Linking Curriculum and Assessment in a Competency-based Residency Training Program
Explain the integration of:
- CanMEDS-FM*
- Domains of Clinical Care
- Evaluation Objectives
within a Triple C Competency-based Curriculum

Goal of Residency Training

“To develop professional competence to the level of a physician ready to begin practice in the specialty of Family Medicine.”

Alignment Sub-committee of the Triple C Competency-based Curriculum Task Force, November 2011
The Triple C Competency Based Curriculum

Canadian Family Medicine Curriculum

Le cursus en médecine familiale au Canada

Ensuring readiness to begin practice in the specialty of Family Medicine

www.cfpc.ca/Triple_C
Triple C Competency-based Curriculum

1. **Comprehensive**
2. **Continuity of**
3. **Centred in Family Medicine**
Becoming a Family Physician

A Lifelong Journey
Becoming a Family Physician

A Lifelong Journey

Ready to begin practice in the specialty of Family Medicine
Becoming a Family Physician

A Lifelong Journey

UNDERGRADUATE MEDICAL EDUCATION

Canadian Family Medicine Curriculum

FAMILY MEDICINE RESIDENCY TRAINING

CFPC CERTIFICATION

CONTINUING PROFESSIONAL DEVELOPMENT

*Includes Formal Enhanced Skills Training

Ready to begin practice in the specialty of Family Medicine

Canadian Family Medicine Curriculum

Le cursus en médecine familiale au Canada
Responsibilities of a Program

- Design a curriculum that leads to expected program outcomes
- Provide relevant educational experiences
- Assess residents for competence
Design Curriculum

Guided by:

• CanMEDS-FM Roles
• Domains of Clinical Care
  - Where residents learn across clinical settings
# The Building Blocks

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<th>Design and provide curriculum</th>
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# The Building Blocks

## Design

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## Design and provide curriculum

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## Assess

ONGOING ASSESSMENT of residents – based on Evaluation objectives
The Building Blocks

**Design**

**DEFINED PROGRAM OUTCOMES**
- Competency-based and guided by CanMEDS-FM

**Design and provide curriculum**
- Triple C Competency-based LEARNING OPPORTUNITIES
  - Clinical Experiences
  - Academic Program
  - Other Activities
- Triple C Competency-based teaching and learning STRATEGIES
- Triple C Competency-based RESOURCES
  - Clinical resources
  - Teaching Materials
  - Faculty

**Assess**

ONGOING ASSESSMENT of residents – based on Evaluation objectives

Outcome-based PROGRAM EVALUATION
Provide Relevant Learning Opportunities

Each family medicine resident will be given the relevant learning opportunities to become proficient in the seven CanMEDS-FM Roles across the Domains of Clinical Care
Assess Residents

Comprehensive sampling across the Domains of clinical care is guided by the Evaluation Objectives:
- Six skill dimensions
  - Observable behaviours
  - Themes
- Phases of the Clinical Encounter
- Priority topics
  - Key features for assessment in Family Medicine
Assess Residents

• The Evaluation Objectives are a guide to sample performance in the clinical and academic environment

• The process of ongoing workplace-based assessment enables the program director to determine competence for certification
Assess Residents

Competency-based assessment of residents requires:

• Ongoing in-training assessment
• Regular progress reviews
• Other assessment tools
How do the Multiple Frameworks Relate?

• Multiple frameworks

- CanMEDS-FM Roles
- Domains of Clinical Care
- Evaluation Objectives
How do the Multiple Frameworks Relate?

• Multiple frameworks

  - Each has a purpose within a Triple C Competency-based Curriculum
  - The linkage point: the resident engaged in relevant learning activities
Triple C Through Different Lenses

- CanMEDS-FM Roles
- Evaluation Objectives
- Domains of Clinical Care

Resident engaged in relevant learning activities

Within a Triple C Competency-based Curriculum
Triple C Through Different Lenses

Design
- CanMEDS-FM Roles
- Evaluation Objectives

Provide
- Domains of Clinical Care

Assess
- Resident engaged in relevant learning activities

Within a Triple C Competency-based Curriculum
The Three Frameworks

- FM Expert
- Communicator
- Collaborator
- Professional
- Advocate
- Manager
- Scholar

- CanMEDS-FM Roles
- Evaluation Objectives
- Domains of Clinical Care

Resident engaged in relevant learning activities

Within a Triple C Competency-based Curriculum
The Three Frameworks

Resident engaged in relevant learning activities

Skill Dimensions:
- Patient-Centered Approach
- Clinical Reasoning Skills
- Procedure Skills
- Selectivity
- Communication Skills
- Professionalism

Content sampling utilizes:
- Themes with observable behaviours
- Phases of Clinical Encounter
- Priority Topics with Key features
The Three Frameworks

Across the Life Cycle
Across Clinical Settings
Across Spectrum of Clinical Responsibilities
Across Diverse Populations
Procedural Skills

Within a Triple C Competency-based Curriculum

CanMEDS-FM Roles
Evaluation Objectives
Domains of Clinical Care

Resident engaged in relevant learning activities

Skill Dimensions:
- Patient-Centered Approach
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FM Expert
Communicator
Collaborator
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Content sampling utilizes:
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CanMEDS-FM Roles
Evaluation Objectives
Domains of Clinical Care

Resident engaged in relevant learning activities

Within a Triple C Competency-based Curriculum
**Example**

**FM expert:**
Demonstrate proficient assessment and management of patients using the patient-centred clinical method

**Communicator:**
Develop rapport, trust and ethical therapeutic relationships with patients and families

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**Resident seeing a recent immigrant teenage mother with abdominal pain in the Family Practice Clinic**

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**CanMEDS-FM Roles**

**Evaluation Objectives**

**Domains of Clinical Care**

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Within a Triple C Competency-based Curriculum
Example

FM expert: Demonstrate proficient assessment and management of patients using the patient-centred clinical method.

