

## **FUNCTIONAL COMPETENCIES REQUIRED FOR THE STUDY OF MEDICINE\***

**Revision Approved by Core Competencies Sub-Committee March 26, 2024**

**Revision Approved Student Academic Management Committee May 7, 2024**

**Revision Approved College of Medicine Faculty Council September 24, 2024**

The College of Medicine at the University of Saskatchewan is responsible to society to provide a program of study to support the development of the knowledge, skills, and professional behaviors and attitudes necessary to enter the practice of medicine in Canada upon graduation and completion of residency. At the time of entry to the MD program, and throughout the program, students must possess functional core competencies (cognitive, communication, sensory, motor, behavioral and social) to enable them to engage in the various learning activities of the program to develop competency in these areas, to meet all program learning objectives and, ultimately, to ensure patient safety and quality patient-centered care.

In addition to obtaining an MD degree, and completing an accredited residency training program, an individual must pass the licensure examinations of the Medical Council of Canada (MCC) in order to practice medicine. It is important for prospective candidates to know that cognitive, physical examination, management skills, communication skills, and professional behaviors are all assessed at regular intervals throughout the MD Program.

The following functional core competencies are required at admission and throughout the program. They support the achievement of subsequent academic and professional competencies articulated in course requirements throughout the program, and in program objectives required by graduation.

It is expected that all students possess the required functional core competencies as described in the following section. All individuals are expected to review this document to assess their ability to meet these standards.

Functional competencies are necessary for the safety and wellbeing of patients, students, and others. Students with a range of differing abilities become successful health professionals and contribute in important ways to the care of their patients and the health care system. The MD program welcomes students with a range of differing abilities, and will support students to access reasonable accommodation due to a characteristic protected under Saskatchewan Human Rights legislation, up to the point of undue hardship. The duty to accommodate is a shared duty, requiring cooperation, engagement, and consultation with both the student and the University.

Accommodations are supports or services that allow a student with a disability, or other accommodation needs, a fair opportunity to engage in academic activities and fulfill essential course and program requirements. Accommodations are meant to level the playing field for students; they are never meant to provide an advantage to students.

Where a student cannot exhibit these functional core competencies to such an extent that it may impact the safety or well-being of patients, students, or others, the program may modify the participation of a student including, but not limited to, adjusting student activities, requiring the student to take a leave of absence, or in serious instances, requiring a student to not enter or discontinue from the program.

The MD Program curriculum is comprehensive, additive, and integrative in nature, such that timely completion of learning and skill development is necessary; therefore, students are expected to complete the MD degree within four years. Achieving the required program competencies within a defined time period also helps ensure that the student will have the necessary skills for maintenance of competence in post-graduate training and practice. Students with a disability may be granted an extension of time within which to complete the MD program. Students

who anticipate requiring disability-related accommodation are responsible for notifying the medical school. These requests are considered on a case-by-case basis. All other requests for a leave-of-absence are handled separately.

## **FUNCTIONAL COMPETENCIES FOR STUDENTS IN THE MD PROGRAM**

A candidate for the MD degree must demonstrate the following:

### **(1) Observational skills**

A student demonstrates accurate and appropriate observational skills when participating in learning situations. Examples of key observations, include but are not limited to:

- Anatomic and histologic laboratory specimens and samples;
- Large group and small group presentation materials (slides, audiovisual media, documents);
- Discernment of signs of illness, discomfort, and emotional state in patients, through observation and examination;
- Measurements associated with competent use of medical equipment;
- Diagnostic tests;
- Observation of, and supervised performance of appropriately selected, clinical patient procedures as an element of supporting learning of procedures.

### **(2) Communication skills**

A student communicates effectively and sensitively with people of all genders, ages, races, sexual orientations, political, cultural, and religious backgrounds, specifically to patients and family members. Students must be able to convey a sense of compassion, empathy, and respect. Students communicate effectively with teachers, supervisors, staff, other learners, and other members of the MD program and health care team. Examples of effective communication include but are not limited to:

- Verbal and non-verbal communication with patients, teachers, staff and colleagues;
- Preparation of oral and written presentations (about patients' problems and medical conditions, and/or for academic and scholarly work);
- Recognition and response to emotional states such as sadness, worry, agitation, and lack of comprehension of communication;
- Communication through translators when appropriate;
- Reading and documentation of observations, assessments and plans legibly in electronic and paper patient records and in other communications; and
- Accurate and timely response to pages, emails, and other communications from other members of the health care team, instructors/preceptors, administrative support, mentors, course directors, deans, or educational leaders.

