



CAME Voice/Voix

Professional identity as the gateway to General Internal Medicine (GIM) Residency Training.

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A graduate's professional identity will direct the focus of their future career. It is important to align that professional identity with the expectations of the communities they will serve. In Canada, General Internal Medicine (GIM) residency training is a 2-year PGY4/5 program following 3 years of Internal Medicine training. Several years ago, we noted that neither the GIM residents nor the faculty had a shared mental model of what the discipline of GIM "is". We hypothesized that restructuring our GIM 2-week foundational "boot camp" explicitly around the GIM professional identity would assist with aligning the learning goals throughout the entire residency with the societally desired graduate's outcomes.

To develop a vision of the ideal GIM professional identity for our province we identified the current and desired tasks of the discipline through review of available literature on GIM scope of practice, Royal College of Physicians and Surgeons (RCPSC) standards and survey, focus group and interview data from practising GIM specialists both local and national. From this we isolated the ideal tasks of the discipline labelling learning items via the use of entrustable professional activities (EPAs). The EPAs were then clustered into longitudinal learning themes that recur throughout the GIM residency program allowing all learning to link back to professional identity. All of the themes and EPAs are explicitly introduced in the 2-week foundational rotation.

Longitudinal themes for the ideal GIM professional identity we identified are: 1. Holistic Care of all GIM Conditions (Perioperative; Obstetrical; Prevention; Acute; Chronic; Critically Ill; Single or multi-system; inpatient or ambulatory); 2. Adapting scope of practice to societal needs and context; 3. Advancing patient care through scholarly, quality improvement and patient safety initiatives, and advocacy); 4. Leadership; 5. Lifelong Learning (self and others); 6. Resiliency; 7. Communication Partnership (shared decision making and coordination).

The rotation has been well received by residents. Openly talking about GIM professional identity has allowed residents to develop a robust vision of GIM that is encouraging matching career goals to societal care needs. General Internists in the community have become more engaged as the rotation is illustrative of the provincial human resource needs versus being perceived as solely an academic endeavor.

Determining the tasks (EPAs) of the ideal professional identity of the discipline with input from a large variety of sources allows a shared vision between practitioners and the residency program. This can then assist with mitigating the hidden curriculum as well as focusing residency training on the needs of society. One of the aims of competency based medical education is to ensure graduates outcomes are linked to societal needs. Being explicit about the ideal discipline professional identity can allow residency output to more closely align with the graduates needed.

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www.royalcollege.ca/rcsite/documents/icre/what-works-card.pdf