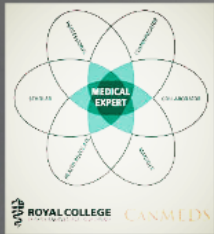


# CanMEDS Innovations: What Works, What Doesn't So Much...

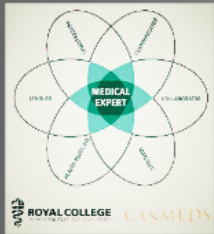
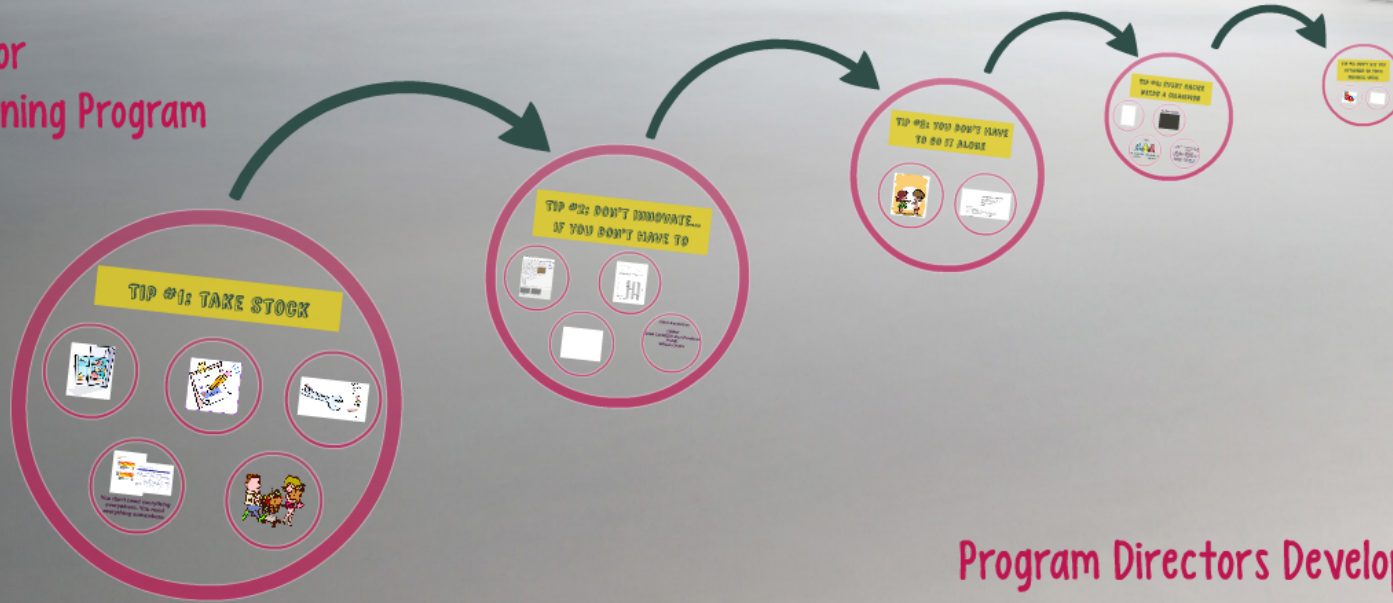
Chris Li, MD  
Program Director  
Respirology Training Program



Program Directors Development Workshop  
Sept 13, 2016

# CanMEDS Innovations: What Works, What Doesn't So Much...

Chris Li, MD  
Program Director  
Respirology Training Program



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# TIP #1: TAKE STOCK

An illustration of two spreadsheets or data tables. The top one has a header row with 'Item Name' and 'Quantity' and several rows of data. The bottom one is a similar table with more columns.

You don't need everything everywhere. You need everything somewhere.







