



**CBME UPDATES**  
NOV TOWN HALLS  
RC UPDATES



**WORKSHOPS & MORE**  
ASSESSMENT MAPPING  
AND MORE...



**CBME COMMITTEE**  
UPDATES



**FOR OUR LEARNERS**  
**FROM OUR LEADERS**  
WE'RE LISTENING

# WHAT'S HAPPENING?

## CBME Updates

### CBME Town Halls - November 27, 2020

We are interested in how CBD implementation is going for those programs who launched in 2020 (and prior) and held an open invitation to a Town Hall on Nov. 27th. I was good to hear both the challenges and successes as this helps inform how to support and the work of the CBME Committees. Some key takeaways...

- \* Complete a **Curriculum Map** - an essential tool (*follow up assessment mapping workshop on Jan. 8/21, templates and September's recorded session is on CBME website, 2021 programs will receive emails and an assessment mapping package to review prior* )
- \* **Listing EPAs** on a pocket card/lanyard for quick reference was helpful
- \* The volume of **resources** need time to review (CBME Office is working to further categorize/tag/recommend key resources across the timeline to transition, RC CBD Webpage much better)
- \* **Start early**, faculty and learner engagement is critical and using multiple communication strategies e.g. news flashes helps
- \* There is a **learner orientation and training** package on CBME website
- \* **Remind residents** not to worry less about the scores, they reflect their learning and progress, pay attention to the feedback
- \* **Ensure senior residents are prepared** to supervise junior residents
- \* **Plan for lots of faculty development** sessions as attendance varies
- \* It takes a **team and support** (e.g. CBD Lead, PAs are critical)
- \* Take the time to **learn MedSIS** and take advantage of the new features, submit issues you may have to CBMEO or Chantelle Campbell
- \* It takes time to **evaluate the EPAs, milestones, and contextual variables**, where they're placed, how best to assess, issues should be shared with Speciality Committee
- \* (NB: RC is looking for feedback and issues with EPAs, Milestones and Contextual Variables to refine, inform next version if required)

- \* Next Steps: **evaluating implementation** (*the CBME Program Evaluation and QI Committee is tasked with this framework and will build a toolkit*)

We also wanted to hear from the **2021 programs** how their transition planning is going, what their faculty development and learner development needs are etc. Key discussion points included:

- \* How do we **evaluate** implementation, how will we know we are successful?
- \* Faculty development: organizing and delivering is a challenge (to support, the CBME Office has a plan to move workshops onto **an online learning space for anytime access**, CBME resources on website are tagged and organized, but will be further categorized this month)
- \* Additional **communication/engagement strategies** (*Town Halls, interactive webinars, meetings for CC Chairs to network etc are in being added to the line up or activities*)
- \* Communication to faculty, staff and learners is key: frequent and digestible
- \* **Training** with medSIS is important
- \* **Mapping activities to a timeline** for implementation is key (see RC Implementation Planner, aligning our workshops and resources to key activities in this resource is underway)
- \* **Hearing from programs that have gone before** is very helpful, mentorship appreciated. PDs, CBD Leads, PAs, CC Chairs, Academic Coaches, PAs comprise our various CBME Committees and are actively engaged in implementation activities and resources development. There are a number of CBD Champions on our website you can access.

## RC Updates

### Programs confirmed for **Launch July 1, 2021**

Programs deferred from 2020 moving forward:

- *Adult* Cardiology
- Clinical Immunology and Allergy (adult and pediatrics)
- Neonatal Perinatal Medicine
- Pediatric Surgery
- Respiriology (adult and pediatrics)
- Vascular Surgery

In addition, the following programs are confirmed for a July, 2021 launch.

- Adolescent Medicine
- Child and Adolescent Psychiatry
- Clinical Pharmacology and Toxicology
- Forensic Psychiatry
- Geriatric Psychiatry
- Pediatric Hematology/Oncology
- Pediatrics

Programs deferred to 2022:

- Neuropathology
- Medical Genetics
- Public Health and Preventive Medicine
- Hematology
- Dermatology
- Ophthalmology

- Diagnostic Radiology

Synchronous training on the CBME and Competence Committee dashboard is planned for early 2021 when programs are established in the CBME module.

