



THE COLLEGE OF  
FAMILY PHYSICIANS  
OF CANADA



LE COLLÈGE DES  
MÉDECINS DE FAMILLE  
DU CANADA

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SECTION OF TEACHERS • SECTION DES ENSEIGNANTS

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# CanMEDS-Family Medicine

A Competency Framework for  
Family Medicine Education and  
Practice in Canada

# Objectives

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- Explain the rationale leading to the development of CanMEDS-FM
- Describe the content of CanMEDS-FM
- Demonstrate how CanMEDS-FM can be used across the learning continuum

Frank JR, ed. The CanMEDS 2005 physician competency framework. Better standards. Better physicians. Better care. Ottawa: The Royal College of Physicians and Surgeons of Canada; 2005 [cited 2009 Dec 14]. Available from: <http://rcpsc.medical.org/canmeds/index.php>.

2



# Background

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- The Triple C Competency-based Curriculum was developed to train Canadian family medicine residents to meet societal needs using the best available educational evidence
- To deliver this, a framework to organize the competencies for family physicians was necessary

# What is a Competency Framework?

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## Competencies in family medicine

= What a family physician must know and do in order to be effective

## Competency framework

= Organization and categorization of competencies

# Selecting a Framework

Existing attempts to describe the different roles of physicians:

- **Canadian**

- The Four Principles of Family Medicine (CFPC)\*
- EFPO Project
- CanMEDS 2005 (RCPSC)

- **International**

- EURACT Tree (Europe)\*
- ACGME (USA)
- IIME (USA)
- RACGP (Australia)\*
- Dundee Outcome Model (Scotland)
- RCGP (UK)\*

\*Developed for Family Medicine

# Selecting a Framework

- Focus given to those developed in the Canadian context
- The Four Principles of Family Medicine (CFPC) (1985)
  - Describes the discipline of family medicine and the work of family physicians
  - Not intuitive or operational
- CanMEDS 2005 (RCPSC)
  - Contribution of family physicians through EFPO
  - Common language across specialties and throughout the continuum of learning
  - Operational, educationally speaking

6

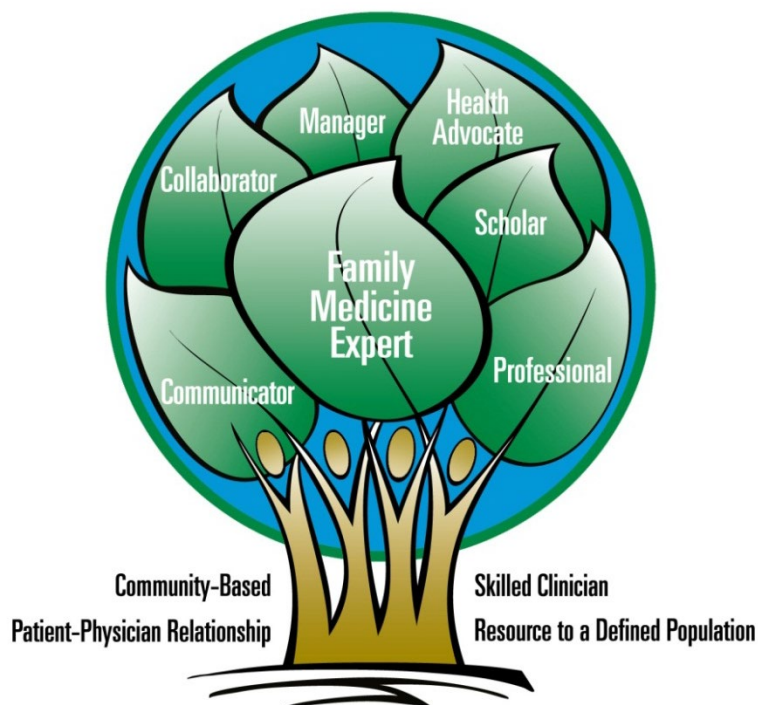
# Selecting a Framework

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- No existing competency framework adequately described family medicine in Canada and was educationally operational
- A novel framework for family medicine was developed, based on CanMEDS 2005



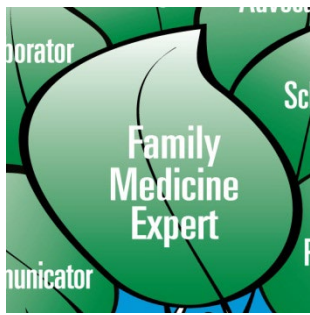
# Introducing ... CanMEDS - Family Medicine (CanMEDS-FM)



- Seven Roles with FM Expert as integrating Role
- Four Principles inspire and inform the Roles as “roots”

Adapted from the CanMEDS Physician Competency Diagram with permission of the Royal College of Physicians and Surgeons of Canada. Copyright © 2009.





