UGME MISSION
To develop, deliver and evaluate a high quality educational program for the MD Program.

VALUES

Our Graduates will approach their profession with a spirit of Discovery by:
- Welcoming and adapting to the ever-changing nature of medicine
- Appreciating the continuum of basic science and human wellness
- Building a broad and unbiased foundation of medical knowledge
- Maintaining openness to practice medicine and conduct broader academic work in urban hubs and in rural and Northern communities, in Canada and around the world

Our Graduates will embrace Scholarship by:
- Pursuing academic excellence at every stage of their careers as clinicians, researchers, academics, and administrators
- Appropriately applying medical research and innovation to patient care
- Committing to the practice of lifelong learning as professionals
- Committing to the lifelong maintenance of an evidence-based practice
- Healing through knowledge and compassion and acting as educators for patients, allied health professionals, and one another

Our Graduates will lead and collaborate within their Communities by:
- Advocating for the health and safety needs of individual patients and collective populations
- Communicating effectively with all health care professionals, including generalists, specialists, and allied professionals and those in related sectors
- Exemplifying professionalism and sustaining a climate of respect in all aspects of their lives
- Fostering an atmosphere of cultural safety for all patients and populations by practicing with open-mindedness and unconditional goodwill
- Providing expert and compassionate medical care to diverse patient populations in Canada and beyond

In so doing, graduates of the Faculty of Medicine at the University of Manitoba will become exemplary physicians prepared to undertake the responsibilities entrusted to them.
UGME Learning Objectives

The Undergraduate Medical Education Learning Objectives were developed using the Royal College of Physicians and Surgeons of Canada CanMEDS competency based framework (2005) and the CanMEDS – Family Medicine (FM) framework (2009). Recommendations from the Future of Medical Education in Canada (FMEC): A Collective Vision for MD Education (2010) and First Nations, Inuit, Metis Health Core Competencies, A curriculum framework for undergraduate medical education (AFMC 2009) were incorporated in this document.

The learning objectives are organized around seven primary physician roles or areas of responsibility:

I. Medical Expert
II. Communicator
III. Collaborator
IV. Manager
V. Health Advocate
VI. Scholar
VII. Professional

The competency descriptors were chosen to acknowledge that graduates of our MD program are about to begin post-graduate residency training programs. As such, they should serve as a framework for students’ acquisition of the knowledge, skills and attitudes required by the end of medical school.

I. Medical Expert

Definition:

As Medical Experts, physicians integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional attitudes in their provision of quality, safe patient-centered care.

Description:

Physicians possess a defined body of knowledge, clinical skills, procedural skills and professional attitudes, which are directed to effective patient-centered care. They apply these competencies to collect and interpret information, make appropriate clinical decisions, and carry out diagnostic and therapeutic interventions. They do so within the boundaries of their discipline, personal expertise, the healthcare setting and the patient’s preferences and context. Their care is characterized by up-to-date, ethical, and resource-efficient clinical practice.

Educational Program Goal:

By the end of the MD program the student will utilize a patient/family-centered approach and evidence-based medicine to formulate diagnoses and differential diagnoses; develop, organize and implement
Learning Objectives
The student will be able to:

1. Demonstrate thorough knowledge of the etiology, pathogenesis, clinical features, complications, principles of prevention and management of common and life-threatening conditions presenting throughout the age spectrum, specifically including but not limited to those listed in the Composite Clinical Presentations (CP4).
2. Apply basic sciences and foundational knowledge to the practice of medicine.
3. Practice evidenced-based medicine.
4. Perform a complete or focused history and physical examination as indicated using a patient-centered approach.
5. Formulate a differential diagnosis for each of the listed Composite Clinical Presentations (CP4) where applicable.
6. Appropriately order and interpret commonly used diagnostic investigations.
7. Develop a prioritized patient-centered management plan for the Composite Clinical Presentations (CP4) where applicable.
8. Recognize an acutely ill patient and request assistance.
9. Recognize the indications for basic medical procedures and perform them at a defined level of competence.
10. Recognize the biological, psychosocial, economic and spiritual influences on patients’ well-being.