### Rotation CanMEDS Map

Role taught and evaluated  
 Special emphasis on teaching and evaluation of role

#### Mandatory Rotations

Role	IMH	IMH	IMH	IMH	IMH	IMH	IMH	IMH	IMH
Medical Officer									
Communicator									
Collaborator									
Manager									
Advocate									
Self-leader									
Professional									

IMH	D. Mohr's Hospital Respiratory & CP	SC	Steele
IMH	University Health Network Respiratory	CCM	Collins
IMH	St. Michael's Health Sciences Centre Respiratory	PHU	Phelan
IMH	St. Michael's Health Sciences Centre Respiratory	PHU	Phelan
IMH	St. Michael's Health Sciences Centre Respiratory	PHU	Phelan
IMH	St. Michael's Health Sciences Centre Respiratory	PHU	Phelan
IMH	St. Michael's Health Sciences Centre Respiratory	PHU	Phelan
IMH	St. Michael's Health Sciences Centre Respiratory	PHU	Phelan
IMH	St. Michael's Health Sciences Centre Respiratory	PHU	Phelan

#### Elective Rotations

Role	IMH	IMH	IMH	IMH	IMH	IMH	IMH	IMH	IMH
Medical Officer									
Communicator									
Collaborator									
Manager									
Advocate									
Self-leader									
Professional									

WCH	Women's College Hospital	CCC	Chung
IMH	St. Michael's Health Sciences Centre Respiratory	CCM	Collins
IMH	St. Michael's Health Sciences Centre Respiratory	CCM	Collins
IMH	St. Michael's Health Sciences Centre Respiratory	CCM	Collins
IMH	St. Michael's Health Sciences Centre Respiratory	CCM	Collins
IMH	St. Michael's Health Sciences Centre Respiratory	CCM	Collins
IMH	St. Michael's Health Sciences Centre Respiratory	CCM	Collins
IMH	St. Michael's Health Sciences Centre Respiratory	CCM	Collins

### Academic Half Day CanMEDS Roles Map

Topic	Staff Supervisor	Medical Expert	Scholar	Health Advocate	Manager	Communicator	Professional	Collaborator
Long disease in pregnancy (lowers during hypercapnic resp failure talk)	S. Lapinsky	X		X	X			X
Stage 3 exercise testing	J. Granton	X	X				X	
Intro to radiology (Stair)	T. Chung	X				X		X
Intro to radiology 2 (Rad)	T. Chung	X				X		X
Intro to radiology 3 (Res)	S. Shapera	X				X		X
Congenital lung diseases	K. McIntyre	X	X		X	X	X	X
Deep diving	S. Shapera	X				X		
Innumerable pulmonary nodules	S. Shapera	X			X			
Pleural Diseases imaging	H. Wong	X			X			
Central lung disease	S. Shapera	X						
Portfolio Lam Sessons	C. U/A. Lau	X	X	X	X	X	X	X
GI sessons	K. McIntyre	X	X	X	X	X	X	X
HP	S. Shapera	X	X	X	X			X
ILD pathology	B. Mullen	X						X
Non-IPF ILD and treatment of steroid-responsive ILD	M. Birnie	X				X		X
ILD radiology	H. Roberts	X		X		X		X
BOOP / COP	S. Shapera / T. Marraz	X				X		X
HP	S. Shapera / T. Marraz	X		X		X		X

You don't need everything everywhere. You need everything somewhere.

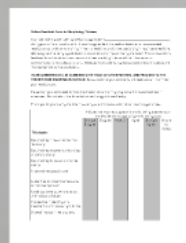
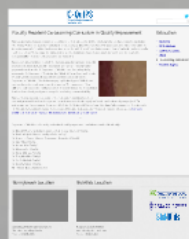








# TIP #2: DON'T INNOVATE... IF YOU DON'T HAVE TO

A screenshot of the Academic Adversity Project website. The page features a title, a list of project members with their names and affiliations, and a list of project activities or milestones.

