

THE COLLEGE OF  
FAMILY PHYSICIANS  
OF CANADA



LE COLLÈGE DES  
MÉDECINS DE FAMILLE  
DU CANADA

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SECTION OF TEACHERS • SECTION DES ENSEIGNANTS

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# Linking Curriculum and Assessment in a Competency-based Residency Training Program

# Objective

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Explain the integration of:

- CanMEDS-FM\*
- Domains of Clinical Care
- Evaluation Objectives

within a Triple C Competency-based Curriculum

\*Frank 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 [cited 2009 Dec 14]. Available from: <http://rcpsc.medical.org/canmeds/index.php>.

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# 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

Canadian  
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# The Triple C Competency Based Curriculum

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Ensuring readiness to begin practice  
in the specialty of Family Medicine

[www.cfpc.ca/Triple\\_C](http://www.cfpc.ca/Triple_C)

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# Triple C Competency-based Curriculum

1. **C**omprehensive
  2. **C**ontinuity of
  3. **C**entred in Family Medicine
- Care  
Education

# Becoming a Family Physician

## *A Lifelong Journey*

UNDERGRADUATE  
MEDICAL  
EDUCATION

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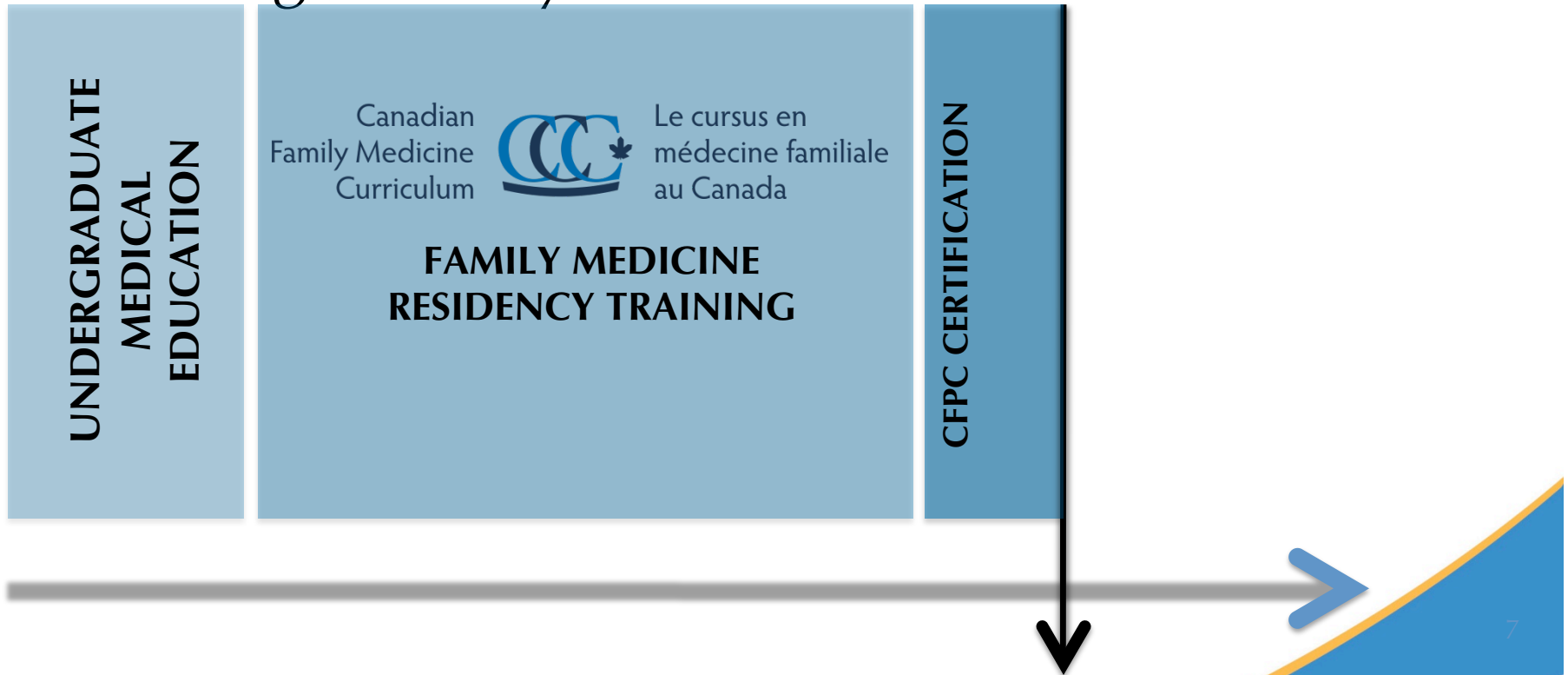


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# Becoming a Family Physician

