

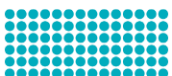


# Preparing your competence committee

The webinar will begin shortly

While you wait consider.....

- What is a competence/competency committee?
- Why have one?
- What can you do before, during and after a meeting to help things run smoothly?
- What scares you?



# Competence Committees

## The PA Perspective



**Julie Ghatalia, BA, Med, uOttawa Anesthesiology PA |  
Anna Oswald, MD, FRCPC, Clinician Educator**

Thursday, April 23, 2020





# Disclosure

- We do not have an affiliation (financial or otherwise) with a pharmaceutical, medical device or communications organization.



# Introductions

- Julie Ghatalia
  - PA Anesthesiology, University of Ottawa
- Anna Oswald
  - Clinician Educator RCPSC, U of A CBME Director, Rheumatologist





# Objectives

Upon completion of this session, participants will be able to:

- Describe the purpose, structure and function of a competence committee
- Outline tasks to complete in preparing for a competence committee
- Identify practical approaches to facilitating a competence committee meeting
- Identify action items and processes needed for after the meeting





# Outline:

## How to run a competence committee

- What is a competence/competency committee?
- Why have one? What's the point?
- What can you do before, during and after a meeting to help things run smoothly?
- What scares you?

NB: Thank you to all those who submitted questions in advance!

\*\*Webinar recording/slides will be available on the Royal College Website within approx 2 weeks





# What is the role of a Competence Committee?





# What is a Competence Committee?

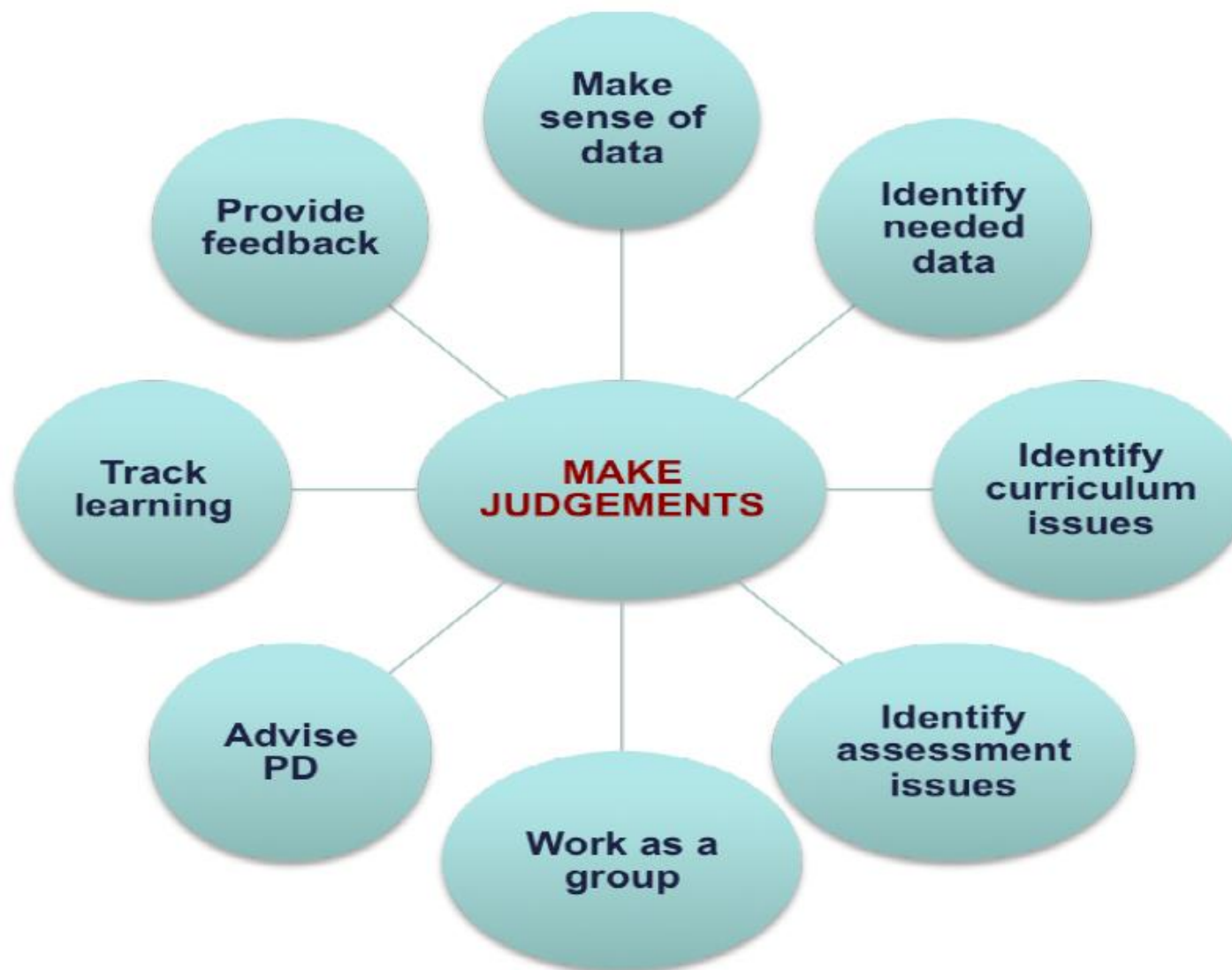
- A committee whose purpose is to **synthesize all** low-stakes EPA & other assessment data to make **progress/promotion decisions and guide learning activities**
- The PA plays an integral role in supporting the effective and efficient functioning of the Competence Committee!







