



FM Residency Program
Competencies (with EPA's, CanMEDS and CFPC Priority Topics)
Evidence Based Medicine, Research, Quality Improvement, and Patient Safety

FOUNDATIONS				DOMAIN SPECIFIC EBM, Research, Quality Improvement, and Patient Safety	
Activity and related CanMEDS-FM role(s)	Competencies -General	Foundation Competencies - detail	Relevant CanMEDS-FM Comps	Domain Specific Competencies - detail	Relevant Priority topics & other*
Health promotion and health maintenance (Medical Expert, Collaborator, Manager, Health Advocate)	1. Provide preventive care through the application of current standards for the practice population	a. Do a periodic health assessment in a proactive or opportunistic manner. b. Selectively adapt the periodic health examination to that patient's specific circumstances. c. Use an evidence-based annual health assessment and keep up to date with new recommendations for the periodic health examination. d. Implement prevention and screening recommendations. e. Provide advice on and implement routine /scheduled and <i>ad hoc</i> vaccination as required, based on current recommendations, patient's age and circumstances.	ME3.6, ME4.1, ME4.2 COLL3.1 COLL3.4 MG3.2 HA1.3		
	2. Recognize modifiable risk behaviors and provide advice on risk reduction with appropriate use of resources and supports.	a. Regularly evaluate and document smoking status, discuss the benefits of quitting or reducing smoking, and advise regarding the use of a multi-strategy approach to smoking cessation. b. Regularly evaluate and document current alcohol intake and provide advice on reduction when above recommended maximum intake. c. Regularly ask about use of drugs of abuse and provide advice and intervention where appropriate.	ME3.6 ME4.1 ME4.2 COLL3.1 COLL3.4 MG3.2 HA1.3		

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		<ul style="list-style-type: none"> d. Identify patients at risk of heart disease, hypertension, stroke and diabetes and provide appropriate, evidence-based -advice regarding risk factor modification and, where appropriate, provide referral to health care professionals for additional support and advice on risk reduction. e. Recognize and advise about protection for patients, or parents of patients/care-givers, involved in activities associated with increased risk of head trauma e.g. bikes/motor-bikes/contact sports and provide advice to patients after sustaining minor traumatic brain injury (concussion) . f. Where appropriate, provide advice on reducing risk of acquiring sexually transmitted infections. 			
Clinical Care (CC) (Medical Expert, Collaborator)	1. Demonstrate an effective approach to patients presenting with acute self-limiting illness and potentially life-threatening conditions	<ul style="list-style-type: none"> a. Demonstrate an understanding of the natural history and prognosis of the established diagnosis when treated and untreated. b. Demonstrate skilled interviewing and physical examination techniques in gathering clinical data. c. Formulate a differential diagnosis that includes the most likely diagnosis (taking into account the prevalence of the condition in the population), a hierarchy of likely alternatives, and the most serious or life-threatening possibility. d. Locate the relevant evidence when needed for diagnosis and treatment e. Discuss the most relevant evidence for medical therapy for the diagnosis f. Recommend only pharmacotherapy and other therapeutic interventions that are clearly indicated for the diagnosis g. Outline for the patient (or parent/care-giver) the most common and the most serious risks associated with the pharmacotherapy and 	<ul style="list-style-type: none"> ME1.1 ME2.2 ME3.2 ME3.3 ME3.5 ME3.8 ME4.1 ME4.3 ME5.1 ME5.2 ME5.3 ME5.4 ME5.5 ME5.6 ME5.7 		

