Integrating Faculty Feedback: The Program Director’s Dilemma

CHEST/APCCMPD Symposium for the Clinician Educator: Best Practices in Faculty Development

Matthew C Miles, MD, MEd, FCCP
Associate Professor of Medicine
Wake Forest School of Medicine
Winston-Salem, NC, USA
Disclosures

I have no relevant financial relationships regarding the material in this presentation.
How would you rate this fellow?

You have been working with a first-year fellow on the inpatient pulmonary consult service for one week. The fellow came from a residency program with a strong reputation and has integrated well into your hospital system. They are already beloved by the residents, nurses, and clerical staff. You have corrected the fellow’s assessment and plan twice because they diagnosed asthma without recognizing features that suggested another less common diagnosis.
How would you rate this fellow?

1. Critical Deficiency
2. Advanced Beginner
3. Competent
4. Ready for Unsupervised Practice
5. Aspirational
How would your rating change if...

You skipped lunch that day
Last month you worked with a brilliant third-year fellow
This is the fellow’s first rotation of first-year
You are completing this evaluation 90 days after the rotation
Outline

Overview of Competency-based medical education (CBME)
ACGME “Milestones” reporting structure
How faculty assessments support Milestones ratings
Cognitive biases can affect faculty ratings
Faculty development can help address bias
Competency-Based Medical Education

ACGME Outcome Project

Launched in 2001 aiming to transition emphasis of GME from educational process to graduate outcomes

Defined six core competencies

- Medical Knowledge
- Patient Care
- Systems-Based Practice: system improvement
- Practice-Based Learning and Improvement
- Professionalism
- Interpersonal Communication Skills

Programs found it difficult to define and measure these outcomes
Milestones project - 2013

Developed in part to make assessment of competency more explicit, easier to understand.

Provides specific developmental stage anchors.

Designed after the Dreyfus model of skill acquisition.

Novice

Competent

Expert

Novice

Competent

Expert

Advanced Beginner

Proficient
<table>
<thead>
<tr>
<th>Subcompetency</th>
<th>Milestones</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Possesses Clinical knowledge (MK1)</td>
<td>(Novice)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Not Yet Assessable</th>
<th>Critical Deficiencies</th>
<th>Ready for unsupervised practice</th>
<th>Aspirational</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lacks the scientific, socioeconomic, or behavioral knowledge required to provide patient care</td>
<td>Possesses insufficient 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>
</tr>
</tbody>
</table>

Milestones:
- (Novice)
- (Advanced Beginner)
- (Competent)
- (Proficient)
- (Expert)
Clinical Competency Committee

Faculty Assessments

Competency

MK
PC
SBP
PBLI
PROF
ICS

Sub-competency

1 2 3
1 3 4b 5
1 2 3 4
1 2 3 4
1 2 3 4
1 2 3
What would you do next?

You are a member of the CCC and individually reviewing mid-year evaluation data for a second-year fellow in your program. The aggregate evaluation summary provided by the program coordinator shows a score of 3.6 out of 5 for Medical Knowledge.

Six months ago, this fellow was rated as Advanced Beginner (level 2) on the MK1 milestone by the CCC. You will share your recommended rating with the CCC for discussion at an upcoming meeting.
What would you do next?

1. Select “3 – Competent” because it’s premature to give a second-year fellow a rating of 4
2. Select 2.5 because it’s a little better than they got last time
3. Review the evaluation comments for examples of their performance
4. Ask the CCC chair if the fellow was upset with their last rating
Role of the Clinical Competency Committee (CCC)

Appointed by the program director to

• review all fellow evaluations semi-annually

• prepare and ensure the reporting of Milestones evaluations of each fellow semi-annually to ACGME

• advise the program director regarding fellow progress, including promotion, remediation, and dismissal.

2017 ACGME Program Requirements in Pulmonary and Critical Care Medicine, V.A.1.b)
The best-laid plans of mice and men...
Cognitive Biases affect Faculty Assessments
Cognitive Biases affect Faculty Assessments
Cognitive Biases affect Faculty Assessments
Cognitive Biases affect CCC Deliberations

- Anchoring
- Availability
- Bandwagon
- Confirmation
- Framing effect
- Groupthink
- Overconfidence

- Reliance on gist
- Selection
- Visceral

Where to target faculty development?

Faculty who rate trainees at the time of observation

CCC who incorporate evaluations into milestones ratings
Where to target faculty development?

Faculty who rate trainees at the time of observation

CCC who incorporate evaluations into milestones ratings
Ideas and Resources

This hour:

• Teaching the Teachers: The Role of Objective, Structured Teaching Evaluations

• Using Video-Based Vignettes to Standardize Faculty Observation, Evaluation

• APCCMPD Resources for Faculty Development

Next hour:

Collaborative Discussion on Ideas/Barriers/Solutions!