

Appendix 1 to:

Broussenko M, Burns S, Leung FH, Toubassi D. Can teachers distinguish competencies from entrustable professional activities? PRiMER. 2019;3:19. <https://doi.org/10.22454/PRiMER.2019.433736>

PostGraduate Residency Assessment of Family Medicine EPAs (“GRADE”) Survey

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Background

The Royal College, in an iterative update of Competency Based Medical Education (CBME), released a paper in 2015 outlining several directions in medical education and assessment. Among other trends, this included a move towards assessment based on both professional competencies as well as “entrustable professional activities”(EPAs), a relatively newer concept. Definitions are provided below.

Competency: An observable ability of a health care professional that develops through stages of expertise from novice clinician to master clinician.

Entrustable professional activity: An essential task of a discipline (profession, specialty, subspecialty) that an individual can be trusted to perform without direct supervision in a given care context, once sufficient competence has been demonstrated.

As part of the process of incorporating EPAs into current assessment frameworks, postgraduate medical faculties are tasked with identifying and describing core areas of practice or “essential tasks” that define a given EPA. These EPAs are then incorporated into the typical framework of assessments, including field notes, quarterly ITERS, etc.

To date, there have been no studies comparing the ability of preceptors to distinguish between competencies and EPAs.

The aim of this survey is therefore to examine the ability of preceptors to discriminate competencies and EPAs using the high-level descriptions of each, generated from lists produced by an accredited Canadian Family Medicine residency program.

Consent

Participation in this survey is purely voluntary. There are no anticipated risks to participating, and the only potential benefit to participating is to be introduced to the concept of EPAs, which are relatively novel in medical education literature. There are no consequences, professional or otherwise, for non-participation, and non-participants will not, and cannot, be identified. You will be asked for high-level demographic information, pertaining to your experience in a supervisory role only. Any identifying information provided beyond what is requested will be discarded in order to protect the confidentiality of participants. The data collected from this tool will be transcribed into an electronic format and stored on an encrypted database and paper surveys will be deposited into confidential shredding.

Aggregate data will be analyzed for accuracy of rating, and subjected to standard tests of statistical significance. Results will be presented and discussed as part of a Resident Academic Project at Toronto Western Hospital, and if accepted, published in a peer-reviewed journal.

By completing this survey, you provide consent for your answers to be aggregated and used in the analysis mentioned above. **You will not be able to withdraw from the study once your survey has been submitted due to the anonymous nature of the survey.**

Should you decline to participate for any reason, do not enter any responses in the survey below, and return it, blank, to the facilitators of this study. You will not suffer any consequences as a result of your decision.

Demographics

Please complete this section prior to starting the survey (attached on the next page).

[1] Time in practice (please pick one):

- 0-5 years
- 6-10 years
- 11-15 years
- 16-20 years
- >20 years

[2] Time in a supervisory role (please pick one):

- 0-5 years
- 6-10 years
- 11-15 years
- 16-20 years
- >20 years

[3] Number of hours per week teaching or supervising (please pick one):

- 0-5 hours
- 6-10 hours
- 11-15 hours
- 16-20 hours
- >20 hours

[4] Do you now, or have you ever in the past, have(had) any direct involvement in an educational leadership or scholarship role (please pick one):

- No
 - Yes
-

Instructions

The list below features (in random order) descriptions of competencies and EPAs. Please indicate whether you think the description refers to a **competency** or an **entrustable professional activity (EPA)**. You may refer to the definitions provided above. Please do not provide any additional information or identifying data.

All responses are anonymous. As a reminder, should you decline to participate in this survey, simply return this booklet to the facilitators without entering any responses.

Description	EPA	Competency
Recognize modifiable risk behaviors and provide advice on risk reduction with appropriate use of resources and supports.	<input type="checkbox"/>	<input type="checkbox"/>
Recognize and appropriately refer for emergent conditions.	<input type="checkbox"/>	<input type="checkbox"/>
Recognize and provide initial management of common adult emergencies.	<input type="checkbox"/>	<input type="checkbox"/>
Determine when an adult Family Medicine patient requires admission and inpatient hospital care.	<input type="checkbox"/>	<input type="checkbox"/>
Develop a common understanding on issues, problems and plans with patients and families, colleagues and other professionals to develop, provide and follow-up on a shared plan of care.	<input type="checkbox"/>	<input type="checkbox"/>
Contribute to the creation, dissemination, application and translation of new knowledge and practices.	<input type="checkbox"/>	<input type="checkbox"/>
Accurately elicit and synthesize information from and perspectives of patients and families, colleagues and other professionals.	<input type="checkbox"/>	<input type="checkbox"/>
Assess and appropriately manage the adult Family Medicine patient in hospital.	<input type="checkbox"/>	<input type="checkbox"/>
Serve in administration and leadership roles, as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrate general key features for procedural skills.	<input type="checkbox"/>	<input type="checkbox"/>

Description	EPA	Competency
Participate in a collaborative team-based model and with consulting health professionals in the care of the patient.	☐	☐
Recognize and provide initial management of the unstable adult Family Medicine patient in the hospital setting.	☐	☐
Plan and coordinate discharge of adult Family Medicine patients from hospital.	☐	☐
Manage and follow-up patients with common chronic conditions.	☐	☐
Demonstrate an effective approach to the ongoing care of patients with chronic conditions and/or to patients requiring regular follow-up.	☐	☐
Convey effective oral and written information.	☐	☐
Assess, manage, and follow-up patients presenting with common complaints and undifferentiated symptoms.	☐	☐
Complete an adult periodic health assessment, using evidence-based screening and risk reduction recommendations.	☐	☐
Provide preventive care through the application of current standards for the practice population	☐	☐
Critically evaluate medical information its sources and its relevance to their practice and apply this information to practice decisions	☐	☐

Answer Key

Format: # on survey - competency/EPA

1. competency
2. EPA
3. EPA
4. EPA
5. competency
6. competency
7. competency
8. EPA
9. competency
10. EPA
11. competency
12. EPA
13. EPA
14. EPA
15. competency
16. competency
17. EPA
18. EPA
19. competency
20. competency