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		<p>other therapeutic interventions.</p> <p>h. Reinforce to the patient (or parent/care-giver) the importance of appropriate non-pharmacological therapy where indicated.</p> <p>i. Explain to the patient (or parent/care-giver) when and/or why they need to follow up in the office.</p> <p>j. Manage the majority of common diagnoses without the need for referral</p> <p>k. List and demonstrate the use of the essential skills, equipment and medications required to deal with acute, life threatening conditions in the office.</p> <p>l. Recognize a patient with an emergent/urgent, potentially life-threatening condition and act promptly to deliver immediate care and/or referral as indicated.</p> <p>m. Access safely and expeditiously emergency services for the patient with a potentially life-threatening condition.</p> <p>n. Share key information with emergency services when referring patients with life-threatening conditions.</p> <p>o. Demonstrate appreciation of the unique considerations for recently hospitalized and/or post-operative patients.</p>	<p>ME6.1</p> <p>ME6.2</p> <p>ME7.1</p> <p>ME7.3</p> <p>COLL1.4</p>		
CC (Medical Expert, Collaborator)	2. Demonstrate an effective approach to patients presenting with undifferentiated, symptoms	<p>a. History</p> <p>i. Take an appropriately thorough history in a timely manner.</p> <p>ii. Demonstrate ability to effectively and selectively identify and prioritize main presenting symptoms.</p> <p>iii. Move quickly into a focused history regarding the main symptoms</p> <p>iv. Elicit pertinent associated symptoms, red flags and risk factors</p> <p>v. Demonstrate effective use of the patient-centered clinical</p>	<p>ME1.1</p> <p>ME2.2</p> <p>ME3.2</p> <p>ME3.3</p> <p>ME3.5</p> <p>ME3.8</p> <p>ME4.1</p> <p>ME4.3</p>		

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		<p>method</p> <p>b. Physical Exam</p> <ul style="list-style-type: none"> i. Perform an appropriately thorough physical examination in a timely manner. ii. Exhibit an awareness of the role of the physical examination in making certain diagnoses more or less likely. <p>c. Differential Diagnosis</p> <ul style="list-style-type: none"> i. Construct an appropriately thorough differential diagnosis that is congruent with the data generated by the history and physical. ii. Demonstrate the core knowledge of Family Medicine informed by evidence. iii. Modify the differential diagnosis in light of unexpected or changing symptoms or when symptoms persist beyond what one would ordinarily expect. iv. Recognize the typical and atypical presentation of common diagnoses as well as possible emergent life-threatening disease. v. Demonstrate appreciation of the unique considerations for recently hospitalized and/or post-operative patients <p>d. Diagnostic Tests and Procedures</p> <ul style="list-style-type: none"> i. Select appropriate diagnostic tests and procedures ii. Justify selection of laboratory and imaging tests and employ them only when likely to have an impact on patient management. iii. Select investigations based on consideration of prevalence, 	<p>ME5.1</p> <p>ME5.2</p> <p>ME5.3</p> <p>ME5.4</p> <p>ME5.5</p> <p>ME5.6</p> <p>ME5.7</p> <p>ME6.1</p> <p>ME6.2</p> <p>ME7.1</p> <p>ME7.3</p> <p>COLL1.4</p>		

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		<p>evidence of benefit and risk, past experience of physician, patient's wishes, and cost.</p> <ul style="list-style-type: none"> iv. Interpret the test results promptly and correctly. v. Communicate results in a timely fashion. <p>e. Treatment /Management Plan</p> <ul style="list-style-type: none"> i. Develop an appropriate treatment plan. ii. Inform patient about the diagnosis, possible alternative diagnoses and likely prognosis. iii. Link patient's symptom to a lifestyle behavior and in doing so, employ the principles of disease prevention and health promotion. iv. Counsel on the risks and benefits of treatment if diagnosis is amenable to treatment. v. Synthesize and help focus treatment goals. vi. Integrate the patient's viewpoint of above. -finding common ground/shared decision making and demonstrating the use of the patient-centered clinical method. vii. Judge the patient's (and/or parent's) understanding, ability to adhere to the plan and ability to pay and based on these factors adjust the treatment/management plan as necessary. viii. Write a complete prescription when appropriate. ix. Recommend to the patient (or parent) when and/or why they should present for reassessment. x. Where appropriate coordinate care with other health care-Professionals including referral. 			
CC	3. Demonstrate an effective approach to	a. Prioritize professional duties when faced with multiple competing demands	ME1.2 ME2.1		

