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## **Title**

Development of a national PGME pain and substance use curriculum: Using an environmental scan to identify existing gaps

## **Priority 1 (Research Category)**

Education and training

## **Presenters**

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## **Abstract**

Context: Opioid overdoses and surging death rates are a national public health crisis for Canada. Primary healthcare providers have a key role to play in curbing the opioid epidemic and this begins with education. In January 2021, the Association of the Faculties of Medicine of Canada (AFMC), launched an online pain management and opioid stewardship curriculum for integration into Canada's 17 medical school undergraduate programs. To ground this initiative within the medical education continuum, the AFMC is extending this curriculum into postgraduate medical education (PGME).

Objective: To conduct an environmental scan to identify gaps in current PGME educational resources related to pain management and substance/opioid use disorders.

Study Design: Scoping review, document analysis, surveys, interviews.

Setting and Population Studied: A scoping review of patient experiences with pain and opioid management. A document analyses of Canadian Pain Guidelines and Competency Frameworks, the Royal College of Physicians of Canada CanMEDS key and enabling competencies, the College of Family Physicians of Canada's 105 Priority Topics, and PGME pain-related curricula from Canada's 17 medical schools. Surveys to key stakeholders in PGME offices, and interviews with stakeholders from key partner associations.

Outcome Measures/Results: Current PGME curricular offerings have been praised for their value, interactive nature, and use of up-to-date evidence. The challenges of existing curricula included a lack of formative assessments, lack of a developmental approach in PGME, a need to address issues of stigma and bias in opioid use and prescribing, and concerns about translating knowledge into clinical practice. Future educational programs should ensure that curricula focus on person-centered approaches to care that prioritize patients' lived experiences, stigma and bias around opioid use and prescribing, evidence-based guidelines, and developing competencies based on the full-range of CanMEDS competencies and the College of Family Physicians of Canada skill dimensions.

Conclusion: Through a collaborative approach, AFMC is currently working with experts in the field, and patient subject matter experts and family advocates to begin identifying the key topics and learning outcomes for a national PGME pain management and substance/opioid use disorder curriculum.