

Specific learning objectives per year of training

Residency Year-1

Kuwait Family Medicine Competencies	Details
1.Clinical proficiency and medical complexity	1.1 Being able to differentiate between the primary care setting and the hospital setting 1.2 Developing problem solving skills: history taking & Clinical examination skills, discriminative of the wide range of interventions available (including investigations) and Interpretation and analysis of data 1.3 Show ability to make initial management decisions about common acute and chronic problems encountered in family medicine. 1.4 Recognize occasions when referral to hospital specialist is indicated and act accordingly. 1.5 Adequate knowledge and skills for dealing with common pediatrics problems with particular awareness of the unique vulnerabilities of infants and children that may require special attention, consultation and/or referral. 1.6 Show ability to manage appropriately emergency cases before transferring patients (e.g., resuscitation and stabilization) 1.7 Show ability to prioritize tasks to manage acute illness and trauma effectively
2.Communication	2.1 Able to understands the importance of patient-centered approach in the consultation with sensitivity to each patient's expectations, needs and health beliefs 2.2 Initial integration of the holistic approach when dealing with patients
3.Health Promotion	3.1 Able to understands the principle of disease prevention and the importance of partnership between doctors and patients to promote optimal health.
4.Evidence based practice	4.1 Able to apply the principles of evidence base medicine in the management of patients.
5.Working as a team and leadership	5.1 Involve in team work and to act in collaboration with colleagues both as a leader and as part of the team 5.2 Able to understands the importance of collaboration with specialists in secondary care for best patients' outcome 5.3 Able to write comprehensive referral letter
6.Organization management	6.1 Able to understands principles of organization management, medical ethics, administrative regulations and teamwork.

	6.2 Able to understand comprehensive record-keeping
7. Personal and professional growth	<p>7.1 Commitment to educational activities and recognition of continuing educational needs</p> <p>7.2 Show capabilities and limitations, then work on meeting those needs and inadequacies.</p> <p>7.3 Able to apply medico-legal & ethical issues encountered in the primary care setting.</p>

Learning /Teaching Opportunities in FMRP

Year of training	Teaching/ learning methods	Courses
<i>PGR1</i>	<ul style="list-style-type: none"> • Observing trainers and other experienced family practitioners. • Joined consultations followed by independent supervised consultations • Direct observed consultations with feedback (Joint consultation log) • Reflection on learning (reflective diaries). • Learning through case analysis (PCD) • Learning through random case selection from the candidate work time sheet (RCA) • Formal tutorials. • Opportunity to work as assistant registrars in pediatrics department and Genetics Center • Opportunity to work as assistant registrars in emergency department • Clinic and hospital direct observation of procedural skills (DOPS) • Leadership activity participation • Community Health activities 	<p>ODSC:</p> <ol style="list-style-type: none"> 1. Mastering consultation skills course 2. Emergencies in General Practice course 3. Growth Chart and Child Abuse 4. Reflection and Presentation skills

WPBA Requirements for Each Residency Year

Residents should achieve adequate performance in WPBA assessment in order to ensure readiness of the resident to proceed to the next level of training.

Residency year	Rotations and Courses	Reports
PGR1	Attendance of all/passing 75% of the Rotations and Courses of R1	<p><u>Clinic:</u></p> <p>Minimal required number of teaching session per academic year:</p> <p>4 COTs, 3 CBDs, 30 Joint Consultation, 4 Random case analysis, 4 Problem Case Discussion.</p> <p>1 Reflection feedback academic year</p> <p>1 DOPS per month</p> <p>1 Examination per month</p> <p>6 Tutorials</p> <p>Mid rotation feedback</p> <p>KIMS forms (trainee + tutor+ clinic) evaluation form at the end of rotation</p> <p>Leadership assessment</p> <p>ITER</p> <p><u>Hospital:</u></p> <p>DOPS 2 per month</p> <p>Cases seen and Discussed 10 cases per month</p> <p>Mid rotation feedback</p>

		KIMS forms (trainee + tutor+ clinic) evaluation form at the end of rotation
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