### Have questions? Not sure about requirements? Tips for implementation?

2021 programs have been sent a detailed CBD [transition plan template](#) and invited to meet with the CBME Office to review their plan and address any questions or readiness issues you may have. The RC [CBD Implementation Planner](#), [CBD for CBD template](#) to prepare faculty, the Learner Orientation and Training package and the readiness recommendations from the RC available on the CBME website are very helpful. The CBME Office is working to align recommended workshops and resources along the timeline to launch and beyond.

## Workshops and More... November, 2020

### Assessment Mapping Workshop, January 8, 2021

Presenters: Drs. Lori Whitehead, Som Mukherjee

The Curriculum Mapping workshop in September provided 2021 programs several templates and strategies to use to complete this critical activity. Having a completed curriculum map was a strong recommendation of 2020 programs. A follow up Assessment Mapping workshop with **Drs. Lori Whitehead and Som Mukherjee** on Jan. 8/21 will help the 2021 programs complete their curriculum maps and take program leads through their draft templates and strategies to map their assessments to their EPAs/Clinical learning experiences. Programs who wish to review their curriculum maps and focus on assessment mapping are also welcome to attend.

### RC Competence Committee Chairs Forum

Of potential interest, registration is now open for the RC Competence Committee Chairs Forum [on November 26 from 11:00 – 12:30 EDT](#).

See attached program and click on the following link to register.

<https://royalcollege.ungerboeck.com/prod/emc00/register.aspx?OrgCode=10&EvtID=5433&AppCode=REG&CC=120101303651>

### In case you missed...follow the links...

#### CBME Annual Retreat 2020 Webinar Series

#### [Oct. 14, 3-5 pm Are We Progressing as Expected?](#)

[Oct. 19, 3-5 pm Good Data In, Good Decisions Out](#) A case-based workshop engaged analysis and deeper discussion around trainee review, progression decisions.

[Oct. 23, 3-4 pm CBD Expert Panel: Questions and Answers](#) and [Program Presentations: CBME Success Stories, Innovations, and Scholarship](#)

*Please share your ideas for a Spring CBD webinar with the CBME Office.*

### Recommended Resources, worth taking a look...

- [New! RC Technical Guides: EPA Assessment, Competence Committees, Standards for Programs with Both Time-based and CBD models](#)
- [Competence Committees for Residents – August 20, 2020](#)
- [Work-based Assessment in CBD – June 26, 2020](#)
- [Coaching in CBD – June 12, 2020](#)
- [Competence Committees – June 9, 2020](#)
- [Teaching and learning in CBD – May 27, 2020](#)
- [Resident Development – A Resource for your incoming cohort – May 19, 2020](#)
- [Competence Committees for Program Administrators – April 23, 2020](#)
- [CBD In the Meantime Guide \(launching in a year or two?\)](#)

## CBD Implementation and COVID-19

We are starting to see some trending right with respect to launch dates. Impacts on workshops and EPA development are evident. It's recognized it may be challenging to assess some EPAs in times of reduced clinical opportunity and other pressures imposed by COVID-19; resources to support virtual teaching and assessment have been posted to the PGME site. As EPA assessment remains a requirement, programs are encouraged to ensure coaching and work-based assessments are occurring. Documenting observations and any challenges completing EPA observations with clear rationale is important. To recall, a [JMR/SMR ITAR for redeployment during COVID](#), [Guidelines for Assessment of Learners During COVID-19](#), as well as other new teaching resources are available on the PGME site.

**Did you know?** The Royal College is actively seeking your feedback on your EPAs, milestones, and contextual variables. They would really like to hear about any issues with contextual variables.

