Getting Beyond a Pleasure to Work With: An Evaluation Writing Workshop
Presenters

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An Audience Poll

How many of you have received formal training in writing evaluations?

How many of you find it challenging to write resident evaluations?

How many of you can describe how these evaluations are used by the residency program?
Goals and Objectives

✓ Optimize written training feedback
✓ Identify Barriers to effective written evaluations
✓ Describe how written evaluations are used in our residency program
✓ Practice writing Milestones relevant evaluations
Barriers to Giving Effective Feedback
Barriers to Giving Effective Feedback

Fear of upsetting the trainee

Fear that negative feedback will make the trainee defensive

Fear of negative repercussions

Having general feelings and not specific examples
  ◦ Hesitation to “fail” a trainee

Not knowing if you are giving effective feedback

1. Hesketh, Med Teach, 2002
2. Park, Teach Learn Med, 2016
Barriers to Written Evaluations

1. They take time, so you wait until you have time.
2. You wait and then you can’t remember.
3. You want to write something great, so you wait...see #2.
4. You were not happy with a resident’s performance and struggle with how to write it...see #5
5. It’s awkward...
6. Etc, etc
Examples of how Evaluations may be Used

Red flags-for early intervention
Semi-Annual review
Letters of Recommendation
Clinical Competency Committee data
Used to inform the Milestones which are reported to the ACGME every 6 months
Internal Medicine Milestones

6 CORE COMPETENCIES
(Patient Care, Medical Knowledge, System-based Practice, Problem-based Learning, Professionalism, Interpersonal and Communication Skills)

22 SUBCOMPETENCIES
(5PC, 2MK, 4SBP, 4PBL, 4PROF, 3ICS)

REPORTING MILESTONES
### Table 1. Comparison of Traditional and Competency-Based Educational Models*

<table>
<thead>
<tr>
<th>Variable</th>
<th>Educational Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal of educational encounter</td>
<td></td>
</tr>
<tr>
<td>Traditional</td>
<td>Acquisition of knowledge</td>
</tr>
<tr>
<td>Competency-Based</td>
<td>Application of knowledge</td>
</tr>
<tr>
<td>Responsible for driving the educational process</td>
<td>Teacher</td>
</tr>
<tr>
<td></td>
<td>Learner</td>
</tr>
<tr>
<td>Responsible for content</td>
<td></td>
</tr>
<tr>
<td>Traditional</td>
<td>Teacher</td>
</tr>
<tr>
<td>Competency-Based</td>
<td>Student and teacher</td>
</tr>
<tr>
<td>Timing of assessment</td>
<td></td>
</tr>
<tr>
<td>Traditional</td>
<td>Emphasis on summative (high-stakes final evaluation)</td>
</tr>
<tr>
<td>Competency-Based</td>
<td>Emphasis on formative (ongoing feedback facilitating improvement)</td>
</tr>
<tr>
<td>Typical assessment tool</td>
<td></td>
</tr>
<tr>
<td>Traditional</td>
<td>Indirect, proxy assessment</td>
</tr>
<tr>
<td>Competency-Based</td>
<td>Direct assessment, with observation of real tasks of profession</td>
</tr>
<tr>
<td>Evaluation standards</td>
<td></td>
</tr>
<tr>
<td>Traditional</td>
<td>Relative to peers (norm-referenced)</td>
</tr>
<tr>
<td>Competency-Based</td>
<td>Relative to objective measures (criterion-referenced)</td>
</tr>
<tr>
<td>Program completion</td>
<td></td>
</tr>
<tr>
<td>Traditional</td>
<td>Fixed time</td>
</tr>
<tr>
<td>Competency-Based</td>
<td>Variable time</td>
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</table>

*Weinberger, Ann Int Med, 2010*
Milestones

“In a traditional educational system, the unit of progression is time and it is teacher centered. In a CBET system, the unit of progression is mastery of specific knowledge and skills and is learner-centered.”


Our evaluations tended to be comparison with where we thought trainees should be for that PGY level and how they compared to their PEERS. We are now evaluating trainees based on where we think trainees are on their road to becoming ATTENDINGS in the “real world”.
Using Milestones to improve written evaluations

- Review the ACGME Milestones list
- Identify Milestones which are relevant to what you want to say
- Review the example set in the ACGME Milestones document
- Identify adjectives and adverbs used in the example set, e.g. “basic” vs “complex” or “inconsistently” vs “consistently”
- Use these words in your evaluation
Example 1

“Needs to read more”
Example 1

“Needs to read more”

What does “Needs to read more” actually mean to you?

