

October 26, 2022

Sent on behalf of Adrienne Tan, Director, General Psychiatry Residency Program

Dear PGY1 and 2 Resident Colleagues:

As we approach the milestone of our fall competence committee meetings (aka Psychiatry Competence Subcommittee or PCS) and continue to integrate key elements of Competence by Design (CBD), we understand that there have been some questions about contextual variables (CVs).

We want to assure all residents, as previously noted in communications regarding PCS, that **the residency program is looking at CVs for the purpose of program evaluation only. Completion of CVs will not inform progress or progression in the residency program.**

The intent of CVs is to ensure that residents are being observed in and have exposure to different contexts and patient populations to inform robust assessment for and of learning towards unsupervised/independent practice. CVs also include information about who is conducting the observation and providing feedback regarding the workplace task/Entrustable Professional Activity (EPA).

From a program evaluation perspective, we want to understand both the *feasibility* of CVs alongside their *educational impact* or value to inform the assessment strategy within our residency program. The data we gather will also guide feedback residency program leadership provides to the Specialty Committee in Psychiatry at the Royal College.

The heart of residency training occurs in our teaching hospitals (i.e. the workplace) through patient care across a variety of settings alongside our faculty teachers. And, given the unpredictability of clinical settings, ensuring residents are immersed in their clinical settings for a sufficient period of time to learn from a variety of patient presentations and clinical scenarios remains an important part of CBD, as documented, in part, via the CVs.

However, it is also true that the burden of assessment and its impact on the learning and work environment and learner (and faculty) experience is an ongoing concern in our residency program as it is in others across UofT and nationally.

Ultimately our community is undergirded by goodwill and trust – trust that we will remain true to our values and core purpose in residency training - and that the ongoing dialogue with key stakeholders, especially our residents, about the benefits and increasing evidence regarding the burden of assessment in CBD will be thoughtfully considered by residency program and Departmental leadership.

Please do not hesitate to reach out - via our [resident leaders](#) and representatives, [resident advisors](#), and our [residency program leadership](#) across our training sites, with your feedback and questions.

Sincerely,

Adrienne Tan, MD, FRCPC, FACLP
Director, General Psychiatry Residency Program

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