

PGME Core Curriculum Overview

The Max Rady College of Medicine Postgraduate Medical Education (PGME) Core Curriculum was developed to fulfil the recommendations of the Royal College (RCPSC) and the College of Family Physicians of Canada (CFPC) to ensure competencies relevant to all residency programs were being taught consistently. The Undergraduate Medical Education (UGME) Accreditation Standard 9.1 requires that residents who supervise and teach medical students are familiar with their clerkship learning objectives and are prepared to teach and assess students. The Core Curriculum consists of a variety of courses which address multiple CanMEDS roles as well as a Teaching Development Program.

**A complete map of CanMEDS competencies for each PGME Core Curriculum course can be found at the end of this document.*

There are currently 12 courses offered in Core Curriculum, the **majority** of which are mandatory for all residents.

Logistics

Residents are enrolled into their required online courses in UM Learn by the PGME office.

**For non-UM Learn courses, such as the CMPA workshop and Practice Management, registration information is communicated by PGME to programs and residents must pre-register for these sessions.

Each resident's Entrada dashboard displays their required Core Curriculum courses. When a course is completed, this will be indicated on the Entrada dashboard. Please note that because UM Learn and Entrada are not linked, completion information is entered manually and may take a few days.

Core Curriculum Requirements

All courses, except Practice Management which is to be completed in the final years of training, must be completed by June 1st of the resident's first year of training.

Failure to complete all of the required PGME Core Curriculum courses (except Practice management which will occur in the final year of training) by June 30th of the first year of training will result in the resident not being allowed to commence any of their PGY-2 rotations and the resident will be placed on Remediation for a breach of professionalism until they have successfully completed the courses. Letters of intention for Remediation will be communicated to Programs and residents in mid-June.

Information specific to Subspecialty Programs:

- Residents who join the University of Manitoba for **subspecialty programs** must only complete TDP 0 and the Teaching Development Program (TDP).
- If evidence of completion of another teaching course is provided to the Director of Core Curriculum, they will not be required to complete TDP.

- If programs have opted into Resource Stewardship Part B, subspecialty residents must also complete this course.
- The following Subspecialty programs have opted to make **Practice Management** mandatory:
 - GI Medicine, Pediatric Infectious Disease, Hematology, Developmental Pediatrics, Pediatric Hematology/Oncology, Pediatric Clinical Immunology & Allergy, Respiriology, Geriatric Medicine.
 - Residents in other Subspecialty programs are encouraged to attend the Practice Management sessions and will be provided with registration information.

Core Curriculum Course Description

- 1) **TDP: Teaching Development Program for Residents:** UM Learn online course
CanMED Roles: Scholar, Communicator

TDP is designed to give residents and graduate students up-to-date teaching tools and skill sets to be more effective teachers in the clinical setting. TDP and TDP0 are mandatory for all residents as they fulfil the requirements for the UGME Accreditation Standard 9.1 which states that residents “are familiar with the learning objectives of the required learning experience in which they participate and are prepared for their roles in teaching and assessment. The medical school provides resources to enhance and improve residents’ teaching and assessment skills, with central monitoring of their participation in those opportunities provided.”

This course covers the 5 main areas, listed below, and includes interactive exercises, locally filmed demonstration videos and a final quiz.

- Orienting the Learner & Setting Expectations
- Learner Assessment
- Giving Feedback in a Clinical setting
- Clinical teaching: The One-Minute Preceptor, Bedside teaching, Teaching a Procedure
- Learner in Difficulty

- 2) **TDP0: Introduction to Teaching Medical Students:** UM Learn online course
CanMED Role: Scholar

TDP 0 is a brief introduction to teaching medical students by providing an overview of clerkship schedule, learning objectives and essential clinical presentations (ECPs) for all core clerkship rotations.

- 3) **Conflict Management:** UM Learn online course
CanMED Roles: Professional, Medical Expert

This session is designed to provide residents with the knowledge and skills to constructively manage conflict with patients and within teams.

Objectives:

- Analyze ineffective and effective ways to react to conflict.
- Define the causes of conflict.
- Describe conflict management styles.
- Identify and describe skills to diffuse conflict and prevent escalation.

- 4) **Diversity- Delivering Culturally Proficient Care:** UM Learn online course
CanMED Roles: Advocate

This course is meant to offer a small snapshot of diversity and consideration for providing culturally proficient care. Depending on previous education, training and life experiences, residents will bring different knowledge, attitudes and skills to this learning. As they go through this course, the residents are asked to think about their own beliefs and experiences regarding culture and diversity. Three populations considered within the module are First Nations, Inuit and Metis; immigrant/refugee and LGBTQ populations.