II. Communicator

Definition:

As Communicators, physicians effectively facilitate the doctor-patient relationship and the dynamic exchanges that occur before, during, and after the medical encounter.

Description:

Physicians enable patient-centered therapeutic communication through shared decision-making and effective dynamic interactions with patients, families, caregivers, and everyone involved in the patient’s care. These competencies are essential for establishing rapport and trust, formulating a diagnosis, delivering information, striving for mutual understanding, and facilitating a shared plan of care.

Educational Program Goal:

By the end of the MD program, the student will communicate effectively with patients, families, and everyone involved in the patient’s care to enhance patient outcomes.
Learning objectives
The student will be able to:

1. Utilize effective patient-centered communication skills.
2. Consider the influence of the patient’s ideas, beliefs and expectations along with cultural, ethnic, spiritual, socioeconomic, gender and age factors during patient encounters.
3. Develop therapeutic relationships with patients and families characterized by respect, honesty and empathy.
4. Deliver information to patients and families in a manner that is easily understood, encourages discussion and participation in decision making.
5. Demonstrate accurate, informative, organized and timely record keeping.

III. Collaborator

Definition:
As Collaborators, physicians effectively work within a healthcare team to provide safe, quality patient care in order to achieve optimal health outcomes.

Description:
Physicians work in partnership with others involved in the care of individuals or specific groups of patients. It is essential for physicians to be able to collaborate effectively with patients, families, and health care teams for the provision of optimal care, health promotion, education and scholarship.

Educational Program Goal:
By the end of the MD program, the student will participate effectively in intra- and inter-professional health care teams and contribute productively to team-based patient centred care.

Learning Objectives
The student will be able to:

1. Discuss the roles and responsibilities of health care professionals and recognize their contribution to effective patient care.
2. Demonstrate effective team skills, participating effectively within intra- and inter-professional health care teams.
3. Consult medical specialists and allied health professionals appropriately.
4. Communicate effectively verbally and in writing (or electronically) with members of the health care team.
5. Engage patients and relevant stakeholders in developing plans that reflect the patient’s health care needs and goals.
IV. Manager

Definition:

As Managers, physicians are integral participants in healthcare systems, establishing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the healthcare system.

Description:

Physicians require the ability to prioritize, effectively execute tasks collaboratively with colleagues, and make systematic choices when allocating scarce healthcare resources.

Educational Program Goal:

By the end of the MD program, the student will understand the structure and function of the Canadian health care system and its impact on the practice of medicine. The student will recognize the need for physicians to manage resources judiciously.

Learning Objectives

The student will be able to:

1. Describe the broad structure and function of the Canadian health care system, including the role of physicians.
2. Discuss the issues relevant to access, efficiency, cost effectiveness and delivery of health care.
3. Identify community resources for patient care that are appropriate and cost effective.
4. Participate in patient safety initiatives, including the prevention and management of medical errors.
5. Explain the basic principles of continuous quality improvement in the health care setting.
6. Describe the health care issues of and health care services provided to Indigenous peoples and special populations.
7. Demonstrate priority setting and time management skills.

V. Health advocate

Definition:

As Health Advocates, physicians responsibly use their expertise and influence to advance the health and well-being of individual patients, communities, and populations.

Description:

Physicians recognize their duty and ability to improve the overall health of their patients and the society they serve. Health advocacy is an essential component of health promotion. Health advocacy is
appropriately expressed both by individual and collective actions of physicians in influencing public health and policy.

**Educational Program Goal:**

By the end of the MD program, the student will advocate for the health of their patients and the communities in which they learn and provide care under supervision, promoting health in individuals, communities and populations. The student will demonstrate his/her accountability to society at large.

