

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

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# Presenters

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# An Audience Poll

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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?

**Facilitator: ask for a show of hands to answer each question.**

Most faculty have never received training in writing evaluations.

Most faculty find it difficult to write evaluations.

Most faculty don't realize how these evaluations are used and how valuable they can be.

## Goals and Objectives

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- ✓ 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

**Facilitator: G&O may be customized to meet your needs.**

# Barriers to Giving Effective Feedback

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## **Group Discussion**

**Facilitator:** Ask your audience why it is hard for them to do written evaluations.

# Barriers to Giving Effective Feedback

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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

There are many common reasons why it is hard to give feedback. You are not alone.

# Barriers to Written Evaluations

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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

**Facilitator: Normalize the challenges of writing evaluations by reviewing this slide and/or sharing your own challenges.**

## Examples of how Evaluations may be Used

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Red flags-for early intervention

Semi-Annual review

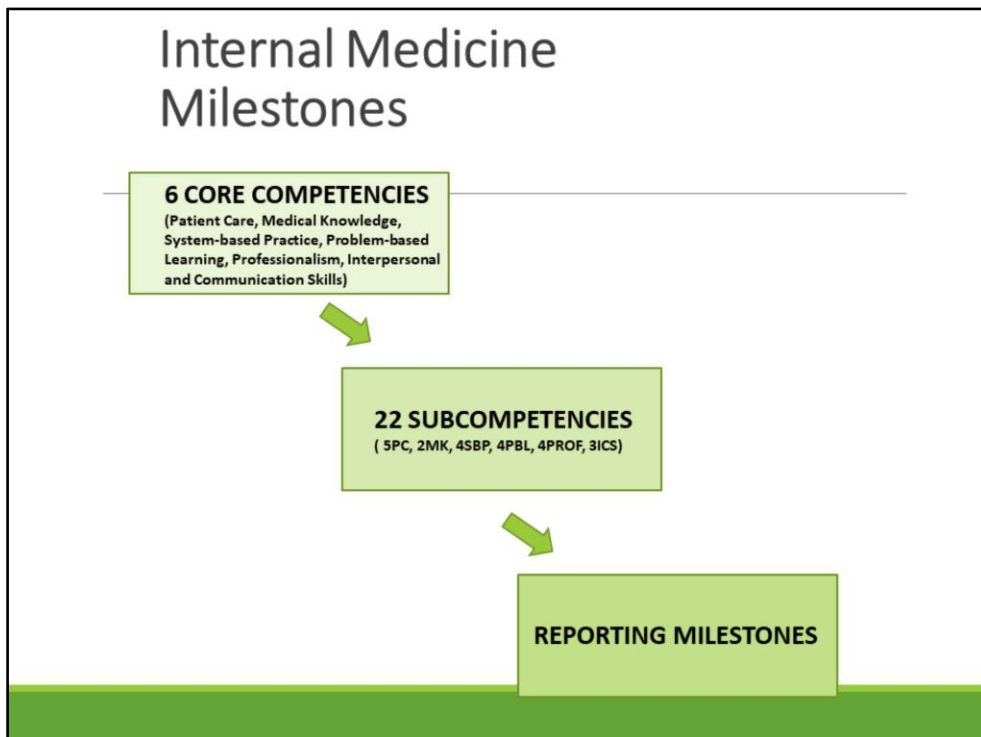
Letters of Recommendation

Clinical Competency Committee data

Used to inform the Milestones which are  
reported to the ACGME every 6 months

**Facilitator: Discuss how evaluations are used in your program. Reinforce the importance of faculty evaluations.**





You know about the Core Competencies. These are further broken down into Subcompetencies, which are mapped to examples of specific activities. For example, the Subcompetency SBP1=Systems Based Practice statement is “Works effectively within an interprofessional team (e.g. peers, consultants, nursing, ancillary professionals and other personnel).” For this Subcompetency, an example of a specific activity is “Transitions patients effectively within and across health delivery systems”

**Facilitator: if your faculty/evaluators are Milestones novices, it may be helpful to hand out the SBP1 page from The Milestones Guidebook so your participants can follow along.**

# 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

Weinberger, Ann Int Med, 2010

**Facilitator: review the differences between Traditional and Competency Based Education and Training.**

# Milestones

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“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”.*

Again, we are looking at where trainees are relative to where they should be when they complete the program. The Milestones are not all inclusive but meant to guide us in ensuring that a trainee becomes a competent physician.

## Using Milestones to improve written evaluations

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- ✓ 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

Now we'll see how we can use the Milestones to improve our written evaluations.

**Facilitator: let participants know that you will demonstrate this technique and they will apply it in a small group exercise.**

# Example 1

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**"Needs to read more"**

We can probably all agree that everyone needs to read more but why and what?

## Example 1

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### **“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

What does “Needs to read more” actually mean? Most would agree that the trainee has knowledge gaps and needs to work on Medical Knowledge. Using the one page ACBME Milestones Guide (which was handed out earlier), the relevant Milestones identified are MK1 and MK2.

## 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...

Please identify all of the adjective and adverbs.

