

# What is CBD?

Competency By Design is the Royal College's model of Competence-Based Medical Education (CBME) which is an educational model that is...

- More oriented to outcomes rather than time in training (i.e. what trainee can DO)
- More flexible to learners' prior skills and current needs
- Training using a coaching approach with more regular feedback & entrustment decisions
- Enhanced tracking of learners' progress and performance

## What is an EPA?

An Entrustable Professional Activity is a unit of work actually done during the clinician's day (e.g., admit a patient to hospital, carry out a procedure, lead a family meeting)

- There are 29 EPAs for the PGY1-4 Internal Medicine training program
- Each EPA gets assessed several times for each resident
- Each EPA is made up of several "milestones"
- The EPAs increase in complexity through stages

Learn more about EPAs and CBD:

#### READ

<u>CBD Terminology</u> <u>Improving Feedback Tips</u>

# WATCH

CBME & CBD 101 CBD in Internal Medicine

# VISIT

<u>DOM CBME</u> for general information on resources and events.

<u>PGME Elentra Help</u> for Elentra Guides

**Questions? CONTACT** us at <a href="mailto:im.cbd@utoronto.ca">im.cbd@utoronto.ca</a>



# Primer for EPA TTP5 - Initiating and **facilitating transfers** of care through the health care system

This **Transition to Practice - TTP EPA 5 (PGY4)** focuses on the decision to transfer patients with a complex, evolving hospital course from the care of the IM specialist to another acute care institution. This EPA includes the medical decision-making about appropriate level of care and builds on the discharge facilitation skills achieved in Foundations.

# **EPA MILESTONES: TTP5 – Facilitating Transfers**

- 1. Determine the setting of care appropriate for the patient's health needs
- 2. Apply knowledge of the health care resources available in other care settings
- 3. Assess the need, timing, risk and benefits of transferring a patient's care to another health professional and/or care setting
- 4. Anticipate, prevent and manage changes in health status at the time of transition
- 5. Establish a plan for ongoing care in the local setting and/or for care prior to and during transfer
- Consult as needed with other health care professionals, including other physicians
- 7. Facilitate timely patient access to services and resources
- 8. Organize the handover of care to the most appropriate physician
- 9. Summarize the patient's issues, including plans to deal with ongoing issues
- 10. Recognize and act on patient safety issues in the transfer of care
- 11. Keep the patient and family informed of changes in health status, treatment plan and/or setting of care

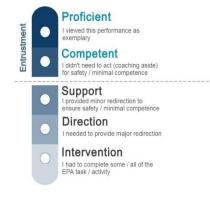
## **HOW TO COMPLETE AN EPA ASSESSMENT:**

- 1. You or the resident initiate the assessment. The assessment may be based on direct observation or case discussion.
- 2. You or the resident sign onto Elentra, and provide the assessment demographics. This can be done on the mobile phone or computer top.
- 3. From the list of milestones pertinent to the EPA, choose 2-3 milestones that are relevant to the activity, and indicate their



performance level on each milestone you assessed, using the entrustment scale. You are not required to cover all milestones, but are welcome to.

4. Using the global entrustment scale, decide whether the resident can be entrusted overall to perform this activity with a similar case in the future. In general, residents are not expected to be entrustable early in a new stage of training, although this particular tool verifies skills that should have been learned in medical school.



GLOBAL ENTRUSTMENT SCALE (Competent and Proficient levels are entrustable)

- Describe 2-3 strengths and 2-3 actions, or areas for improvement. Please provide detailed and actionable comments based on your observations of their performance.
- 6. Discuss your feedback with the resident.