Physical Medicine & Rehabilitation: Transition to Practice SA 2

Contributing to the improvement of health care delivery for persons with impairments/disabilities

Key features
- This SA focuses on managerial and leadership activities commonly encountered in Physiatry
- The observation of this EPA is divided into two parts: engagement in management and leadership activities; and, self-reflection on activities.
- Examples of managerial activities include: creating and overseeing physiatry on-call schedules, organizing academic half days, participating in various committees, and RPC meetings.
- Examples of leadership activities include: advocating for patients and systems to improve health outcomes for persons with disabilities, applying evidence to achieve cost-appropriate care, participating in quality assurance/improvement to improve patient care and safety.
- The self-reflection must identify the patient or systems issue, describe the action taken by the resident, the outcomes achieved and any identified learning points.
- The self-reflection may be written or oral.

Assessment plan

Part A: Engagement in management and leadership
Review of evidence of resident’s participation in management and leadership activities by Coach over Time (CoT), program director or other supervisor
Use form 4
Collect evidence of participation in at least two management and/or leadership activities

Part B: Self-reflection
Review of resident’s self-reflection (written or oral) by Coach over Time (CoT), program director or other supervisor
Use form 4
Collect evidence of one completed self-reflection activity

Milestones
1. P 2.1 Demonstrate a commitment to active participation in the activities of the profession
2. HA 2.3 Contribute to a process to improve health in the communities or populations served
3. L 1.3 Analyze harmful patient safety incidents and near misses to enhance systems of care
4. L 1.4 Use health informatics to improve the quality of patient care and optimize patient safety
5. HA 2.2 Improve clinical practice by applying a process of continuous quality improvement to
disease prevention, health promotion, and health surveillance activities

6. L 3.1 Demonstrate an understanding of the administrative operations of physiatry programs

7. L 3.1 Contribute to improvements in professional practice

8. L 3.2 Facilitate change in health care to enhance services and outcomes

9. S 3.4 Integrate best evidence and clinical expertise into decision-making

10. COL 1.3 Work effectively with physicians and other colleagues