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(Medical Expert, Collaborator)	the ongoing care of patients with chronic conditions and/or to patients requiring regular follow-up	<ul style="list-style-type: none"> b. Apply acquired knowledge, skills and attitudes to daily clinical practice c. Recognize personal limits in knowledge, skills and attitudes d. Find common ground with the patient in regard to defining problems and priorities, setting goals of treatment and recognizing the roles of patient and family physician in each encounter e. Incorporate prevention and health promotion into the clinical encounter f. Consciously enhance the patient-physician relationship recognizing characteristics of a therapeutic and caring relationship g. Provide primary contact and comprehensive continuing care to a defined population of patients through the spectrum of health promotion and disease prevention; diagnosis; acute treatment, including the management of life-threatening illness; chronic disease management; rehabilitation; supportive care; and palliation. h. Provide preventive care through application of current standards for the practice population i. Utilize diagnostic and therapeutic interventions meeting the needs of the patient according to available evidence, balancing risks, benefits and costs j. Manage simultaneously multiple clinical issues, both acute and chronic, often in a context of uncertainty k. Appropriately incorporate families and other caregivers in the care of patients, while abiding by the ethical standards of patient autonomy and consent 	<ul style="list-style-type: none"> ME2.2 ME2.4 ME3.3 ME3.5 ME3.6 ME3.7 ME3.8 ME4.1 ME4.2 ME4.3 ME5.7 ME7.1 ME7.2 ME7.3 COLL1.4 COLL1.6-1.11 MG1.2-1.4 MG2.1 MG2.3 MG2.4 MG3.1 MG3.2 MG3.3 MG3.4 		

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		<p>Inter-professional Care</p> <ul style="list-style-type: none"> a. Coordinate the care of patients with multiple care providers and teams of providers b. Work with others to assess, plan, provide and integrate care for individual patients or groups of patients. c. Participate effectively in inter-professional team meetings d. Enter into interdependent relationships with other professions for the provision of quality care e. Utilize the principles of team dynamics to enhance team performance f. Contribute to working relationships on teams and participate in a collegial process to designate appropriate team leadership roles g. Respect team ethics, including confidentiality, resource allocation and professionalism h. Where appropriate, demonstrate leadership in a healthcare team i. Work collaboratively with other health care professionals and community organizations to provide coordinated care for patients j. Apply the competencies of the Collaborator role in team-based care, and when working with consulting health professionals <p>Quality Improvement</p> <ul style="list-style-type: none"> a. Participate in systemic quality process evaluation and improvement such as patient safety initiatives b. Participate in continuous quality improvement activities within 			

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		<p>their own practice environment, such as practice audit.</p> <ul style="list-style-type: none"> c. Implement processes to ensure continuous quality improvement within a practice d. Contribute to the enhancement of quality of care in their practice, integrating the available best evidence and best practices <p>Practice/Self/Resource Management</p> <ul style="list-style-type: none"> a. Set priorities and manage time to balance patient care, practice requirements, outside activities and personal life b. Employ information technology, including electronic medical records to plan appropriately for patient care c. Recognize the importance of appropriate allocation of healthcare resources, including referral to other health care professionals and community resources, balancing effectiveness, efficiency and access with optimal patient care d. Apply evidence and management processes for cost-appropriate care e. Judiciously manage access to scarce community resources and referral sources f. Integrate knowledge of the structure of the health care system and its components in the provision of care g. Manage time and resources effectively 			
Communicator (COM)		See Also - CFPC Communication Skills (Skill domain)- www.cfpc.ca/uploadedFiles/Education/Communication%20Skills.pdf			
COM	Develop rapport, trust	<ul style="list-style-type: none"> i. Recognize that being a good communicator is a core clinical 	COM1.1-1.8		

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	and ethical therapeutic relationships with patients and families.	skill for physicians, and that physician- patient communication can foster patient satisfaction, physician satisfaction, adherence and improved clinical outcomes ii. Establish positive therapeutic relationships with patients and their families that are characterized by understanding, trust, respect, honesty and empathy iii. Respect patient confidentiality, privacy and autonomy iv. Listen effectively v. Develop awareness of, and responsiveness to, non- verbal cues vi. Facilitate a structured clinical encounter vii. Acquire skills of cross-cultural communication viii. Respect boundaries in the doctor-patient relationship			
COM	Accurately elicit and synthesize information from and perspectives of patients and families, colleagues and other professionals	i. Gather information about a disease, but also about a patient’s beliefs, concerns, expectations and illness experience ii. Explore the patient’s psychosocial context iii. Seek out and synthesize information from other sources, such as a patient’s family, caregivers and other professionals iv. Conduct an interview with multiple participants to gather information about factors affecting the patient	COM2.1-2.4		
COM	Accurately convey needed information and explanations to patients and families, colleagues and other professionals	i. Deliver information to a patient and family, colleagues and other professionals in a humane manner and in such a way that it is understandable and encourages discussion and participation in decision-making ii. Disclose error / adverse events in an effective manner	COM3.1-3.2		
COM	Develop a common understanding on issues,	i. Effectively identify and explore problems to be addressed from a patient encounter, including the patient’s context, responses,	COM4.1-4.9		