**EPA Versioning** continues in discussion at the national CBD Leads group. **Please share any issues you are experiencing with your speciality committee and the CBME Office so they can be communicated to the CBD Leads group for discussion.** Please indicate the EPA #(s) along with any suggestions for revision). As a reminder, some of the issues identified with contextual variables include:

Open-text CVs

Inconsistency in the way particular variables are written, especially within a Specialty

Misalignment between assessment plan and CVs as written

Fortunately, MedSIS has instituted a means to archive and keep accessible EPA data as programs receive new versions. Although a new version of EPAs is begun at entry to stage, competence committees and program reserve discretion for how archived EPA data is used. If new EPAs are introduced while the resident is mid stage, they may serve to enhance learning. Program should consider the situation where residents are working ahead in next stage having yet to be formally progressed from current stage. More information will follow.

**Overlap training guidelines for operationalization are in development** and will be provided to CBME Leads in the near future and shared with program leads.

For context, the background and current process is:

- Currently, post-graduate training allows double counting, meaning training in one discipline will overlap with another such that the overall course of training is shortened.
- The current system is based on overlap of specific training requirements, described as months/blocks of rotations and therefore based on time.
- With the transition to CBD and move away from time-based requirements, a new system for double counting/overlap was required. The application of ‘Overlap Training’ in CBD was approved by the Committee on Specialty Education in May 2018. This replaces the traditional “Double Counting” model and outlines the conditions for “overlap” to exist.
- There are three models for oversight of the overlap when it exists: Delegated, Conjoint, and Discretionary.
- The principles of the overlap training policy are:
  - ‘Credit for competencies achieved’ can be applied, focusing on overlap of demonstrated competencies.
  - Shared competencies must be equivalent, don’t need to be identical.
  - Identification of and responsibility for shared competencies is mutually decided between disciplines, at specialty committee level.
- An implication of the policy is that decisions on overlap training can only be made once both disciplines completed CBD educational design, as the competencies, EPAs, milestones and training experiences are required to be compared.
- The Current overlap model for that pair stays in place until both disciplines have implemented CBD and takes effect for that cohort of residents.
- Additionally, there may need different models of oversight and responsibility for different pairs of disciplines.
- Discussions on overlap are triggered when two disciplines that previously had overlap have both completed CBD educational design. The question of overlap is initially raised at the CBD Workshops, and then brought forward to the Speciality Committees for discussion and decision after initial review by the Royal College.
- Equivalencies are completed via the subspecialty’s CBD program (where applicable). The subspecialty therefore only needs to review their own EPAs (i.e. do not require access to the primary program’s dashboard).
- Once a resident is in subspecialty, then, progress information does not need to be fed back to primary program. Instead, subspecialty recommends to RC that resident is ready for certification based on the completion of the equivalent EPAs’.

An update will be available after the January meeting of the CBD Leads group.



# CBME Committee Updates

## Executive Committee



**Dr. Parveen Wasi**

Associate Dean,

**Committee Chair Dr. Parveen Wasi** and the dedicated members of the Executive continue to steward a successful transition to CBD for all programs at various stages of implementation, supporting all aspects of implementation. With an eye on quality resident training and wellness, the committee works to ensure program needs are met and the resident voice is heard.

## Implementation Committee

**Committee Chair Dr. Parveen Wasi** The Implementation Committee continues to monitor and support the implementation of all core elements of CBD. The committee has guided recent extensive medSIS enhancements as

detailed below and will work closely with the new Program Evaluation Sub-committee to identify indicators of success and promote a quality improvement culture.