## *A Lifelong Journey*



**Ready to begin practice  
in the specialty of Family Medicine**



# Becoming a Family Physician

## *A Lifelong Journey*



Ready to begin practice  
in the specialty of Family Medicine



# Responsibilities of a Program

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

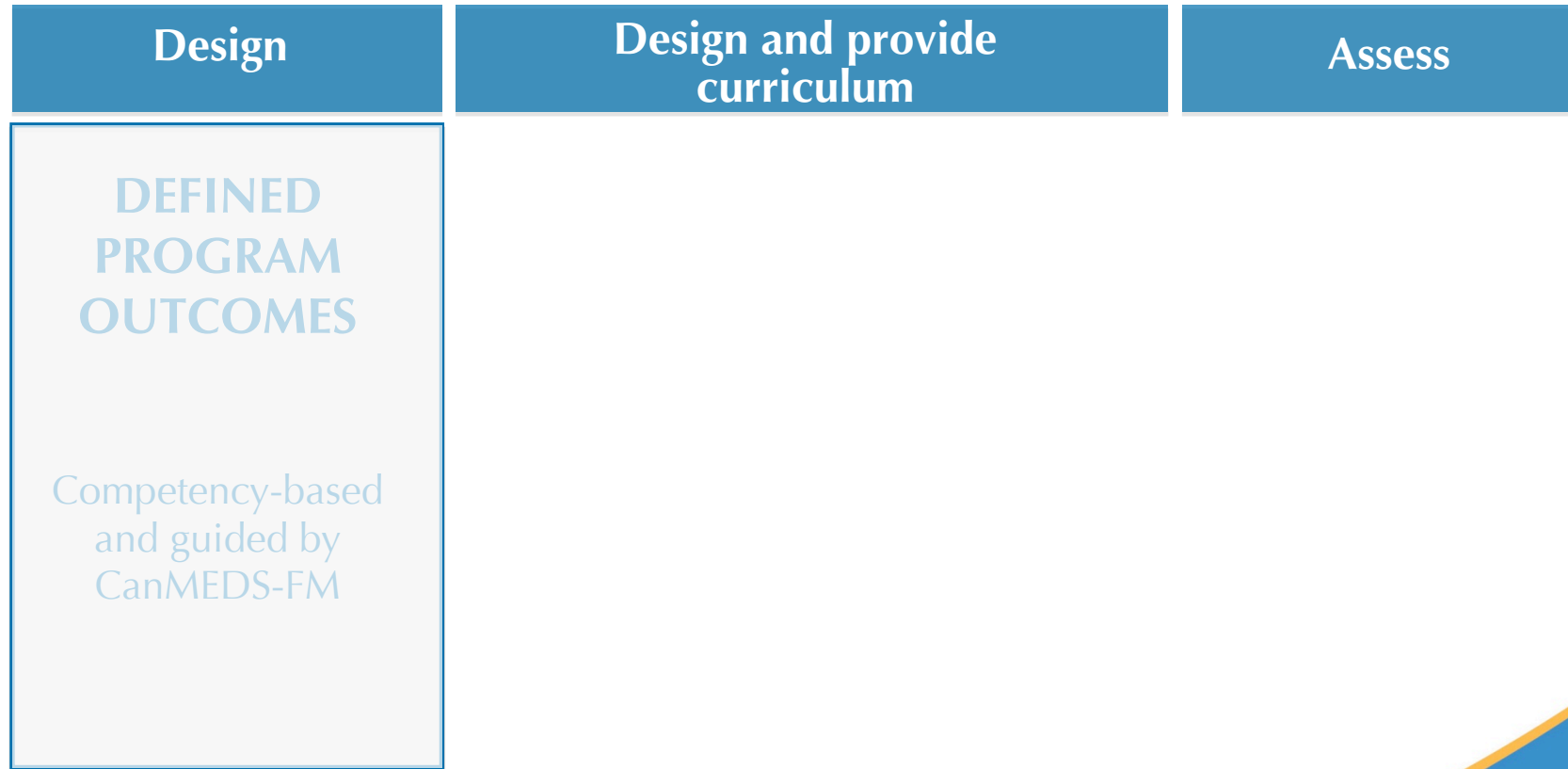
# Design Curriculum

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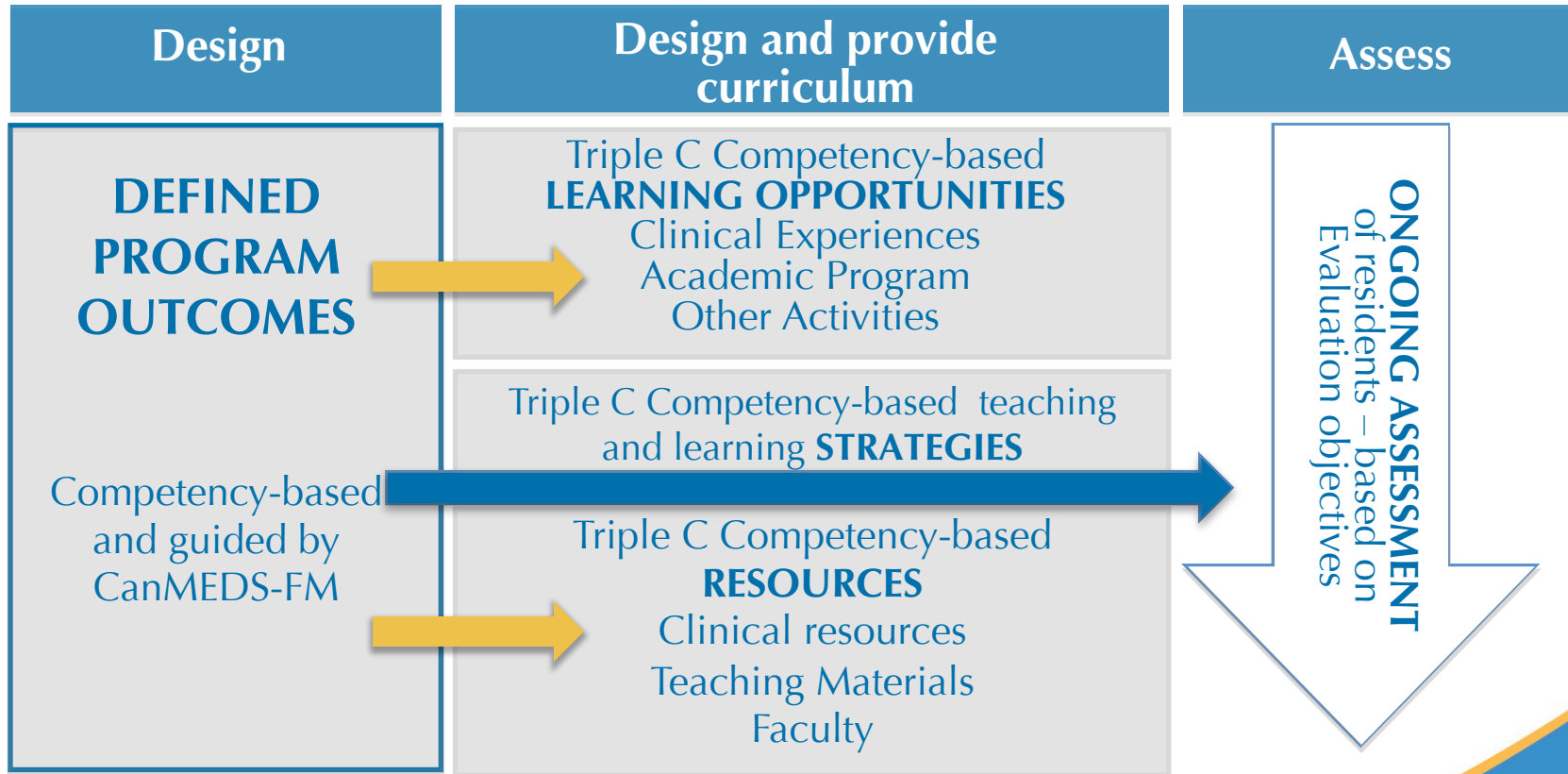
Guided by:

- CanMEDS-FM Roles
- Domains of Clinical Care
  - Where residents learn across clinical settings

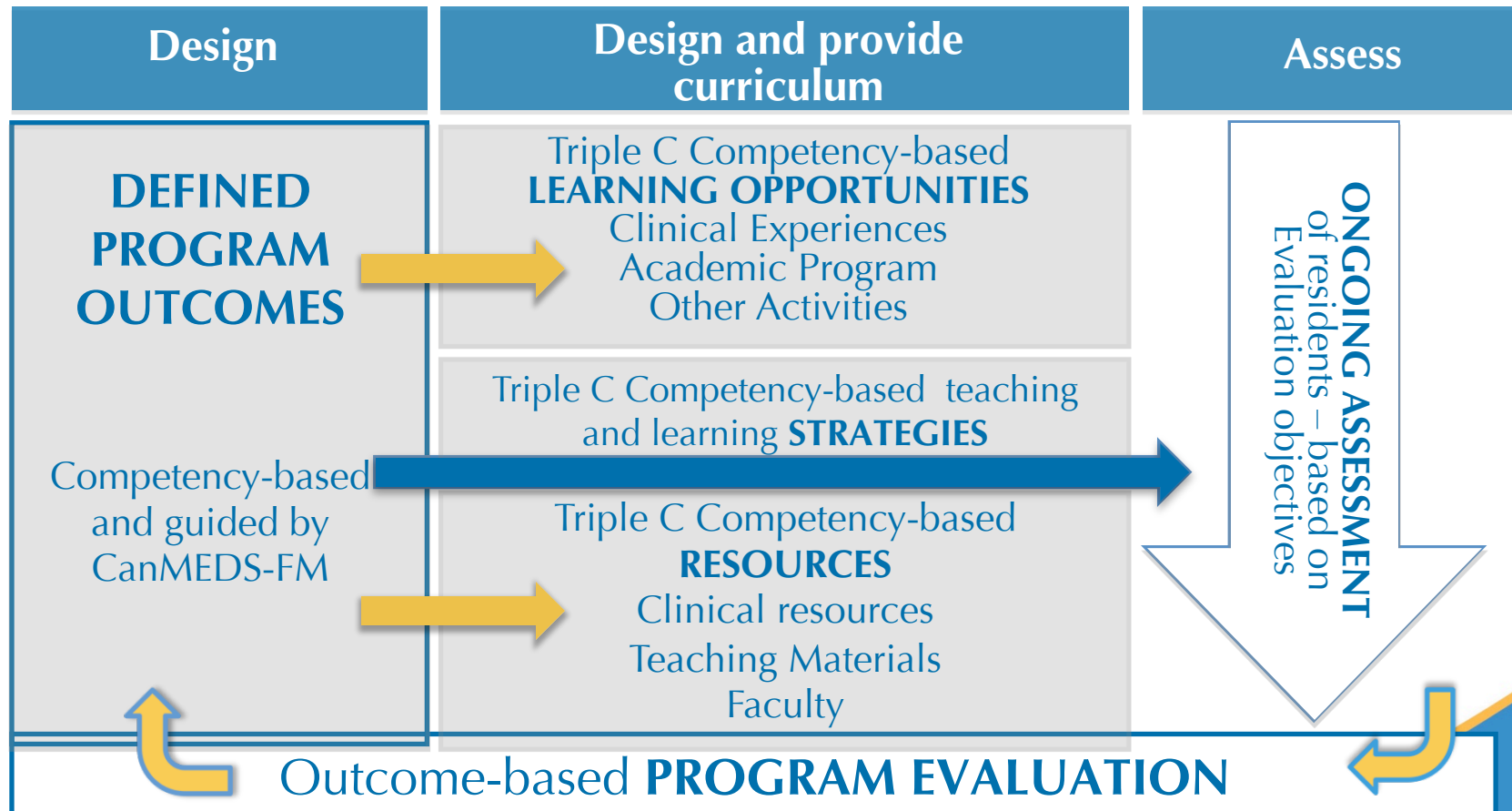
# The Building Blocks



# The Building Blocks



# The Building Blocks



# Provide Relevant Learning Opportunities

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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

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# Assess Residents

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- 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

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# Assess Residents

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Competency-based assessment of residents requires:

- Ongoing in-training assessment
- Regular progress reviews
- Other assessment tools

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# How do the Multiple Frameworks Relate?

