

What is CBD (Competence By Design) and how is it different from what we have been doing?

CBD is an educational system that focuses on outcomes. Instead of assuming that a resident gains relevant knowledge and skills over a period of time (e.g., a six-month rotation), CBD requires that we directly assess that the resident has gained this knowledge and these skills.

What are EPAs and how do I assess them?

Entrustable Professional Activities are the core tasks that we feel every psychiatrist should be able to do in practice (for a listing of the EPAs and their descriptions, go [here](#)). In many cases, the only way you can truly assess an EPA is to *directly observe the resident doing the task*. So if you haven't been watching what residents do, this is something that you will need to do differently.

You can assess an EPA using the Elentra platform and can be accessed [here](#). Use your UTORid to log on. You will rate the resident's overall performance of the EPA, using this scale:

Intervention	Direction	Support	Entrustment	
			Competent	Proficient
<i>I had to complete some/all of the EPA task/activity</i>	<i>I needed to provide major redirection</i>	<i>I provided minor redirection to ensure safety/minimal competence</i>	<i>I didn't need to act (coaching aside) for safety/minimal competence</i>	<i>I viewed this performance as exemplary</i>

Please pay attention to the descriptions of each rating. If you are rating the resident in the "Entrustment" end of the scale, you are indicating that the resident can perform this task *independently and competently in future situations*. If you need to help the resident with the EPA in any way, then you should be rating the performance somewhere in the range of Intervention → Guidance. You will also be providing comments about what the resident did well and what they can improve. This feedback is highly valued by residents, particularly if it is specific.

What are the resident requirements for completing EPAs?

Except for TTD EPAs (which only need to be completed once), residents are expected to become "entrustable" in each EPA at least 3 times each training stage (see table at right).

2 Transition to Discipline (TTD) EPAs	First 3 months of PGY-1
5 Foundations of Discipline (FoD) EPAs	PGY-1 through PGY-2
13 Core of Discipline (CoD) EPAs	PGY-3 through PGY-4
6 Transition to Practice (TTP) EPAs	PGY5

Given that a resident may require multiple attempts at an EPA before becoming entrustable, residents should be attempting an average of 1 EPA per week. Consider suggesting to residents any opportunities you see for EPA completion.

What are these stages of training?

The Royal College has divided residency into different stages of training (see diagram at right). Transition to Discipline is the first 3 months of PGY-1. Foundations of Discipline is rest of PGY-1 and PGY-2. Core of Discipline is PGY-3 and PGY-4. Transition to Practice is PGY-5.

Who decides if the resident "passes" from one stage to the next?

All assessments (EPAs, STACERs, tests/exams, etc.) are reviewed by the Competence Subcommittee, who will determine if a resident is making adequate progress. No single assessment (especially not a single EPA) will have undue influence on this decision. If a resident is not yet making adequate progress, they will be given extra time to learn the relevant areas (usually in what would have been elective time).

What if I have more questions?

Go [here](#) for starters.

