Assessing Faculty Milestone Competencies

Shah SH, Church R, Bird SB/Univ of Massachusetts Medical School, Shrewsbury, MA

Background: ACGME Milestones provide a spectrum of competencies on which to evaluate resident physicians. Little is known about the application of these Milestones to practicing EM attendings.

Objectives: To determine faculty self-assessment (SA) of their competency on all Milestones and to compare these SAs to just-graduated resident assessments (RA).

Methods: Six faculty of the UMass emergency medicine residency (3 women, 3 men) performed SA on all 23 Milestones using published Milestone forms (rating from 1 to 5 in 0.5 increments). Six just-graduated residents performed anonymous assessments of the six faculty and were blinded to the SAs. Means for faculty SAs of all Milestones were calculated. The means for each faculty were calculated from RAs. Correlation of faculty SA and RA were determined using Goodness of Fit. The sum of an individual faculty SA minus the mean RA for all Milestones was then calculated to determine if faculty under- or over-assessed their competency compared to RA.

Results: Mean years since residency graduation for faculty was 7 (range: 2–13). Mean faculty SA of all 23 Milestones was 4.44 (range 4.26 to 4.78). The lowest mean SA was 4.0 on Milestone #12 (goal-directed U/S) and #22 (SBP); the highest mean SA was 5.0 on Milestone #14 (vascular access) and #15 (MK). The mean of all RA was 4.50 (range 4.16 to 4.69) with highest and lowest assessment on Milestone #15 (MK; mean 4.97) and #12 (goal-directed U/S; mean 4.15), respectively. There was no statistically significant correlation between faculty SA and RA (slope=-0.248, p=NS, Fig 1). The mean sum of all faculty SA minus the mean of RA was -1.89, with individual range of -8.68 to 6.76.

Conclusions: As a whole, faculty SA and RA of faculty competencies are similar and congruent. However, there is considerable individual variation in SAs compared to RAs. The marked range of difference between faculty SA and RA of competencies should be explored as a method to assist in faculty development.

Figure 1. Faculty self-assessment versus resident assessment.