## Faculty Development Committee



**Dr. Ereny Bassilious**

Chair, CBME Faculty Development Committee /  
Program Director,  
Pediatric Endocrinology &  
Metabolism

**Committee Chair Dr. Ereny Bassilious** Faculty development activities have shifted well to web-based formats and recordings are made available on the CBME website. The **Curriculum Mapping workshop in September** provided several templates for 2021 programs. A follow up **Assessment Mapping workshop with Drs. Lori Whitehead and Som Mukherjee on Jan. 8/21** will help the 2021 programs complete their curriculum maps and take program leads through templates and strategies to map their assessments to their EPAs/clinical learning experiences. If you missed the **Town Halls on November 27th, please share your faculty development needs, ideas, or resources you require.**

## Learner Development Committee



**Dr. David Callen**

Chair, CBME Learner Development Committee /  
Program Director,  
Pediatric Neurology

**Committee Chair Dr. David Callen** The CBME Learner Development Committee and its working groups continue to address the needs of resident learners at various stages of transition to CBD. A **resident CBD orientation package and resources** were shared with programs receiving trainees new to the model (available on CBME website). The committee continues to identify strategies to foster learner development and encourage participation on CBME committee work in collaboration with the Resident Lead Committee. A resident survey is under consideration.

### Resident Lead Committee



**Dr. Spencer Van Mil**  
Co-chair, CBME Resident Subcommittee



**Dr. David Sands**  
Co-chair, CBME Resident Subcommittee

**Committee Co-Chairs Drs. Spencer Van Mil and David Sands** We have been working to establish a clear channel for bidirectional feedback between the resident body and the faculty level committees. We are in the process of creating a pre-meeting feedback tool to help committee members efficiently gather new concerns from a broad array of residents within their program to ensure that challenges are being addressed. In addition, we have our sights set on a needs assessment to identify what has and has not worked for those that have transitioned to CBME.

We hope to use these results to help optimize the CBME resident experience going forward. ~ *Dr. Spencer Van Mil*

### Program Evaluation and QI Committee



**Dr. Ranil Sonnadara**  
Co-chair, CBME Evaluation Committee  
Director, Education Science & Associate Professor, Surgery



**Lisa Colizza**  
PGME CBME Lead / Co-chair, CBME Evaluation Committee

**Committee Co-Chairs Dr. Ranil Sonnadara and Lisa Colizza** The CBME Program Evaluation and Quality Improvement Committee established a data governance model that has been approved by the CBME Executive Committee. A Governance Committee will be established. A framework is in development to guide the activities of the committee and define short, mid, and long term outcome measures, policies and procedures, and tools to support programs approaching evaluation

and quality improvement goals. Core elements of CBD implementation, and in particular, Competence Committees, will be the initial focus of evaluation activities. Related resources are available on the CBME site.

### Program Administrators Committee

**PA CBME Committee Co-Chairs, Julia Smerili and Sarah Richardson**, as well as their committee members had a busy Fall assisting with a CBD 101 PA Orientation webinar, offering tips and recommendations to incoming Program Assistants working in CBD programs. We provided another PA Lunch & Learn workshop focusing on Competence Committees in November.

Candice Stroud and Lauren Davis sit on the Program Assistant National Advisory Council and reported most national competence committees are running smoothly but learning plans and coaching require more work. Program Assistants widely agree CBME is a cultural change that will take time. Faculty buy-in and timely assessment completion remain challenges, as well as, the number of platforms PAs are required to use.

**medSIS**

Chantelle Campbell, our [Business Systems Analyst](#) continues to provide extensive support to programs transitioning to CBME. The **Orientation to the CBME Dashboard and mobile functionality training sessions** video capture is available on the [medSIS training site](#) and will be offered synchronously in the Spring for 2021 programs and others interested in the enhancements. For: PDs, PAs, CBD Leads, Competence Committee Chairs, and Academic Coaches, supervisors.

**New! Competence Committee Dashboard Training, Nov. 27th** -This recorded session is available on the CBME website and the medSIS training site.

**Thank you from the CBME Office! We wish for you great success in your CBME implementation efforts and continued good health. Questions? Please reach out to us.**

*With highest regards,*



**Dr. Parveen  
Wasi**

Associate Dean,



**Lisa Colizza**

PGME CBME Lead / Co-chair, CBME  
Evaluation Committee



**Allison Paquette**

Administrative Coordinator