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

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“scientific”, “socioeconomic” “behavioral” “preventive” describe the type of knowledge gaps

“medically uncommon”, “ambiguous” describe a very high level of skill



## 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	Inconsistently interprets basic diagnostic tests accurately  Does not understand the concepts of pre-test probability and test performance characteristics  Minimally understands the rationale and risks associated with common procedures	Consistently interprets basic diagnostic tests accurately  Needs assistance to understand the concepts of pre-test probability and test performance characteristics  Fully understands the rationale and risks associated with common procedures	Interprets complex diagnostic tests accurately  Understands the concepts of pre-test probability and test performance characteristics  Teaches the rationale and risks associated with common procedures and anticipates potential complications when performing procedures	Anticipates and accounts for pitfalls and biases when interpreting diagnostic tests and procedures  Pursues knowledge of new and emerging diagnostic tests and procedures
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

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 interpret 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>Interpret 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> <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"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <p>Comments:</p>				

Milestones language: adjectives, adverbs

Adverbs: “inconsistently” “consistently”, “minimally”, “fully”, “accurately”

Adjectives: “basic”, “complex”, “common”, “potential”, “diagnostic”, “new”, “emerging”

## Example 1-using Milestones language An Early Learner

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### **“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”

“Needs to read more” was rewritten with the addition of Milestones adjectives. This could an early learner.

By adding just a few adjectives and more specific content, this comment becomes richer for both the trainee and the program. The trainee now knows what he/she needs to learn and the program understands that this trainee is probably at an early stage of development in the Milestones and has an example of his/her knowledge gaps.

## Example 1-using Milestones language A More Advanced Learner

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### **“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”

This version could be for a more advanced learner.

Adverbs: “consistently”, “accurately”

Adjectives: “comprehensive”, “complex”

## Example 2

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**"A pleasure to work with"**

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

This phrase has been seen or used by most of you. It was cited in one Pediatrics paper as the most frequently used phrase in trainee evaluations.

**Facilitator: Ask the audience what it means to them. Discuss audience responses.**

## Example 2

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### **"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".

What does "A pleasure to work with" mean?

Here are examples of what this might mean for your faculty.

## Example 2

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### **“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).

Based on the meanings listed on the previous slide, here are several relevant Milestones.

Determine what you are trying to say, then select relevant Milestones.

# 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
Comments:				

Milestones language: adjectives, adverbs...

Adjectives and adverbs have been identified for Systems Based Practice 1

“other”, “all”, “collaborative” could describe the breadth of skill

“frequently”, “ineffectively” “actively”, “effectively”, “efficiently” could describe the skill level.

Remember that unsupervised practice is when the learner is performing at the level of an attending.



# 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
Comments:				

Milestones language: adjectives, adverbs...

Adverbs and adjectives have been identified for Professionalism 1.

Adverbs: "blatantly", "inconsistently", "consistently", "proactively", "positively"

Adjectives: "disrespectful", "appropriate", "respectful", "challenging", "available", "responsive", "safe", "effective", "all", "high-functioning"

## 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> <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"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> Comments:				

Milestones language: adjectives, adverbs...

Adverbs and adjectives identified for Interprofessional and Communication Skills 2

Adverbs: “inconsistently”, “consistently”, “actively”

Adjectives: “verbal”, “non-verbal”, “effective”, “unidirectional”, “collaborative”, “appropriate”, “written”, “all”, “challenging”, “conflicting”

## Example 2-using Milestones Professionalism 1

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"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"

Notice that the original comment was 5 words long, the first rewrite is only 7 words long but much more informative.

Add relevant adverbs and adjectives-you are not limited to the Milestones examples.

Add specific examples of situations or behaviors-the last example is richly informative and demonstrates a high level of skill.

## Writing Exercise-small group

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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.

**Facilitator: Instruct participants to break out into groups of 4-6. Each group should have a facilitator at the table or a “floater” who will check in with each group. Each participant should have the ACGME Milestones list and each group should have at least one copy of The Milestones Guidebook.**

## Evaluation comments

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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.

These are frequently used, we have probably all used them at one time or another. But they are generic, lacking detail and context; they do not help us understand if the trainee is making progress in his/her Milestones.

**Facilitator: check in with each group, to clarify exercise, help select Milestones, etc.**

**Allow about 15 minutes for the exercise.**

## Group Discussion

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

What did you get out of this exercise?

**Facilitator:** Highlight the fact that the revised evaluations took only a few minutes but are substantially better.

**Optional:** *you may wish to read or hand out the examples of well written evaluations which you have previously selected. This demonstrates that effective evaluations are already being done in your program. It may also help if the participants got “stuck”.*

## Additional Take Home Tips

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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

Use the adjectives and adverbs to help identify where the learner is on the road to meet all Milestones successfully.

More is not always more: the evaluation does not need to be lengthy-but as seen in previous example, being more specific, e.g. with adverbs/adjectives or a specific example of what a trainee actually did can add tremendous value.

Try using "You did..." if you find it easier to give verbal feedback.

## Summary

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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

Your assessments of our trainees are vital to our program but we acknowledge that it can be difficult to write evaluations.

We use the Milestones to track the progress of our residents. Similarly, you can apply them to your evaluations.

**Facilitator: Thank your participants and ask for questions. If you are using a pre/post survey, ask participants to complete them and then collect them.**