

Use of Standardized Evaluation Methods for Assessing ACGME Core Competencies

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Background: Emergency medicine (EM) residencies have been charged with meeting the ACGME requirements of assessing residents in six 'core competences. The Council of Residency Directors (CORD) created a Standardized Evaluation Methods (SEM) Committee to create various assessment tools to help measure the core competencies of patient care, medical knowledge, interpersonal and communication skills, professionalism, practice-based learning, and systems-based practice.

Methods: This is a survey project of the members of the CORD listserv who are residency directors or associate/assistant residency directors.

Results: Of 142 programs, 92 (64.3%) responded. Programs were limited to one response with secondary responses excluded from analysis. The Mock Oral Boards are the most widely used SEM tool with 74 of 92 (80.4%) programs using it and a majority of those programs (59) using it semi-annually or annually. The Standardized Directly Observed Tool (SDOT) is used by 59 (64.1%) programs, and a majority of those (34) use it annually or semi annually. In addition, 25 (27.2%) programs use the SDOT monthly, weekly or daily. Fifty-four (59.3%) use the procedure competencies and 44 (48.4%) use the resuscitation competencies. Forty-eight (54.5%) programs use the year-end competencies. Only 25 (27.8%) programs use the standard resident portfolio. If SEM products were not used, the most common responses for all tools were that residencies frequently had similar evaluation methods already in place. However, the SDOT was particularly vulnerable to faculty preferences as 12 of 35 (34.3%) reported they tried to use the tool but stopped because of faculty inertia.

Conclusions: EM residencies use CORD SEM Committee designed evaluation tools to help measure core competencies. While a majority of programs use one or more of the tools, either existent evaluation systems or faculty inertia prevent other programs from adopting these tools.