# What do they do?

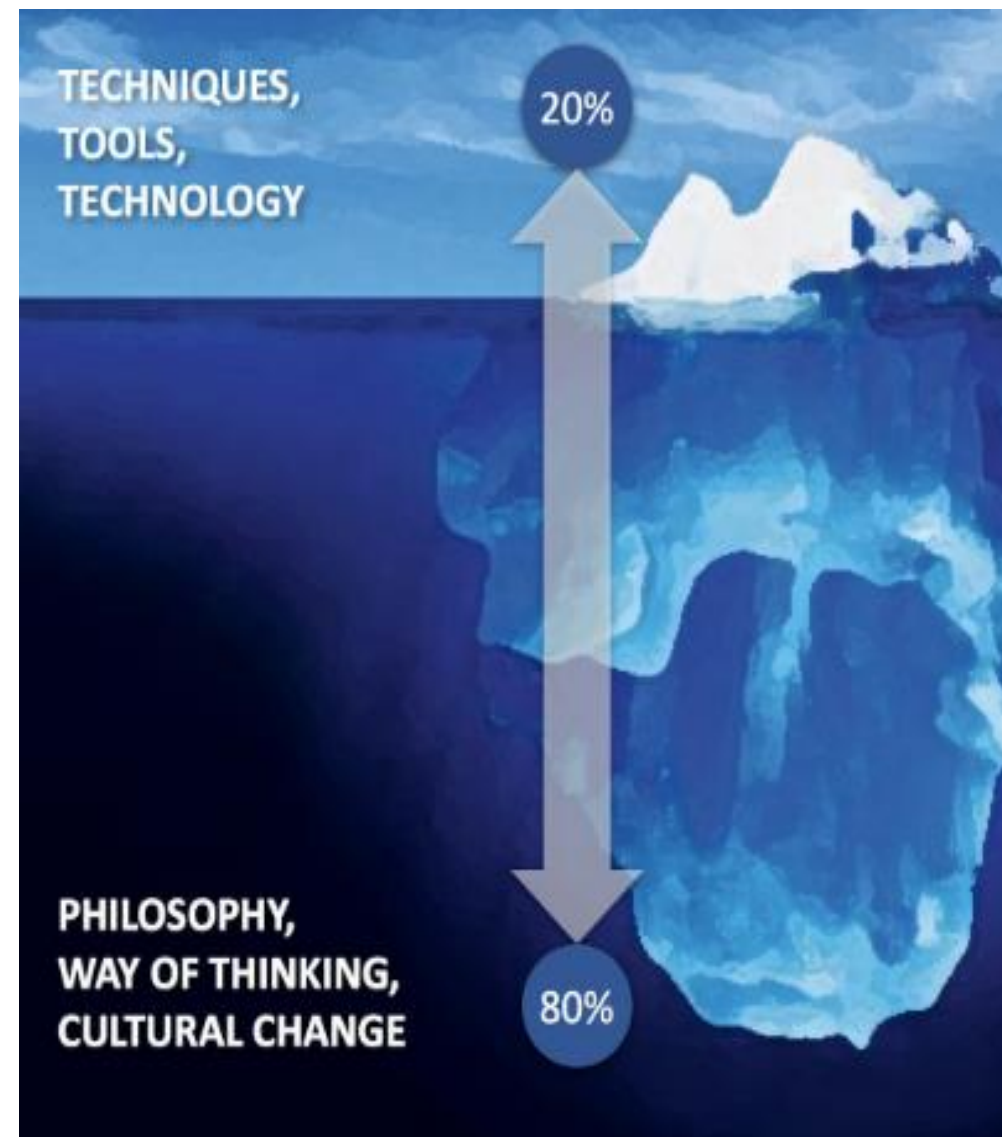


Adapted from Hauer, Ekpenyong, Chan  
ICRE 2016: Creating & Continuing  
Clinical Competency  
Committees





# Clinical Competence Committee Implementation Nuts, Bolts, & More





# Role of the Preceptor vs. Competence Committee

- Preceptors observe and record **low-stakes observations** based on how the resident performs
- Preceptors **don't make** the final assessment decisions
- The Competence Committee takes **all** the low-stakes assessments and other assessment data in order to make **progress decisions and guide learning activities**





# How does your program set up a Competence Committee?

- PGME Guidelines based on Royal College and PG Dean's Assessment Advisory Working Group
- These Terms of Reference can be used/modified for your local committee
- Each program must **document plans for decision making and communicate this** to their residents and faculty



# Competence Committee Nuts and Bolts

- Subcommittee of the RPC
  - Members may be the same or different than RPC
- Membership:
  - Chair
  - Program Director\*
  - Minimum 1 Faculty per 8-10 residents; minimum 3 members
  - \*\*\* PA's play an integral role in the functioning of CC \*\*\*
- Helpful to assign Primary Reviewers prior to the meetings
  - May be the Academic advisor or committee member
  - Suggest Max 3-5 residents per reviewer

