



Primer for EPA COD2A - Assessing and managing patients with **COMPLEX CHRONIC CONDITIONS: Assessment, Diagnosis, and Management**

This EPA **Core of Discipline -COD2 (PGY2s and 3s)** involves **assessing and managing patients with complex chronic medical presentations**, where high complexity is defined as: multiple conditions that co-exist and/or interact; a single condition with multi-systemic manifestation; an atypical presentation of a common condition; management challenges due to social determinants of health +/- cultural complexities. Supervisor (staff and/or supervising fellow) does assessment based on **direct* and indirect observation**.

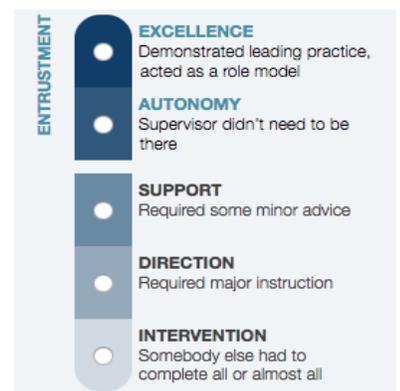
**Direct = unfiltered case review at the time of presentation, with validation of part of the history/physical by the supervisor followed by discussion of the management plan.*

EPA MILESTONES: COD 2A Assess and Manage Chronic Conditions

1. Perform clinical assessments that address all relevant issues
2. Select and interpret investigations based on clinical priorities
3. Identify and address interactions between different diseases and different treatments
4. Develop patient centered management plans that address multimorbidity, frailty and/or complexity of patient presentations
5. Adapt guideline based recommendations for care to the context of the patient's specific needs and priorities
6. Work effectively with other health care professionals, including other physicians
7. Demonstrate resource stewardship in clinical care
8. Facilitate timely patient access to services and resources

HOW TO COMPLETE AN EPA ASSESSMENT:

1. You or the resident initiate the assessment. The assessment may be based on direct observation or case discussion.
2. You or the resident sign onto Elentra, 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 indicate their 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. Describe 2-3 strengths and 2-3 actions, or areas for improvement. Please provide detailed and actionable comments based on your observations of 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: Click [here](#) to watch

EPAs 101: Click [here](#)

VISIT

www.deptmedicine.utoronto.ca/cbme for general information on resources and events.

Questions? CONTACT us at

im.cbd@utoronto.ca