of, and risk factors for obesity
 - 2.1.8.2. The impact of obesity on growth, development, health and well-being
 - 2.1.8.3. The developmentally-appropriate and evidence-based treatment modalities for adolescent obesity

- 2.1.9. Sexual and reproductive health
 - 2.1.9.1. Normal and abnormal, male and female, sexual and reproductive anatomy and physiology
 - 2.1.9.2. Diagnosis and management of disorders of the reproductive tract, including but not limited to tumours, congenital abnormalities, inflammatory conditions, and vascular conditions
 - 2.1.9.3. Diagnosis and treatment of menstrual disorders
 - 2.1.9.4. Sexuality
 - 2.1.9.4.1. The developmental aspects of adolescent sexuality and trends in adolescent sexual behavior

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 2.1.9.4.2. Development and diversity of sexual orientation and identity
- 2.1.9.5. Contraception
 - 2.1.9.5.1. Methods, indications, contraindications and complications of contraception in healthy adolescents and those with special health care needs
 - 2.1.9.5.2. Mechanisms of action of contraceptive methods
 - 2.1.9.5.3. Issues relating to acceptability of and adherence to contraceptive methods
- 2.1.9.6. Sexually transmitted infections (STIs)
 - 2.1.9.6.1. Epidemiology of STIs, including HIV
 - 2.1.9.6.2. Risk factors for STIs that are relevant to adolescents
 - 2.1.9.6.3. Prevention of STIs, including safe sex practices
 - 2.1.9.6.4. Screening, diagnosis, and treatment of sexually transmitted infections
 - 2.1.9.6.5. Indications for STI testing, genital and pelvic examination and Papanicolaou testing
- 2.1.9.7. Adolescent pregnancy
 - 2.1.9.7.1. Epidemiology of adolescent pregnancy
 - 2.1.9.7.2. Pregnancy prevention
 - 2.1.9.7.3. Physical, emotional, social and economic implications of adolescent pregnancy
 - 2.1.9.7.4. Initial assessment, pregnancy options counseling, and planning for appropriate follow-up of the pregnant adolescent
 - 2.1.9.7.5. Complications of early pregnancy including ectopic pregnancy, and threatened, incomplete and complete abortions
 - 2.1.9.7.6. Methods and complications of therapeutic abortions
 - 2.1.9.7.7. Impact of chronic illness on the pregnant adolescent
 - 2.1.9.7.8. Impact of pregnancy on adolescents with chronic medical illnesses
- 2.1.10. Maltreatment, violence and trauma
 - 2.1.10.1. Epidemiology, prevention, identification, assessment, and management of:
 - 2.1.10.1.1. Neglect

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 2.1.10.1.2. Emotional abuse
- 2.1.10.1.3. Physical abuse
- 2.1.10.1.4. Intimate partner violence and victimization
- 2.1.10.1.5. Sexual victimization and the principles of assessment, including procurement of samples for forensic purposes
- 2.1.10.1.6. Bullying
- 2.1.10.1.7. Gang-related violence

- 2.1.10.2. Impact of trauma on development, attachment and mental and physical health

- 2.1.11. Injury
 - 2.1.11.1. Epidemiology and prevention of intentional and unintentional injury
 - 2.1.11.2. Impact of injury on health and well-being
 - 2.1.11.3. Clinical presentation and approach to overdose and toxic ingestion

- 2.1.12. Sports medicine
 - 2.1.12.1. Assessment and management of common sports injuries
 - 2.1.12.2. Disorders associated with the female and male athlete, including but not limited to use of performance enhancing substances, and the female athlete triad (disordered eating, amenorrhea/oligomenorrhea and low bone mineral density)

- 2.1.13. Medical illness in adolescents
 - 2.1.13.1. Epidemiology, etiology, pathogenesis, clinical features, and management of common organ-specific conditions that present or worsen during adolescence
 - 2.1.13.2. Complex health conditions, including but not limited to chronic fatigue syndrome, sleep disorders, functional and somatic disorders
 - 2.1.13.3. Common complementary and alternative medicine strategies

- 2.1.14. Special health care needs
 - 2.1.14.1. Impact of chronic illness and disability on the health and well-being of adolescents and their families
 - 2.1.14.2. Special needs of the adolescent with physical and cognitive disabilities