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	problems and plans with patients and families, colleagues and other professionals to develop, provide and follow-up on a shared plan of care	<ul style="list-style-type: none"> concerns, and preferences ii. Respect diversity and difference, including but not limited to the impact of gender, religion and cultural beliefs on decision-making iii. Encourage discussion, questions, and interaction in the encounter iv. Engage patients, families, and relevant health professionals in shared decision-making to develop a plan of care v. Communicate effectively as a member or leader of a health care team or other professional group vi. Provide follow-up contact with patient and family using a form of communication that will achieve the best outcome for the patient and family vii. Effectively address challenging communication issues such as motivating behavioural change, delivering bad news, and addressing anger or dependency viii. Provide therapeutic interventions through supportive and other counseling techniques used in primary care ix. Communicate utilizing an interpreter 			
COM	Convey effective oral and written information	<ul style="list-style-type: none"> i. Maintain clear, accurate, and appropriate records (e.g., written and electronic) of clinical encounters and plans ii. Use effective written and oral communication for referral and collaborative care. iii. Effectively present verbal reports of clinical encounters and plans iv. Communicate appropriately using electronic mail and other electronic means, while maintaining patient confidentiality v. When requested or needed by a community, present medical 	COM5.1-5.5		

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		information to the public or media about a medical issue			
Professional (PRO)	Demonstrate a commitment to their patients, profession, and society through ethical practice	<ul style="list-style-type: none"> i. Exhibit professional behaviors in practice, including honesty, integrity, reliability, compassion, respect, altruism, and commitment to patient well-being ii. Demonstrate a commitment to delivering the highest quality care and maintenance of competence iii. Recognize and appropriately respond to ethical issues encountered in practice iv. Demonstrate respect for colleagues and team members v. Appropriately manage conflicts of interest vi. Recognize the principles and limits of patient confidentiality as defined by professional practice standards and the law vii. Maintain appropriate professional boundaries viii. Speak directly and respectfully to colleagues whose behaviour may put patients or others at risk 	PRO1.1=1.8		
PRO	Demonstrate a commitment to their patients, profession, and society through participation in profession-led regulation	<ul style="list-style-type: none"> i. Appreciate the professional, legal and ethical codes of practice, including knowledge of the CMA Code of Ethics ii. Fulfill the regulatory and legal obligations required of current practice iii. Demonstrate accountability to professional regulatory bodies iv. Recognize and respond to others' unprofessional behaviours in practice v. Participate in peer review 	PRO2.1-2.5		
PRO	Demonstrate a commitment to physician health and	<ul style="list-style-type: none"> i. Balance personal and professional priorities to ensure personal health and a sustainable practice ii. Strive to heighten personal and professional awareness and 	PRO 3.1-3.3		

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	sustainable practice	<ul style="list-style-type: none"> iii. Recognize and respond to other professionals in need 			
PRO	Demonstrate a commitment to reflective practice	<ul style="list-style-type: none"> i. Demonstrate the ability to gather information about personal performance, know one’s own limits, and seek help appropriately ii. Demonstrate an awareness of self, and an understanding how one’s attitudes and feelings impact their practice iii. Reflect on practice events, especially critical incidents, to deepen self knowledge 	PRO 4.1-4.3		
Health Advocate (HA)	Respond to individual patient health needs and issues as part of patient care	<ul style="list-style-type: none"> i. Identify the health needs of an individual patient ii. Advocate for individual patients around relevant health matters iii. Implement health promotion and disease prevention policies and interventions for individual patients and the patient population served 	HA1.1-1.3		
HA	Respond to the health needs of the communities that they serve	<ul style="list-style-type: none"> i. Describe the practice communities that they serve ii. Identify opportunities for advocacy, health promotion and disease prevention in the communities that they serve, and respond appropriately iii. Appreciate the possibility of competing interests between the communities served and other populations 	HA2.1-2.3		
HA	Identify the determinants of health within their own communities	<ul style="list-style-type: none"> i. Identify the determinants of health within their communities, including barriers to accessing care and resources ii. Identify vulnerable or marginalized populations and respond as needed 	HA3.1-3.2		
HA	Promote the health of	<ul style="list-style-type: none"> i. Describe approaches to implementing changes in determinants of 	HA4.1-4.6		

