

## Didactic Curriculum Update

The implementation of CBD has created a unique opportunity to examine the didactic curriculum taught across the five years of our residency program. This year, a committed group of educators closely examined best practices in

Postgraduate education and, for the first time ever, carefully mapped the existing didactic curriculum. The purpose of these activities is to gain a better and more integrated understanding of what is being taught and in turn develop a refreshed didactic curriculum that better meets the educational needs of our residents and takes into account the evolving field of psychiatry and changing patient and societal needs.

Recently, these educators met for a half-day retreat to begin to map out a refreshed didactic curriculum. This curriculum not only takes into account feedback that we have received from past and current residents, but it integrates with the new clinical rotation structure and recognizes the impact of teaching in the clinical environment. Duplication of lecture content is minimized, innovative teaching methods such as the flipped classroom are being developed and overall hours spent in didactic formats is being reduced, but there will still be a robust, in person, didactic component.

The details of the curriculum are coming together piece by piece in hope that we have something great to offer future residents. The PGY1 and PGY2 classes in 2019-20 will be the first residents to enjoy the new curriculum. In addition, we look forward to offering a more streamlined, simple and insightful didactic lecture evaluation tool so that we can get real time feedback from the residents while implementing the refresh. Happy Learning!



### Faculty Development

#### CBD Spring Primers

Planning is well underway for the 2019-20 academic year. Along with that comes the need to onboard many new Supervisors to the CBD model of training. It's not just a new lingo, it's a new way of assessing our psychiatry residents. Join the wave, learn what CBD is all about and most importantly learn what an [Entrustable Professional Activity \(EPA\)](#) is and how to use EPAs to assess your residents. Here is a listing of all the [Spring CBD Primers](#). If you ever have residents in PGY1 or PGY2 you must get trained! Contact [Kristen Sharpe](#) for details.



We asked PGY1 Resident, Hamza Riaz for his thoughts on CBD, "The new curriculum and EPA tool mean I can more easily have conversations with my preceptors about my progress and goals day to day."

# Calling All Coaches

Currently, we have 25 coaches across the hospital sites providing advice and support to our PGY1 and PGY2 pilot CBD residents. In July, we have 39 new PGY1s beginning in the CBD model of resident training. If you or someone you know is interested in catching the CBD wave, becoming a coach is a great opportunity to get your toes wet. We have lots of coaching resources in our [CBD Handbook](#) and in our [Coach's Corner](#) on the CBD website. After a little upfront learning on coaching, it takes only 30 minutes of your time/per resident, every other month, to meet with your assigned resident(s), review their progress and provide some guidance on their learning plan. Please be in touch if you are interested – [cbd.psych@utoronto.ca](mailto:cbd.psych@utoronto.ca)

You asked we listened....



Numerous sources of feedback indicate that the value of the homeroom experience is not quite what we had hoped it would be. Challenges arose such as scheduling and travel requirements to attend homeroom when on offsite rotations. Thanks for all your honest responses. **HOMEROOM IS CANCELLED!**

## Focus on FOD2: Develop and implement a management plan based on a bio-psycho-social-cultural formulation in a patient with a common mental health concern.

FOD2 is an EPA that can be achieved in a variety of settings across PGY1 and PGY2 rotations. A supervisor can assess this EPA when the resident is giving a case report or when reviewing the resident-written plan.

Supervisors will be looking for the residents' ability to:

- Develop and document the formulation.
- Develop a differential diagnosis (e.g. list 3 or 4) and justify the preferred diagnosis.
- Develop a treatment plan that incorporates biological, psychological, social and cultural considerations.
- Conveys the formulation, diagnosis and plan (including goals) accurately and clearly.

At the Foundations of Discipline level of competency, cases should (ideally) be less complicated. Residents should request observation for this EPA for cases such as psychosis, mood, substance use, anxiety or personality disorders.

FOD 2 can be assessed in the child, general or geriatric setting. In addition, it can be assessed during a STACER.

Do you have feedback on FOD2? Please send your comments to [kristen.sharpe@utoronto.ca](mailto:kristen.sharpe@utoronto.ca)



**February Leaderboard: 769 EPAs completed to end of February 2019**

- Brandon Christensen is the PGY1 CBD Resident with the most EPAs entered.
- Siqi Xue, Brett Jones, Kirsten Penner-Goeke are the PGY2 Pilot CBD Residents with the most EPAs entered.
- Eileen La Croix is the Supervisor who has participated in completion of the most EPAs.

Every month, the Residents and Supervisor with the most completed EPAs receive a Tim Horton's Gift Card!

**CONGRATS!**

Call Kristen to receive your EPA Progress Tim Horton's gift card.

And... a shout out to the following faculty who recently began completing EPAs on PsychRocks: Ben Rosen, Christopher Richards-Bentley, Donna Ferguson, Esther Elliott, Molyn Leszcz, and Rosalie Steinberg!!