Most would agree that the trainee has knowledge gaps and needs to work on Medical Knowledge.

Identify Relevant Milestones:

Medical Knowledge 1: Demonstrates clinical knowledge

Medical Knowledge 2: Demonstrates knowledge of diagnostic testing and procedures
Review the Milestones example set
Find adjectives, adverbs...

### Medical Knowledge 1

<table>
<thead>
<tr>
<th>Critical Deficiencies</th>
<th>Ready for unsupervised practice</th>
<th>Aspirational</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lacks the scientific, socioeconomic or behavioral knowledge required to provide patient care</td>
<td>Possesses the scientific, socioeconomic and behavioral knowledge required to provide care for common medical conditions and basic preventive care</td>
<td>Possesses the scientific, socioeconomic and behavioral knowledge required to provide care for complex medical conditions and comprehensive preventive care</td>
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Comments:
Medical Knowledge 1

### Milestones language: adjectives, adverbs...

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Medical Knowledge 2

### 7. Knowledge of diagnostic testing and procedures. (MK2)

<table>
<thead>
<tr>
<th>Critical Deficiencies</th>
<th>Inconsistently interprets basic diagnostic tests accurately</th>
<th>Consistently interprets basic diagnostic tests accurately</th>
<th>Interprets complex diagnostic tests accurately</th>
<th>Anticipates and accounts for pitfalls and biases when interpreting diagnostic tests and procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lacks foundational knowledge to apply diagnostic testing and procedures to patient care</td>
<td>Does not understand the concepts of pre-test probability and test performance characteristics</td>
<td>Needs assistance to understand the concepts of pre-test probability and test performance characteristics</td>
<td>Understands the concepts of pre-test probability and test performance characteristics</td>
<td>Pursues knowledge of new and emerging diagnostic tests and procedures</td>
</tr>
<tr>
<td>Minimally understands the rationale and risks associated with common procedures</td>
<td>Fully understands the rationale and risks associated with common procedures</td>
<td>Teaches the rationale and risks associated with common procedures and anticipates potential complications when performing procedures</td>
<td></td>
<td></td>
</tr>
</tbody>
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Comments:
# Medical Knowledge 2

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Comments:
Example 1—using Milestones language

An Early Learner

“Needs to read more”

“Needs to read more about the behavioral aspects of common medical conditions”

“Needs to read more about the behavioral aspects of common medical conditions, in particular, alcohol withdrawal”

“Needs to read more about the behavioral aspects of common medical conditions, in particular, alcoholism, and comprehensive treatment strategies”
Example 1-using Milestones language
A More Advanced Learner

“Needs to read more”

“Needs to read more about management of medically complex patients in alcohol withdrawal”

“Needs to read more about the comprehensive management of medically complex patients in alcohol withdrawal”

“Needs to read more about the comprehensive, evidence based management of medically complex patients in alcohol withdrawal especially how to consistently and accurately adjust medications in renal failure”
Example 2

“A pleasure to work with”

What does a pleasure to work with mean to you?
Example 2

“A pleasure to work with”

*What does a pleasure to work with mean to you?*

It could mean that the trainee works effectively with the team to provide good care, which reduces the teaching attending’s workload and level of stress.

It could mean that the trainee treats everyone professionally and respectfully, to create a more positive working environment.

It could mean that the trainee communicates effectively so that everyone is “on the same page”.
Example 2

“A pleasure to work with”

Identify Relevant Milestones:

**Systems Based Practice 1:** Works effectively within an interprofessional team (e.g. peers, consultants, nursing, ancillary professionals, and support personnel).

**Professionalism 1:** Has professional and respectful interactions with patients, caregivers, and members of the interprofessional team (e.g. peers, consultants, nursing, ancillary professionals, and support personnel).

