



## The AAMC Core EPAs for Entering Residency: an Update from the National Pilot

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on behalf of  
The Core EPA Pilot Group

<https://www.aamc.org/initiatives/coreepas/>



## Disclosures

Dr. Lomis receives support from

- the Association of American Medical Colleges, serving as Associate Project Director for the Core Entrustable Professional Activities for Entering Residency (Core EPAs) Pilot Project.
- the American Medical Association (AMA) as a principal investigator in the Accelerating Change in Medical Education consortium, also serving as co-director of the AMA competency-based assessment group.

The content presented here reflects her views and does not necessarily represent the views of AAMC, the AMA, or other participants in these initiatives.

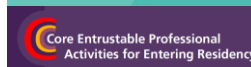


## Session outline

- Review the background of the AAMC Core EPAs for Entering Residency initiative
- Summarize recent activities of the national pilot group
- Review guiding principles for implementation
- Introduce the EPA toolkits
- Discuss areas of ongoing development & study
- Address questions from the audience



## Background: Ensuring Learners are Prepared to Transition to GME

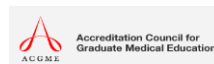


## Rationale for the Core EPA Project

- US Graduate Medical Education competencies have been established
- The desired “product” from UME has not been well-articulated
- Gaps identified between:
  - expectations of Program Directors and the skills of entering residents
  - what residents are called upon to do without supervision, and what they have been certified as competent to do
- Transitions have become an international focus



## Articulating desired outcomes



### Competencies

describe (trainable) attributes of an individual

### Milestones

describe the developmental trajectory of the individual



### EPAs

describe units of work

Entrustment for a task requires the **synthetic application** of multiple competencies at a specified level of performance (milestone)

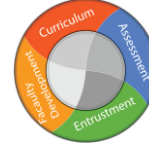




Graphic courtesy of OHSU

## The Core EPA Pilot Project

- Pilot group first assembled in Washington, DC in October 2014
- Implemented initial activities with the incoming class of 2015
- Targeting summative entrustment decisions for that class at graduation in 2019
- Studying key concepts in implementation of EPAs



## Acknowledgment: Pilot Schools

- Columbia University College of Physicians and Surgeons
- Florida International University Herbert Wertheim College of Medicine
- Michigan State University College of Human Medicine
- New York University School of Medicine
- Oregon Health & Science University School of Medicine
- University of Illinois College of Medicine
- University of Texas Health Science Center at Houston
- Vanderbilt University School of Medicine
- Virginia Commonwealth University School of Medicine
- Yale School of Medicine



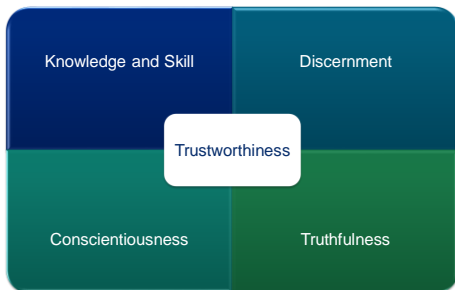
## Findings: Entrustment



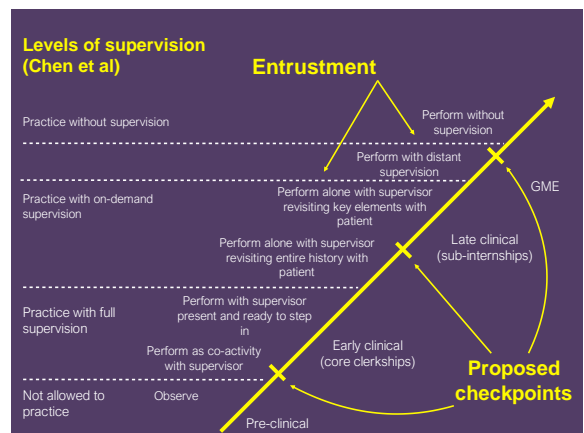
- “Ad hoc” entrustment decisions are intuitive, but are influenced by several factors *other than* the performance of the learner
- Summative entrustment decisions demand more rigor
- Explicit measures of trustworthiness are needed in addition to assessment of EPA-specific knowledge and skills
- Standardization across institutions will be critical to support transitions



## Dimensions of Trustworthiness



– Kennedy et al., *Academic Medicine*, 2008



## Findings: Assessment



- Assessment in the clinical workplace is essential
- We need feasible tools for frontline faculty and resident assessors
- We are exploring the Chen supervisory scale for UME and the Ottawa co-activity scale, considering modifications for some EPAs
- Portfolios will enable us to organize performance evidence from multiple low-stakes assessments to support summative decisions



## Modified Ottawa Co-Activity Scale



Graphic courtesy of OHSU



## Findings: Curriculum



- A systems-based approach is recommended to embed this framework throughout all of UME
- The EPA conceptual framework and requisite competencies can be incorporated in pre-clinical training
- Simulation will serve a supplementary role in training and deliberate practice
- Restructuring of clinical experiences may be required to create
  - opportunities for learners to perform EPAs
  - more longitudinal supervisory relationships



## Findings: Faculty Development



- Various faculty roles will require differing levels of training regarding the EPA framework
- Development will support a shared mental model of expectations and standards
- Development needs include:
  - content essential for each EPA, and methods to teach this material
  - techniques for direct observation and provision of feedback
  - assessment expertise to provide data that is accurate, timely and standardized
  - expertise in the judicious review of evidence to render summative entrustment decisions