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 2.1.14.3. Impact of life-threatening illnesses on adolescent development and emotional well-being
- 2.1.15. Adherence to treatment regimens
 - 2.1.15.1. Developmental considerations impacting adherence
 - 2.1.15.2. Protective factors and barriers influencing adherence
 - 2.1.15.3. Strategies to promote adherence
- 2.1.16. Transition and transfer of care from the pediatric to the adult health care system
 - 2.1.16.1. Models to promote optimal transition of care
- 2.1.17. Mental health and neurodevelopmental disorders
 - 2.1.17.1. Epidemiology, clinical features, differential diagnosis, course of illness and management, including referral as appropriate, of the following mental health disorders commonly seen by Adolescent Medicine specialists:
 - 2.1.17.1.1. Adjustment disorders
 - 2.1.17.1.2. Anxiety disorders
 - 2.1.17.1.3. Attention deficit hyperactivity disorder
 - 2.1.17.1.4. Depressive disorders
 - 2.1.17.1.5. School problems and school refusal
 - 2.1.17.1.6. Somatic symptom disorders
 - 2.1.17.1.7. Eating disorders (see section 2.1.5)
 - 2.1.17.1.8. Substance use disorders (see section 2.1.17.)
 - 2.1.17.1.9. Suicide and self-harm behaviours
 - 2.1.17.1.10. Disruptive behavior disorders
 - 2.1.17.1.11. Problem gambling and gaming
 - 2.1.17.2. Epidemiology, clinical features, differential diagnosis, course of illness, and appropriate referral of the following mental health disorders:
 - 2.1.17.2.1. Autism spectrum disorder
 - 2.1.17.2.2. Bipolar and related disorders
 - 2.1.17.2.3. Cognitive and learning disorders
 - 2.1.17.2.4. Personality disorders
 - 2.1.17.2.5. Psychotic disorders
 - 2.1.17.3. Key aspects in the management of mental health disorders

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 2.1.17.3.1. Indications, contraindications, and side effects of commonly used psychotropic medications appropriate for use during adolescence
- 2.1.17.3.2. Knowledge of the various psychotherapeutic modalities: individual, family, and group therapy
- 2.1.17.3.3. Knowledge of psychiatric disorders affecting and/or secondary to medical conditions in adolescents
- 2.1.17.3.4. Crisis identification and management
- 2.1.17.3.5. Indications for referral to a mental health professional
- 2.1.17.3.6. Stigmatization of mental health problems

2.1.18. Substance use/abuse

- 2.1.18.1. Epidemiology, prevention, risk factors, identification, and evaluation of tobacco, alcohol and other substance use and abuse
- 2.1.18.2. Impact of substance use and abuse on health and well-being
- 2.1.18.3. Pharmacokinetics of substances of abuse
- 2.1.18.4. Specific aspect of treatment
 - 2.1.18.4.1. Effective strategies for tobacco cessation
 - 2.1.18.4.2. Counseling for substance use reduction/cessation
 - 2.1.18.4.3. Assessment of need and readiness for treatment
 - 2.1.18.4.4. Harm reduction and its application to the spectrum of substance use and abuse disorders
 - 2.1.18.4.5. Developmentally-appropriate treatment modalities for substance use and abuse
 - 2.1.18.4.6. Identification, evaluation and management, including referral, of the adolescent with concurrent disorders including but not limited to co-existing substance abuse and mental health disorders
 - 2.1.18.4.7. Knowledge of the medical management of withdrawal and overdose

2.1.19. Care of vulnerable and marginalized populations

- 2.1.19.1. Social, cultural, and political dimensions of health in the following populations:
 - 2.1.19.1.1. Aboriginal youth
 - 2.1.19.1.2. Youth from diverse cultural and ethnic backgrounds including but not limited to immigrants and refugees
 - 2.1.19.1.3. Street-involved youth

