#### PEDIATRIC GENERAL COMPETENCIES

#### **PATIENT CARE**

Residents must be able to provide family centered patient care that is developmentally and age appropriate, compassionate, and effective for the treatment of health problems and the promotion of health

## **Elements May Include:**

Gathering essential and accurate information about the patient using the following clinical skills:

- medical interviewing
- physical examination
- diagnostic studies
- developmental assessment

Making informed diagnostic and therapeutic decisions based on patient information, current scientific evidence, and clinical judgment:

- use effective and appropriate clinical problem-solving skills
- understand the limits of one's knowledge and expertise
- use consultants and referrals appropriately

Developing and carrying out patient care management plans

Prescribing and performing competently all medical procedures considered essential for the scope of practice

Counseling patients and families:

- to take measures needed to enhance or maintain health and function and prevent disease and injury
- by encouraging them to participate actively in their care by providing information necessary to understand illness and treatment, share decisions, and obtain informed consent
- by providing comfort and allaying fear

Providing effective health care services and anticipatory guidance

Using information technology to optimize patient care

## Possible Assessment Tools:

Attending Evaluation

Peer Evaluation

Global Rating of Live/Recorded Performance

Checklist Evaluation of Live/Recorded Performance

Standardized Patients/Parents

Objective Structured Clinical Examination

**Oral Examination** 

Procedural Skills Documentation

Pediatric Advanced Life Support/Neonatal Resuscitation Program

Mock Codes

**Portfolio** 

#### MEDICAL KNOWLEDGE

Residents must demonstrate knowledge about established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, and the application of this knowledge to patient care

## The Competent Physician Is Expected To:

Know, critically evaluate, and use current medical information and scientific evidence for patient care

## Possible Assessment Tools:

Multiple Choice Examination (In-training Examination)
Oral Examination
Participation in Rounds and Conferences
PALS/NRP

#### INTERPERSONAL AND COMMUNICATION SKILLS

Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and professional associates

# Elements May Include:

Communicating effectively in a developmentally appropriate manner with patients and families to create and sustain a professional and therapeutic relationship across a broad range of socioeconomic and cultural backgrounds

Communicating effectively with physicians, other health professionals, and health related agencies

Working effectively as a member or leader of a health care team or organization

Being able to act in a consultative role to other physicians and health professionals

Maintaining comprehensive, timely and legible medical records

## Possible Assessment Tools:

Attending Evaluation
Peer Evaluation
Global Rating of Live/Recorded Performance
Checklist Evaluation of Live/Recorded Performance
Patient/Parent Questionnaire
Standardized Patients/Parents
360 Global Rating Evaluations

## PRACTICE-BASED LEARNING AND IMPROVEMENT

Residents must be able to use scientific methods and evidence to investigate, evaluate, and improve their patient care practices

# Elements May Include:

Taking primary responsibility for lifelong learning to improve knowledge, skills, and practice performance

Analyzing one's practice experience to recognize one's strengths, deficiencies, and limits in knowledge and expertise

Using evaluations of performance provided by peers, patients, superiors, and subordinates to improve practice

Locating, appraising, and assimilating evidence from scientific studies related to health problems of their patients

Using information technology to optimize lifelong learning

Actively participating in the education of patients, families, students, residents, and other health professionals

## Possible Assessment Tools:

**Attending Evaluation** 

Peer Evaluation

Global Rating of Live/Recorded Performance

Record Review

Case Log

Portfolios (eg, CME, Learning Modules, Literature Review)

Participation in Rounds and Conferences (including Resident Presentation of Cases/Topics)

Self Assessment Instrument

#### **PROFESSIONALISM**

Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to diversity

# **Elements May Include:**

Demonstrating respect for and a responsiveness to the needs of patients and society by:

- accepting responsibility for patient care including continuity of care
- demonstrating integrity, honesty, compassion, and empathy in one's role as a physician
- respecting the patient's privacy and autonomy and maintaining appropriate professional boundaries
- demonstrating accountability and commitment
- demonstrating a responsiveness to the needs of patients and society that supercedes self-interest

Demonstrating high standards of ethical behavior

Demonstrating sensitivity and responsiveness to patients' and colleagues' gender, age, culture, disabilities, ethnicity, and sexual orientation

