

CURRICULUM & ASSESSMENT MAP TEMPLATE FOR GHVP

Blocks	Prior to start of program	1	2	3	4	5	6
Calendar points	PD sends Welcome Package to residents and offers meet and greet	PD meets with resident G&O reviewed	PD/resident monthly check-in	PD/resident monthly check-in Meet & Greet with GH DFCM leadership	PD/resident monthly check-in	PD/resident monthly check-in Periodic Review Planning	PD/resident monthly check-in Periodic Review Planning
Rotation*		ICHA Core Rotation	Crossroads Refugee Clinic WCH Core Rotation	Tropical Medicine TGH Core Rotation [1-2 blocks +/- research block]	Tropical Medicine TGH Core Rotation [1-2 blocks +/- research block]	Rural Medicine, Northern Ontario (Core) Rotation	Rural Medicine, Northern Communities (Core) Rotation
<i>*Not in any particular order; rotation schedule and dates to be planned at discretion of resident, rotation site/supervisor, and PD</i>							
Longitudinal Experiences <sup>1</sup>		TAAAC-FM, DFCM GH work, FM/other					
Planned Assessments <sup>2</sup> (Staff initiated) (Resident initiated)		ITER (POWER)	ITER (POWER)	ITER (POWER)	ITER (POWER)	ITER (POWER)	ITER (POWER)
		Field Note (Elentra): resident chooses a minimum of 1 to complete per rotation week					
Learning Experiences <sup>3</sup>	Resident to begin to formulate G&O and work with PD on rotation organization	<ul style="list-style-type: none"> <li>Central ES Orientation</li> <li>GHVP Orientation</li> <li>Plan rotations and learning experiences</li> </ul>	<ul style="list-style-type: none"> <li>TAAAC-FM Orientation</li> </ul>	<ul style="list-style-type: none"> <li>Mentors meet and greet</li> <li>Scholarly project and activities</li> <li>Reflective written piece around global health and vulnerable population activities</li> </ul>			
Competence Committee <sup>4</sup>				Competence Committee Meeting			Competence Committee Meeting

**CURRICULUM & ASSESSMENT MAP – Twelve Month Program in Global Health & Vulnerable Populations**

Blocks	7	8	9	10	11	12	13
<b>Calendar points</b>	PD/resident monthly check-in	PD/resident monthly check-in	PD/resident monthly check-in	PD/resident monthly check-in	PD/resident monthly check-in	PD/resident monthly check-in Exit survey/feedback Periodic Review Planning	PD/resident monthly check-in
<b>Rotation*</b>	Other rotations: SC, HIV, TB, PED, OB, SH, Hos, EM, AM, MH, PC, GH <sup>5</sup>	Other rotations: SC, HIV, TB, PED, OB, SH, Hos, EM, AM, MH, PC, GH <sup>5</sup>	Other rotations: SC, HIV, TB, PED, OB, SH, Hos, EM, AM, MH, PC, GH <sup>5</sup>	Other rotations: SC, HIV, TB, PED, OB, SH, Hos, EM, AM, MH, PC, GH <sup>5</sup>	Other rotations: SC, HIV, TB, PED, OB, SH, Hos, EM, AM, MH, PC, GH <sup>5</sup>	Other rotations: SC, HIV, TB, PED, OB, SH, Hos, EM, AM, MH, PC, GH <sup>5</sup>	Other rotations: SC, HIV, TB, PED, OB, SH, Hos, EM, AM, MH, PC, GH <sup>5</sup>
	<i>*Not in any particular order; rotation schedule and dates to be planned at discretion of resident, rotation site/supervisor, and PD</i>						
<b>Longitudinal Experiences<sup>1</sup></b>	TAAAC-FM, DFCM GH work, FM/other						
<b>Planned Assessments<sup>2</sup></b> (Staff initiated) <b>(Resident initiated)</b>	ITER (POWER)	ITER (POWER)	ITER (POWER)	ITER (POWER)	ITER (POWER)	ITER (POWER)	ITER (POWER)
	Field Note (Elentra): resident chooses a minimum of 1 to complete per rotation week						
<b>Learning Experiences<sup>3</sup></b>	<ul style="list-style-type: none"> <li>• Mentors meet and greet</li> <li>• Scholarly project and activities</li> <li>• Reflective written piece around global health and vulnerable population activities</li> </ul>						
<b>Competence Committee<sup>4</sup></b>			Competence Committee Meeting			Competence Committee Meeting: Graduation Decision	

**NOTES:**

1. Longitudinal experiences may include clinical activities such as FM half-days during specialist rotations, GH work, or other activities decided jointly between the resident and PD
2. For longitudinal experiences, an ITER or field note can be selected as an evaluation tool by the supervisor, depending on the nature of the experience
3. Scholarly projects can include journal club, research and/or teaching with the TAAAC-FM team, DFCM GH projects, or other activities decided jointly between the resident and PD
4. Competence Committee (part of the Residency Program Committee) meets to confirm resident progress and promotion decisions
5. Global Health rotations will be organized at the discretion of program leadership and the University based on safety for travel, as well as international partner preparedness post-pandemic

**ABBREVIATIONS:**

<b>GHVP</b>	Global Health and Vulnerable Populations
<b>PD</b>	Program Director
<b>DFCM</b>	Department of Family and Community Medicine
<b>ICHA</b>	Inner City Health Associates
<b>TGH</b>	Toronto General Hospital
<b>G&amp;O</b>	Goals and Objectives
<b>GH</b>	Global Health
<b>TAAAC-FM</b>	Toronto Addis Ababa Academic Collaboration in Family Medicine
<b>FM</b>	Family Medicine
<b>SC</b>	Scholar
<b>AM</b>	Addictions Medicine
<b>MH</b>	Mental Health
<b>HIV</b>	HIV Care
<b>PED</b>	Pediatric at risk populations
<b>WCH</b>	Women's College Hospital
<b>TB</b>	Tuberculosis
<b>OB</b>	Obstetrics
<b>SH</b>	Sexual Health
<b>Hos</b>	Hospitalist
<b>EM</b>	Emergency Medicine
<b>PC</b>	Palliative Care
<b>ITAR</b>	In-training Assessment Reports
<b>ITER</b>	In-training Evaluation Reports
<b>POWER</b>	Postgraduate Web Evaluation and Registration