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 2.1.19.1.4. Lesbian, gay, bisexual, transgendered, questioning (LGBTQ), and gender dysphoric adolescents
 - 2.1.19.1.5. HIV-positive adolescents
 - 2.1.19.1.6. Youth in the care of child protective services
 - 2.1.19.1.7. Adolescent parents and their children, including the role of males and fathering
 - 2.1.19.1.8. Youth living in poverty
 - 2.1.19.1.9. Incarcerated youth and youth involved in the justice system
 - 2.1.19.1.10. Sexually exploited youth
- 2.1.20. Public health
- 2.1.20.1. Principles of public health including primary, secondary and tertiary prevention
 - 2.1.20.2. Screening and anticipatory guidance
 - 2.1.20.3. Immunizations relevant to adolescent health
 - 2.1.20.4. Adolescent risk-taking
 - 2.1.20.5. Impact of media, technology and social networking on adolescent health
 - 2.1.20.6. Social determinants of health
- 2.1.21. Legal and ethical issues, according to jurisdiction
- 2.1.21.1. Laws and concepts of confidentiality and informed consent, as applied to one's own practice, when caring for adolescents
 - 2.1.21.2. Ethical issues pertaining to confidentiality and consent to treatment
 - 2.1.21.3. Assessment of competency and capacity of the adolescent in health care decision-making
 - 2.1.21.4. Legal issues pertaining to adolescent health and behaviour
 - 2.1.21.5. Ethical issues in providing care to the adolescent
 - 2.1.21.6. Laws and obligations in reporting abuse and neglect, sexual, emotional and physical
 - 2.1.21.7. Mental health laws
- 2.1.22. Role of the family
- 2.1.22.1. Evolving nature and organizational diversity, including but not limited to culture, religion, and socio-economic status, of the concept of family
 - 2.1.22.2. Impact of family functioning and dynamics on adolescent development

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 2.1.22.3. Impact of adolescent physical and mental problems on family functioning
 - 2.1.22.4. Impact of family transitions, including but not limited to divorce, blended family, serious illness in a family member, and death, on adolescent well-being
 - 2.2. Describe the CanMEDS framework of competencies relevant to Adolescent Medicine
 - 2.3. Apply lifelong learning skills of the Scholar Role to implement a personal program to keep up-to-date and enhance areas of professional competence
 - 2.4. Contribute to the enhancement of quality care and patient safety in Adolescent Medicine, integrating the available best evidence and best practices
- 3. Perform a complete and appropriate assessment of an adolescent and his/her family**
- 3.1. Assess the cognitive and developmental maturation of an adolescent clinically and use a non-judgmental, developmentally appropriate approach towards the adolescent
 - 3.2. Identify and explore issues to be addressed in an adolescent encounter effectively, including the adolescent's context, preferences, and agenda
 - 3.3. Conduct history and physical examinations that are complete, accurate, well-organized, and reflect a biopsychosocial approach
 - 3.3.1. Conduct a thorough assessment of growth and development including sexual maturity rating, height and weight, body mass index (BMI), and plotting on a growth curve
 - 3.3.2. Conduct a psychosocial assessment
 - 3.3.2.1. Select and use appropriate interviewing and screening tools
 - 3.3.3. Assess family function and dynamics as appropriate
 - 3.4. Select medically appropriate investigative methods in a resource-effective and ethical manner
 - 3.5. Demonstrate effective clinical problem solving and judgment to address adolescent problems, including interpreting available data and integrating information to generate differential diagnoses and management plans
- 4. Use preventive and therapeutic interventions effectively**
- 4.1. Demonstrate the ability to select, assess, and interpret laboratory tests, with an awareness of costs and potential inconvenience and discomfort to the adolescent
 - 4.2. Implement an effective management plan in collaboration with the adolescent and his/her family when appropriate

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 4.3. Demonstrate effective, appropriate, and timely application of preventive and therapeutic interventions
 - 4.3.1. Conduct effective short-term counseling for adolescents and their parents
 - 4.3.2. Effectively handle conflict situations between adolescents and their families
 - 4.3.2.1. Facilitate developmentally appropriate autonomy in the adolescent and support parents in this developmental task
 - 4.3.3. Recognize and manage emergency conditions effectively, including but not limited to an extremely ill adolescent or an adolescent in a crisis situation
 - 4.3.4. Demonstrate the ability to promote stress management strategies designed to move youth towards positive behaviours
 - 4.4. Identify and promote resilience and positive youth development in the adolescent
 - 4.5. Ensure appropriate informed consent is obtained for therapies
 - 4.5.1. Demonstrate the ability to assess capacity to consent to treatment in adolescents
 - 4.6. Ensure patients receive appropriate end-of-life care
- 5. Demonstrate proficient and appropriate use of procedural skills, both diagnostic and therapeutic**
- 5.1. Demonstrate effective and appropriate use of diagnostic and therapeutic procedures
 - 5.1.1. Perform a complete pelvic examination on the female adolescent and obtain appropriate specimens
 - 5.1.2. Perform a genital examination on the male adolescent and obtain appropriate specimens
 - 5.2. Ensure appropriate informed consent is obtained for procedures
 - 5.3. Document and disseminate information related to procedures performed and their outcomes
 - 5.4. Ensure adequate follow-up is arranged for procedures performed
- 6. Seek appropriate consultation from other health professionals, recognizing the limits of their own expertise**
- 6.1. Demonstrate insight into their own limits of expertise
 - 6.2. Demonstrate effective, appropriate, and timely consultation from another health professional as needed for optimal adolescent care
 - 6.3. Arrange appropriate follow-up care services for adolescents and their families

Communicator

Definition:

As *Communicators*, Adolescent Medicine subspecialists effectively facilitate the doctor-patient relationship and the dynamic exchanges that occur before, during, and after the medical encounter.