### **(3) Physical Exam and Procedural Skills**

A student demonstrates sufficient sensory function and motor skills to perform physical examinations and procedural skills safely, competently, and independently, and be able to do these in a reasonable time. Examples of sensory and motor functioning include but are not limited to:

- Processing various sensory inputs collected as part of observation;
- Handling medical instruments and equipment either directly or in an adaptive form;
- Providing consistent, uninterrupted and/or prolonged service to patient(s) including overnight service;
- Executing motor movements reasonably required to provide general, procedural and emergency medical care to patients.

#### **(4) Intellectual-Conceptual, Integrative, and Quantitative Skills**

A student demonstrates the cognitive skills and memory necessary to measure, calculate, and reason in order to analyze, integrate, and synthesize information. The student comprehends dimensional and spatial relationships and demonstrates clinical reasoning and problem-solving. Examples include but are not limited to:

- Processing and integrating important information from history, physical examination and laboratory data, and from peers, teachers and the medical literature to develop a reasoned explanation for patients' differential diagnoses and management plans;
- Integrating concepts from across courses to support broad knowledge, skill, and behavior development for quality patient care;
- Comprehending three dimensional and spatial relationships of structures;
- Dealing with complexity and ambiguity, and triaging multiple simultaneous course requirements, tasks, and/or patient problems; taking into account relative urgency and available resources;
- Acknowledging and communicating limits to knowledge and skills when appropriate;
- Recognizing unsafe situations and responding appropriately;
- Maintaining situational awareness including perceiving and understanding what is going on and predicting what is likely to happen given this information.

#### **(5) Equity, Diversity, and Inclusion**

The College of Medicine is committed to the principles of equity, diversity, and inclusion to create and nurture a diverse and inclusive community that encompasses our legal, moral, and ethical responsibilities. All members of the university community share the responsibility for creating a supportive and inclusive environment. As a student and member of the medical community learners are expected to:

- Recognize and address personal biases, underlying beliefs and values, assumptions, and stereotypes that inhibit opportunity in work and learning environment;
- Contribute to learning environments that embrace equity, diversity, inclusion, and belonging;
- Contribute to learning environments that are free of discrimination and harassment;
- Support the inclusion of perspectives and voices of underrepresented groups in discussion and decision-making.

#### **(6) Behavioral and Social Attributes**

A student, being new to the profession, commits to continued understanding and growth of professional attributes. Students are expected to demonstrate the behavioral and social attributes in that will allow them to conduct themselves in a manner consistent with the [College of Medicine Guiding Principles for Professionalism](#). This includes displaying respect for others, honesty and integrity, compassion and empathy, and duty and responsibility. Examples of these attributes include but are not limited to:

- Good judgement;
- Self-awareness;
- Emotional intelligence;
- Openness to feedback;
- Personal responsibility;
- Relationship building and cultural humility;
- Maturity;
- Sensitivity;
- Adaptability;
- Tolerance for uncertainty;
- Recognition of personal needs and limitations and willingness to seek help.

\*Replaces **UGME** Technical Standards (former versions Sept 2014; May 2021)

## Addendum

The underlisted documents were reviewed and informed the preparation of the *Core Competencies Required for the Study of Medicine (2024)*.

1. [AFMC Re-envisioning Technical Standards.15 Jan 2024.pdf](#)
2. [3-1-2-Schulich-Statement-Essential-Skills-Abilities-Required-Study-of-Medicine.pdf](#)
3. [Academic Standards and Essential Skills Office of Admissions - McGill University.html](#)
4. [COFM Abilities Nov08.16.pdf](#)
5. [cou-essential-skills-abilities-required-for-entry-to-medical-program.pdf](#)
6. [Dal Technical Standards FINAL Approved Sept 2016.pdf](#)
7. [Essential-Skills-and-Abilities-Required-for-the-Study-of-Medicine.pdf](#)
8. [technicalstandards-Calgary.pdf](#)
9. [Technical-Standards - Memorial 2012.pdf](#)
10. [Equal Access for Students with Disabilities: The Guide for Health Science and Professional Education — Lisa M. Meeks, Neera R. Jain, Elisa P.Laird.](#)