## Other Resources

CREST  
DOM CanMEDS Best Practices  
PGME  
Wilson Centre

## Faculty Resident Co-Learning Curriculum in Quality Improvement

Many residency programs are committed to teaching QI to their trainees, but lack the faculty capacity to deliver a formal QI curriculum. The Faculty Resident Co-Learning Curriculum in QI, created by Dr. Brian Wong and Kawth Shejaria, addressed this need by taking the innovative approach of teaching faculty and residents together, with the goal of developing a cadre of expert faculty who could eventually teach QI to others. The idea was that faculty could attend the curriculum, observe how QI was being taught, and then develop the necessary skills to become teachers and mentors themselves.

Based on positive participant feedback, the program saw rapid expansion from a pilot program for 3 subspecialty medicine programs in 2011-2012 to 15 subspecialty programs in 2014-2015 in the Department of Medicine, and three subspecialty programs in the Department of Pediatrics. As of March 2015, we have taught nearly 60 faculty members across all academic job descriptions and rank from the Departments of Medicine, Paediatrics, Surgery, Ophthalmology and Palliative care, and developed 8 QI teachers and over 20 QI mentors. The emergence of these skilled QI teachers and mentors illustrates both the positive impact that the curriculum has had from a faculty development standpoint, and its long-term sustainability.



Many of the projects carried out as part of the Co-Learning Curriculum have been extremely successful, and have been presented as abstracts at national (10 projects) and international meetings (5 projects). Two projects won conference awards, the most notable being the Presidential Poster Competition Award Winner awarded to the residents in the Endocrinology training program at the International Endocrine Society meeting. For more information, please see our [brief report published in the Journal of Graduate Medical Education published in December 2013](#).

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Department of Medicine Co-Learning Curriculum in Quality Improvement Curriculum Committee Membership:

Dr. Brian M. Wong (Curriculum Committee Chair, Course Director & Faculty)  
Dr. Kawth Shejaria (Director, Quality & Patient Safety)  
Dr. Jeannette Goggin (Director, Postgraduate Education & Faculty)  
Dr. Lisa Hicks (Faculty)  
Dr. Jerome Lelo (Faculty)  
Dr. Alexander Lo (Faculty)  
Dr. Kieran Moynihan (Faculty)  
Dr. Rory McDuffin (Faculty)  
Dr. Gaetha Mukarji (Faculty)  
Dr. Adam Weisman (Faculty)  
Mr. Christian Basse (Administration)

## Education

- [Overview](#)
- [QI Workshops](#)
- [Certificate Course](#)
- [VAQS](#)
- [Co-Learning Curriculum in QI](#)
- [Master's Degree](#)

## Sunnybrook Location



Sunnybrook Health Sciences Centre  
Rm. H4-61, 2015 Bayview Ave.  
Toronto ON M4N 3M5

## SickKids Location



Hospital for Sick Children  
525 University Ave., Suite 630  
Toronto ON M5G 2S3





# The Endocrine Advocacy Project

Jeannette Goguen, MD, MEd, FRCPC  
University of Toronto, Faculty of Medicine, Toronto, Ontario



## Introduction

- Advocacy is one of the CanMEDS roles
- It is important to teach it deliberately<sup>2</sup>
- It is challenging to teach this role<sup>3</sup>
- There are limited resources available on approaches to teaching and evaluation
  - <http://rcpsc.medical.org/canmeds/bestpractices/index.php> → Best practices: no abstracts for advocacy
  - Review of literature: Pediatric projects<sup>3,4</sup>

The Endocrinology division at U of T decided to develop our own Advocacy Project, to be done in the PGY-5 year, to teach residents through a unique interprofessional experience that patient advocacy is both feasible and rewarding for doctors and patients. Projects could be worked on independently or in groups.

**Study Aims:** The primary aim of this project was to **assess the utility of the advocacy project** as a tool to teach residents through a collaborative experience that patient advocacy is feasible and rewarding for doctors and patients; and to explore the challenges associated with developing a PGY-5 Advocacy Project.