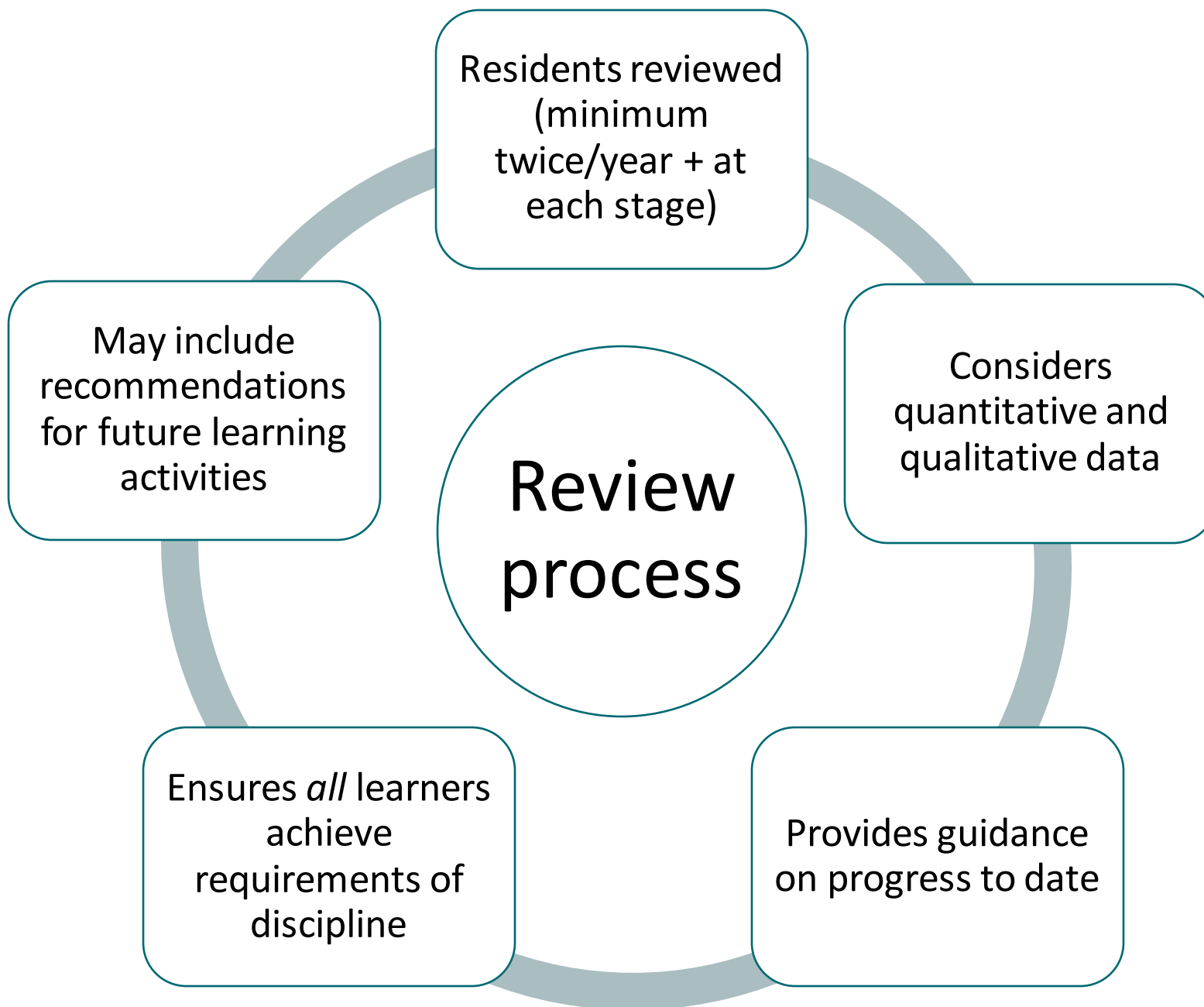




# Special Pandemic Considerations

- Particularly important to continue having regular reviews of resident progress during this time of uncertainty for residents to provide guidance
- When using virtual platforms, ensure are using “enterprise” versions endorsed by your University to maintain security of learners’ assessment data
- Will need to balance flexibility vs ensuring competence
  - It is ok to defer certain expectations until opportunities become available again, but delaying progress decisions may be needed in that case







# CC Decisions vs. Recommendations

- Decisions about:
  - Resident EPA achievement
- Recommendations to RPC about:
  - Resident status (e.g., progressing as expected, failure to progress, accelerated, etc.)
  - Resident learning plans
  - Resident progression from one stage to the next
  - Readiness for RCPSC exams
  - Readiness for unsupervised practice

*Guided by a National Competency Framework*  
(comes from Specialty Committee at the Royal College)







# Competence Committee vs RPC?

## DIFFERENTIATING ROLES

### Competence Committee

- Reviews resident portfolios and makes recommendations to the PD and RPC
- Advises on individual learner needs apparent from the assessment process
- Advises on issues of curriculum or assessment in the patterns they see from the data