- Multiple frameworks



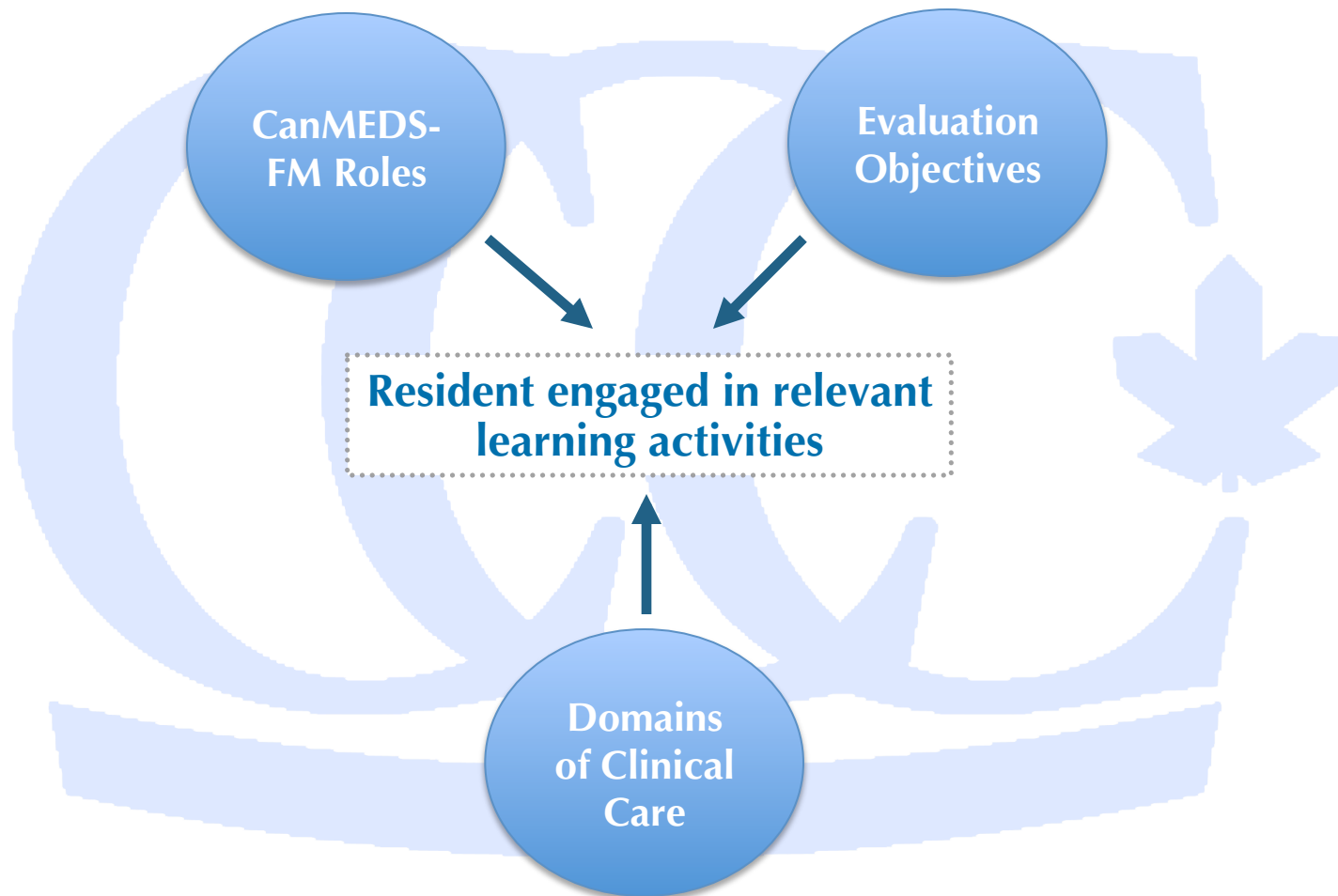
# How do the Multiple Frameworks Relate?

- Multiple frameworks



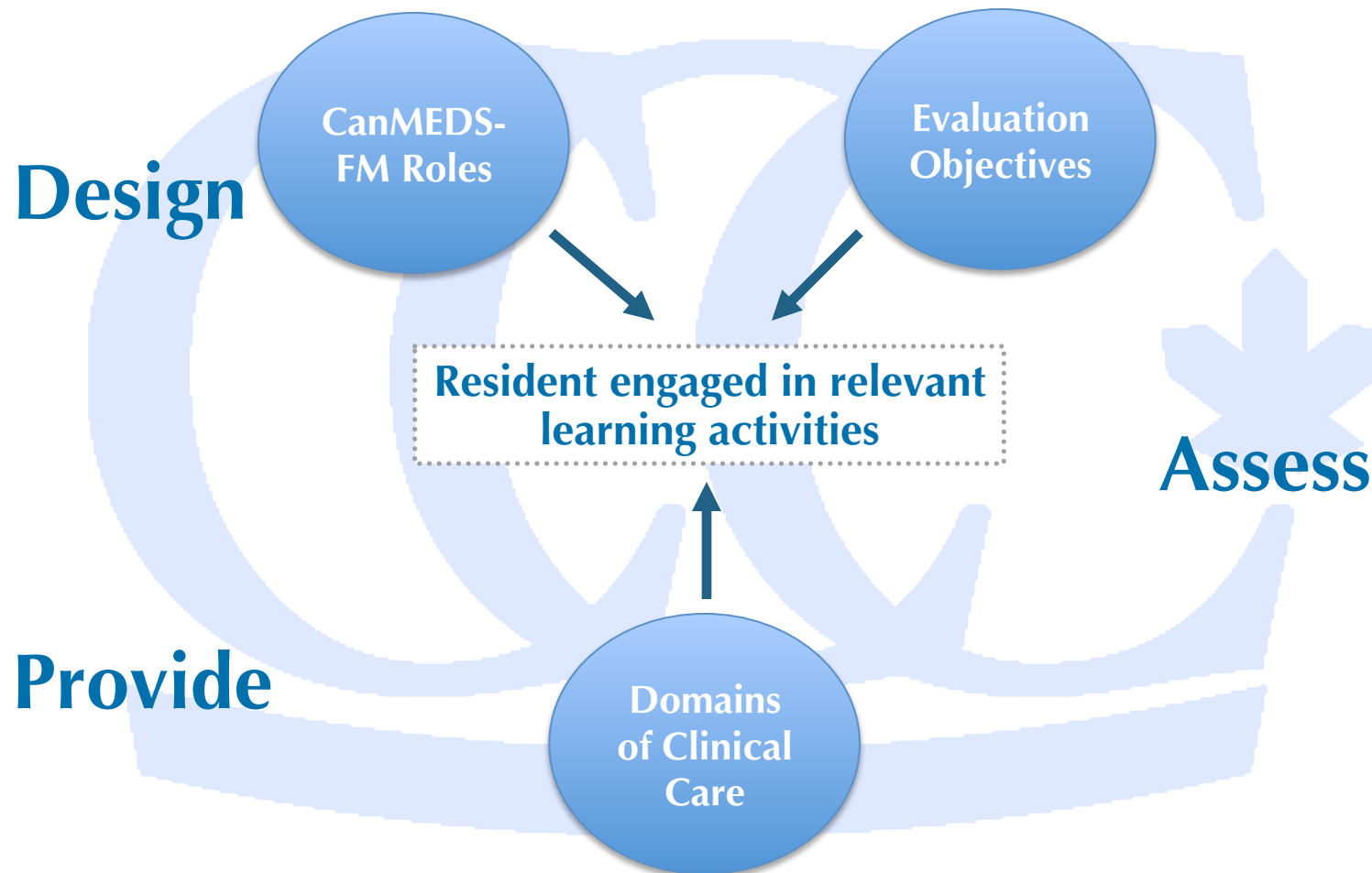
- Each has a purpose within a Triple C Competency-based Curriculum
- The linkage point: the resident engaged in relevant learning activities

