Medicine — UNIVERSITY OF TORONTO | Internal Medicine

Primer for EPA TTD2 - Identifying and Assessing UNSTABLE PATIENTS, Providing Initial Management and Obtaining Help

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 Factsheets:
CBD Terminology Click here
Improving feedback tips: Click here

WATCH an eModule on:
CBD in Internal Medicine: Click here to watch
EPAs 101: Click here

VISIT
www.deptmedicine.utoronto.ca/cbme
for general information on resources and events.

Questions? CONTACT us at
im.cbd@utoronto.ca

This EPA focuses on clinical assessment of the **unstable patient**. The residents need to **identify and assess unstable patients, provide initial management and obtain help,** for the following conditions: acute respiratory distress; hemodynamic instability; and altered level of consciousness**.**

Supervisor (staff and/or supervising fellow) does assessment based on **direct* and indirect observation.** *Direct = unfiltered case review at the time of presentation, with validation of part of the history/ physical by the supervisor followed by discussion of the management plan.*

It should be done in the **Transition to Discipline (TTD) stage (first 4 blocks of PGY1).**

EPA MILESTONES: TTD2 Unstable Patient

1. Perform a focused history and physical exam
2. Recognize urgent problems that may need the involvement of more experienced physicians and seek their assistance
3. Develop and implement initial management plans for common acute unstable presentations in Internal Medicine
4. Perform the skills of Advanced Cardiac Life Support (ACLS)
5. Provide explanations and updates to the patient and family
6. Provide specific information required for safe and effective handover to senior colleagues

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.

ENTRUSTMENT

EXCELLENCE
Demonstrated leading practice, acted as a role model

AUTONOMY
Supervisor didn't need to be there

SUPPORT
Required some minor advice

DIRECTION
Required major instruction

INTERVENTION
Somebody else had to complete all or almost all

GLOBAL ENTRUSTMENT SCALE
(Autonomous and Consultancy levels are entrustable)

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.
5. 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.