



## Primer for Addressing Personal Learning Needs – EPA FOD7

This EPA focusses on the ability to **identify personal learning needs, and effectively address them**. The resident **completes a Personal Learning Need form** and shows it to the assessor. This can also be assessed when the resident presents a **formal rounds** around a patient case. The assessor can be the supervisor, a physician specialist being consulted or another health professional.

It is generally completed in Blocks 5-13 of the PGY1 year.

### EPA MILESTONES: Identifying personal learning needs and addressing them FOD 7

1. Demonstrates a commitment to improving one's own performance.
2. Seeks and responds to feedback on clinical or academic performance.
3. Identifies and articulates gaps in existing knowledge and skills.
4. Generates focused questions that address identified gaps in knowledge and skills.
5. Creates an appropriate personal learning plan to address identified learning needs.
6. Selects appropriate evidence-informed resources to answer clinical or scholarly questions.
7. Synthesizes and interprets learned information, explaining its relevance to practice.
8. Applies new knowledge to daily clinical or academic work.
9. Reflects on the effectiveness of learning strategies used to refine the personal learning plan.

### HOW TO COMPLETE AN EPA ASSESSMENT:

1. You or the resident initiate the assessment. You observe the resident carry out the activity. We expect at least 10 minutes of direct observation for this tool. Parts of the assessment can be done as case review/discussion.
2. You or the resident sign onto [medsquares](#), 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 provide comments about the resident's performance. Please also indicate the 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. Provide 2-3 specific, targeted comments on what they did well and suggestions for improving their performance.
6. Discuss your feedback with the resident.



GLOBAL ENTRUSTMENT SCALE (Autonomous and Consultancy levels are entrustable)



### 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 **29 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** an eModule on:

CBD in Internal Medicine and Medsquares

troubleshooting: Click [here](#) to watch

EPAs 101: Click [here](#)

**PREVIEW** a sample completed TTD1 EPA.

Click [here](#) to preview.

**VISIT**

[www.deptmedicine.utoronto.ca/cbme](http://www.deptmedicine.utoronto.ca/cbme) for

general information on resources and

events.

**Questions? CONTACT** us at

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