### GUIDING PRINCIPLES

- Employ a **systematic** approach to map educational opportunities and assessments for each EPA
- Explicitly measure the attribute of **trustworthiness** in addition to the specific knowledge, skills and attitudes required for each EPA
- Create a **longitudinal view** of each learner's performance via, at minimum, aggregated performance evidence; and consider the added value of longitudinal relationships and formal coaching structures in informing entrustment decisions
- Gather **multi-modal performance evidence** from multiple assessors about each learner for each EPA
- Include **global professional judgments** about entrustment of each learner in the body of evidence that supports entrustment decisions
- Ensure a process for **formative** feedback along the trajectory to entrustment to provide opportunities for both remediation and potential acceleration of responsibilities
- Create a process to render and maintain formal entrustment decisions by a trained group (**entrustment committee**) that reviews performance evidence for each student
- Ensure that each learner is an **active participant** in the entrustment process: aware of expectations, engaged in gathering and review of performance evidence, and generating individualized learning plans to attain entrustment
- Adhere to entrustment thresholds that are **standardized across institutions**, as currently described in the Core EPA Curriculum Developer's Guide

The screenshot shows the AAMC website's 'Publications and Presentations' page. It features a navigation bar with links for 'About', 'Missions', 'Advocacy', 'Data', 'Services', and 'News'. The main content area is divided into several sections:

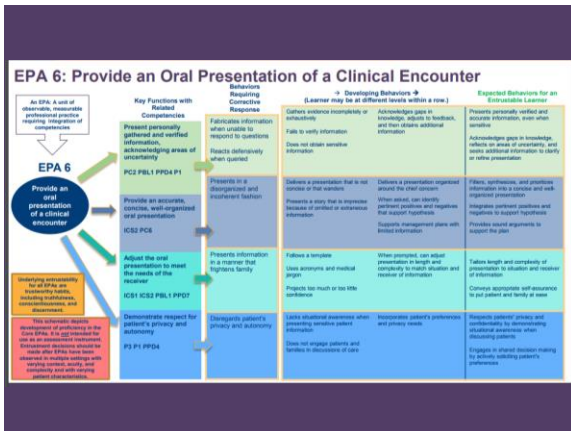
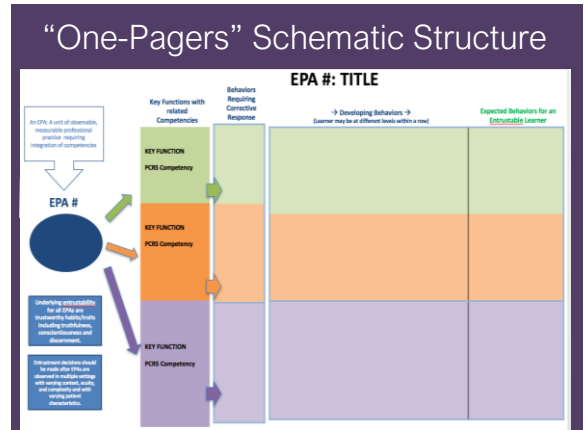
- EPA Toolkits:** A table listing toolkits for EPA 1 through EPA 10, along with an 'Abridged Toolkit'.
- Meeting Presentations:** A list of presentations from the 2016 AAMC Learn Serve Lead Annual Meeting, including 'Using EPAs in UME and GME Poster Session' and 'Meeting Summaries'.
- Core EPA Pilot Project Guides:** A list of guides for entering residency, including 'Core Entrustable Professional Activities for Entering Residency: Curriculum Developer's Guide' and 'Core Entrustable Professional Activities for Entering Residency: Faculty and Learners' Guide'.

On the right side of the page, there is a 'Learners' section with a 'Subscribe to the Core EPA Initiative' form and a 'Contact' section with an email address: coreepa@aamc.org.



## EPA Toolkits and “One-Pagers”

- Design by Curriculum & Assessment group
- “One-Pager” Schematics created by EPA-specific working groups
- Designed to encourage learner and faculty familiarity with:
  - The content of each EPA
  - Observable Behaviors to describe student’s development toward readiness for indirect supervision
  - Behaviors requiring immediate correction and/or remediation within each EPA



## EPA Toolkits and “One-Pagers”

### Toolkit Structure

- Frequently Asked Questions
- “One Page” Schematic for the specific EPA
- Resources from AAMC’s DREAM repository related to the specific EPA
- Bulleted list of Behaviors and Vignettes
- Complete Physician Competency Reference Set (PCRS)



## Future directions

- Sites are assessing clerkship students in EPA performance
- Comparing assessment tools
- Piloting the summative entrustment process to identify challenges and limitations for 2019 goal
  - Collaborating with GME
- Engaging student leaders at each institution to solicit perspectives



## Is the EPA framework effective?



Flickr



## Program Evaluation

- Emphasis on translation from theory to practice
  - Honest assessment of the challenges of implementation
- Pilot group has proposed many questions to explore
- Program evaluation team leading a process of prioritization
- Collaborating with AAMC for support & resources
- Will continue to report findings along the way



## Bringing the Patient into the Assessment Equation

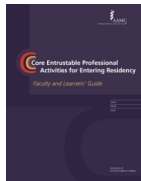


ten Cate, Olle PhD; Academic Medicine:  
June 2017 - Volume 92 - Issue 6 - p 736-738



## Resources

Faculty and Learners' Guide  
Curriculum Developers' Guide  
[AAMC Core EPA Guides](#)



AAMC Pilot Group recommendations:  
[Guiding Principles](#)

To subscribe to the AAMC Core EPA listserve,  
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## Questions?