Objectives:

- Define key terms relating to diversity and culturally proficient care
- Describe implications of cultural difference within the medical context
- Apply a communication strategy to negotiating with patients using a shared approach to a given problem

5) **Foundations of Professionalism:** UM Learn online course

CanMED Role: Professionalism

Objectives:

- State the definition of professionalism adopted by the PGME professionalism curriculum committee
- Identify the constituent components of professionalism, and the relationship to other CanMEDS and Can MEDS-FM competencies
- Reflect on the importance of professionalism as a key enabler of high quality clinical care and physician well-being
- Appreciate the complexity inherent in addressing lapses of professionalism
- Articulate an approach to professionalism concerns
- Demonstrate awareness of resources available to residents encountering concerns related to professionalism

6) **Professional Boundaries:** UM Learn online course

CanMED Role: Professional

Objectives:

- Definitions of Professional Boundaries, Professional Boundaries Crossing and Professional Boundaries violations
- Concepts of Fiduciary relationship, power differential, consent, etc.
- Apply CPSM and CMA regulations regarding Professional Boundaries to a variety of scenarios
- Articulate ways in which to protect self from risk of violation

7) **Resource Stewardship Part A:** UM Learn online course

CanMED Roles: Health Advocate, Medical Expert, Scholar

This course introduces the learner to the principals of resource stewardship, specifically, impact of overuse, underuse and misuse of resources. Antibiotic stewardship serves as an illustrative example.

Objectives:

- Define common terminologies in resource stewardship
- Differentiate between rationing and resource stewardship
- Discuss ethical aspects of resource stewardship
- Recognize the harm associated with overuse
- Identify drivers of overuse
- Discuss strategies to improve resource stewardship
- Identify examples of antimicrobial overuse and opportunities for improved stewardship

8) **Resource Stewardship B:** Self-initiated Project

CanMED Roles: Health Advocate, Medical Expert, Scholar

Programs may **opt** for their residents to complete a self-initiated small project examining a resource stewardship issue relevant to their practice. Family practice residents will undertake this in PGY 2 while other residents will undertake this in their PGY 4 or PGY 5 years. The project must be longer than three days but no longer than four weeks in length (cumulative time). Clinical Quality Improvement (QI) projects done to meet requirements can be used to satisfy this project. In other words, if a QI project is being done

by the resident, this project is considered to be complete, and as such the resident is not required to do a resource stewardship project.

Requirements to fulfill the Resource Stewardship Project

1. Self-initiated project examining a clinical resource problem and coming up with a solution. Implementation of a solution is a plus but not mandatory.
2. Evidence of completion of the project. This would be in the form of presentation of the project by the resident in a report (no more than 1 page) to the Program Director of the training program. This will then be passed on to the PGME Core curriculum office.
 - a. If this project ends up being presented or published, the publication (poster/paper) is sufficient as a report (no need to write a report).
 - b. If a QI project was done, the QI report is sufficient evidence.

9) **CMPA Seminar:** Live online seminar

CanMED Role: Professional

The standardized curriculum is based on CMPA medical-legal risk data and the CanMEDS 2015 and CanMEDS-FM competencies. It covers all medical-legal essentials to reduce medical-legal risk and keep patients safe. This interactive and virtual workshop has been developed specifically for first year Family Medicine residents and second year specialty program residents.

Delivered by highly experienced CMPA physician advisors, the half-day online workshop covers topics representing medical-legal issues frequently encountered by residents in CMPA case files: informed consent, documentation, disclosure of a patient safety incident, and teamwork. There are multiple dates available for registration.

Objectives:

- Recognize the value of trust in the doctor-patient relationship.
- Describe the importance of documentation.
- Identify the elements of informed consent.
- Describe strategies to encourage speaking up within your team.
- Describe the elements of disclosing a safety incident ('accident' in Québec) to a patient.

10) **Drug Prescribing Safely:** UM Learn online course

CanMED Roles: Professional, Medical Expert

This course was developed by the College of Physicians and Surgeons of Manitoba and the College of Pharmacists of Manitoba and focuses on safe prescribing standards with respect to opioids and benzodiazepines, the province's centralized drug database and the Pharmacare program.