# Family Medicine Expert

- Major modifications from CanMEDS 2005's "Medical Expert" Role
- Defines family physician as the personal physician in a long-term relationship of trust with patients and families
- Highlights include
  - The patient-centred clinical method
  - Comprehensive, continuing care
  - Management of complex situations
  - Coordinating care and collaboration

9

# Communicator

- Significant modifications from CanMEDS 2005
- Highlights include:
  - Centrality of the patient–physician relationship
  - Understanding patients’ experience of illness
  - Developing common understanding
  - Effective use of oral and written communication
  - Empowering patients to “take charge” of their own health
  - Communication with different type of patients and challenging situations



# Collaborator

- Moderate modifications from CanMEDS 2005
- Highlights include
  - Participating in collaborative team-based models of care and interprofessional health care teams
  - Engaging patients and families as active participants in care
  - The family physician as community-based
  - Work with consulting professionals and community agencies
  - Management of scarce resources and understanding of the health care system

11



# Manager

- Moderate modifications to CanMEDS 2005 Role
- Highlights include
  - First-contact nature of family medicine
  - Coordinating patient care and FP as a resource to one's patient population
  - Contributing to effectiveness in health care systems
  - Working in different primary care models
  - Practice and career management, and effective use of resources
  - Serving in administrative and leadership roles

12



# Health Advocate

- Minor modifications from CanMEDS 2005
- Highlights include:
  - Respond to patients' needs
  - Respond to community needs
  - Identify determinants of health
  - Identify means of promoting health of patients and communities

The logo features the word "Scholar" in white text on a green background that resembles a leaf with black veins. A yellow speech bubble icon is partially visible in the top-left corner.

Scholar

# Scholar

- Minor modifications from CanMEDS 2005
- Highlights include:
  - Self-directed learning
  - Critical appraisal
  - Educating others
  - Contributing to new knowledge and approaches

14



- Moderate modifications from CanMEDS 2005
- Highlights include:
  - Commitment to patient well-being
  - Integrity, commitment and ethical practice
  - Respecting colleagues and team members
  - Demonstrating reflective practice
  - Physician self-care
  - Using evidence-based medicine and critical appraisal
  - Participating in profession-led regulation



# CanMEDS-FM

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*Is Relevant to all Stages of Learning and Practice*

- Undergraduate
  - Medical students learn the Roles as outlined in CanMEDS-FMU
- Postgraduate
  - Residents are trained in the CanMEDS-FM Roles across the Domains of Clinical Care, through a Triple C Curriculum
- Practice
  - Family physicians demonstrate Roles in practice
  - May prove useful to organize CPD objectives

16

# Acknowledgment

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17

# Based Upon

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## CanMEDS-Family Medicine: A Framework of Competencies in Family Medicine

Tannenbaum D, Kerr J, Konkin J, Organek A, Parsons E, Saucier D, Shaw L, Walsh A . *CanMEDS-Family Medicine. Report of the Working Group on Postgraduate Curriculum Review-Part 1*. Mississauga ON: College of Family Physicians of Canada; 2011 [Available Here](#)

18

# For More Information

Tannenbaum D, Kerr J, Konkin J, Organek A, Parsons E, Saucier D, Shaw L, Walsh A. *Triple C Competency-based Curriculum. Report of the Working Group on Postgraduate Curriculum Review-Part 1*. Mississauga ON: College of Family Physicians of Canada; 2011 [Available Here](#)

Frank JR, ed. The CanMEDS 2005 physician competency framework. Better standards. Better physicians. Better care. Ottawa: The Royal College of Physicians and Surgeons of Canada; 2005 [cited 2009 Dec 14]. Available from: <http://rcpsc.medical.org/canmeds/index.php>.

Tannenbaum D, Kerr J, Konkin J, Organek A, Parsons E, Saucier D, Shaw L, Walsh A. *Triple C competency-based curriculum Report Part 2*. Mississauga ON: College of Family Physicians of Canada; 2011; in press. [Available Here](#)

Tannenbaum D, Kerr J, Konkin J, Organek A, Parsons E, Saucier D, Shaw L, Walsh A. *Scope of Training*. Mississauga ON: College of Family Physicians of Canada; in press.

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Allen T, Bethune C, Brailovsky C, Crichton T, Donoff M, Laughlin T, Lawrence Kl. *Defining Competence in Family Medicine for the Purposes of Certification by the College of Family Physicians of Canada: The Evaluation objectives in Family Medicine (updated December 2010)*. [Available Here](#)

Please visit [www.cfp.ca](http://www.cfp.ca) for a series of articles on the Triple C Competency-based Curriculum, published in *Canadian Family Physician*

19