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2016

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Recommended Citation

Lewis, Kadriye O.; Hathaway, Susan B.; Knapp, J F.; Bratcher, Denise; and Blowey, Douglas, "Investigating Program Directors' Milestones Assessment Practices in Graduate Medical Education: Preliminary Results" (2016). *Posters*. 96.

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INVESTIGATING PROGRAM DIRECTORS' MILESTONES ASSESSMENT PRACTICES IN GRADUATE MEDICAL EDUCATION: PRELIMINARY RESULTS

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BACKGROUND

ACGME's Milestones assessment requirement has placed new demands on Program Directors (PDs), especially those who may not have sufficient working knowledge of assessment theories that would allow them to design useful and appropriate milestones assessments for their training curriculum.

PURPOSE

To investigate the current assessment practices as well as to identify the needs and challenges of the PDs in implementing Milestones for assessment in Graduate Medical Education at Children's Mercy Kansas City.

METHODS

This collective case study used dialogic conversation as an inquiry method to investigate the milestone assessment issues within the residency/fellowship programs in our institution.

- Data collection began January 2015 and is still in progress (7 out of 21 programs completed).
- Structured meetings with planned agendas (a pre-formatted template to itemize program current practices, needs, difficulties/challenges in the Milestone assessment).
- Three coders developed thematic content/cross-case analysis to increase validity (Green & Thorogood, 2005; Patton, 2002; Riessman, 2008).
- A cross-case thematic structure was built to compare coding and themes for each program, and then built up another cross-thematic matrix to identify commonalities across programs for contextual validity (Miles & Huberman, 1994).

RESULTS

All programs are using multiple methods to teach the core competencies. Similar assessment/evaluation tools are consistently being used or needed across programs (see Table 1). Both Patient Care and System Based Practice listed the high demand needs for tool development in the areas of peer, discreet task, conference assessment, non-rotation faculty assessment, and scholarly product review. The Medical Knowledge competency had only one category of common need, which is the journal club evaluation. Peer assessment and alignment improvement for a 360° evaluation were apparently the primary need when we escalated one level up to inspect the most common needs reported by programs.

PDs reported a variation of evaluation challenges that fell into five domains (see Table 2). The most common challenges were related to time management and difficulty in determining and interpreting the Milestones numbers and levels.

Table 1: Cross-Thematic Matrix: Common Themes in Assessment Needs across 7 Programs

Competencies	Common Themes
Patient Care (PC)	<ul style="list-style-type: none"> ✓ Alignment Improvement for Rotation Evaluation ✓ Alignment Improvement for 360 Degree Evaluation ✓ Peer Assessment ✓ Rotation Evaluation
Medical Knowledge (MK)	<ul style="list-style-type: none"> ✓ Journal Club Evaluation (Research Training Evaluation)
Systems -Based Practice (SBP)	<ul style="list-style-type: none"> ✓ Alignment Improvement for 360 Degree Evaluation ✓ Expert M & M Evaluation (Conference Evaluation) ✓ On Demand Evaluation (Discreet Task Assessment) ✓ QI Mentor Evaluation (Scholarly Product Review)
Practice -Based Learning and Improvement (PBLI)	<ul style="list-style-type: none"> ✓ Journal Club Evaluation (Research Training Evaluation) ✓ QI Mentor Evaluation (Scholarly Product Review)
Professionalism (PROF)	<ul style="list-style-type: none"> ✓ Alignment Improvement for 360 Degree Evaluation ✓ Peer Assessment
Interpersonal Communication Skills (ICS)	<ul style="list-style-type: none"> ✓ On Demand Evaluation (Discreet Task Assessment) ✓ Peer Assessment ✓ Semi-annual Assessment (Non-rotation Faculty Assessment)

RESULTS

Table 2: Program Directors' Challenges in Seven Programs

Program Directors' Challenges	P1	P2	P3	P4	P5	P6	P7
Frequency, duration and intensity							
• Too many evaluations producing assessment and evaluation fatigue	x		x				
• Time management/Time distribution per evaluation	x		x	x			x
Engagement							
• Inadequate participation in evaluation	x						
• Difficulty in obtaining written feedback from faculty	x						
• Incomplete understanding of the content of a meaningful assessment	x						
Training and support							
• Variation of faculty training on assessment and feedback	x						
• Difficulty in determining and interpreting the Milestones numbers and levels				x	x	x	
• Tracking difficulties of evaluation in the resident management system	x						x
• Measurement errors in scoring and mismatch with the narratives						x	x
• Difficult in interpreting the verbiage with multi-descriptors				x		x	
• Faculty difficulty in assessing beyond direct supervision experiences		x					
• Conflicting faculty interpretation of the anchors in the evaluation							x
Clarity/Alignment							
• Unclear descriptions that are not applicable to fellows				x			
• Matching the milestone descriptors with the labels for sub-competencies				x			
• Trying to combine concepts in evaluations that do not fit together				x			
• Evaluating procedural skills that are not reflected in the Milestones							x
• Difficulty mapping sub-competencies with program's assessments							x
Clinical Competency Committee (CCC) function							
• Faculty coming to CCC meeting unprepared				x			
• Faculty understanding the roles and functions of a CCC		x					

CONCLUSION

This initial data analysis provides perspectives regarding PDs' current practices/needs/challenges with Milestone assessment and identifies similarities/differences between programs. In addition to the cross- thematic analysis, it will be useful to apply the Generalized Linear Mixed Model to further examine how the Milestones assessment affects fellows' performance levels.

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