Objectives:

- Describe historical factors that contributed to the opioid crisis.
- Discuss the main elements of The Standard of Practice for Prescribing Opioids.
- Identify high risk prescribing practices involving opioids and other medications that contribute to prescription drug related morbidity and mortality.
- Discuss how polypharmacy and OTC medication use contribute to accidental overdose deaths.
- Briefly review upcoming CPSM Initiatives around benzodiazepines.
- Summarize important background information on DPIN, Pharmacare, drug coverage and drug legislation.
- Apply the three components of safe and effective prescription writing.
- Describe the information that should be included on a prescription.
- Summarize prescription formatting/writing tips.
- Reflect on the awareness of patient safety in prescribing.

11) **Practice Management:** Two-part live online workshop

CanMED Role: Leader

This course is run as two online workshops for senior residents. Issues of practice management relevant to the start of clinical practice are discussed (such as evaluating practice opportunities, physician remuneration, insurance and taxation). Practice Management is a core skill recognized by the Royal College of Physicians and Surgeons as important to residents' future success as physicians. CFPC residents have the option to complete the Family Medicine Practice Management or the PGME run Practice Management.

Objectives:

- i. Successfully transition into practice with a practical knowledge of:
 - What to pay attention in residency so they can succeed after graduation.
 - How to evaluate practice opportunities, different practice structures and locums.
 - Billing process.
 - Contract evaluation and negotiation.
 - Office management basics (e.x. overhead costs, EMR management), office set up and staffing concepts.
- ii. Understand financial management basics:
 - Net worth, debt management and investing concepts.
 - Accounting and taxation (including incorporation).
- iii. Understand the importance of having a professional advisory team to help them succeed:
 - What key factors to look for in an accountant, lawyer, financial planner and insurance agent.
 - Understand the value vs. cost of having professional advisors.
- iv. Understand the benefits and resources of national, provincial and societal membership services.

12) Nightmares Simulation Boot Camp: In person

CanMED Roles: Medical Expert, Communicator, Leader, Collaborator

PGY-1 residents in Anesthesia, Internal Medicine, Emergency, Obstetrics & Gynecology, Neurology and Surgery must take this course during July of their first year of training.

This simulation-based course gives PGY-1 residents the opportunity to manage challenging cases in a safe environment and focuses on both medical management and principles of Crisis Resource Management. It consists of 4 simulation sessions.

Objectives: By the end of this course, the learner will be able to:

- Describe the principles of Crisis Resource Management.
- Manage a patient in cardiac arrest following the ACLS guidelines.
- Manage a patient with a cardiac emergency including stable and unstable tachycardia/bradycardia, and ACS.
- Manage a patient with an acute respiratory emergency including acute pulmonary edema, anaphylaxis and COVID respiratory failure.
- Manage a patient with altered mental status including alcohol withdrawal, opioid toxicity and sepsis.

Table 1. The following courses are mandatory for all PGY-1 residents. *Program exemptions are noted:

Mandatory Sessions	Program Exemptions
Teaching Development Program (TDP) 0 Online Course	-
Teaching Development Program (TDP) Online Course	-
Conflict Management Online Course	-
Foundations of Professionalism Online course	-
Professional Boundaries Online Course	-
Resource Stewardship A Online Course	Medical Microbiology Medical Genetics Pediatrics
CMPA Seminar Online Live Course	Medical Microbiology Anatomical Pathology IMG Medical Genetics Clinical Biochemistry
Drug Prescribing Safety Online Course	Clinical Biochemistry

*Trainees in Clinical Psychology, Dental and Diagnostic & Surgical Sciences, Pediatric Dentistry, Clinical Investigator Program and Clinical Microbiology are exempt from ALL courses.

*Trainees in Molecular Genetics & Cytogenetics (Post PhD) must complete Conflict Management and Resource Stewardship Part A.

Table 2. The following courses are **required only** for the noted programs:

Diversity: Offering Culturally Proficient care Online Course	Internal Medicine Ophthalmology General Surgery Urology Clinical Biochemistry Psychiatry
Nightmares Boot Camp In Person Simulation course	Anesthesia Emergency Obstetrics & Gynecology Surgery Internal Medicine Neurology
Resource Stewardship B Project	Geriatric Medicine

If you have any questions about PGME Core Curriculum, please email the PGME Office at pgme@umanitoba.ca