Key and Enabling Competencies: Adolescent Medicine subspecialists are able to...

1. Develop rapport, trust, and ethical therapeutic relationships with adolescents and their families

- 1.1. Demonstrate a positive, non-judgmental attitude towards adolescents and their families
- 1.2. Recognize that being a good communicator is a core clinical skill for physicians, and that effective physician-adolescent communication can foster adolescent satisfaction, physician satisfaction, adherence and improved clinical outcomes
- 1.3. Establish positive, ethical therapeutic relationships with adolescents and their families that are characterized by understanding, trust, respect, honesty and empathy
- 1.4. Respect the adolescent's right to confidentiality, privacy and autonomy within a developmental context
- 1.5. Listen effectively
- 1.6. Be aware of and responsive to nonverbal cues
- 1.7. Communicate effectively with family members involved in the adolescent's health care where appropriate
- 1.8. Facilitate a structured clinical encounter effectively
- 1.9. Utilize various strategies, including but not limited to motivational interviewing and strengths-based interviewing, to engage the reluctant or ambivalent adolescent

2. Accurately elicit and synthesize relevant information and perspectives of adolescents and families, colleagues, and other professionals

- 2.1. Demonstrate appropriate interviewing skills with adolescents and their families
- 2.2. Recognize emotional and developmental needs of adolescents and their families
- 2.3. Understand the adolescent's beliefs, concerns, expectations and experiences relevant to the presenting condition
- 2.4. Seek out and synthesize relevant information from other sources, such as the adolescent's family, caregivers and other professionals as appropriate

3. Convey relevant information and explanations accurately to patients and families, colleagues, and other professionals

- 3.1. Communicate information to adolescents and, if appropriate, their families in a sensitive manner and in such a way that it is understandable and encourages discussion and participation in decision-making
- 3.2. Communicate effectively with family members involved in the adolescent's health care while respecting the adolescent's legal and ethical rights

4. Develop a common understanding on issues, problems and plans with patients, families, and other professionals to develop a shared plan of care

- 4.1. Engage adolescents in shared decision making in a developmentally-appropriate manner to formulate a plan of care, involving families and other relevant professionals as needed
 - 4.1.1. Integrate the adolescent's beliefs, concerns, expectations and experiences relevant to the presenting condition
- 4.2. Identify, explore, and respect the adolescent's and, where appropriate, the family's preferences, diversity and differences, including but not limited to the impact of gender, religion, and cultural beliefs on decision-making
- 4.3. Address challenging communication issues effectively, such as confidentiality, obtaining informed consent, delivering bad news, and addressing anger, confusion and misunderstanding

5. Convey effective oral and written information about a medical encounter

- 5.1. Maintain clear, accurate, timely, and appropriate records of clinical encounters and plans, including but not limited to progress notes, discharge summaries, and consultation letters
- 5.2. Present verbal reports of clinical encounters effectively to other members of the health care team
- 5.3. Present medical information effectively to the public or media about a medical issue

Collaborator

Definition:

As *Collaborators*, Adolescent Medicine subspecialists effectively work within a health care team to achieve optimal adolescent care.

Key and Enabling Competencies: Adolescent Medicine subspecialists are able to...

1. Collaborate effectively and appropriately in an interprofessional health care team

- 1.1. Demonstrate proficiency in working in interdisciplinary and interprofessional teams, managing effective communication within the team, collaborating, consulting, and delegating effectively and respectfully in supporting adolescents and their families
- 1.2. Describe the roles and responsibilities of Adolescent Medicine subspecialists clearly in relation to other professionals
- 1.3. Recognize and respect the diversity of roles, responsibilities and competencies of professionals of other disciplines
- 1.4. Seek consultation from other health professionals when appropriate
- 1.5. Respect team ethics, including confidentiality, resource allocation and professionalism
- 1.6. Demonstrate leadership within a health care team as well as receive direction from other members of the team, when appropriate
- 1.7. Enter into interdependent relationships with other professions for the provision of quality care