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	individual patients, communities and populations	<p>health of the population served</p> <ul style="list-style-type: none"> ii. Describe how public policy, healthcare delivery and healthcare financing impact access to care and the health of the population served iii. Identify points of influence in the healthcare system and its structure iv. Describe the ethical and professional issues inherent in health advocacy, including altruism, social justice, autonomy, integrity and idealism v. Appreciate the possibility of conflict inherent in their role as a health advocate for a patient or community with that of manager or gatekeeper vi. Describe the role of the medical profession in advocating collectively for health and patient safety 			
Collaborator (COLL)	Participate in a collaborative team-based model and with consulting health professionals in the care of the patient	<ul style="list-style-type: none"> i. Clearly describe their roles and responsibilities to other professionals ii. Describe the roles and responsibilities of other professionals within the health care team iii. Recognize and respect the diversity of roles, responsibilities and competencies of other professionals in relation to their own iv. Work with others to assess, plan, provide and integrate care for individual patients or groups of patients. v. Where needed, work with others to assess, plan, provide and review non-clinical tasks, such as research problems, educational work, program review or administrative responsibilities vi. Participate effectively in interprofessional team meetings vii. Enter into interdependent relationships with other professions for the provision of quality care 	COLL1.1-1.11		

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		<ul style="list-style-type: none"> viii. Utilize the principles of team dynamics to enhance team performance ix. Contribute to working relationships on teams and participate in a collegial process to designate appropriate team leadership roles x. 1.10 Respect team ethics, including confidentiality, resource allocation and professionalism xi. Where appropriate, demonstrate leadership in a healthcare team 			
COLL	Maintain a positive working environment with consulting health professionals, health care team members and community agencies	<ul style="list-style-type: none"> i. Demonstrate a respectful attitude towards other colleagues and members of an interprofessional team ii. Work with other professionals to prevent conflicts iii. Employ collaborative negotiation to resolve conflicts iv. Respect differences, misunderstandings and limitations in other professionals v. Recognize one's own differences, misunderstanding and limitations that may contribute to inter-professional tension vi. Reflect on inter-professional team function 	COLL 2.1-2.6		
COLL	Engage patients or specific groups of patients and their families as active participants in their care	<ul style="list-style-type: none"> i. Find common ground on the identification of problems and priorities of interventions ii. Find common ground on the methods and goals of treatment iii. Work to establish the respective roles of family physician and patient iv. Work with patients and families to optimize health 	COLL3.1-3.4		

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Manager (MG)	Participate in activities that contribute to the effectiveness of their own practice, healthcare organizations and systems.	<ul style="list-style-type: none"> i. Describe the role of the family physician in the health care system and their relationships with other health care professionals, and community organizations ii. Work collaboratively with other health care professionals and community organizations to provide coordinated care for patients iii. Participate in systemic quality process evaluation and improvement such as patient safety initiatives iv. Participate in continuous quality improvement activities within their own practice environment, such as practice audit 	MG1.1-1.5	<ul style="list-style-type: none"> a) Effectively implement strategies to prevent and manage safety issues and improve processes and outcomes. <ul style="list-style-type: none"> i. Demonstrate awareness and appreciation of limitations of current medical practice ii. Demonstrate knowledge and understanding of: <ul style="list-style-type: none"> - Systems theory - Common safety and practice management issues - Common QI methods 	
MG	Manage their practice and career effectively	<ul style="list-style-type: none"> i. Set priorities and manage time to balance patient care, practice requirements, outside activities and personal life ii. Manage a practice including finances and human resources, collaboratively when indicated. iii. Implement processes to ensure continuous quality improvement within a practice iv. Employ information technology, including electronic medical records to plan appropriately for patient care 	MG2.1-2.4		
MG	Allocate finite healthcare resources appropriately	<ul style="list-style-type: none"> i. Recognize the importance of appropriate allocation of healthcare resources, including referral to other health care professionals and community resources, balancing effectiveness, efficiency and access with optimal patient care ii. Apply evidence and management processes for cost- appropriate care iii. Judiciously manage access to scarce community resources and referral sources 	MG3.1-3.4		