**Learning Objectives**

The student will be able to:

1. Identify and respond to opportunities for advocacy for individual patients and communities including provision of care to vulnerable populations.
2. Identify and assess the impact of local, national, and global determinants of health on individual patient and community health.
3. Incorporate health promotion and illness prevention strategies in patient care.
4. Describe barriers to health care access, and their impact on patient health care outcomes at the individual, community and population level.
5. Describe the principles of cultural safety / proficiency for all populations, with an emphasis on how this pertains to Indigenous peoples.
6. Discuss how public health interacts with primary health care to impact on the health of populations served.

**VI. Scholar**

**Definition:**

As Scholars, physicians demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application and translation of medical knowledge.

**Description:**

Physicians need to continually learn and model this for others. They contribute to the creation, dissemination and application of medical knowledge. Additionally, they facilitate the education of their students, patients, colleagues, and others.

**Educational Program Goal:**

By the end of the MD program, the student will utilize scientific principles in all aspects of their professional lives including; interactions with patients and peers, educational endeavors and research activities.
Learning Objectives

The student will be able to:

1. Develop and implement a continual personal learning plan.
2. Apply the principles of the scientific method within evidence-based medicine to formulate and answer a clinical question.
3. Describe the basic principles of clinical and translational research.
4. Demonstrate effective presentation skills to facilitate the learning of others including patients, families and colleagues.
5. Assist in teaching others and facilitating learning where appropriate.

VII. Professional

**Definition:**

As Professionals, physicians are committed to ethical practice, profession-led regulation, and high personal standards of behaviour.

**Description:**

The professional role is guided by codes of ethics and a commitment to clinical competence, the demonstration of appropriate attitudes and behaviours, integrity, altruism, personal well-being, and the promotion of the public good. These commitments form the basis of a social contract between a physician and society.

**Educational program goal:**

Beginning with the MD program and throughout their career, the student will demonstrate professional and ethical behaviour in their interactions with others including patients, families, colleagues, members of the health care team, their teachers, and staff. The student will comprehend the core concepts of clinical ethics and law and will apply both to their practice as physicians.

Learning Objectives

The student will be able to:

1. Demonstrate behaviours consistent with the codes of professionalism adopted by the Faculty of Medicine as well as those developed by their peers and supported by the Faculty.
2. Exhibit professional behaviors including honesty, integrity, compassion, respect and altruism.
3. Engage in self-assessment, recognize the limits of his/her knowledge and clinical skills, and seek assistance where necessary.
4. Describe and apply the basic concepts of clinical ethics and health law.
5. Demonstrate their respect for patient autonomy by maintaining confidentiality and ensuring patient privacy.
6. Maintain appropriate professional boundaries and manage conflicts of interest.
7. Develop skills in self-reflection.
8. Balance personal and professional responsibilities to ensure personal health, academic achievement and high quality patient care.
Definitions

Definitions of the UGME Learning Objectives seven primary physician roles:

I. **Medical Expert** - As Medical Experts, physicians integrate all of the CanMEDS Roles, applying medical knowledge, clinical skills, and professional attitudes in their provision of quality, safe patient-centered care.

II. **Communicator** - As Communicators, physicians effectively facilitate the doctor-patient relationship and the dynamic exchanges that occur before, during, and after the medical encounter.

III. **Collaborator** - As Collaborators, physicians effectively work within a healthcare team to provide safe, quality patient care in order to achieve optimal health outcomes.

IV. **Manager** - As Managers, physicians are integral participants in healthcare organizations, organizing sustainable practices, making decisions about allocating resources, and contributing to the effectiveness of the healthcare system.

V. **Health Advocate** - As Health Advocates, physicians responsibly use their expertise and influence to advance the health and well-being of individual patients, communities, and populations.

VI. **Scholar** - As Scholars, physicians demonstrate a lifelong commitment to reflective learning, as well as the creation, dissemination, application and translation of medical knowledge.

VII. **Professional** - As Professionals, physicians are committed to the health and well-being of individuals and society through ethical practice, profession led regulation, and high personal standards of behavior.