

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



Traditional vs Competency Based Education and Training (CBET)

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

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



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.”

Holmboe, The Milestones Guidebook,
Version 2016

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



Medical Knowledge 1

6. Clinical knowledge (MK1)				
Critical Deficiencies			Ready for unsupervised practice	Aspirational
Lacks the scientific, socioeconomic or behavioral knowledge required to provide patient care	Possesses insufficient scientific, socioeconomic and behavioral knowledge required to provide care for common medical conditions and basic preventive care	Possesses the scientific, socioeconomic and behavioral knowledge required to provide care for common medical conditions and basic preventive care	Possesses the scientific, socioeconomic and behavioral knowledge required to provide care for complex medical conditions and comprehensive preventive care	Possesses the scientific, socioeconomic and behavioral knowledge required to successfully diagnose and treat medically uncommon, ambiguous and complex conditions
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Comments:				

Review the Milestones example set
Find adjectives, adverbs...

Medical Knowledge 1

6. Clinical knowledge (MK1)				
Critical Deficiencies			Ready for unsupervised practice	Aspirational
Lacks the scientific , socioeconomic or behavioral knowledge required to provide patient care	Possesses insufficient scientific , socioeconomic and behavioral knowledge required to provide care for common medical conditions and basic preventive care	Possesses the scientific , socioeconomic and behavioral knowledge required to provide care for common medical conditions and basic preventive care	Possesses the scientific , socioeconomic and behavioral knowledge required to provide care for complex medical conditions and comprehensive preventive care	Possesses the scientific , socioeconomic and behavioral knowledge required to successfully diagnose and treat medically uncommon , ambiguous and complex conditions
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

Milestones language: **adjectives**, **adverbs**...

Medical Knowledge 2

7. Knowledge of diagnostic testing and procedures. (MK2)				
Critical Deficiencies			Ready for unsupervised practice	Aspirational
Lacks foundational knowledge to apply diagnostic testing and procedures to patient care	<p>Inconsistently interprets basic diagnostic tests accurately</p> <p>Does not understand the concepts of pre-test probability and test performance characteristics</p> <p>Minimally understands the rationale and risks associated with common procedures</p>	<p>Consistently interprets basic diagnostic tests accurately</p> <p>Needs assistance to understand the concepts of pre-test probability and test performance characteristics</p> <p>Fully understands the rationale and risks associated with common procedures</p>	<p>Interprets complex diagnostic tests accurately</p> <p>Understands the concepts of pre-test probability and test performance characteristics</p> <p>Teaches the rationale and risks associated with common procedures and anticipates potential complications when performing procedures</p>	<p>Anticipates and accounts for pitfalls and biases when interpreting diagnostic tests and procedures</p> <p>Pursues knowledge of new and emerging diagnostic tests and procedures</p>
<div style="display: flex; justify-content: space-between; border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <p>Comments:</p>				

Repeat with the next Milestone
Find adjectives, adverbs

Medical Knowledge 2

7. Knowledge of diagnostic testing and procedures. (MK2)				
Critical Deficiencies			Ready for unsupervised practice	Aspirational
Lacks foundational knowledge to apply diagnostic testing and procedures to patient care	<p>Inconsistently interprets basic diagnostic tests accurately</p> <p>Does not understand the concepts of pre-test probability and test performance characteristics</p> <p>Minimally understands the rationale and risks associated with common procedures</p>	<p>Consistently interprets basic diagnostic tests accurately</p> <p>Needs assistance to understand the concepts of pre-test probability and test performance characteristics</p> <p>Fully understands the rationale and risks associated with common procedures</p>	<p>Interprets complex diagnostic tests accurately</p> <p>Understands the concepts of pre-test probability and test performance characteristics</p> <p>Teaches the rationale and risks associated with common procedures and anticipates potential complications when performing procedures</p>	<p>Anticipates and accounts for pitfalls and biases when interpreting diagnostic tests and procedures</p> <p>Pursues knowledge of new and emerging diagnostic tests and procedures</p>
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Milestones language: **adjectives**, **adverbs**



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

8. Works effectively within an interprofessional team (e.g. peers, consultants, nursing, ancillary professionals and other support personnel). (SBP1)				
Critical Deficiencies			Ready for unsupervised practice	Aspirational
Refuses to recognize the contributions of other interprofessional team members	Identifies roles of other team members but does not recognize how/when to utilize them as resources	Understands the roles and responsibilities of all team members but uses them ineffectively	Understands the roles and responsibilities of and effectively partners with, all members of the team	Integrates all members of the team into the care of patients, such that each is able to maximize their skills in the care of the patient
Frustrates team members with inefficiency and errors	Frequently requires reminders from team to complete physician responsibilities (e.g. talk to family, enter orders)	Participates in team discussions when required but does not actively seek input from other team members	Actively engages in team meetings and collaborative decision-making	Efficiently coordinates activities of other team members to optimize care
				Viewed by other team members as a leader in the delivery of high quality care
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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)				
Critical Deficiencies			Ready for unsupervised practice	Aspirational
Lacks empathy and compassion for patients and caregivers	Inconsistently demonstrates empathy, compassion and respect for patients and caregivers	Consistently respectful in interactions with patients, caregivers and members of the interprofessional team, even in challenging situations	Demonstrates empathy, compassion and respect to patients and caregivers in all situations	Role models compassion, empathy and respect for patients and caregivers
Disrespectful in interactions with patients, caregivers and members of the interprofessional team	Inconsistently demonstrates responsiveness to patients' and caregivers' needs in an appropriate fashion	Is available and responsive to needs and concerns of patients, caregivers and members of the interprofessional team to ensure safe and effective care	Anticipates, advocates for, and proactively works to meet the needs of patients and caregivers	Role models appropriate anticipation and advocacy for patient and caregiver needs
Sacrifices patient needs in favor of own self-interest	Inconsistently considers patient privacy and autonomy	Emphasizes patient privacy and autonomy in all interactions	Demonstrates a responsiveness to patient needs that supersedes self-interest	Fosters collegiality that promotes a high-functioning interprofessional team
Blatantly disregards respect for patient privacy and autonomy			Positively acknowledges input of members of the interprofessional team and incorporates that input into plan of care as appropriate	Teaches others regarding maintaining patient privacy and respecting patient autonomy
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Comments:				

Milestones language: **adjectives**, **adverbs**...

Interprofessional and Communications Skills 2

21. Communicates effectively in interprofessional teams (e.g. peers, consultants, nursing, ancillary professionals and other support personnel). (ICS2)				
Critical Deficiencies			Ready for unsupervised practice	Aspirational
Utilizes communication strategies that hamper collaboration and teamwork Verbal and/or non-verbal behaviors disrupt effective collaboration with team members	Uses unidirectional communication that fails to utilize the wisdom of the team Resists offers of collaborative input	Inconsistently engages in collaborative communication with appropriate members of the team Inconsistently employs verbal, non-verbal, and written communication strategies that facilitate collaborative care	Consistently and actively engages in collaborative communication with all members of the team Verbal, non-verbal and written communication consistently acts to facilitate collaboration with the team to enhance patient care	Role models and teaches collaborative communication with the team to enhance patient care, even in challenging settings and with conflicting team member opinions
<div style="display: flex; justify-content: space-between; width: 100%;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> Comments:				

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.



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