ISSUE:

QUESTIONS?

We are always eager to hear from you. Please do not hesitate to send any questions or concerns to:

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JULY 2020

Resident Assessments: EPA Update

Since the implementation of CBD on July 1st 2017, we have been using several workplace-based assessment tools for our residents. The two main tools have been CEAs (Clinical Encounter Assessments aka "daily evaluations") and EPAs (Entrustable Professional Activities).

As a reminder, EPAs are formative resident assessment, meaning they are feedback on performance that is used for learning and improvement. Using the CanMEDS Roles as an organizing framework, each <u>stage of training</u> is broken down into entrustable professional activities. Each EPA, in turn, is broken down into building blocks of demonstrable skills called milestones.

The EPA assessment tool:

- Identifies stage specific competencies the trainee needs to be able to demonstrate
- Clearly defines the expectations for progression in Anesthesia training
- Can be used by the Anesthesia Resident Competence Committee (ARCC) to confirm achievement of competencies, and be included in the evidence for promotion
- Helps to identify and respond to learners in difficulty early on in training
- Provides learners with directed feedback on those areas of clinical practice they do well and the exact areas where they need to improve
- Supports longitudinal assessment and the practice of learner self-reflection

Many faculty have been confused by the description used for the EPA assessment scale anchors. PGME has listened and has updated the entrustment rating scale for all programs. The key refinements include changes to the scale categories and descriptors including revision of the previous "Autonomy" and "Excellence" categories. The statement that the supervisor "did not need to be present" has been removed (this wording was identified as a barrier to

providing entrustment ratings to Anesthesiology residents, particularly for junior trainees). Those anchors are now "Competent" and "Proficient".

"Competent" implies the resident has the minimum required level of knowledge, skills and attitudes to enable safe provision of care for that task.

Competent i.e. the assessor didn't need to act (coaching aside) for safety/minimal competence

Proficient i.e. the assessor viewed the performance of the task as exemplary

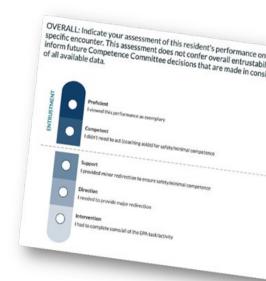
A rating of 'Competent' and 'Proficient' confer entrustment for that single EPA.

The change also emphasizes that a single encounter does not infer future overall entrustability in a given EPA. Entrustability is confirmed at the level of the Competence Committee. Faculty are only asked to document what the saw on that day, in that situation and *not* in any way extrapolate to overall competence in training. All the completed EPAs along with the many other workplace-based assessments are reviewed in detail at the level of the Competence Committee. Each faculty assessment provides just one snapshot of performance, or one pixel to their picture of overall competence. Each one is important, but no one alone infers competence or promotion.

Important Notes:

- EPAs are designed to be stage/level specific. A PGY1 should be able to be entrusted on an EPA for a task that is stage-appropriate, e.g. PACU handover
- Learners can play a key role in providing their faculty information about the EPAs; which tool is most appropriate, help with logging into the platform
- Learners should avoid pressuring faculty on their preferred entrustment rating.
 Not being entrusted isn't a "fail", it simply means they are NOT YET competent, and should use the faculty's

- feedback and coaching to be entrusted on a future observation of the task
- If a 'not entrusted' is not related to the resident's performance of the task (e.g. patient acuity, clinical time constraints, etc.), please provide details in the "Areas for Improvement" comment box.
- Remember the importance of specific actionable coaching comments for future resident performance



For more information and faculty development regarding this change and completion of EPAs, please see PGME's <u>Tip Sheet</u>, or for a feedback and coaching resource, please see PGME's <u>Pocket card</u> for giving and receiving feedback.