# Triple C Through Different Lenses



Within a Triple C Competency-based Curriculum

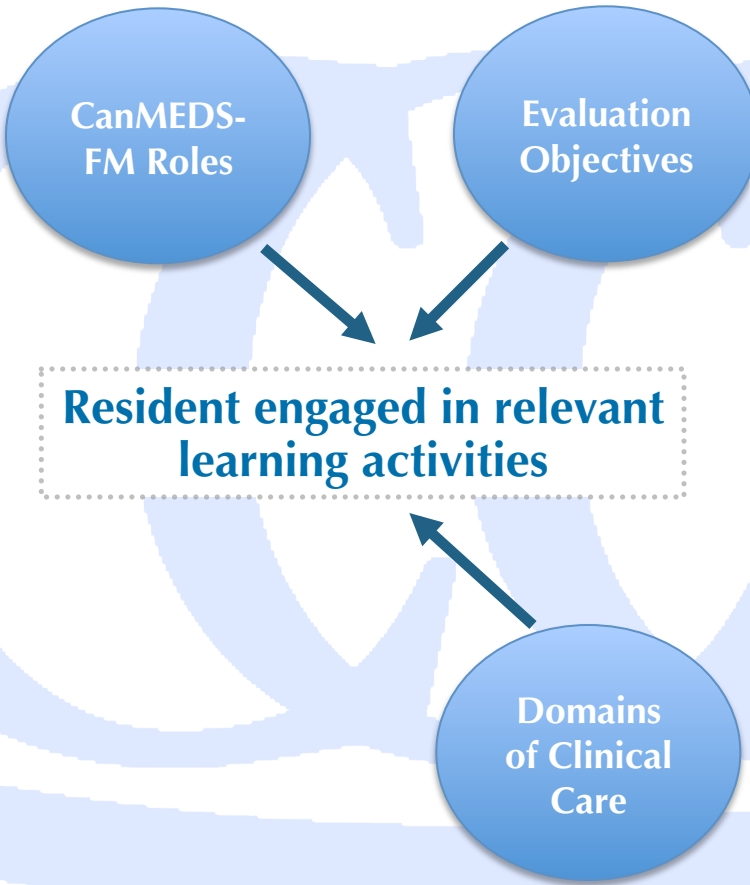
# Triple C Through Different Lenses



Within a Triple C Competency-based Curriculum

# The Three Frameworks

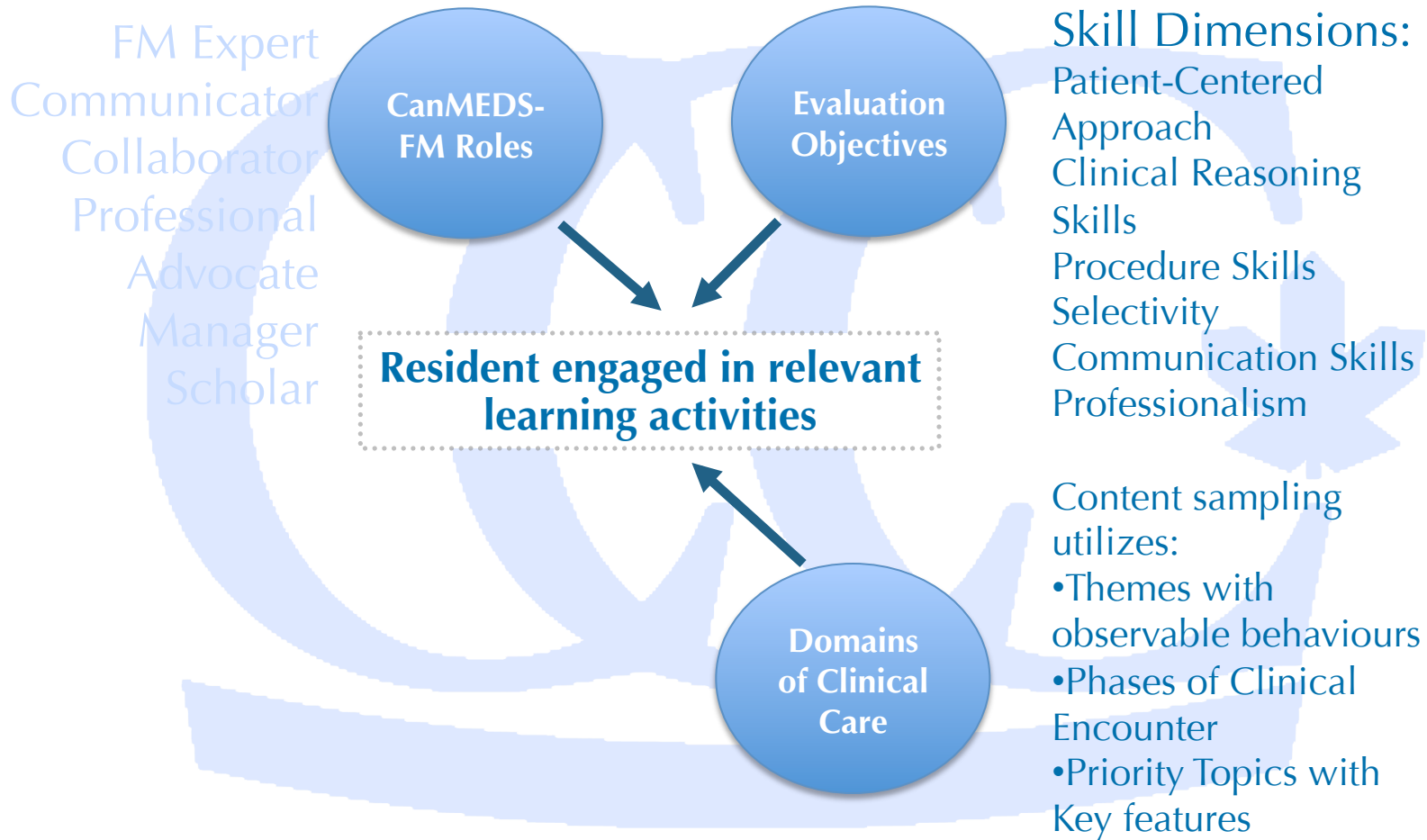
FM Expert  
Communicator  
Collaborator  
Professional  
Advocate  
Manager  
Scholar