Communicator: Develop rapport, trust and ethical therapeutic relationships with patients and families.

Skill Dimension: Clinical Reasoning
Phase: Hypothesis generation
Priority Topic: Abdominal pain
Key feature: In a woman with abdominal pain: always rule out pregnancy if she is of reproductive age.

Skill Dimension: Communication skills
Theme: Cultural and age appropriateness
Observable Behaviour: Adapts communication style based on the patient’s cultural expectations or norms.

Resident seeing a recent immigrant teenage mother with abdominal pain in the Family Practice Clinic.

Within a Triple C Competency-based Curriculum.
Example

FM expert: Demonstrate proficient assessment and management of patients using the patient-centred clinical method
Communicator: Develop rapport, trust and ethical therapeutic relationships with patients and families

CanMEDS-FM Roles

Evaluation Objectives

Resident seeing a recent immigrant teenage mother with abdominal pain in the Family Practice Clinic

Skill Dimension: Clinical Reasoning
Phase: Hypothesis generation
Priority Topic: Abdominal pain
Key feature: In a woman with abdominal pain; always rule out pregnancy if she is of reproductive age.

Skill Dimension: Communication skills
Theme: Cultural and age appropriateness
Observable Behaviour: Adapts communication style based on the patient’s cultural expectations or norms

Life Cycle: Adolescence
Clinical Setting: FP Clinic
Clinical Responsibilities: Diagnosis and management
Population: Recent immigrant
Procedural Skills:

Domains of Clinical Care

Within a Triple C Competency-based Curriculum
Example

FM expert:
Demonstrate proficient assessment and management of patients using the patient-centred clinical method

Communicator:
Develop rapport, trust and ethical therapeutic relationships with patients and families

Resident seeing a recent immigrant teenage mother with abdominal pain in the Family Practice Clinic

Skill Dimension:
Clinical Reasoning
Phase: Hypothesis generation
Priority Topic: Abdominal pain
Key feature:
In a woman with abdominal pain: always rule out pregnancy if she is of reproductive age.

Skill Dimension:
Communication skills
Theme:
Cultural and age appropriateness

Observable
Adapts communication style based on the patient’s cultural expectations or norms

Within a Triple C Competency-based Curriculum
Design and provide

Clinical Exposure

- CanMEDS-FM Roles
- Evaluation Objectives
- Domains of Clinical Care
- Resident engaged in relevant learning activities

Within a Triple C Competency-based Curriculum
Design and provide

Clinical Exposure

CanMEDS-FM Roles

Evaluation Objectives

Domains of Clinical Care

Resident engaged in relevant learning activities

Academic sessions

Project Work

Simulations Etc...

Within a Triple C Competency-based Curriculum
Assess

Field notes

- CanMEDS-FM Roles
- Evaluation Objectives
- Resident engaged in relevant learning activities
- Domains of Clinical Care

Structured progress review
In-training evaluation forms

Within a Triple C Competency-based Curriculum
Assess

Field notes
Guided self-assessment
360 Evaluation
Etc...

Within a Triple C Competency-based Curriculum
The Link

Design

Resident engaged in relevant learning activities

CanMEDS-FM Roles → Evaluation Objectives

Provide

Domains of Clinical Care

Within a Triple C Competency-based Curriculum
The Link

Design

Provide

CanMEDS-FM Roles

Evaluation Objectives

Resident engaged in relevant learning activities

Domains of Clinical Care

Assess

Evidence of competence

Within a Triple C Competency-based Curriculum
The Link

Design

CanMEDS-FM Roles

Evaluation Objectives

Resident engaged in relevant learning activities

Assess

Evidence of competence

Ready to practice FM

Provide

Domains of Clinical Care

Within a Triple C Competency-based Curriculum
A Family Medicine Residency Program using a Triple C Competency-based Curriculum

• “Provides residents with relevant learning activities to enable them to integrate competencies”

• “Gathers evidence to determine resident readiness to begin practice in the specialty of Family Medicine”

Alignment Sub-committee of the Triple C Competency-based Curriculum Task Force, Nov. 2011
How Will a Program Know…
that a resident is ready to begin practice in the specialty of Family Medicine?

“A resident shows consistent demonstration of competencies within a Triple C Competency-based Curriculum.”

Alignment Sub-committee of the Triple C Competency-based Curriculum Task Force, Jan. 2012
Relationship with the Triple C Curriculum

To better understand specific elements within the Triple C Competency-based Curriculum, please view the other resources in the Triple C Toolkit.

http://www.cfpc.ca/Triple_C/

Especially:
• Key concepts and Definitions of Competency based education
• CanMEDS-FM
• The Scope of practice and the Domains of clinical care
• Evaluation Objectives
Acknowledgment

This PowerPoint presentation was authored by the Alignment sub-committee of the Triple C Competency-based Curriculum Task Force

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Based Upon

Linking Curriculum and Assessment in a Competency Based Residency Training


http://www.cfpc.ca/Triple_C/
For More Information


Please visit [www.cfp.ca](http://www.cfp.ca) for a series of articles on the Triple C Competency-based Curriculum, published in *Canadian Family Physician*. 
