Competency Based Medical Education: Moving Forward

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Program Administrator Retreat
Objectives

• Identify the role of programmatic assessment in residency training
• Recognize the key role of the PA in programmatic assessment in CBME
CBD Competence Continuum

1. Entry to residency
2. Transition to discipline (orientation and assessment)
3. Foundations of discipline
4. Core of discipline
5. Transition to practice
6. Continuing professional development (maintenance of competence and advanced expertise)
7. Transition out of professional practice

* Competence by Design (CBD)
* Milestones at each stage describe terminal competencies
Entrustable Professional Activities (EPAs)

Units of professional practice

A way of operationalizing competence
Entrustable Professional Activities (EPAs)

Supervisors should ask:

Based on what I saw today, could I delegate this task to this resident in the future?

Trust must be earned, often by performing the activity with the supervisor present.
Milestones

Observable markers of an individual’s ability along a developmental continuum

The expected ability at a particular stage of expertise

A way of operationalizing a CBME curriculum
Refresh
CBME

More use of...
  Direct observation
  Work-based assessment
  Tailored, deliberate curriculum planning
  Simulation
  Portfolios

Feedback….focuses on milestones and/or EPAs
CBME Model of Training

Preceptor assessments
Competence Committee
Learning trajectory

PGY 1
PGY 2
PGY 3
PGY 4
PGY 4
PGY 4

TTD
FOUNDATIONS
CORE
TTP
Programmatic Assessment

From assessment tools to a system

Mapped to outcomes (EPAs)

Multiple sources of information for each EPA

Builds a “picture” of a resident over time
Challenges

• Programmatic assessment incorporates a variety of assessment tools and methods
• Practical considerations for data collection, management, and preservation
  – Faculty, learner, admin development (skills)
  – Assessment burden (time)
  – Technology (data management)
Clinical Supervisors

• Complete assessments – feedback *for* learning
• Resident, faculty, PA initiated
• Scheduled or spontaneous
• Multiple sources, multiple supervisors
• Frequency, settings, complexity, etc – specialty committees, programs establish
Assessment tools

- In current use – ITERS at end of rotation, multisource feedback, STACERS, etc
- Moving forward – need for other tools
  - e.g. microCEX, field notes, O-scores, 360s
  - Retreat Nov 4th develop a TTD “common” tool
- Electronic, brief, accessible, simple to complete
- Some programs may keep end-of “rotation” or “required learning experience” ITERS
Field Notes

Promote formative feedback

May be collated for assessment decisions

Quick, easy to use
Ottawa Surgical Competency Operating Room Evaluation (O-Score)  
Gofton et. al.

Intuitive 5-point scale:

1 – “I had to do”

2 – “I had to talk them through”

3 – “I had to prompt them from time to time”

4 – “I needed to be in the room just in case”

5 – “I did not need to be there”
Technology

- [https://www.youtube.com/watch?v=X4aulCqs_Qk&feature=youtu.be](https://www.youtube.com/watch?v=X4aulCqs_Qk&feature=youtu.be)
- Royal College MainPort ePortfolio prototype (90 minute video intro)
- Field testing currently, go live? July 2017
- All specialists already have access, easy link (not available CCFP)
- MOU/MNDAs

- [https://one45.schulich.uwo.ca/webeval/](https://one45.schulich.uwo.ca/webeval/)
- Schulich One45
- Supported by Schulich; central Technology Specialist/Data Analyst
- Scheduling, vacations, mobile app, push technology in real time

- Goal: to provide levels of data and a visual summary
- N.B. programs and departments use other software platforms – would be nice if......
Competence Committees

- Collate and interpret data, meet quarterly at a minimum

- Consensus decision-making about learner progress
  - Ready to progress, failing to progress, ready for certification exams, individual learning plan development, etc
  - Reports to RTC

- Based on ePortfolio evidence; synthesis
Program Administrators

• Scheduling with PD/CBME lead
  – based on stage and EPAs
  – continue 4 week blocks
  – clinical experiences in the context of staged or developmental learning

• Assessments
  – Scheduling; completion; quality
  – Access to ePortfolio in advance of CC meetings
  – Flagging system
Schulich CBME

- https://www.schulich.uwo.ca/about/competencybased_medical_education/index.html

- Working together, sharing lessons learned