Within a Triple C Competency-based Curriculum

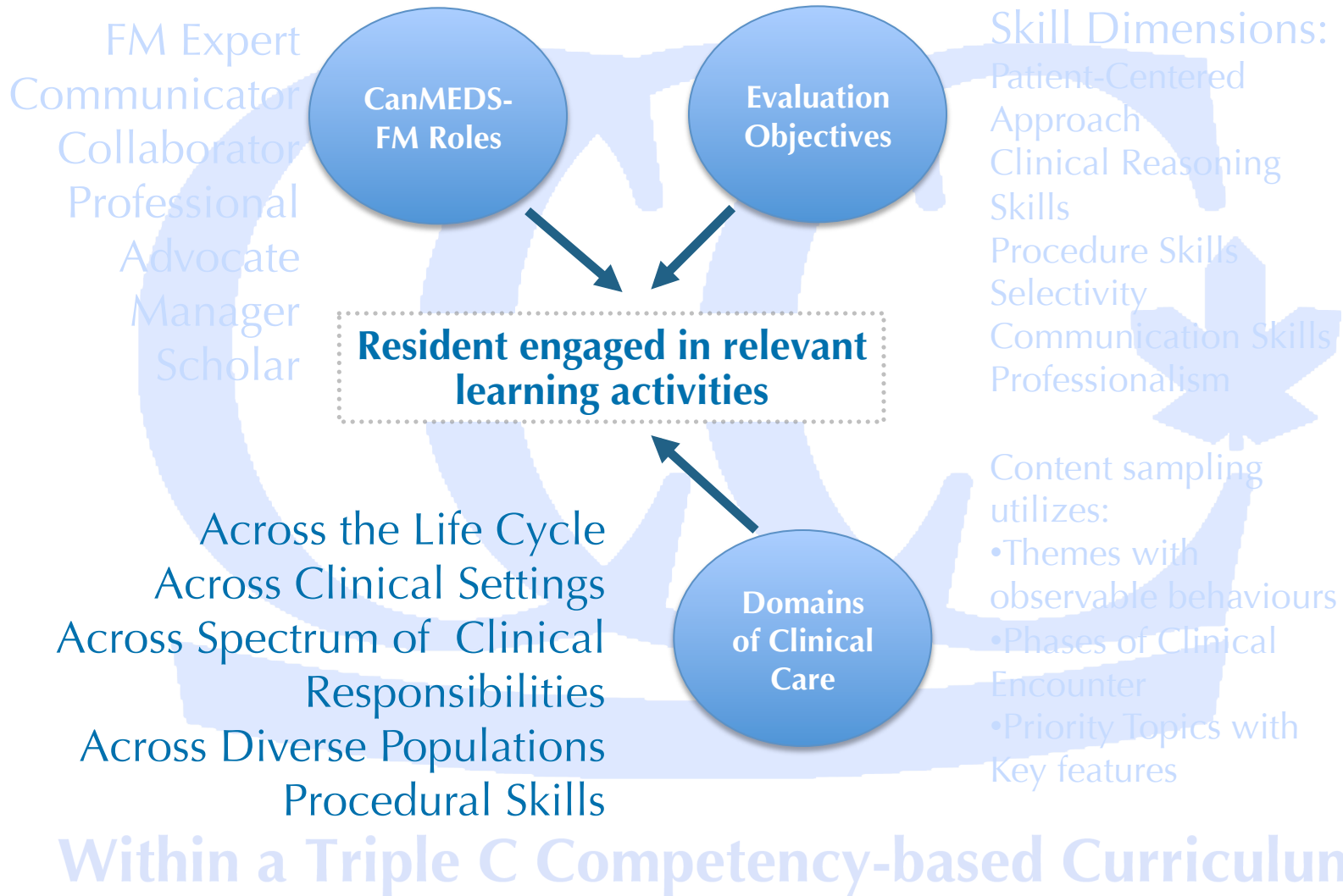


# The Three Frameworks

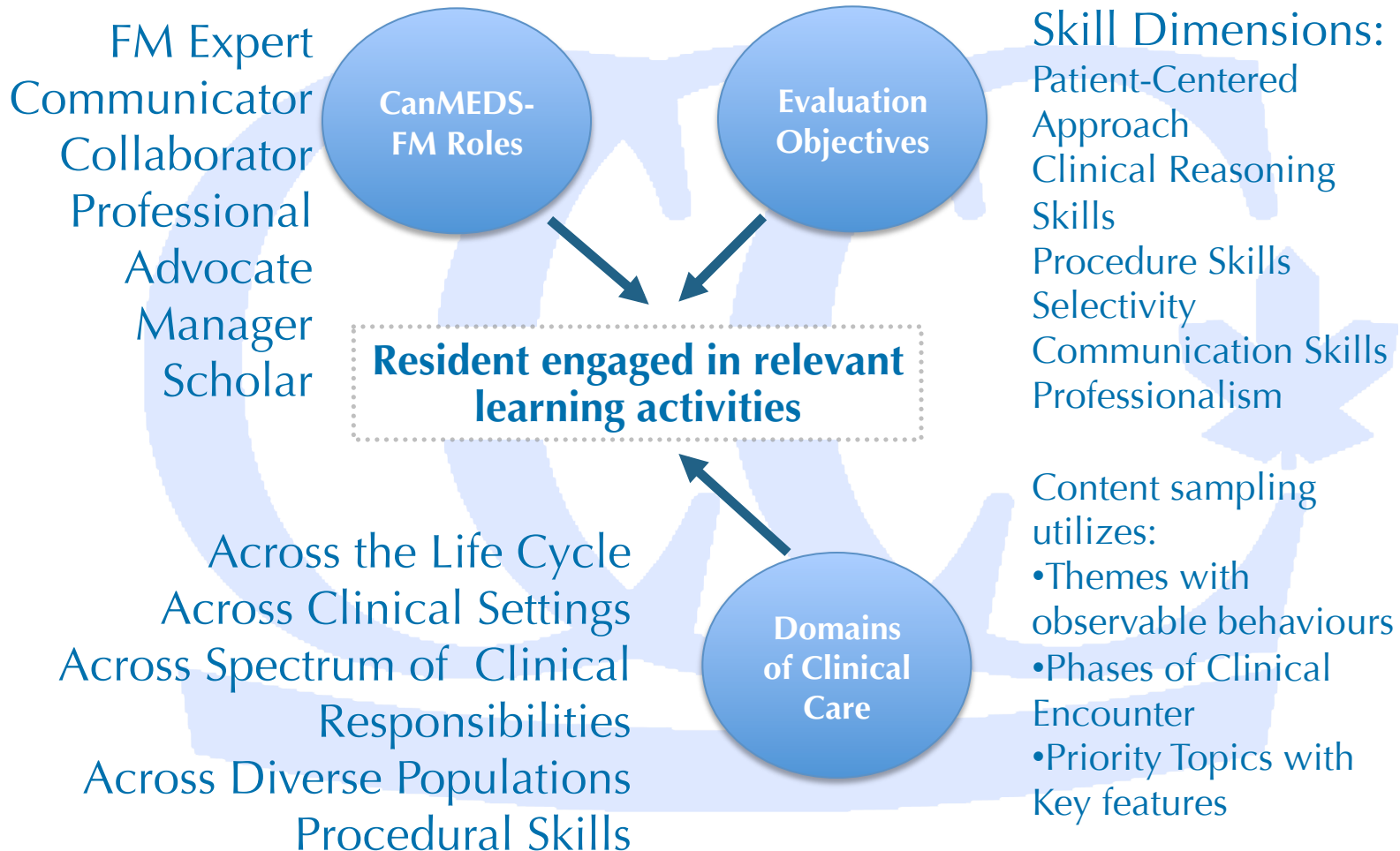


Within a Triple C Competency-based Curriculum

# The Three Frameworks



# The Three Frameworks



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

Domains  
of Clinical  
Care

Within a Triple C Competency-based Curriculum

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CanMEDS-FM Roles

Evaluation Objectives

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

Domains of Clinical Care

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

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

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

CanMEDS-FM Roles

Evaluation Objectives

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

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Skill Dimension:  
Clinical Reasoning  
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Within a Triple C Competency-based Curriculum

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Within a Triple C Competency-based Curriculum



