UC Irvine

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health

Title

Identifying Strengths and Weaknesses in 3rd Year Clerkships Through Patient Evaluations and Self-Reflection

Permalink

https://escholarship.org/uc/item/1fm4j5q8

Journal

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health, 18(5.1)

ISSN

1936-900X

Authors

Welch, K Kelly, L Ko, P

Publication Date

2017

Copyright Information

Copyright 2017 by the author(s). This work is made available under the terms of a Creative Commons Attribution License, available at <u>https://creativecommons.org/licenses/by/4.0/</u>

29 Identifying Strengths and Weaknesses in 3rd Year Clerkships Through Patient Evaluations and Self-Reflection

Welch K, Kelly L, Ko P /SUNY Upstate Medical University, Syracuse, NY

Background: Implementing multi-source feedback in clinical clerkships provides opportunities for students to engage with patients and practice self-reflection.

Educational Objectives: Evaluate the feasibility of a patient evaluation form and have students identify personal strengths and weaknesses through self-reflection in the Neuroscience and Emergency Medicine clerkships.

Curricular Design: Students were evaluated by a patient with whom they worked while on service. Once the evaluation was completed, students were asked to review the patient's form and complete a corresponding guided self-reflection where they were asked to identify what they did well and what skills they can improve in each clerkship setting. Qualitative analysis was conducted on patient and student evaluations to identify common themes.

Impact/Effectiveness: A total of 117 students participated in both clerkships. Patient evaluation forms were returned by 97% of patients and student reflections were completed by 96% students. Patients wrote comments on 70% of the returned evaluation forms. The top three themes from patient comments were positive personality, professional demeanor, and empathetic manner. The top three student self-identified strengths after the Neuroscience Clerkship were building rapport, providing information, and a tie between listening and history/ exam skills. After the Emergency Medicine Clerkship, the top three strengths were history/exam skills, providing information, and building rapport. The top three student self-identified areas for improvement after Neuroscience were history/exam skills, providing next steps and explaining procedures and diagnoses. After Emergency Medicine, areas for improvement were communication, history/exam skills and providing information. Soliciting patient feedback and implementing a student self-reflection in a third year clerkship is helpful to student development. The results of this pilot suggest that third year students are comfortable building rapport with patients, but believe their communication and patient care skills are still developing. Further implementation of multi-source feedback including student self-reflection in clinical clerkships

provides opportunities for students to identify areas of self improvement and learning.

30 Implementation of A 360° Assessment Rubric for Level 5 Milestone Anchors for Procedures

Kane B, Nguyen M, Barr G, Elliott N, Goyke T, Johnson S, Quinn S, Yenser D, Weaver K/Lehigh Valley Health Network, USF Morsani College of Medicine, Bethlehem, PA

Background: The Accreditation Council for Graduate Medical Education's Emergency Medicine Milestones includes three Milestones for procedures wherein the Level 5 Anchor is to teach. They are: 9 (General Approach to Procedures), 10 (Airway Management), and 14 (Vascular Access).

Educational Objectives: To implement a rubric for both junior resident learners and faculty supervisors to assess senior residents on procedural Level 5 Milestone Anchors.

Curricular Design: The residency is a PGY 1-4 dually approved program based in a suburban health care network. Orientation includes both a previously published airway training course and a network based central lines course. With the advent of the Milestones, senior (PGY 3 and 4) residents served as instructors for both courses where previously only faculty taught. In order to document teaching competence, a rubric was introduced to assess the abilities of the senior resident instructors. The rubric, for both interns and faculty, included a previously validated metric of EM clinical teaching, the ER Scale, as well as a 1-5 Likert Scale questions including the Milestone 9 Level 5 anchor verbatim. Table One demonstrates the rubric, omitting the demographics section.

Impact/Effectiveness: The rubric was successfully utilized at the courses above for the incoming interns in 2016. PGY 3 and 4 residents were assessed by junior learners positively as teachers in the ER Scale section (Question 4). Question 5a is the Level 5 Anchor for Milestone 9, and the juniors assessed the seniors positively on this and the other Likert questions as well. Likewise faculty observers assessed the senior residents positively for their teaching and recommended them as Level 5 competent for Milestones 9, 10, and 14, as appropriate, to the Clinical Competency Committee. Plans are to expand use of the rubric to programmatic Lumbar Puncture, Chest Tube and Ultrasound courses provided during orientation.