**Figure – Project 1**  
The financial resource pamphlet is an English-language, printed pamphlet that was designed to outline the various financial assistance programs available to diabetes patients who have limited coverage outside of the Ontario Health Insurance Plan (OHIP), or equivalent.

## Methodology

- Resident evaluations (POWER)
- Comments by supervising staff
- Reflection by the program director

**Patient Feedback Form for Respiriology Trainees**

You have recently been seen by a Respiriology resident \_\_\_\_\_ during your clinic or hospital visit. A respiriology resident is a medical doctor who has completed medical school and further training in internal medicine, and is now specializing in respiratory medicine. We recognize that being a good doctor is about more than "just knowing the facts". The purpose of this feedback form is to let us know how our trainees are doing in terms of their interpersonal, communication and professional skills. Feedback from patients is greatly valued and contributes to the improvement of our future doctors.

**YOUR COMMENTS WILL BE COMBINED WITH THOSE OF OTHER PATIENTS, AND PROVIDED TO THE TRAINEE IN AN ANONYMOUS FASHION.** Be assured that your comments and feedback will not hinder your medical care.

Please mail your completed form to the director of our training program with the stamped return envelopes. Do not return the forms to the respiriology trainee directly.

Thank you for your taking the time in assisting us with the evaluation of our respiriology trainees.

	Indicate how much you agree with the following statements on the left side of the page using the following scale.					
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Unable to Assess
<b>This doctor:</b>						
Explained my illness or concern to me clearly						
Explained my treatment and choices or options clearly						
Explained my follow-up plan to me clearly						
Answered my questions well						
Is attentive to preventive measures to improve my health						
Asked about me as a whole person, and not just a disease						
Involved me in deciding on a treatment plan that was right for me						
Showed interest in my problems						

## **Other Resources**

**CREST**


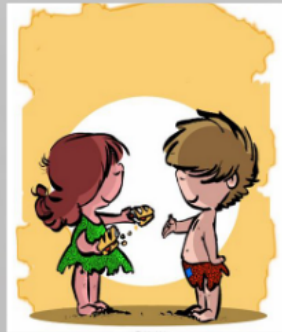
**DOM CanMEDS Best Practices**

**PGME**

**Wilson Centre**



# TIP #3: YOU DON'T HAVE TO GO IT ALONE



**Respiology CanMEDS Conference 2014**  
Donald Gordon Centre, Queen's University  
421 Union Street, Kingston Ontario  
September 12-13, 2014

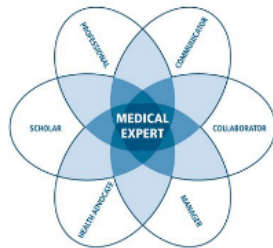
**AGENDA**

**Friday, September 12**

1205-1215h	Arrival, Registration, Lunch
1215h	Meet in Lobby for Transportation to Clinical Simulation Centre
1305-1320h	Clinical Simulation Centre
1320-1345h	Group A: Simulated Cases Group B: Skills

1500-1515h Dinner





## Respirology CanMEDS Conference 2014

*Donald Gordon Centre, Queen's University  
421 Union Street, Kingston Ontario*

**September 12-13, 2014**

### **AGENDA**

#### Friday, September 6

1200-1315h Arrival, Registration, Lunch

1315h Meet in Lobby for Transportation to Clinical Simulation Centre

1330-1500h Clinical Simulation Centre      Group A: Simulated Cases

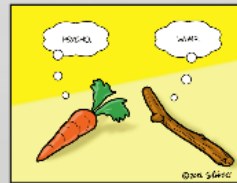
Group B: Skills

1500-1515h Break

# TIP #4: EVERY CAUSE NEEDS A CHAMPION



## Be Persuasive



YOU



ENTHUSIASTIC FACULTY    ENTHUSIASTIC RESIDENT



You have to maintain a portfolio.