# Design and provide

**Clinical  
Exposure**

CanMEDS-  
FM Roles

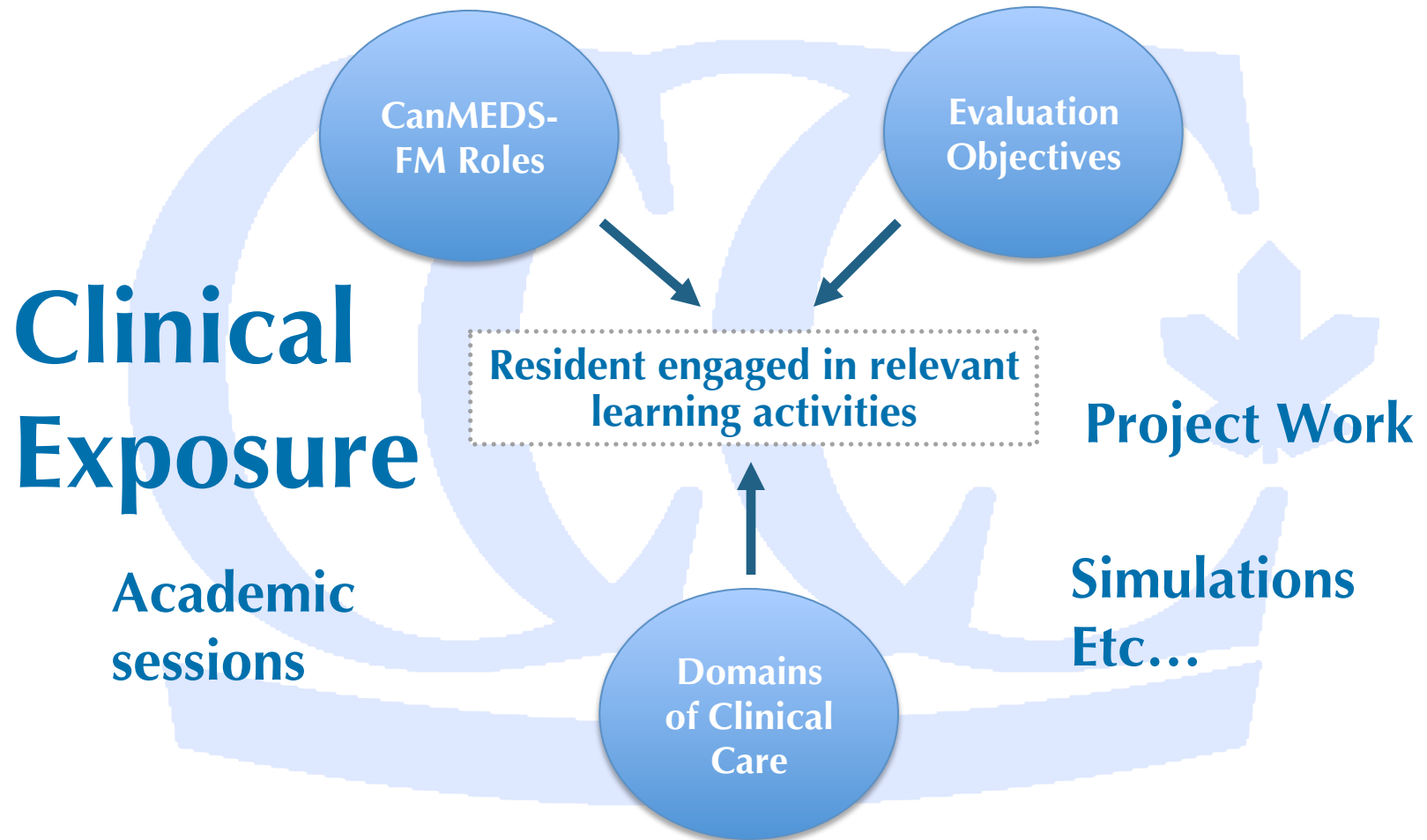
Evaluation  
Objectives

Resident engaged in relevant  
learning activities

Domains  
of Clinical  
Care

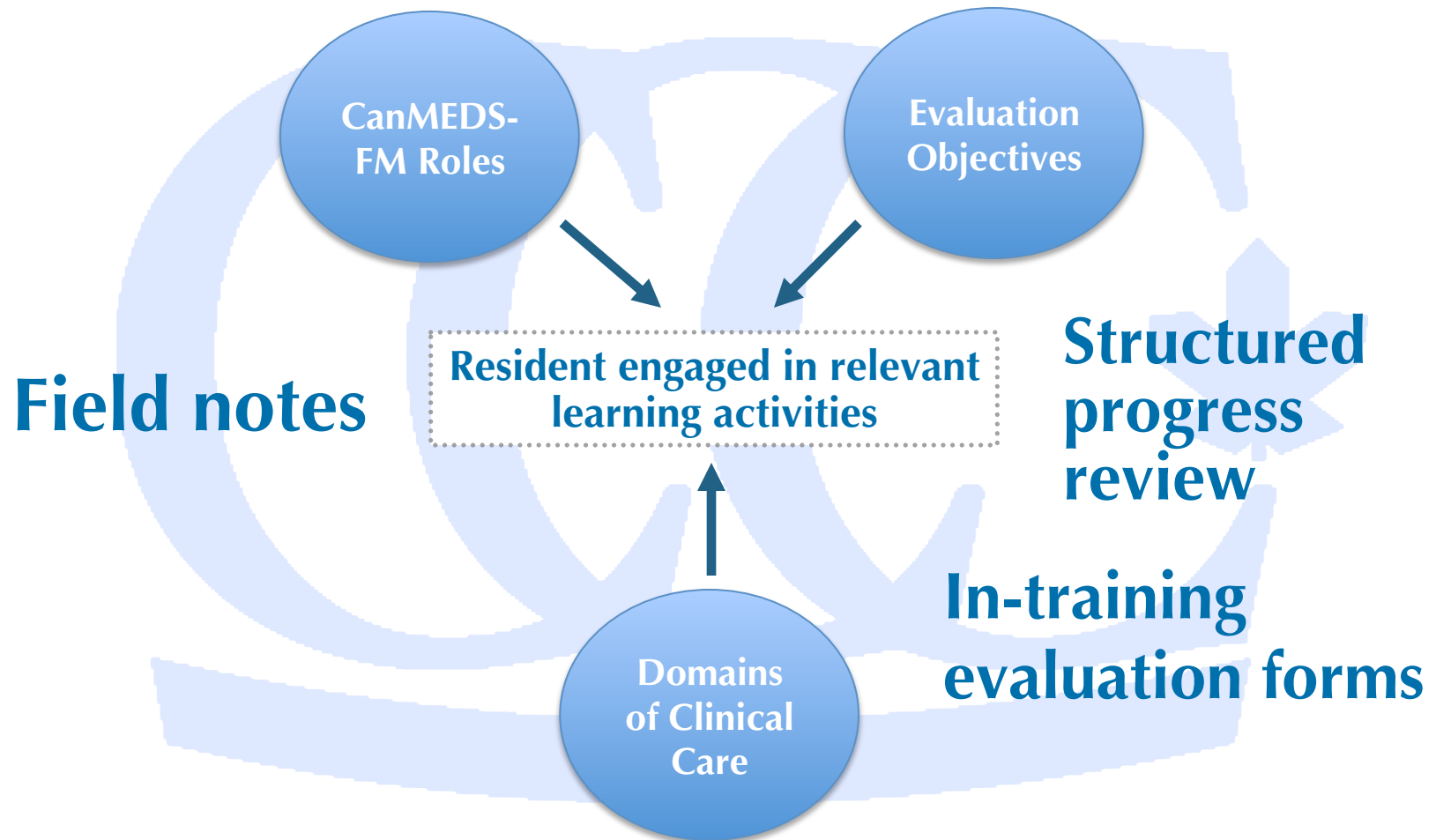
Within a Triple C Competency-based Curriculum