Core Session	CanMEDS Enabling Competencies
<p>Teaching Development Program</p> <ul style="list-style-type: none"> • TDP0: Introduction to Teaching Medical Students • TDP: Teaching Development Program 	<p>S 2.1 Recognize the influence of role-modelling and the impact of the formal, informal, and hidden curriculum on learners S 2.2 Promote a safe learning environment S 2.4 Plan and deliver a learning activity S 2.5 Provide feedback to enhance learning and performance S 2.6 Assess and evaluate learners, teachers, and programs in an educationally appropriate manner</p>
<p>Conflict Management</p>	<p>ME 5.2 Adopt strategies that promote patient safety and address human and system factors COM 1.5 Manage disagreements and emotionally charged conversations COL 2.1 Show respect toward collaborators COL 2.2 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture</p>
<p>Diversity (Offering Culturally Proficient Care)</p>	<p>COM 1.3 Recognize when the values, biases, or perspectives of patients, physicians, or other health care professionals may have an impact on the quality of care, and modify the approach to the patient accordingly COM 4.1 Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe</p>
<p>Resource Stewardship</p>	<p>L 1.1 Apply the science of quality improvement to contribute to improving systems of patient care L 2.1 Allocate health care resources for optimal patient care L 2.2 Apply evidence and management processes to achieve cost-appropriate care L 3.2 Facilitate change in health care to enhance services and outcomes S. 3.3 Critically evaluate the integrity, reliability, and applicability of health-related research and literature S. 3.4 Integrate evidence into decision-making in their practice</p>
<p>Professional Boundaries in the Physician-Patient Relationship</p>	<p>P 1.1 Exhibit appropriate professional behaviours and relationships in all aspects of practice, demonstrating honesty, integrity, humility, commitment, compassion, respect, altruism, respect for diversity, and maintenance of confidentiality P 1.3 Recognize and respond to ethical issues encountered in practice P 1.4 Recognize and manage conflicts of interest P 1.5 Exhibit professional behaviours in the use of technology-enabled communication P 2.1 Demonstrate accountability to patients, society, and the profession by responding to societal expectations of physicians P 3.1 Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice P 3.2 Recognize and respond to unprofessional and unethical behaviours in physicians and other colleagues in the health care professions</p>

Foundations of Professionalism

S 2.2 Promote a safe learning environment
P 3.2 Recognize and respond to unprofessional and unethical behaviours in physicians and other colleagues in the health care professions
P 4.1 Exhibit self-awareness and manage influences on personal well-being and professional performance
P 4.3 Promote a culture that recognizes, supports, and responds effectively to colleagues in need

Drug Safety / Safe Prescribing

ME 1.1 Demonstrate a commitment to high-quality care of their patients
ME 3.1 Determine the most appropriate procedures or therapies
ME 3.1 Determine the most appropriate procedures or therapies
ME 5.1 Recognize and respond to harm from health care delivery, including patient safety incidents
ME 5.2 Adopt strategies that promote patient safety and address human and system factors
COM 1.5 Manage disagreements and emotionally charged conversations
COM 1.6 Adapt to the unique needs and preferences of each patient and to his or her clinical condition and circumstances
L 1.2 Contribute to a culture that promotes patient safety
P 1.3 Recognize and respond to ethical issues encountered in practice
P 2.2 Demonstrate a commitment to patient safety and quality improvement
P 3.1 Fulfill and adhere to the professional and ethical codes, standards of practice, and laws governing practice

CMPA Resident Seminar

COM 3.1 Share information and explanations that are clear, accurate, and timely, while checking for patient and family understanding
COM 3.2 Disclose harmful patient safety incidents to patients and their families accurately and appropriately
COM 4.1 Facilitate discussions with patients and their families in a way that is respectful, non-judgmental, and culturally safe
COM 4.2 Assist patients and their families to identify, access, and make use of information and communication technologies to support their care and manage their health
COM 4.3 Use communication skills and strategies that help patients and their families make informed decisions regarding their health
COM 5.1 Document clinical encounters in an accurate, complete, timely, and accessible manner, in compliance with regulatory and legal requirements
COM 5.2 Communicate effectively using a written health record, electronic medical record, or other digital technology
COM 5.3 Share information with patients and others in a manner that respects patient privacy and confidentiality and enhances understanding
COL 1.1 Establish and maintain positive relationships with physicians and other colleagues in the health care professions to support relationship-centred collaborative care

COL 1.2 Negotiate overlapping and shared responsibilities with physicians and other colleagues in the health care professions in episodic and ongoing care

COL 1.3 Engage in respectful shared decision-making with physicians and other colleagues in the health care professions

COL 2.1 Show respect toward collaborators

COL 2.2 Implement strategies to promote understanding, manage differences, and resolve conflicts in a manner that supports a collaborative culture

COL 3.1 Determine when care should be transferred to another physician or health care professional

COL 3.2 Demonstrate safe handover of care, using both verbal and written communication, during a patient transition to a different health care professional, setting, or stage of care

Practice Management

L 4.2 Manage a career and a practice