

Academic Section of CAEP: Featured Education Innovation



University Division or Department	Département de médecine familiale et de médecine d'urgence – Université Laval
Name of Innovation	Stage d'urgence efficience
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Description of the Innovation	<p>Emergency medicine programs should generate physicians with the competency to practice in urban academic centers. These centers are defined by high and unpredictable volumes and by the obligation, despite the flow, to ensure the safety of patients and manage multiple competing priorities, such as teaching. The focus is on the supervised evaluation and the identification/correction of conditions that may threaten the security of individuals during their stay in the emergency unit.</p> <p>These aspects require excellent leadership skills and involve all CanMEDS roles. They are among the most difficult aspects to teach in emergency medicine because of the required integration of a number of skills, and also because: 1) several internships conducted during training show a different model: a pattern in internal medicine where residents must develop differential diagnoses, as well as comprehensive investigative and treatment plans for which they have more time than is usually available in actual emergency medicine; 2) in emergency medicine internships supervisors tend to protect the residents, even if they are seniors, and not leave them completely alone with the more critical and/or complex situations (i.e.: if they are overwhelmed, they will get some help, while in their own practice residents will have to deal with the situation on their own). Also, concerns for patient safety will tend to induce an intervention that will deprive the residents with an opportunity to acquire important skills for their future practice.</p> <p>In this context, the transition to actual medical practice can prove difficult for residents who have not acquired these skills through specific and more often personal efforts. Some will not succeed and will keep yielding sub-optimal productivity, which may lead to personal dissatisfaction and/or strain their relationship with colleagues.</p> <p>As there is no specific training to help residents acquire this competency, the program committee has created an optional internship for seniors to help them acquire skills in the safe management of high patient volumes in association with competing priorities: an internship in efficient emergency medicine. It consists of 15 sessions and structured activities, with the main objective to develop skills where the residents can be more efficient clinicians in the overall management of the emergency unit.</p> <p>The teaching methods are: 1) supervision by direct observation; 2) reverse supervision; 3) supervision by physicians who are recognized by their peers as</p>

	<p>having the targeted skills (role models) and are able to provide longitudinal monitoring and daily progress assessments; 4) gradual to full takeover of the unit; 5) shifts covering "mistakes" where the supervisor and the resident rate potential or actual errors and discuss security.</p> <p>So far, two residents chose this internship course and pursued it with very positive evaluations; therefore three other residents will be taking this internship next year.</p>
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