You have to attend a CanMEDS retreat. On a Friday & Saturday. In Kingston.

You have to do critical appraisals for journal club



We'll give you a template for portfolio entries! And time in academic half day to do it!

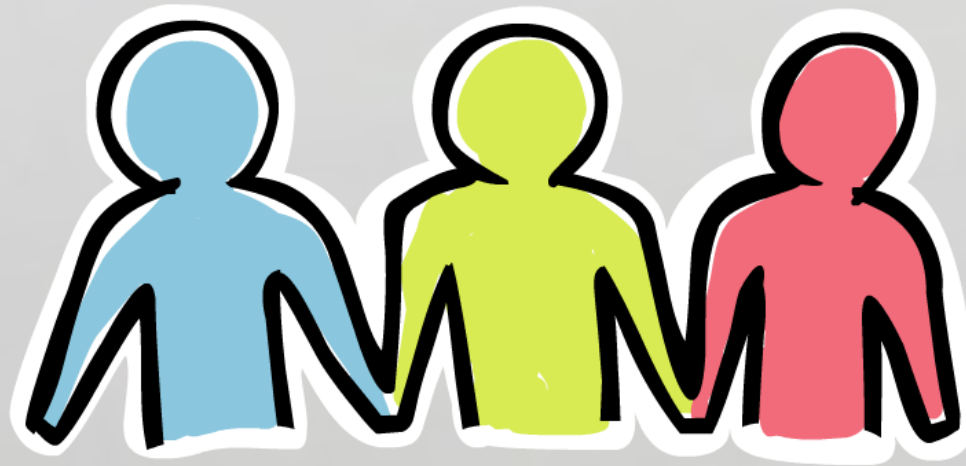
We'll pay for it! #bottomlessgummyworms #respirologypictionary #partyink-town