## Possible Assessment Tools:

Attending Evaluation

Peer Evaluation

Professionalism Evaluation Form

## SYSTEMS-BASED PRACTICE

Residents must practice quality health care and advocate for patients in the health care system

# **Elements May Include:**

Knowing how types of medical practice and delivery systems differ from one another, such as in methods of controlling health care costs, assuring quality, and allocating resources

Practicing cost-effective health care and resource allocation that does not compromise quality of care

Advocating for quality patient care and assisting patients in dealing with system complexities

Knowing how to work with health care managers and health care providers to assess, coordinate, and improve patient care

Knowing how to advocate for the promotion of health and the prevention of disease and injury in populations

Acknowledging medical errors and developing systems to prevent them

## Possible Assessment Tools:

Attending Evaluation
Peer Evaluation
360 Global Rating Evaluations
Record Review
Patient/Parent Questionnaire
Portfolios
Participation in Teaching Conferences

2/01

revised: 2/03

## GLOSSARY OF RESIDENT EVALUATION METHODS

# **ABMS/ACGME Suggested Tools:**

- 1. <u>Record Review</u> Abstraction of information from patient records, such as medications or tests ordered and comparison of findings against accepted patient care standards.
- 2. <u>Chart Stimulated Recall</u> Uses the resident's patient records in an oral examination to assess clinical decision-making.
- 3. <u>Checklist Evaluation of Live/Recorded Performance (single event)</u> A single resident interaction with a patient is evaluated using a checklist. The encounter may be videotaped for later evaluation.
- 4. <u>Global Rating of Live/Recorded Performance (multiple events)</u> After multiple resident interactions with patients and others (e.g., completion of clinical rotation) the resident is evaluated using a summary/global rating form.
- 5. <u>Standardized Patients (SP)</u> Simulated patients are trained to respond in a manner similar to real patients. The standardized patient can be trained to rate resident performance on checklists and provide feedback for history taking, physical examination, and communication skills. Physicians may also rate the resident's performance.
- 6. <u>Objective Structured Clinical Examination (OSCE)</u> A series of stations with standardized tasks for the resident to perform. Standardized patients and other assessment methods often are combined in an OSCE. An observer or the standardized patient may evaluate the resident.
- 7. <u>Simulations and Models</u> Computer-based simulations assess use of knowledge in diagnosing or treating patients or evaluate procedural skills. Examples are virtual reality environments and computerized patient management problems. Models are simulations using mannequins or various anatomic structures to assess procedural skills and interpret clinical findings. Both are useful to assess practice performance and provide constructive feedback.
- 8. <u>360 Global Rating Evaluations</u> Residents, faculty, nurses, clerks, and other clinical staff evaluate residents from different perspectives using similar rating forms.
- 9. <u>Portfolios</u> A portfolio is a set of project reports that are prepared by the resident to document projects completed during the residency year. For each type of project standards of performance are set. Example projects are summarizing the research literature for selecting a treatment option, implementing a quality improvement program, revising a medical student clerkship elective, and creating a computer program to track patient care and outcomes.
- 10. <u>Examination MCQ</u> A standardized examination using multiple-choice questions (MCQ). The in-training examination and written board examinations are examples.
- 11. <u>Examination Oral</u> Uses structured realistic cases and patient case protocols in an oral examination to assess clinical decision-making.
- 12. <u>Procedure or Case Logs</u> Residents prepare summaries of clinical experiences including clinical data. Logs are useful to document educational experiences and deficiencies.
- 13. PSQs Patients fill out Patient Survey Questionnaires (PSQs) evaluating the quality of care

provided by a resident.

# **Other Suggested Tools:**

- 1. Faculty Evaluation
- 2. Participation in Rounds and Conferences
- 3. Resident Presentations Case/Topic
- 4. Peer Evaluation
- 5. Professionalism Evaluation Form
- 6. Mock Code Competency Checklist
- 7. Video Taping of Teaching
- 8. Survey of Graduates
- 9. Self-assessment
- 10. PALS, NRP, APLS
- 11. Morbidity/Mortality Conference