2. Work with other health professionals effectively to anticipate, prevent, negotiate, and resolve professional conflict

- 2.1. Demonstrate a respectful attitude towards other colleagues and members of an interprofessional team
- 2.2. Reflect on interprofessional team function
- 2.3. Identify and utilize collaborative strategies to prevent and manage conflict
- 2.4. Respect differences and address misunderstandings and limitations in other professionals
- 2.5. Recognize one's own personal beliefs and values, and how they may impact professional relationships

3. Collaborate with professionals in community agencies, schools, and other organizations working with adolescents and their families

- 3.1. Collaborate effectively with primary care and referring providers to support, educate and provide consultation
- 3.2. Identify appropriate community agencies, demonstrate an understanding of the role of various service providers, and facilitate regular communication to efficiently and effectively provide collaborative treatment planning and delivery

Manager

Definition:

As *Managers*, Adolescent Medicine subspecialists are integral participants in health care organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the health care system.

Key and Enabling Competencies: Adolescent Medicine subspecialists are able to...

1. Participate in activities that contribute to the effectiveness of their health care organizations and systems

- 1.1. Describe the principles of and participate in systemic quality process evaluation and improvement, such as safety initiatives
- 1.2. Describe the structure and function of the health care system as it relates to Adolescent Medicine
- 1.3. Describe principles of health care financing, including physician remuneration, budgeting and organizational funding
- 1.4. Work with others to assess, plan, and implement non-clinical tasks, such as research, education, and administrative responsibilities

2. Manage their practice and career effectively

- 2.1. Set realistic priorities and manage time to balance professional obligations, personal life and self-care in order to maintain optimal personal and professional functioning
- 2.2. Demonstrate knowledge of practice management strategies
 - 2.2.1. Manage time and work efficiently as either an independent health care professional or as a member of an interdisciplinary team
- 2.3. Implement processes to ensure personal practice improvement
- 2.4. Use information technology effectively to optimize adolescent health care

3. Allocate finite health care resources appropriately

- 3.1. Recognize the importance of equitable allocation of health care resources, balancing effectiveness, efficiency, and access with optimal and evidence-based adolescent care
- 3.2. Apply evidence and management processes for cost-appropriate care

4. Serve in administration and leadership roles, as appropriate

- 4.1. Demonstrate leadership skills in clinical, scholarly, or administrative settings
- 4.2. Chair or participate effectively in committees and meetings
- 4.3. Lead or implement change in health care
- 4.4. Plan relevant elements of health care delivery (e.g., work schedules)

Health Advocate

Definition:

As *Health Advocates*, Adolescent Medicine subspecialists responsibly use their expertise and influence to advance the health and well-being of individual adolescents, communities, and populations.

Key and Enabling Competencies: Adolescent Medicine subspecialists are able to...

1. Respond to individual adolescent health needs and issues as part of adolescent care

- 1.1. Identify and act on opportunities for advocacy, health promotion, and disease prevention with adolescents and their families when appropriate
 - 1.1.1. Assist the adolescent, and his/her family, when appropriate, in making informed choices, and provide guidance and support that gives the adolescent the best opportunity to achieve his/her optimal health potential
- 1.2. Demonstrate and promote, when appropriate, active involvement of the family in medical decision-making and comprehensive care of the adolescent, while respecting issues of confidentiality and capacity to consent
- 1.3. Appreciate the possibility of competing interests between individual advocacy issues and the community at large

2. Respond to the health needs of the communities that they serve

- 2.1. Describe the practice communities that they serve
- 2.2. Identify and act on institutional and environmental barriers to effective adolescent care
- 2.3. Identify and act on opportunities for advocacy, health promotion and disease prevention in the communities that they serve
- 2.4. Appreciate the possibility of competing interests between the communities served and other populations
- 2.5. Participate on committees or in other group settings where there is an opportunity to advocate for the health care needs of the adolescent population

3. Identify the determinants of health for the populations that they serve

- 3.1. Identify the psychological, social, developmental, and economic determinants that may affect adolescents' health and ability to receive care, and work to assist them in addressing these issues
- 3.2. Advocate on behalf of vulnerable or marginalized populations

4. Promote the health of individual adolescents, communities, and populations

- 4.1. Describe an approach to implementing a change in a determinant of health of the populations they serve
- 4.2. Describe how public policy impacts on the health of the populations served
- 4.3. Identify points of influence in the health care system
- 4.4. Describe the ethical and professional issues inherent in health advocacy, including altruism, social justice, autonomy, integrity and idealism
- 4.5. Recognize the possibility of conflict inherent in their role as a health advocate for adolescents or community with that of manager or gatekeeper
- 4.6. Describe the role of the medical profession in advocating collectively for adolescent health and safety

Scholar

Definition:

As *Scholars*, Adolescent Medicine subspecialists demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application, and translation of medical knowledge.

