

## Entrustable Professional Activities (EPAs) Guidelines General Psychiatry Residency Program

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### Background and Purpose

The Department of Psychiatry is committed to supporting residents in completing Royal College of Physicians and Surgeons of Canada (RCPSC) requirements as an essential part of training, including the successful completion of Entrustable Professional Activities (EPAs). In RCPSC Competence by Design, Entrustable Professional Activities (EPAs) are defined as “authentic tasks of a discipline”, which are observed and assessed in diverse contexts of training, including diverse settings and with patients of ranging complexity. Over time, frequent observations of a trainee’s performance of an EPA, will provide a comprehensive and holistic image of their competence and inform promotion decisions. EPAs are designed to be developmental — they go from smaller tasks to bigger tasks (low to high complexity) as trainees progress through stages of training. Each EPA integrates a number of milestones from different CanMEDS roles; a bigger task may include more milestones and/or more complex milestones.

The Department of Psychiatry at the University of Toronto has adopted the Royal College's EPAs since July 2020.

- **Transition to Discipline** (first 1-3 months) has 2 EPAs.
- **Foundations of Discipline** (end of the Transition to Discipline through to the end of PGY2) has 5 EPAs.
- **Core of Discipline** (essentially PGY3 and PGY4) has 12 EPAs. Both COD6 and COD7 have two parts.
- **Transition to Practice** (PGY5) has 6 EPAs. TTP1 has two parts (A, and B) and TTP3 has three parts (A, B, and C).

This document reviews the University of Toronto General Psychiatry Residency Program’s guidelines for effective integration of EPAs into the assessment strategy for our residents. Our aim is to meet Royal College requirements, maximize educational value, minimize assessment burden to residents and faculty, and reduce redundancy wherever possible.

### Reference Documents

[Royal College Entrustable Professional Activities for Psychiatry](#)

### University of Toronto Guidelines for EPA completion:

EPAs are valuable formative assessments *for* learning, and represent low-stakes opportunities for residents to receive feedback, and for faculty to provide important guidance towards development of competence in essential tasks of psychiatric practice. Importantly, EPAs represent only one aspect of our assessment strategy at the University of Toronto. The Psychiatry Competence Sub-Committee is tasked with integrating a holistic approach to diverse assessment data, including ITARs, STACER exams, EPAs,

and more. Here we provide guidance for residents, faculty (including coaches and PCS members) for integrating EPAs into CBD (Competence by Design) developmental stages of residency training:

1. **Residents in TTD, FOD and COD\* are required to attempt 1 EPA per week.** During the early years of training, frequent EPA attempts allow for residents to develop skills around seeking feedback, identifying their own gaps in knowledge/practice, and meeting RCPSC requirements for EPAs. Faculty supervisors of residents in TTD, FOD and COD are encouraged to initiate EPAs at this same frequency (1x/week), recognizing that completion of EPAs is a shared task between residents and faculty, and there is added richness of learning when the EPA opportunity is chosen by the teacher versus the learner.
2. **Starting in November 2022, for residents who started training in July 1, 2021 onwards, the PCS (Psychiatry Competence Subcommittee) will begin to review Contextual Variables (CVs) in their analysis of resident assessment portfolios, although this review will not impact progression to the next stage of training.** Starting the 2023-24 academic year, contextual variables will be a standard component incorporated in PCS review for residents who started training from July 1, 2021 onwards. *Contextual variables will only impact resident progression if there is evidence across assessments (including ITARs) that a resident is not adequately achieving depth and breadth of cases and learning opportunities.*
3. **When a resident has completed RCPSC requirements for all EPAs in TTD, FOD and COD (including contextual variables) and they are in PGY4 or beyond, weekly EPA attempts will no longer be a program requirement.** Residents at this stage are encouraged to continue EPAs in more complex contexts and with higher complexity patients for ongoing growth and learning. At this stage in residency, residents are expected to be more autonomous in their learning and take responsibility for identifying and addressing any gaps in knowledge or skills. Evidence of greater self-directed learning is demonstrated in self-reflections, coaching sessions, or through professionalism assessment integrated into ITARs.

\*TTD – Transition to Discipline

FOD – Foundations of Discipline

COD – Core of Discipline

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