### Residency Program Committee

- Ratifies resident status recommendations of the competence committee
- Sets individual learning plans
- Sets residency curriculum and improvements
- Responsible for curriculum program review and evaluation



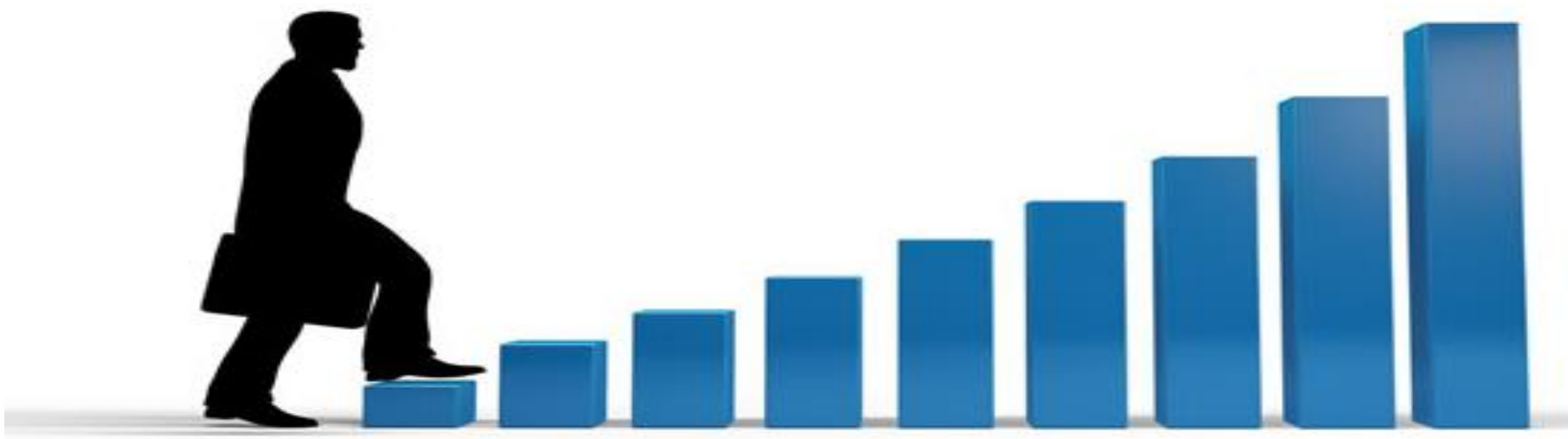


# Developmental Model for CC

Collect enough evidence to PROMOTE a resident

NOT

Enough evidence to FAIL a resident



# “Not there....yet”



I can learn anything I want to.  
When I'm frustrated, I persevere.  
I want to challenge myself.  
When I fail, I learn.  
Tell me I try hard.  
If you succeed, I'm inspired.  
My effort and attitude determine everything.



I'm either good at it, or I'm not.  
When I'm frustrated, I give up.  
I don't like to be challenged.  
When I fail, I'm no good.  
Tell me I'm smart.  
If you succeed, I feel threatened.  
My abilities determine everything.

Created by: Reid Wilson @wayfaringpath ©ⓈⓃ Icon from: thenounproject.com

Dweck, Carol. "What having a “growth mindset” actually means."  
*Harvard Business Review Web Article (2016).*



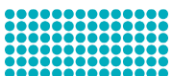


# Preparing for a Meeting



# Considerations for your group

- Provide examples of Terms of reference & Standard Operating Procedures for chair/members
  - Alert chair to upcoming term limits
- Committee Membership
  - Maintain the list of reviewer/resident assignments
  - Ensuring members/advisors have access to assessments





# Sequencing of Meetings

- Minimum twice per year per resident and at stage changes
  - Usually every 3 to 6 months, maybe more
  - Base on your local context
  - May need more frequent with bigger program or resident issues
- Try and align meetings with stage promotions, and after specific summative assessments
- Help ensure advisor meetings are booked prior to the CC meetings
- Help ensure RPC meetings are timed shortly after CC meetings
- Set a draft agenda for residents due for review





