Coordinator Educational Series:

Operations & Milestones (From Theories to Practice)

Graduate Medical Education

September 14, 2017
Agenda

- Quiz on Policies & Procedures
- Operations
- Milestones (From Theories to Practice)
Quiz

1. The program/trainee is responsible for submitting the away election/rotation form to the GME Office at least ____ before the start of the rotation.
   - A. 30 days        B. 60 days        C. 90 days        D. 120 days

2. When a visiting resident completes their assigned required training, how long does it take to gain access to the Stanford systems?
   - A. 14 days        B. 6 days        C. 4 days        D. 2 days

3. Residents are required to promptly complete medical records (including medical records at affiliates e.g., PAVA, Kaiser, SCVMC, etc.) Failure to do so is grounds for:
   - A. internal probation until the records are completed
   - B. suspension without pay
   - C. being written up, with documentation placed in the resident’s permanent personnel file
   - D. 1:1 discipline meeting with the Program Director
Quiz

4. Sexual harassment is not tolerated at Stanford: If a violation of the no harassment policy is verified, the offender will be subject to corrective action, up to and including:
   - A. Termination
   - B. Counselling
   - C. Anti-harassment training
   - D. Suspension

5. Assume that your program will have a new elective rotation in Oakland Children’s Hospital, what kind of approval do you need to obtain from the GME office? And how many days prior to the start of the rotation?
   - A. Program Letter of Agreement
   - B. Approval of away rotation
   - C. Program Letter of Agreement and approval of away rotation
Agenda

- Quiz on Policies & Procedures
- Operations
- Milestones (From Theories to Practice)
Agenda

- Quiz on Policies & Procedures
- Incoming and Continuing Resident Appointment
- Milestones (From Theories to Practice)
What Are the Milestones?

- Simply defined...
  - Milestones are outcomes-based framework for determining resident and fellow performance within the 6 ACGME Core Competencies.
Competency-Based Medical Education (CBME)

- Competency-Based Medical Education (CBME)
  - Foundational element of Next Accreditation System (NAS)
  - CBME measures the progression toward specific competencies
  - 2 Key features: time is not the intervention, ongoing assessment

4 Steps in CBME

1. Competencies (ACGME 6 Core Competencies)
2. Components & Levels (Milestones)
3. Ongoing Evaluation (Performance Evaluation & CCC)
4. Overall Assessment (360 & Summative Evaluation)

---

Milestones: Six ACGME Core Competencies

Medical Expertise

Patient Care
Medical Knowledge
Practice-based Learning and Improvement
Interpersonal and Communication Skills
Professionalism
System-based Practice

A milestone is a significant point in the progressive development of a competency.
## Milestones: 5 Levels

<table>
<thead>
<tr>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
<th>Level 4</th>
<th>Level 5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What are the expectations for a beginning resident/fellow?</strong></td>
<td><strong>What are the milestones for a resident/fellow who has advanced over entry, but is performing at a lower level than expected at mid-residency/fellowship?</strong></td>
<td><strong>What are the key developmental milestones mid-residency/fellowship?</strong></td>
<td><strong>What does a graduating resident/fellow look like?</strong></td>
<td><strong>Stretch Goals – exceeds expectations</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>What should a resident be able to do well in the realm of the specialty at this point?</strong></td>
<td><strong>What additional knowledge, skills, and attitudes have they obtained?</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Are they ready for certification?</strong></td>
<td><strong>Aspirational</strong></td>
</tr>
</tbody>
</table>

Upon Graduation (Ready for Unsupervised Practice)
Milestones: 5 Levels

- **Level 1**: The resident is a graduating medical student/experiencing first day of residency.

- **Level 2**: The resident is advancing and demonstrating additional milestones.

- **Level 3**: The resident continues to advance and demonstrate additional milestones; the resident consistently demonstrates the majority of milestones targeted for residency.

- **Level 4**: The resident has advanced so that he or she now substantially demonstrates the milestones targeted for residency. This level is designed as the graduation target—not requirement.

- **Level 5**: The resident has advanced beyond performance targets set for residency and is demonstrating “aspirational” goals which might describe the performance of someone who has been in practice for several years. It is expected that only a few exceptional residents will reach this level.
Milestones: Who Developed Milestones?

- ACGME RC Members
- ABMS Certification Board(s)
- PDs
- Trainee Representatives
- And others
### Milestones: How To Read My Program’s Milestones?

