



Primer for EPA COD5 - Performing the PROCEDURES of Internal Medicine



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 **28 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

EPAs 101: Click [here](#)

VISIT

www.deptmedicine.utoronto.ca/cbme

for general information on resources and events.

Questions? **CONTACT** us at

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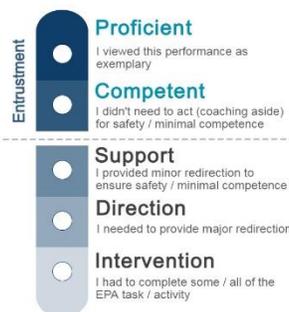
This **Core of Discipline -COD EPA 5 (PGY2&3)** can be started in PGY1 (TTD and FOD). The **resident requires 5 of each procedure completed successfully** by the end of PGY3. They can start self-assessments (i.e., doing the procedure independently) after the following minimum number completed: **thoracentesis (3), paracentesis (3), LP (3), arterial lines (3), central lines (5), Endotracheal intubations (3), knee aspirations (3)**. Resident should also **log all code blues**. Residents may log procedures and have faculty sign off afterwards if they feel comfortable prior to reaching the target 3, however all residents must have completed one procedural EPA on a living person with faculty overview prior to this.

EPA MILESTONES: COD5 - Procedures

1. Obtain and document informed consent, explaining the risks and benefits of, and the rationale for, a proposed procedure
2. Perform pre-procedural tasks in a timely, skillful, and safe manner
3. Perform procedures in a skillful and safe manner, adapting to unanticipated findings or changing clinical circumstances
4. Document procedures accurately
5. Establish and implement a plan for post-procedure care
6. Recognize and manage complications
7. Document the encounter to convey the procedure and outcome

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.
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.



GLOBAL ENTRUSTMENT SCALE
(Competent and Proficient levels are entrustable)