



Guide to Periodic Reviews in Family Medicine Residency

Developed by Residents for Residents

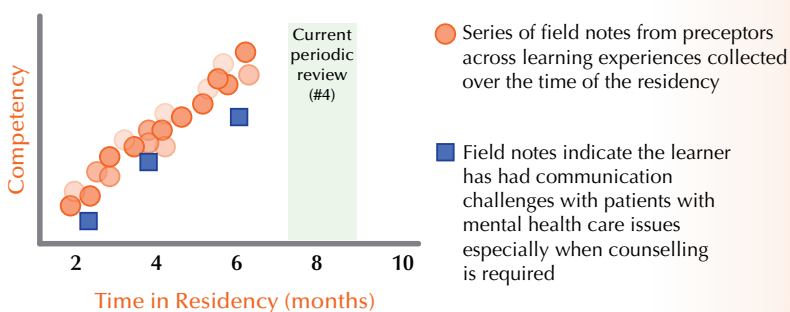
IMPORTANCE OF PERIODIC REVIEWS

Periodic reviews are sessions in which a resident and their assigned faculty adviser and/or site director discuss the resident's progress and additional opportunities for learning in family medicine.

- Document progressive achievement of competence
- Provide a low-stakes assessment approach to track progress
- Offer a time to identify areas of improvement and opportunities for growth
- Establish a formal process that encourages self-reflection and addresses learning goals

WHAT ARE THE EXPECTATIONS FOR A PERIODIC REVIEW?

Periodic reviews over the first year of family medicine residency



Example: James is a second-year family medicine resident who loves emergency medicine but struggles with managing patients with depression or anxiety. This has been demonstrated in his field notes and preceptor feedback. At his latest periodic review James decided to focus on mental health. His faculty adviser agreed with the decision and said she would work with James to have him see more patients with depression and review key aspects of mental health care.

RESIDENT'S ROLE

- Understand that the periodic review is different than a summative final evaluation
- Use the review to identify progressive achievement of competency in family medicine
- Focus on self-reflection during the periodic review
- Help design and update your individualized learning plan to address areas in which you feel you are lacking competence
- Understand that participating in a series of periodic reviews as part of your residency is not about getting check marks of completion; it requires an ongoing process of reflection and getting advice from colleagues so you are better able to assess your own competence and address your learning needs






FACULTY ADVISER'S ROLE

- Try not to judge; act as a coach* and understand that the resident is practising the skill of self-reflection to assess ongoing learning needs
- Have a sense of an average trajectory of resident progression when providing feedback
- Ask the resident about their own thoughts before providing feedback
- Consider using a structured feedback model
- Think of a cat-and-lion analogy to understand your role as coach: When a cat looks in the mirror and sees a lion, the coach is there to provide guidance and gentle correction; when a lion looks in the mirror and sees a cat, the coach is there to provide support and evidence of strength

*The Competency Coach (also termed "adviser" in some programs) facilitates the planning and career development of the learner.

THE PERIODIC REVIEW ROAD MAP

BEFORE EACH MEETING:

				
Set aside 20 to 45 minutes for the periodic review	Schedule the review to take place in a quiet, private space (e.g., an office)	Review field notes, rotation evaluations, and other forms of feedback and complete any preparatory work beforehand; your faculty adviser should do the same	Take a positive approach and don't view it as pass or fail; the review is meant to be self-reflective and to help guide you toward expected levels of competence	Be prepared to lead the review—plan to provide your thoughts on progress first before the adviser shares input and feedback

DURING EACH MEETING:

STEP 1

Review field notes, feedback, and progress toward competence in the following areas:

- Review exposures to Domains of Care: children, adolescent, adult, elderly, and palliative care (as a minimum)
- Review the seven CanMEDS-FM roles (Health Expert, Communicator, Collaborator, Health Advocate, Manager, Scholar, and Professional)
- Review the CFPC's evaluation objectives (patient-centred care, communication skills with patients and colleagues, professionalism, clinical reasoning skills, selectivity, and priority topics and procedural skills)

Key questions: What is your level of competence across these competencies and Clinical Domains? Have you had enough learning experiences to gain competence and confidence? Do you need to have more targeted learning opportunities?

STEP 2

Focus on the following four areas:

- Areas in which you're doing well
- Areas to improve
- Areas requiring additional learning experiences
- Areas in which you have had sufficient learning opportunities

Key question: Why do you feel this way?

STEP 3

After you have provided your comments, receive feedback from your faculty adviser:

- Ask whether they agree, disagree, or have any comments to add
- Ask for concrete examples to help you understand the feedback provided

Key question: Do the field notes and faculty adviser agree with your interpretation?

STEP 4

Focus on non-academic aspects:

- Career planning: What types of family medicine practice choices are emerging for you? What might you need to prepare?
- Health and well-being check-in: Consider discussing harassment, safety concerns, any need for confidential advisers/ outside services, whether you have a family doctor, and your personal physical health and mental well-being

Note: This was valued as very important by all Section of Residents members

STEP 5

Wrap up the meeting with a self-reflective learning plan:

- Look at specific deficits and strengths and develop a plan with your adviser that covers the time until your next periodic review
- Use SMART goals (specific, measurable, attainable, realistic, and timely)
- Plan to revisit your learning goals at the next review

Key questions: What are you and your adviser going to do to address the areas in which you feel you need to improve? Does the faculty adviser have suggestions for improvement? Come to a mutually agreed-upon plan.

ACKNOWLEDGEMENTS

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