Physician humanism in CanMEDS 2025
Humanisme des médecins dans CanMEDS 2025

Heather M Waters,[1] Anna Oswald,[2,3] Evelyn Constantin,[4] Brent Thoma,[5] J Damon Dagnone[6]

[1]Department of Family Medicine, McMaster University, Ontario, Canada; [2]Department of Medicine, University of Alberta, Alberta, Canada; [3]Royal College of Physicians and Surgeons of Canada, Ontario, Canada; [4]Department of Pediatrics, McGill University, Quebec, Canada; [5]University of Saskatchewan, Saskatchewan, Canada; [6]Department of Emergency Medicine, Queen's University, Ontario, Canada
Correspondence to: Heather M Waters, Associate Professor, Department of Family Medicine, McMaster University; email: watersh@mcmaster.ca

Introduction

Canadian physicians experience underacknowledged vulnerability, stress, and burnout while working in an overburdened healthcare system. Health workforce deficits, increasing complexity of care, and the COVID-19 pandemic have magnified these challenges, impacting patient care and physician self-care. Within this context, it is no surprise that a recent review identified physician humanism as an underrepresented concept in the CanMEDS physician competency framework.[1] Explicitly acknowledging and honouring physician humanity is necessary to develop and sustain healthy and wholehearted physicians, which also underpins physicians' ability to provide effective humanistic care for patients.[2]

What is physician humanism and why is it important to physician competency?

Physician humanism has both inward and outward facing components; physician experiences of their own humanity and development of relationship with "self," and physician contributions towards humanistic care of patients and interactions with their families, colleagues, and the healthcare system. Physician wellness, a prominent topic in the recent literature, has important links to discourse on both facets of physician humanism. Historically, physicians have committed to raise the needs of others—their patients, teams, and institutions - above their own. Trust in the physician social contract is facilitated by such altruism and the paradigm of the selfless physician hero is frequently celebrated. However, physicians are simply human with personal needs, limitations, vulnerabilities, imperfections, fallibility, and mortality. The concept of physician humanism recognizes the inherent humanity and personhood of physicians, along with the legitimacy of their physical needs (nutrition, sleep, cognitive rest), social needs (personal safety, meaningful connection), and existential needs (value, meaning). In fact, maintaining compassionate connection with their own personhood supports physicians in extending humanistic care to patients and in other relationships. While self-care is an important contributor to maintaining one's humanity, humanism extends beyond the individual physician's personal needs to include values and relationships, the ways in which self and "being" are expressed in the world and in relationship with others.[2] Empathy, an ability to connect with the emotions of another, is a key element of humanism which has been shown to decline throughout medical training but can be nurtured through reflection and experiences in the arts and humanities. It is fundamental to humanistic care that physicians maintain the ability to identify and effectively navigate their own emotions, while employing self-compassion.

Denial of physician humanity has deleterious consequences for physician wellness that are underscored by statistics on physician ill-health, addiction, burnout, suicide, and exodus from the profession.[3] Disregard for physician and patient humanity is reflected in feedback on the lack of humanistic care in the current system.[4]

Healthcare and medical education systems present countless threats to physician humanism including excessive workloads, sleep deprivation, insufficient resources, competitive environments, stigma and lack of resources for mental health.[5] If healthcare and medical education systems fail to embrace and nurture physician humanism, physicians will continue to suffer as will their ability to sustain high-quality, humanistic care for patients. All leaders and stakeholders must together confront the dangers of continuous physician self-sacrifice; it is not realistic to perpetually disregard physician humanism without significant personal and societal cost.[4]

How is Physician Humanism represented in the 2015 CanMEDS competency framework?

The CanMEDS Physician Competency Framework describes the required competencies of physicians to meet "societal needs in a dynamic and increasingly demanding health care environment."[6] It derives from the foundational Educating Future Physicians of Ontario Project (EFPO), which notably incorporated physician humanism in a "Doctor as Person" role.[7] While some concepts from this role were distributed among the CanMEDS Professional, Communicator, Collaborator, and Leader roles (Table 1B), physician personhood was not explicitly included in CanMEDS. While it could be argued that physician personhood is an acknowledged reality and not a role to be defined by competencies, we believe it warrants a prominent place in our physician competency framework. Comparatively, the Netherlands' adaption of the CanMEDS framework prioritizes a "Reflector" role as the stem of the flower, asserting the importance of this aspect of physician humanism in discourse on physician training and competence.[8]

The competencies related to physician humanism in CanMEDS 2015 are limited and potentially harmful in that they focus solely on the outward facing needs of others (patients, colleagues, and institutions), while neglecting sufficient attention to physicians' own humanity. CanMEDS does not adequately acknowledge the competencies required by physicians to effectively explore and nurture their own humanity and a humanistic approach to self through lifelong personal and professional identity formation.