- Remember where to find the Milestones in ACGME website?
- Or Google search “xxx milestone project acgme”

#### EMERGENCY MEDICINE MILESTONES

**ACGME REPORT WORKSHEET**

<table>
<thead>
<tr>
<th>Sub-Competency</th>
<th>General Competency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Emergency Stabilization (PC1)</td>
<td>Prioritizes critical initial stabilization action and mobilizes hospital support services in the resuscitation of a critically ill or injured patient and reassesses after stabilizing intervention.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Has not Achieved Level 1</th>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
<th>Level 4</th>
<th>Level 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recognizes abnormal vital signs</td>
<td>Recognizes when a patient is unstable requiring immediate intervention</td>
<td>Performs a primary assessment on a critically ill or injured patient</td>
<td>Manages and prioritizes critically ill or injured patients</td>
<td>Recognizes in a timely fashion when further clinical intervention is indicated</td>
<td>Develops policies and protocols for the management and/or transfer of critically ill or injured patients</td>
</tr>
<tr>
<td>Discerns relevant data to formulate a diagnostic impression and plan</td>
<td></td>
<td></td>
<td>Prioritizes critical initial stabilization actions in the resuscitation of a critically ill or injured patient</td>
<td>Integrates hospital support services into a management strategy for a problematic stabilization situation</td>
<td></td>
</tr>
</tbody>
</table>

#### Levels & Milestone Descriptors

- Levels & Between-Levels Available

**Comments:**

**Ratings & Between-Levels Available**

**Suggested Evaluation Methods:** SDOT, observed resuscitations, simulation, checklist, videotape review
Milestones in ACGME: Resources

- Milestones Guidebook for Residents and Fellows:
  - [http://www.acgme.org/Portals/0/PDFs/Milestones/Milestone...06-29-090859-107](http://www.acgme.org/Portals/0/PDFs/Milestones/MilestonesGuidebookforResidentsFellows.pdf?ver=2017-06-29-090859-107)

- Milestones Guidebook:

- Clinical Competency Committee Guidebook:

- First ACGME Milestones Annual Report
In Practice, How To Use Milestones To Evaluate Performance?

- Step 1: Develop evaluation forms based on milestones (competencies and sub-competencies).

- Step 2: Collect milestones data using the evaluation forms developed.

- Step 3: CCC (Clinical Competency Committee) determines milestones level based on aggregated data and other information.
How To Use Milestones? Step 1: Development of Evaluation Forms

- Import Milestones (competencies and sub-competencies) to MedHub
  - Serves as the basis for tagging of evaluation questions
  - Medhub Home - Evaluation tab - Milestones Summary - Import/Update Subcompetencies

<table>
<thead>
<tr>
<th>Subcompetencies</th>
<th>Milestones Summary</th>
<th>Progress Reports</th>
<th>Milestone Settings</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Competency</th>
<th>ID</th>
<th>Subcompetency</th>
<th>Status</th>
<th>Linked EPAs</th>
<th>Linked Elements</th>
<th>Tagged Questions</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Care</td>
<td>PC-1</td>
<td>Gathers and Synthesizes Essential and Accurate Information to Define Each Patient's Clinical Problem(s). Performs a directed neurological history and performs detailed neurological examination</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>Modify</td>
</tr>
<tr>
<td>Patient Care</td>
<td>PC-2</td>
<td>Performs a comprehensive musculoskeletal and appropriate neuromuscular history and examination</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>Modify</td>
</tr>
<tr>
<td>Patient Care</td>
<td>PC-3</td>
<td>Performs a complete psychiatric history and mental status examination with special attention to psychiatric and pain comorbidities</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>Modify</td>
</tr>
<tr>
<td>Patient Care</td>
<td>PC-4</td>
<td>In Collaboration with the Patient, Develops and Achieves a Comprehensive Pain Treatment Plan for Each Patient; Includes Consideration of Available Pharmacologic, Behavioral, Rehabilitative, Interventional, Complementary/Alternative Approaches</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>Modify</td>
</tr>
<tr>
<td>Patient Care</td>
<td>PC-5</td>
<td>Demonstrates Skill in Performing and Interpreting Diagnostic and Therapeutic Interventions: Appropriate use and interpretation of diagnostic laboratory and imaging studies; Appropriate use and interpretation of electro-diagnostic studies; Performs intravenous access, basic and advanced airway management, management of sedation, and basic and advanced cardiac life support; Performs a wide range of invasive pain treatments involving the neuraxis, peripheral nerve and musculoskeletal system</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>6</td>
<td>Modify</td>
</tr>
<tr>
<td>Medical Knowledge</td>
<td>MK-1</td>
<td>Possesses Clinical Knowledge: Anatomy, physiology, and pharmacology of pain; Assessment of pain; Treatment of pain; Interventional pain treatment</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>Modify</td>
</tr>
<tr>
<td>Medical Knowledge</td>
<td>MK-2</td>
<td>Demonstrates Knowledge of Diagnostic Laboratory, Diagnostic Imaging and Neuro-diagnostic Testing and Procedures</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>Modify</td>
</tr>
<tr>
<td>Medical Knowledge</td>
<td>MK-3</td>
<td>Participates in Scholarship (Foundation, Investigation, Analysis, and Dissemination)</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>4</td>
<td>Modify</td>
</tr>
<tr>
<td>Systems-based Practice</td>
<td>SBP-1</td>
<td>Works Effectively Within an Interprofessional Team (e.g., with peers, consultants, nursing, ancillary professionals, and other support personnel)</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>Modify</td>
</tr>
<tr>
<td>Systems-based Practice</td>
<td>SBP-2</td>
<td>Recognizes System-based Error and Advocates for System Improvement</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>Modify</td>
</tr>
<tr>
<td>Systems-based Practice</td>
<td>SBP-3</td>
<td>Identifies Forces that Impact the Cost of Health Care, and Advocates for and Practices Cost-effective Care</td>
<td>Active</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>Modify</td>
</tr>
</tbody>
</table>

[Add Subcompetency] [Import/Update Subcompetencies] [View all Subcompetencies (Active/Inactive)]
How To Use Milestones? Step 1: Development of Evaluation Forms

- Import Milestones (competencies and sub-competencies) to MedHub
  - Serves as the basis for tagging of evaluation questions
  - Medhub Home - Evaluation tab - Milestones Summary - Import/Update Subcompetencies

Warning: At least one Subcompetency/EPA/Element has already been added for your program. Importing a new package may result in duplicates.