Key and Enabling Competencies: Adolescent Medicine subspecialists are able to...

1. Maintain and enhance professional activities through ongoing learning

- 1.1. Demonstrate a commitment to life-long learning
- 1.2. Describe the principles of maintenance of competence
- 1.3. Describe the principles and strategies for implementing a personal knowledge management system
- 1.4. Recognize and reflect on learning issues in practice
- 1.5. Conduct a personal practice audit
- 1.6. Pose an appropriate learning question
- 1.7. Access and interpret the relevant evidence
- 1.8. Integrate new learning into practice
- 1.9. Evaluate the impact of any change in practice
- 1.10. Document the learning process

2. Critically evaluate medical information and its sources, and apply this appropriately to practice decisions

- 2.1. Describe the principles of critical appraisal
- 2.2. Access and critically appraise evidence in order to address a clinical question
- 2.3. Integrate critical appraisal conclusions into clinical care

3. Facilitate the learning of patients, families, students, residents, other health professionals, the public, and others

- 3.1. Describe principles of learning relevant to medical education
- 3.2. Identify collaboratively the learning needs and desired learning outcomes of others
- 3.3. Select effective teaching strategies and content to facilitate others' learning
- 3.4. Demonstrate an effective lecture or presentation
- 3.5. Assess and reflect on a teaching encounter
- 3.6. Provide effective feedback
- 3.7. Describe the principles of ethics with respect to teaching

4. Contribute to the development, dissemination, and translation of new knowledge and practices

- 4.1. Actively participate in a project of substantive scholarly exploration and analysis that requires critical thinking: basic, clinical, or translational research, health services research, quality improvement, bioethics, education, and/or public policy
 - 4.1.1. Describe the principles and processes of research and scholarly inquiry
 - 4.1.2. Describe the principles of research ethics
 - 4.1.3. Demonstrate skill in formulating a scholarly question, conducting a systematic search for evidence, and applying appropriate methods to address the question
 - 4.1.4. Gather and analyze data
 - 4.1.5. Disseminate findings of the study in oral and/or written form

Professional

Definition:

As *Professionals*, Adolescent Medicine subspecialists are committed to the health and well-being of individuals and society through ethical practice, profession-led regulation, and high personal standards of behaviour.

Key and Enabling Competencies: Adolescent Medicine subspecialists are able to...

1. Demonstrate a commitment to their adolescent patients, their profession, and society through ethical practice

- 1.1. Exhibit appropriate professional behaviors in practice, including honesty, integrity, commitment, compassion, empathy, responsibility, respect, altruism, and an appreciation of diversity
- 1.2. Demonstrate self-awareness and an understanding of how one's own beliefs and values, as they relate to issues in adolescent health, may influence one's professional care

OBJECTIVES OF TRAINING IN ADOLESCENT MEDICINE (2013)

- 1.3. Demonstrate a commitment to delivering the highest quality care and maintenance of competence
 - 1.4. Recognize and appropriately respond to ethical issues encountered in practice
 - 1.5. Recognize and appropriately manage conflicts of interest
 - 1.6. Recognize the principles and limits of adolescent confidentiality as defined by professional practice standards and the law
 - 1.7. Maintain appropriate boundaries with adolescents and their families
- 2. Demonstrate a commitment to their adolescent patients, their profession, and society through participation in profession-led regulation**
- 2.1. Demonstrate knowledge and understanding of the professional, legal and ethical codes of practice
 - 2.2. Fulfil the regulatory and legal obligations required of current practice
 - 2.3. Demonstrate accountability to professional regulatory bodies
 - 2.4. Recognize and respond to others' unprofessional behaviours in practice
 - 2.5. Participate in peer review
- 3. Demonstrate a commitment to physician health and sustainable practice**
- 3.1. Balance personal and professional priorities to ensure personal health and a sustainable practice
 - 3.2. Strive to heighten personal and professional awareness and insight
 - 3.3. Recognize other professionals in need and respond appropriately

This document is to be reviewed by the Specialty Committee in Adolescent Medicine by 31 December 2014.

Revised – Specialty Committee – January 2013

Approved – Specialty Standards Review Committee – March 2013