How can Physician Humanism be better represented within the 2025 CanMEDS competency framework?

The 2025 CanMEDS framework update could more explicitly acknowledge and value physician humanism, underscoring its associated competencies as essential to the wellbeing of physicians, patients, and the healthcare system.[7-9] However, this will be challenging. As a complex construct, physician humanism is not easily defined, taught, or assessed. Worse, defining and assessing competencies related to this construct may undermine the fundamental value and goals of elevating physician humanism in the first place.[9] For example, defining humanistic behaviours for evaluation risks reductionism, performative display, neglect of non-observable aspects of humanism worthy of curricular investment (i.e., emotions, values), inappropriate evaluation of personal experiences of self-care and wellness, and summative appraisal stress for an aspect of development intended to be lifelong, reflective, and restorative.

Acknowledging these risks, we have outlined a way forward for Physician Humanism by suggesting 14 new key competencies and adapting one existing key competency. These suggestions were developed based on expert opinion and consensus among our author group as a proposed means by which physician humanism could be more directly integrated into CanMEDS 2025 (Table 1C). To prevent adverse impacts from assessment of these competencies, the authors propose they are not delineated for assessment, but instead for exploration and nurturing of lifelong personal and professional development, reflective and collaborative practices, and promotion of a growth mindset. The benefits of employing a growth mindset in health professions education, whereby belief in the ability to develop oneself and one's abilities over time through goal setting, graded experiences, constructive feedback, and learning through "failure" is embraced, include enhanced learning environments, learner well-being, and resiliency, even in the face of difficulty.[10]

Preferably, expanding CanMEDS to prioritize a 'Doctor as Person' role in which these competencies are elaborated would more distinctly highlight the importance of physician humanism. This role would include competencies that extend beyond professionalism and personal responsibility to others, to support doctors in developing a humanistic approach towards themselves as well, within the

challenging constraints of the healthcare system. As physician humanism influences the effectiveness of physicians across all competency roles, an updated pictorial representation of CanMEDS could symbolize the 'Doctor as Person' role as the supporting and nurturing parts of the flower: the stem, leaves and roots.[7,8]

Table 1. Physician humanism competencies for the CanMEDS physician competency framework

A. CanMEDS 2015 Key or Enabling Competencies directly related to Physician Humanism	
N/A– there are currently no key or enabling competencies *directly* related to physician humanism	
B. CanMEDS 2015 Key or Enabling Competencies indirectly related to Physician Humanism	
Medical Expert	
1.1 Demonstrate a commitment to high-quality care of their patients	
2.4 Establish a patient-centred management plan	
4.1 Implement a patient-centred care plan that supports ongoing care, follow-up on investigations, response to treatment, and further consultation	
5.2 Adopt strategies that promote patient safety and address human and system factors	
Communicator	
1. Establish professional therapeutic relationships with patients and their families	
2. Elicit and synthesize accurate and relevant information, incorporating the perspectives of patients and their families	
3. Share health care information and plans with patients and their families	
4. Engage patients and their families in developing plans that reflect the patient's health care needs and goals	
5. Document and share written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy	
Collaborator	
1. Work effectively with physicians and other colleagues in the health care professions	
2. Work with physicians and other colleagues in the health care professions to promote understanding, manage differences, and resolve conflicts	
3. Hand over the care of a patient to another health care professional to facilitate continuity of safe patient care	
Leader	
1.2 Contribute to a culture that promotes patient safety	
4.1 Set priorities and manage time to integrate practice and personal life	
4.2 Manage a career and a practice	
4.3 Implement processes to ensure personal practice improvement	
Advocate	
1. Respond to an individual patient's health needs by advocating with the patient within and beyond the clinical environment	
2. Respond to the needs of the communities or populations they serve by advocating with them for system-level change in a socially accountable manner	
Scholar	
1. Engage in the continuous enhancement of their professional activities through ongoing learning	
2.1 Recognize the influence of role-modelling and the impact of the formal, informal, and hidden curriculum on learners	
2.2 Promote a safe learning environment	
2.3 Ensure patient safety is maintained when learners are involved	
2.5 Provide feedback to enhance learning and performance	
3.1 Recognize practice uncertainty and knowledge gaps in clinical and other professional encounters and generate focused questions that address them	
4.2 Identify ethical principles for research and incorporate them into obtaining informed consent, considering potential harms and benefits, and considering vulnerable populations	
Professional	
1. Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards	
2. Demonstrate a commitment to society by recognizing and responding to societal expectations in health care	
4. Demonstrate a commitment to physician health and well-being to foster optimal patient care	
C. Suggested additions or modifications for the CanMEDS 2025 Framework related to Physician Humanism*	
New (or modified) Key or Enabling Competency**	Rationale for change
Medical Expert	
1.1 (Modified): Demonstrate a commitment to high-quality <u>humanistic</u> care of their patients	Providing high quality care is a fundamental competency; CanMEDS needs to explicitly include a humanistic approach as central to that care.
<u>5.3 (New): Acknowledge medical error and demonstrate self-compassion and compassion for others in debriefing, learning from, and managing mistakes.</u>	All physicians are affected by medical error which is a source of stress and distress; physicians, patients, and the healthcare system benefit from developing healthy strategies to approach such occurrences.
Communicator	
Collaborator	
<u>1.4 (New): Acknowledge the limitations of one's current knowledge and ability and appropriately engage the abilities of other healthcare team members.</u>	It is not possible for an individual physician to know everything and address all patient and system needs. Healthcare requires acknowledgement of personal limitations, and a willingness to engage others in teamwork to optimize care and learning.

