Using a Systems-Based Approach for the Development and Implementation of EPAs in UME

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Background

- Medical Education is a complex system
- “Systems Thinking” seeks to understand the system as a whole, all its moving parts and its non-linear relationships in order to produce better outcomes
- Core EPA Pilot Institutions will use a Systems-Based Approach using the 5 rules of process design and improvement model1 for the development and implementation of EPAs across UME

Define your System

- Review the Framework
- Map the EPA PCRS framing competencies to your institutional competencies and/or program objectives
- Identify where the curricular elements and assessments related to the EPA are nested within your 4 year program.
- Identify clinical Microsystems (opportunities in clerkships, etc.) for implementation of EPA related training and Workplace-Based Assessment.
- Identify all stakeholders
- Recognize Drivers/Barriers

Pathway

- Review EPA related curriculum and assessment for key components: increasing breadth, complexity, application/integration of multiple competencies, proficiency3
- Develop pre clerkship milestones/benchmarks that should precede the more clinical (3rd and 4th year) milestones described in the EPA manual
- Consider expanding the current two dimensional clinical pre-entrustable/entrustable milestone model to include more levels
- Describe the collection of “evidence” from multiple sources and contexts3
- Use the Critical Functions and Expected Bulleted Pre-Entrustable and Entrustable Behaviors to guide and align the development of assessments and/or the identification of “evidence” needed to help make entrustment decisions
- Align assessments with the construct being evaluated4 - When developing assessment tools or identifying “evidence” aligned with the Critical Functions or Expected behaviors of a Pre-Entrustable/Entrustable learners for a particular EPA, MAP items on the assessment tool or “evidence” to the related competency domains
- Describe how the entrustment decision for a particular EPA will have multiple assessment data points
- Determine the minimum number and mix of assessments (granular/checklist, holistic/global scales, narrative, etc.) at your institution
- Consider a portfolio approach (+Competency Committee).
- Define gateway assessments or progression points (yes, not yet)?
- Describe how your institutions will convene groups to collate formative and gateway assessments into a summative endorsement of the entrustable medical student

Connection

- Institutional engagement
- Student engagement
- Faculty engagement/development
- implement check points and how you will communicate them?
- Communicate the outcomes to the right stakeholders at the right time

Work Activity

- Identify gaps in curriculum and assessment and revise as needed
- Perform a literature search for existing resources
- Develop a tool box of assessment that can be applicable, generalizable (setting/level of training, applicable across settings) and feasible to implement

Improvement

- Develop a curriculum/assessment program that will continue to provide program feedback and quality improvement

References

3. Colbert CY, Danner LF, French JC. Clinical Competency Committees and Assessment: Changing the conversation in Graduate Medical Education. Journal of Graduate Medical Education 2015; Vol. 7, No. 2, pp.162-165