# Align meeting calendar with Curriculum Map

	Block 1	Block 2	Block 3	Block 4	Block 5	Block 6	Block 7	Block 8	Block 9	Block 10	Block 11	Block 12	Block 13
<b>PGY1</b>	PGY1 Exam		QR CCC	OSCE CRM Exam	CRM Exam	DR CCC		Pulse 360 Survey		PGY1 Interim Exam		DR CCC	
<b>PGY2</b>					Oral Exams	DR CCC			Oral Exams ACLS	DR CCC			
<b>PGY3</b>			DR CCC		Oral Exams				Oral Exams ACLS	DR CCC			Pulse 360 Survey
<b>PGY4</b>			DR CCC		Oral Exams				Oral Exams		Royal College Sims PGY4 Exam	DR CCC	
<b>PGY5</b>			QR CCC		Oral Exams	DR CCC			Oral Exams	QR		DR CCC	

DR=Detailed Review

QR=Quick Review





# Collating and Presenting Data

- Dashboards / Portfolios
  - Develop familiarity with the abilities / limitations of your portfolio platform
  - Some platforms will create the summary reports you need
  - For others you may need to summarize assessment data for members
- Saves valuable time for review process
- NB: ensure security/privacy settings in place!





# Faculty Development

- Maintain a shared folder of resources
- Provide opportunity to incorporate as standing agenda item within CC meetings
  - EPA Education
  - Review a Coaching Model
    - RX-OCR coaching in the moment
      - Royal College online modules
    - Coaching over time model
  - Paper for discussion
    - Cognitive Biases
    - Summative vs Formative Assessment
    - Problematic data
- Suggest Review of Royal College Mock CC Data cases
- Circulate Faculty Development opportunities





# During the Meeting



# On your marks, get set, go!

- Arrive to the room early
  - Presentation, data, etc ready to be displayed
- Meeting materials
- Being the first person there & prepared
  - ↑ comfortability ↓ stress
  - Helps set the tone and hopefully puts others at ease



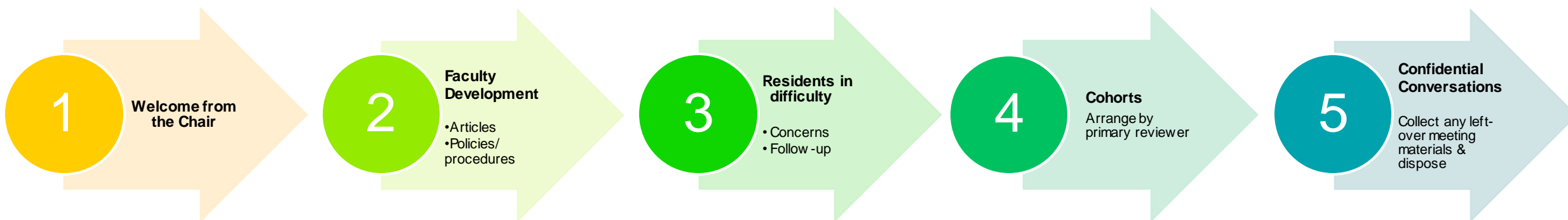
# The Agenda – version 564.2



- Last minute additions
  - Inform committee chair & members before the “official” start
- Changes to the order of items
  - Certain members need to leave early/arrive late