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		iv. Integrate knowledge of the structure of the health care system and its components in the provision of care			
MG	Serve in administration and leadership roles, as appropriate	<ul style="list-style-type: none"> i. Chair or participate effectively in committees and meetings ii. Lead or implement a change in health care practice iii. Contribute to policy development related to systems of health care iv. Participate in relevant administrative roles related to clinical care 	MG4.1-4.4		
Scholar (S)	Maintain and enhance professional activities through ongoing self-directed learning based on reflective practice	<ul style="list-style-type: none"> i. Describe the principles in maintaining professional competence and implementing a personal knowledge management system ii. Recognize and reflect learning issues in practice iii. Conduct a personal practice audit iv. Formulate a learning question v. Identify sources of knowledge appropriate to the question vi. Access and interpret the relevant evidence vii. Integrate new learning into practice viii. Evaluate the impact of any change in practice ix. Document the learning process 	S1.1-1.9	<ul style="list-style-type: none"> a) Able to formulate attainable learning objectives b) Demonstrates knowledge of relevant learning resources 	
S	Critically evaluate medical information its sources and its relevance to their practice and apply this information to practice decisions	<ul style="list-style-type: none"> i. Describe the principles of critical appraisal ii. Critically appraise retrieved evidence in order to address a clinical question iii. Integrate critical appraisal conclusions into clinical care 	S2.1-2.3	<ul style="list-style-type: none"> a) Appropriately utilize evidence to inform clinical decision-making <ul style="list-style-type: none"> i. Demonstrate awareness and appreciation of limitations of personal and professional knowledge ii. Demonstrate knowledge and understanding of : <ul style="list-style-type: none"> - Clinical practice guidelines - Decision support tools iii. Demonstrate awareness and appreciation of limitations of clinical practice guidelines and decision 	

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				support tools iv. Able to formulate answerable questions relevant to the health concerns of patients and family members v. Able to perform literature searches using electronic databases and utilize other strategies to obtain relevant medical literature vi. Show knowledge and understanding of: <ul style="list-style-type: none"> - Research paradigms and designs - Principles of measurement - Commonly used statistical tests - Components of a research article - Levels of evidence vii. Demonstrate awareness and appreciation of limitations of medical literature viii. Able to accurately assess when evidence is applicable to the health concerns of particular patients and family members ix. Show awareness and appreciation of the role of patients, family members, and other health care professionals in the decision-making process	
S	Facilitate the education of patients, families, trainees, other health professional colleagues, and the public as appropriate	i. Describe principles of learning relevant to medical education ii. Collaboratively identify the learning needs and desired learning outcomes of others iii. Discuss the benefits of collaborative learning iv. Deliver a learner-centred approach to teaching v. Select effective teaching strategies and content to facilitate others' learning	S3.1-3.9	a) Effectively communicate evidence based decisions to patients, family members and other health care professionals; i. Able to accurately assess the level of understanding of patients, family members, and other health care professionals and use terminology that is targeted to a particular audience	

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		<ul style="list-style-type: none"> vi. Deliver an effective presentation vii. Assess and reflect on a teaching encounter viii. Provide effective feedback ix. Describe the principles of ethics with respect to teaching 		<ul style="list-style-type: none"> ii. Demonstrate knowledge and understanding of: <ul style="list-style-type: none"> - Communication styles - Self-reflection iii. Willing to reflect on personal strengths and weaknesses when communicating with different audiences and to modify approach in future interpersonal encounters 	
S	Contribute to the creation, dissemination, application and translation of new knowledge and practices	<ul style="list-style-type: none"> i. Describe the principles of research and scholarly inquiry ii. Judge the relevance, validity, and applicability of research findings to their own practice and individual patients iii. Describe the principles of research ethics iv. Pose a scholarly question v. Conduct a systematic search for evidence vi. Select and apply appropriate methods to address the question vii. Appropriately disseminate the findings of a study 	S4.1-4.7		

Note: *other refers to topics beyond CFPC's 99 Priority Topics that the Working Group identified as important to include in the curriculum. These topics appear in red font.

History

- May 2016 – Reviewed at the Curriculum and Evaluation Committee Meeting
- July 2016 – Added 'History' section
- October 2017
 - o Removed 'Calgary' from title

With thanks to the following members of the Curriculum Working Group who developed these competencies;

Dr. Maeve O'Beirne(Chair)
Dr. Fariba Aghajafari
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Dr. Nureen Sumar

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