# Design and provide



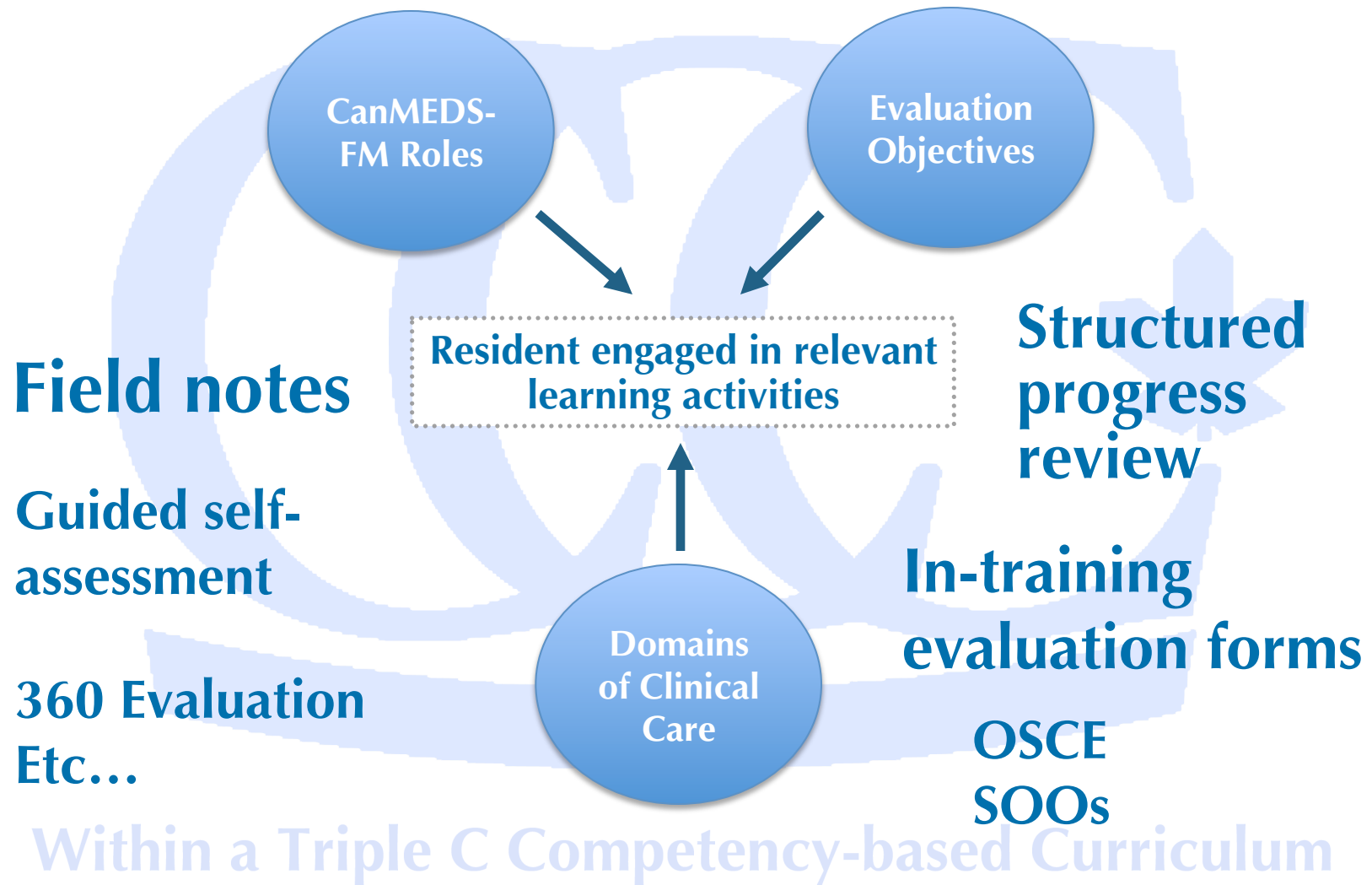
Within a Triple C Competency-based Curriculum