In the彼得 псалтырь, личики тело, на стадо видел сердце, пришелся смеситель, Петров родCONTROL.

### Packages Available for Import

<table>
<thead>
<tr>
<th>Package:</th>
<th>Last Updated:</th>
<th>Items:</th>
<th>Actions:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain Medicine (RECOMMENDED)</td>
<td>10/14/2014</td>
<td>24</td>
<td>Update Package</td>
</tr>
<tr>
<td>AAOMS Oral and Maxillofacial Surgery</td>
<td>6/17/2016</td>
<td>32</td>
<td>Import Package</td>
</tr>
<tr>
<td>Abdominal Radiology</td>
<td>2/27/2014</td>
<td>13</td>
<td>Import Package</td>
</tr>
<tr>
<td>ABMGG Clinical Molecular and Cytogenetics Milestones</td>
<td>3/25/2016</td>
<td>12</td>
<td>Import Package</td>
</tr>
<tr>
<td>ACGME-International Common Milestones</td>
<td>2/24/2014</td>
<td>31</td>
<td>Import Package</td>
</tr>
<tr>
<td>Addiction Psychiatry</td>
<td>11/7/2014</td>
<td>16</td>
<td>Import Package</td>
</tr>
<tr>
<td>Adult Cardiothoracic Anesthesiology</td>
<td>11/7/2014</td>
<td>15</td>
<td>Import Package</td>
</tr>
<tr>
<td>Adult Reconstructive Surgery</td>
<td>1/8/2016</td>
<td>23</td>
<td>Import Package</td>
</tr>
<tr>
<td>Aerospace Medicine</td>
<td>10/4/2013</td>
<td>27</td>
<td>Import Package</td>
</tr>
<tr>
<td>Allergy/Immunology</td>
<td>10/4/2013</td>
<td>10</td>
<td>Import Package</td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>10/4/2013</td>
<td>25</td>
<td>Import Package</td>
</tr>
<tr>
<td>Blood Banking and Transfusion Medicine</td>
<td>6/18/2014</td>
<td>16</td>
<td>Import Package</td>
</tr>
<tr>
<td>Brain Injury Medicine</td>
<td>10/23/2014</td>
<td>16</td>
<td>Import Package</td>
</tr>
</tbody>
</table>
How To Use Milestones? Step 1: Development of Evaluation Forms

- Tag subcompetencies to questions
  - MedHub Home -> Evaluation tab -> Manage Evaluation Forms -> choose a draft -> choose a question to modify

Modify Questions

Question:
Arrives at assigned responsibilities punctually and appropriately prepared

Answer Type:
-Scale: Milestones - Level 1-5 (w/ NA) (2) (6)

Required: [ ]

Milestone Elements: (none)

Subcompetencies:
PRF-A1 - Exhibits ethical and responsible behavior in all aspects of practice and scholarly activity. Is accountable to patients, society, and the profession and acknowledges errors. Maintains responsibility for his or her own emotional, physical, and mental health, including fatigue awareness and avoidance, and commitment to lifelong learning and self-assessment. Demonstrates sensitivity to diverse patient, staff, and support personnel populations. Considers needs of patients, families, and colleagues.

Competencies: (none)

Rooter: 7 (current)
How To Use Milestones? Step 1: Development of Evaluation Forms

- Tag subcompetencies to questions
  - MedHub Home -> Evaluation tab -> Manage Evaluation Forms -> choose a draft -> choose a question to modify
In Practice, How To Use Milestones To Evaluate Performance?

✔ Step 1: Develop evaluation forms based on milestones (competencies and sub-competencies).

✔ Step 2: Collect milestones data using the evaluation forms developed.

✗ Step 3: CCC (Clinical Competency Committee) determines milestones level based on aggregated data and other information.
Milestones: Clinical Competency Committee (CCC)

- Quality Improvement Activities
- Self Assessment
- In-service training exams
- Safety Incident Reports
- Case Logs
- Patient/Family Evaluations
- Clinical Skills Assessment
- Clinical Competency Committee
- End-of-Rotation Evaluations
- Nursing Staff/Techs Evaluations

Progress on Milestones
THANK YOU!

Two More Things...

- Quick Evaluation of CES
  (E-evaluation will be sent out later to the PCs who dialed in)

- For next month’s quiz on Policies & Procedures, please read from page 24 (Compliance Integrity program) to page 31 (Performance Evaluation)