2.3 (New): Participate in effectively debriefing challenging situations with the healthcare team, utilizing a supportive and growth-oriented mindset.	Physicians work in inter-professional teams that encounter difficult and unique patient care experiences. Reinforcing team learning and support through skilled debriefing is essential to optimize patient care and provider well-being over time.
Leader	
1.5 (New): Contribute to the development of a psychologically safe workplace	Effective and sustainable medical learning and practice is optimized in environments of psychological safety, to which all healthcare providers must skillfully and actively contribute.
4.5 (New): Provide time to meet basic human needs during work, including nutrition, hydration, rest (physical and cognitive), for self and for team members.	For sustainable and optimized practice, physicians benefit from role modelling and support in addressing their most basic human needs in the daily practice of medicine.
4.6 (New): Take time for rest and recovery from work through vacation, professional leave, post-call days.	Physicians must at times defer meeting their own human needs in the interests of humanistic patient care; physicians also manage difficult and traumatic situations. Rest and recovery time is essential to allow reflection, restore wellness, promote humanism, and optimize learning and effectiveness.
Advocate	
1.4 (New): Contribute to humanistic practices and a humanistic culture for everyone in the healthcare system (patients, caregivers, staff, healthcare providers)	Physicians are key contributors to creating a healthy culture within healthcare, by promoting and respecting personhood and a humanistic approach for all stakeholders, including themselves.
2.4 (New): Participate with patients and caregivers in co-designing a humanistic and compassionate healthcare system.	Patients and caregivers are essential contributors to the development of a more humanistic healthcare system. Physicians benefit from connecting compassionately, respectfully, and collaboratively with patients and caregivers as co-designers in health systems transformation.
Scholar	
1.4 (New): Participate in regular introspection and guided self-reflection to support lifelong personal and professional identity formation and appreciate the intersections between the two.	Personal and professional identities are intertwined and have the potential to develop and influence one another continually over a lifetime; engaging in regular reflection supports self-awareness and potential for growth.
1.5 (New): Identify, develop, and regularly reassess personal values, mission, and goals.	Personal and professional growth are enhanced through the practice of developing and regularly reassessing one's values, mission, and goals, and by considering alignment with one's current reality and any need for adjustments.
2.7 (New): Practice a growth mindset for self and apply a growth mindset towards interactions with others.	The advantages to personal and professional development from a growth mindset are well established. Physicians at all stages of career can benefit from the practice and application of such an approach to learning, teaching, and supervision.
Professional	
4.4 (New): Develop and implement strategies to support awareness of personal health and wellness.	Health and wellness are dynamic and influenced by innumerable factors both within and beyond individual control. Maintaining insight and awareness into one's own health and wellness can be challenging at times, and physicians benefit from not only understanding this reality, but also from developing and employing an approach to help accurately gauge their own health and wellness status.
4.5 (New): Identify and express personal and professional needs related to medical practice.	To promote and sustain wellness and effectiveness, physicians benefit from the ability to acknowledge and ask for what they need to optimize a humanistic approach in their work, within a context of psychological safety.
4.6 (New): Identify, express, and reflect on personal reactions to professional situations.	Physicians will naturally experience various emotions and thoughts in response workplace situations; learning to identify and manage them effectively enhances physician wellbeing and the ability to care humanistically for self and others.

As in the CanMEDS 2015 framework, individual Key and Enabling Competencies may fit under various Roles, beyond the one to which they are formally assigned.

**Given the granularity of some of these suggestions, it might be proposed that they are incorporated as Enabling (not Key) Competencies or within Entrustable Professional Activities (EPAs) (as milestones).*

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