# Assess

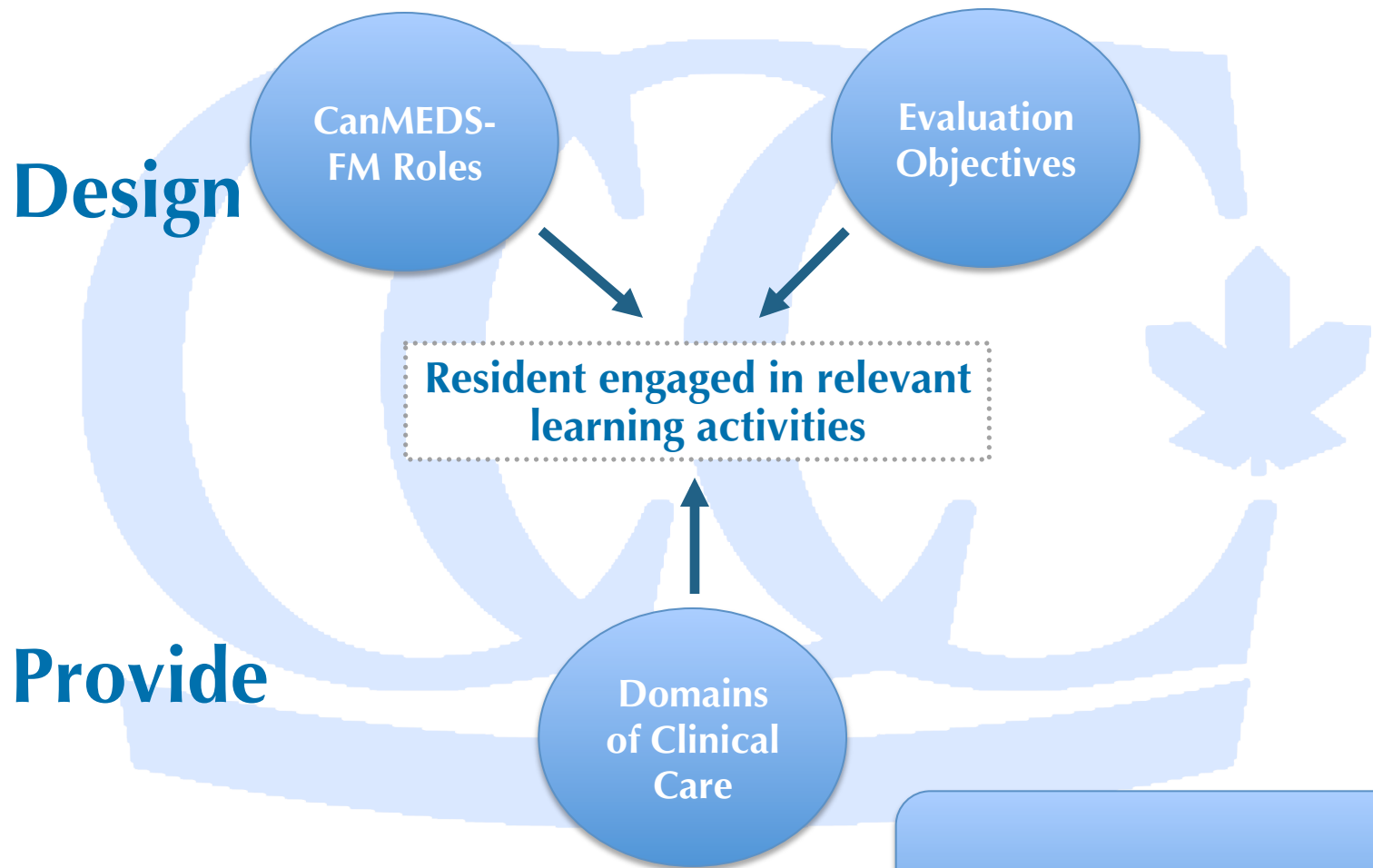


Within a Triple C Competency-based Curriculum

# Assess

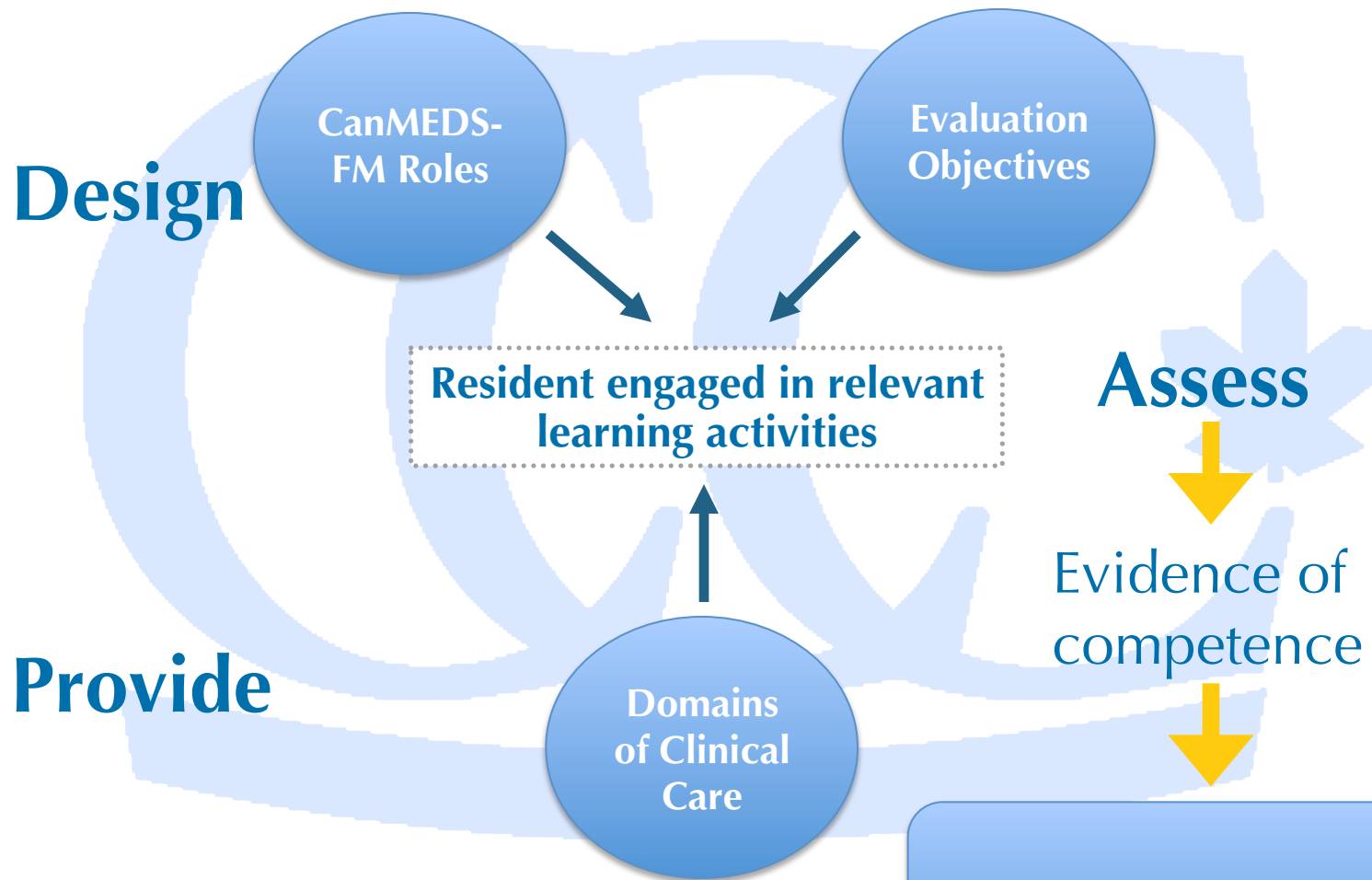


# The Link



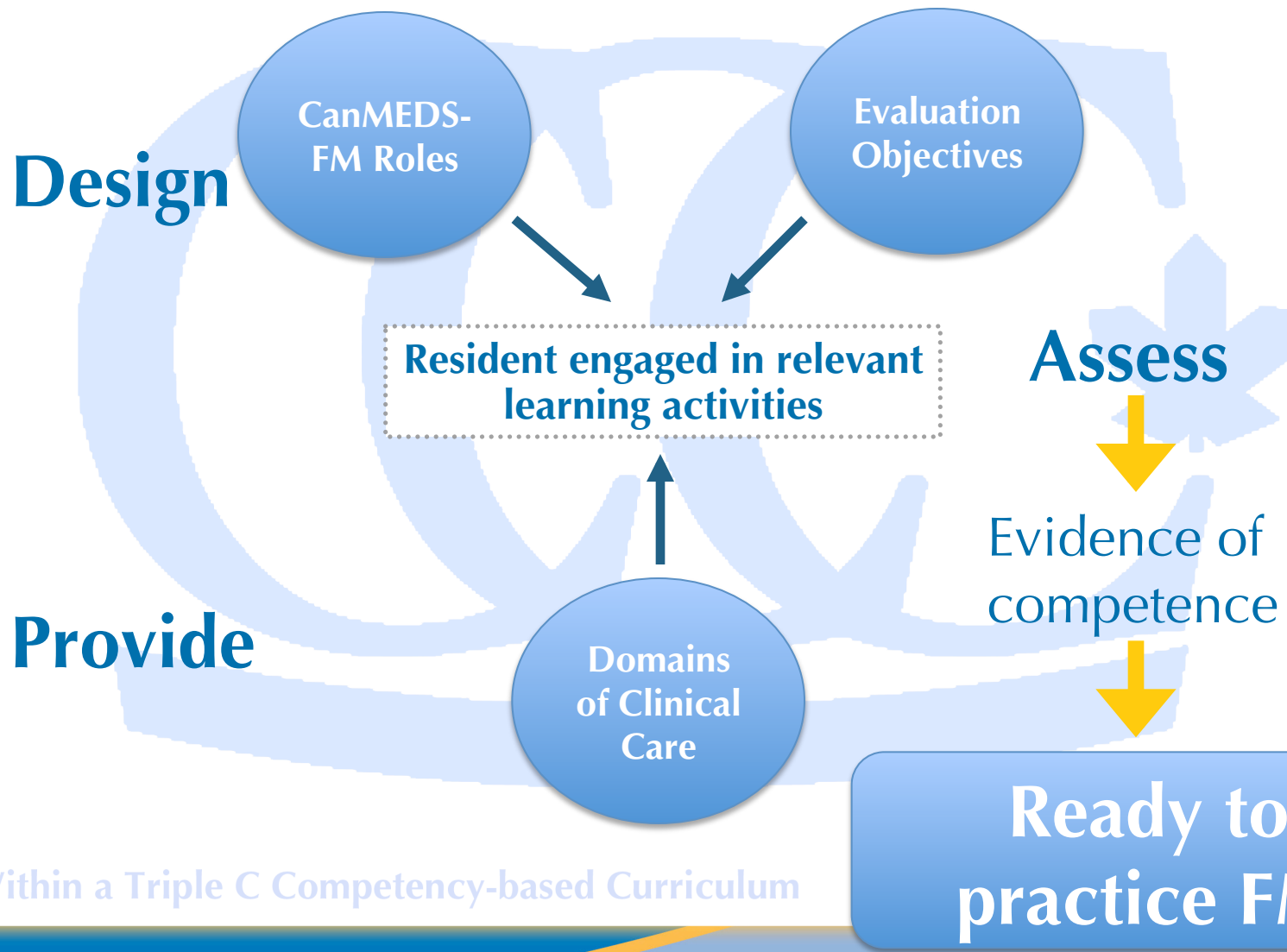
Within a Triple C Competency-based Curriculum

# The Link



Within a Triple C Competency-based Curriculum

# The Link





# 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

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# 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

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# 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/](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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Suggested citation: Saucier D, Oandasan I, Donoff M, Iglar K, Schipper S, Wong E. Understanding Curriculum and Assessment in a Competency-based Residency Training Program [PowerPoint presentation]. Mississauga ON: College of Family Physicians of Canada; 2011.

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# Based Upon

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## Linking Curriculum and Assessment in a Competency Based Residency Training

Donoff M, Iglar K, Oanadasan I, Saucier D, Schipper S, Wong E. *Triple C competency-based curriculum. Report of the Working Group on Postgraduate Curriculum Review – Part 2*. Mississauga, ON: College of Family Physicians of Canada. In press.

[http://www.cfpc.ca/Triple\\_C/](http://www.cfpc.ca/Triple_C/)

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# For More Information

Tannenbaum D, Kerr J, Konkin J, Organek A, Parsons E, Saucier D, Shaw L, Walsh A. *Triple C Competency-based Curriculum. Report of the Working Group on Postgraduate Curriculum Review-Part 1*. Mississauga ON: College of Family Physicians of Canada; 2011 [Available Here](#)

Tannenbaum D, Kerr J, Konkin J, Organek A, Parsons E, Saucier D, Shaw L, Walsh A. *Triple C competency-based curriculum Report Part 2*. Mississauga ON: College of Family Physicians of Canada; 2011; in press. [Available Here](#)

Tannenbaum D, Kerr J, Konkin J, Organek A, Parsons E, Saucier D, Shaw L, Walsh A. *Scope of Training*. Mississauga ON: College of Family Physicians of Canada; in press.

Donoff M, Iglar K, Oandason I, Saucier D, Schipper S, Wong E. *Alignment Statements. Report of the Alignment sub-committee of the Triple C Task Force Executive*. Mississauga ON: College of Family Physicians of Canada; in press.

Crichton T, Allen T, Bethune C, Brailovsky C, Donoff M, Laughlin T, Lawrence K. *Defining Competence in Family Medicine for the Purposes of Certification by the College of Family Physicians of Canada: The Evaluation objectives in Family Medicine (updated December 2010)*. [Available Here](#)

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*

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