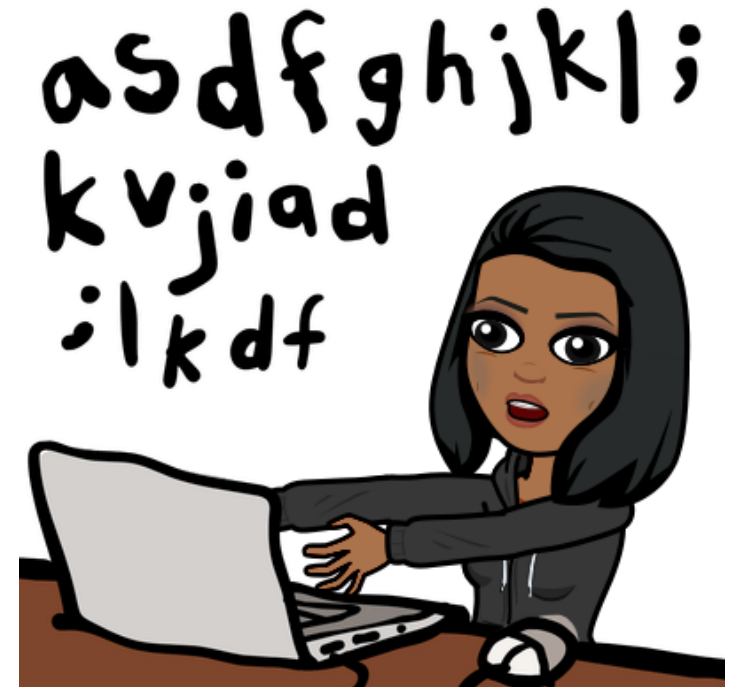


# What do we actually talk about?



# Minutes & Reports & Records, oh my!

- Meeting minutes/reports/records are displayed in real-time
- What do I record?
  - Recommendations – green, yellow, red
    - Justifications, especially for yellow/red
  - Suggestions – follow-up, resources, redos
  - Non-resident issues (e.g. rotation issue)
  - Ask for clarification
- What don't I record?
  - Conversations/discussions





# Minutes & Reports & Records, oh my!

Resident	Cohort	September 2019	December 2019
Resident 1	2019		
Resident 2	2019		
Resident 3	2019		
Resident 4	2019		
Resident 5	2019		
Resident 6	2019		
Resident 7	2019		
Resident 8	2019	Needs to re-write exam	Failed exam, rotation partial pass, referred to Wellness office
Resident 9	2019	Needs to re-write exam	Exam re-write = 85%
Resident 10	2019		

Follow-up for next meeting

Follow-up for next meeting, Keep on Agenda

Follow-up for next meeting

not reviewed  
ILP  
concerns  
progress as expected



# On the Brightside...

- Opportunity to talk with CC members
  - Getting to know faculty
  - Ask questions and follow-up
- Learn more about the program/residents
  - More attuned to residents in difficulty
- Offer your own concerns & insights
- Satisfaction of a job well-done 😊

Before meeting...



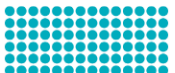
After meeting...







# After the CC Meeting



# Outcomes of the meeting

- Draft meeting minutes/reports which outline:
- A decision for each resident that was reviewed
  - EPA achievement
- Recommendations for each resident that was reviewed
  - Status of the resident
    - E.g. "progressing as expected"
  - Action for each resident
    - E.g. "promote learner to Core", "Ready for exam"...





# Report Management

- Different types of meeting documentation:
  - Meeting minutes, resident status report
- Determine:
  - **Where** these documents will be kept
  - **Who** will have access to these documents
  - NB: Maintain security/privacy

**Resident Name:** John Doe

**Primary Reviewer:** Dr. Smith

**Reporting Period:** 2018-01-05 to 2018-04-27

**Current Stage:** Core

**Status:** Progressing as expected – promote to TTP

**Actions from last report:**

No action required

Lacking some multi-trauma and advanced airway experiences

**Comments from last report:**

Demonstrating appropriate progression across EPAs, other assessment data is congruent. Lacking some data on experiences with multi-trauma and advanced airways – will likely come with time.

**Comments from current report:**

Has acquired additional experience with and demonstrated strong performance on multi-trauma and advanced airway cases (mix of clinical and SIM). Continues to demonstrate progress on all EPAs – all EPAs in Core achieved. Strong knowledge demonstrated on in-training exam scores. SIM OSCE assessment congruent with EPA observations. Ready to progress to TTP.