We'll buy dinner! And put it on Twitter! @respandsleepjc





YOU



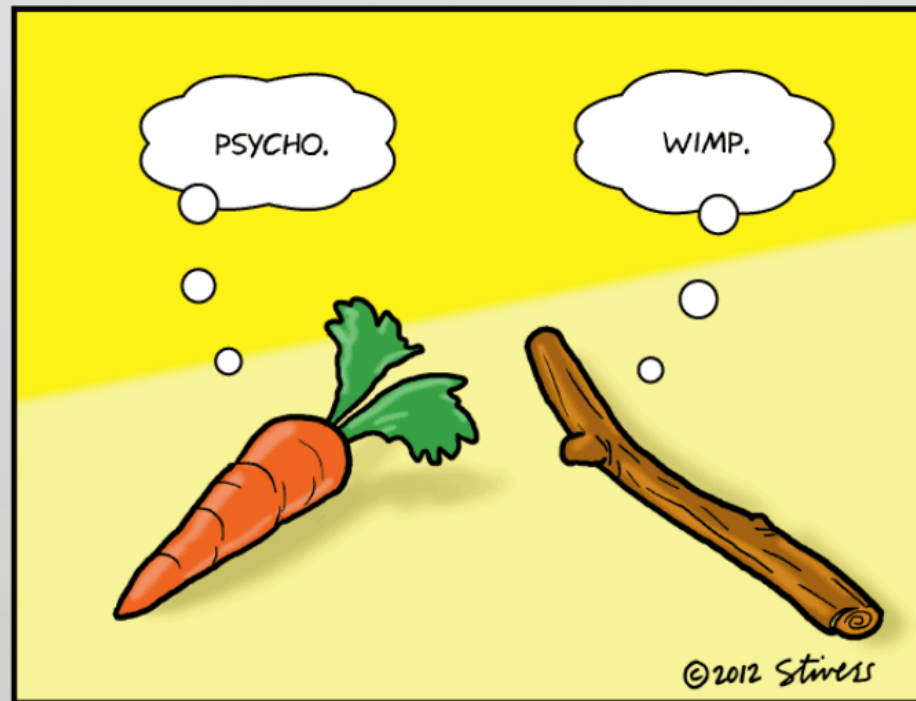
ENTHUSIASTIC

FACULTY

ENTHUSIASTIC

RESIDENT

# Be Persuasive





**You have to maintain a portfolio.**

**You have to attend a CanMEDS retreat. On a Friday & Saturday. In Kingston.**

**You have to do critical appraisals for journal club**



**We'll give you a template for portfolio entries! And time in academic half day to do it!**

**We'll pay for it!**  
**#bottomlessgummyworms**  
**#respirologypictionary**  
**#partyink-town**

**We'll buy dinner! And put it on Twitter!**   
**@respandsleepjc**



**TIP #5: DON'T GET TOO  
ATTACHED TO YOUR  
ORIGINAL IDEAS**

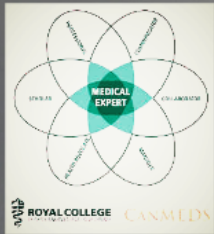
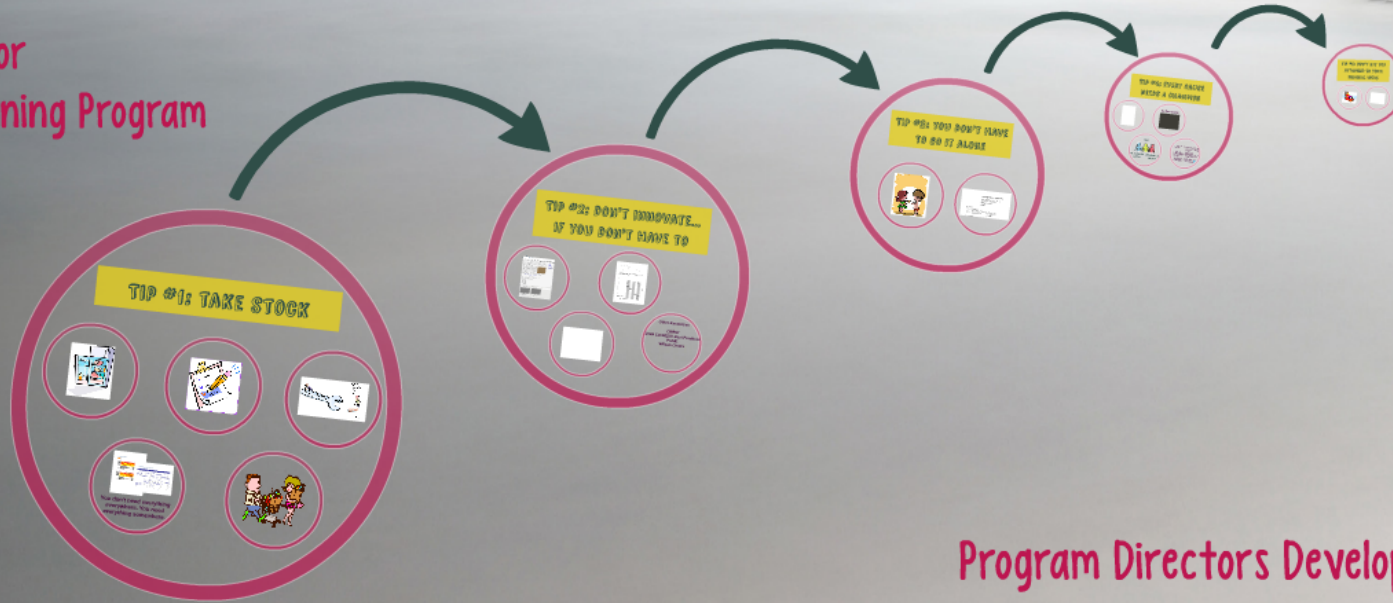






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