**Interpersonal and Communication Skills 2:** Communicates effectively in interprofessional teams (e.g. peers, consultants, nursing, ancillary professionals, and support personnel).
# Systems Based Practice 1

<table>
<thead>
<tr>
<th>Critical Deficiencies</th>
<th>Identifies roles of other team members but does not recognize how/when to utilize them as resources</th>
<th>Understands the roles and responsibilities of all team members but uses them ineffectively</th>
<th>Ready for unsupervised practice</th>
<th>Aspirational</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refuses to recognize the contributions of other <strong>Interprofessional</strong> team members</td>
<td>Frequently requires reminders from team to complete physician responsibilities (e.g. talk to family, enter orders)</td>
<td>Participates in team discussions when required but does not actively seek input from other team members</td>
<td><strong>Actively</strong> engages in team meetings and <strong>collaborative decision-making</strong></td>
<td>Integrates <strong>all</strong> members of the team into the care of patients, such that each is able to maximize their skills in the care of the patient</td>
</tr>
</tbody>
</table>

**Comments:**

Milestones language: **adjectives, adverbs**...
### Professionalism 1

**16. Has professional and respectful interactions with patients, caregivers and members of the interprofessional team (e.g. peers, consultants, nursing, ancillary professionals and support personnel). (PROF1)**

<table>
<thead>
<tr>
<th>Critical deficiencies</th>
<th>Inconsistently demonstrates empathy, compassion and respect for patients and caregivers</th>
<th>Consistently respectful in interactions with patients, caregivers and members of the interprofessional team, even in challenging situations</th>
<th>Ready for unsupervised practice</th>
<th>Aspirational</th>
</tr>
</thead>
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<tr>
<td>Lacks empathy and compassion for patients and caregivers</td>
<td>Disrespectful in interactions with patients, caregivers and members of the interprofessional team</td>
<td>Demonstrates empathy, compassion and respect to patients and caregivers in all situations</td>
<td>Role models compassion, empathy and respect for patients and caregivers</td>
<td></td>
</tr>
<tr>
<td>Sacrifices patient needs in favor of own self-interest</td>
<td>Inconsistently demonstrates responsiveness to patients’ and caregivers’ needs in an appropriate fashion</td>
<td>Is available and responsive to needs and concerns of patients, caregivers and members of the interprofessional team to ensure safe and effective care</td>
<td>Anticipates, advocates for, and proactively works to meet the needs of patients and caregivers</td>
<td></td>
</tr>
<tr>
<td>Blatantly disregards respect for patient privacy and autonomy</td>
<td>Inconsistently considers patient privacy and autonomy</td>
<td>Emphasizes patient privacy and autonomy in all interactions</td>
<td>Demonstrates a responsiveness to patient needs that supersedes self-interest</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Positively acknowledges input of members of the interprofessional team and incorporates that input into plan of care as appropriate</td>
<td>Fosters collegiality that promotes a high-functioning interprofessional team</td>
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<td></td>
<td></td>
<td></td>
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**Milestones language: adjectives, adverbs...**
## Interprofessional and Communications Skills 2

### Milestones language: adjectives, adverbs...
Example 2—using Milestones

Professionalism 1

“A pleasure to work with”—this resident communicates effectively to ensure everyone is “on the same page”

“Consistently available to members of your team”

“Consistently available to your interns, students and nursing team”

“Consistently available to your interns, students and nursing team and coordinated communication effectively during complex situation”

“Consistently available to your interns, students and nursing team and coordinated communication effectively and respectfully during a complex situation with the family of a dying patient awaiting terminal extubation”
Writing Exercise-small group

As a group, choose one of the evaluation comments on the next slide.

Identify relevant Milestones

Rewrite the comment, using the Milestones language as a guide.

Include specific skills, activities or situations. Be specific, focus on things directly observed.

Share with your group. Ask the group members for feedback on your rewrite.

After 15 minutes, each group will be asked to share their best examples.
Evaluation comments

1. “A pleasure to work with”
2. “Good fund of knowledge”
3. “Needs to read more”
4. “Good team player”
5. “Compassionate”

Choose one comment, identify relevant Milestones, then rewrite. Include specific observed skills or situations. Apply relevant adverbs, adjectives and nouns.

Share with your group. Ask the group members for feedback on your rewrite.
Group Discussion

Please tell us which evaluation your group selected and share your rewrites.

What did you get out of this exercise?
Additional Take Home Tips

Use the Milestones for language to describe strengths and areas for improvement

More is not always more

Think about specific situations/behaviors/skills

One specific example can be enough

If helpful, write in the second person, “You did…”

Do them promptly. Delaying reduces accuracy.

Park, Teach Learn Med, 2016
Summary

Your written feedback is essential for the learner to progress and for the program to assess development towards becoming an independent practitioner.

Writing effective evaluations is challenging; there are multiple barriers.

By using the Milestones, you can write more meaningful and relevant evaluations.