**Actions from current report:**

Recommend to RPC that John Doe be promoted to TTP

Academic coach to meet with John Doe to inform of CC decision and to develop learning plan for TTP

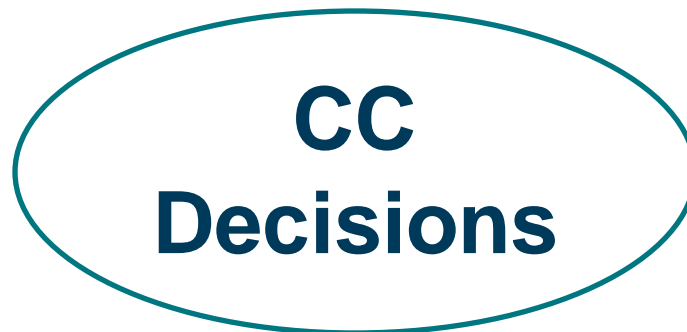
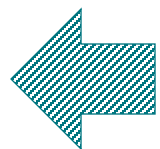




# Communication



PGME



Resident

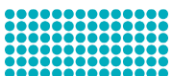


RPC



# Communication to RPC

- Recommendations made by the CC should be ratified by the RPC
  - Timing of the CCs should closely precede RPC meetings
  - What information does the RPC want to hear about?
    - From all residents?
    - From those residents with a change in learner status / action?
  - What documentation should be presented to the RPC?



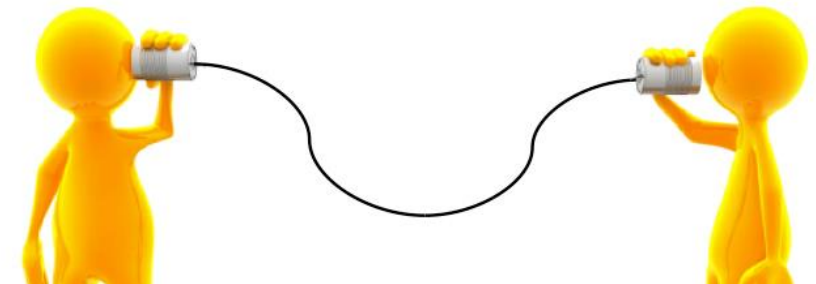


<b>Learner Status</b>	<b>Learner - Resident Action</b>	<b>PG Dean approval / awareness</b>
Progressing As Expected	Monitor Learner - Resident	Not required
	Modify Learning Plan – Suggested Focus on EPA/IM observations or RTE	Not required
	Promote Learner - Resident – to Stage 2	Not required
	Promote Learner - Resident – to Stage 3	Not required
	Promote Learner - Resident – RC Exam Eligible*	Awareness
	Promote Learner - Resident – to Stage 4	Not required
	Promote Learner - Resident – RC Certification Eligible	Required*
Not Progressing As Expected	Modify Learning Plan – Additional Focus on EPA/IM observations or RTE	Not required
	Formal Remediation	Required



# Communication to residents and PGME

- What documentation does PGME want?
- Who will communicate with residents? With PGME?
  - PD
  - PA
  - Academic advisor
- Does the RPC need to ratify before resident is informed?



# Individualized Learning Plans

- Should be developed for each resident
  - Who's responsibility:
    - CC, PD, AA, RPC
- For the PA, this may involve
  - Rotation/scheduling adjustment
  - Setting up extra meetings
  - Liaising with PGME



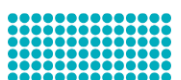




# Making your time Count

- Acknowledge that this will take time
- Negotiate protected time for faculty and PA
- Refine the process over time (CQI)
- Celebrate the New & Awesome!

# Questions?



# Thank You!

[cbd@royalcollege.ca](mailto:cbd@royalcollege.ca)

\*\*Webinar recording/slides will be available on the Royal College Website within approx 2 weeks

