

Background

Family physicians form 50% of the physician workforce in Canada. The two-year family medicine residency program is delivered in 17 large, university-based programs that work closely with College of Family Physicians of Canada (CFPC), the national residency accreditation body.

Despite a record of excellence, Canadian family medicine residency programs are at a crossroads and must respond to:

- A changing face of health care
- A call to address societal needs
- Advances in medical education
- The challenge to produce family physicians ready to practice comprehensive care

In 2006, a curriculum review process was launched by the Section of Teachers of the CFPC. The Working Group on Postgraduate Curriculum Review (WGCR) was mandated to make recommendations for the future of family medicine residency training.

Methods

The WGCR undertook:

- An extensive literature review
- Consultations with key internal/external stakeholders
- Reflection on needs, evidence, and trends

Recommendations for change were reached through an iterative process. The WGCR report containing recommendations was presented and approved by the CFPC. Full details are available at:

www.cfpc.ca/Triple_C

and highlighted in this brochure.



Comprehensive Care and Education
Continuity of Education and Patient Care
Centred in Family Medicine

Competency-based Curriculum

Competency-based Curriculum

- An international educational trend
- Fits with societal expectations for accountability
- Focuses on program outcomes with congruent curricular design, teaching and learning strategies, and resident assessment
- Requires an integrated curriculum, moving away from the traditional rotation-based system
- Emphasizes competency-based assessment and residents as active learners

In the context of family medicine, a competency-based curriculum requires the following Triple C characteristics:

- Comprehensive care and education
- Continuity of education and patient care
- Centred in family medicine

Comprehensive Care and Education

- Enables residents to achieve the required competencies, defined by the CanMEDS-FM¹ competency framework and the Domains of Clinical Care in family medicine residency training
- Requires a comprehensive curriculum, with faculty who model comprehensiveness of care

¹Frank JR, ed. The CanMEDS 2005 physician competency framework. Better standards. Better physicians. Better care. Ottawa: The Royal College of Physicians and Surgeons of Canada; 2005

Continuity of Education and Patient Care

- Continuity of patient care is integral to, and thus a key competency for comprehensive care
- Continuity of education includes:
 - Continuity of supervision
 - Continuity of learning environment
 - Continuity of curriculum
- Both promote integrated learning, progressive development of competencies, and their ongoing assessment

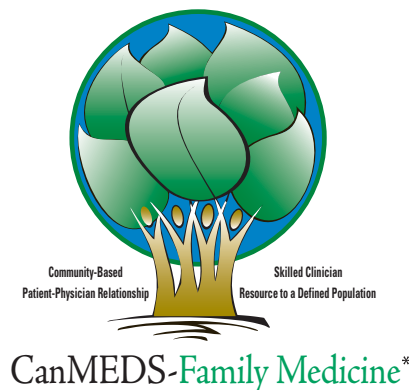
Centred in Family Medicine

- Family medicine controls the whole curriculum
- The family medicine experience forms the central and continuous focus of residency:
- Context of learning:
 - Primarily family medicine settings
 - Primarily family medicine faculty as teachers, role models, and assessors
 - Contributes to development of professional identity
- Content of learning:
 - Relevant to learning needs as family medicine residents
 - Focuses on competencies rather than knowledge

The Triple C Competency-based Curriculum was developed to renew Canadian family medicine residency training. The CFPC, residency programs, and residents see it as meaningful to the discipline of family medicine and empowering in the effort to achieve relevant educational changes. Implementation and evaluation are already under way.

CanMEDS-Family Medicine (FM)

The WGCR developed a competency framework for family medicine in Canada, structured around the Royal College of Physicians and Surgeons of Canada's CanMEDS Framework. CanMEDS-FM is available at: www.cfpc.ca/Triple_C



Results

The CFPC is adopting a competency-based curriculum for family medicine residency programs in Canada that is comprehensive, focused on continuity of education and patient care, and centred in family medicine—the Triple C Competency-based Curriculum.

The Canadian Triple C Competency-based Curriculum

Advancing a National Process Toward Curriculum Renewal

D. Tannenbaum, J. Kerr, J. Konkin, A. Organeck, E. Parsons, D. Saucier, E. Shaw, A. Walsh

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