



# Entrustable Professional Activities

## EPA 6 for Pediatric Emergency Medicine

### EPA 6: Provide Supervision for Emergency Personnel to Enhance Patient Care Quality and Assure Patient Safety

#### Supervision Scale for This EPA

1. Trusted to observe only
2. Trusted to execute with direct supervision and coaching
3. Trusted to execute with indirect supervision with supervisor immediately available to assist when needed
4. Trusted to execute with indirect supervision but may require coaching to improve member and team performance
5. Trusted to execute without supervision

#### Description of the Activity

A pediatric emergency medicine physician functions as the leader of the emergency health care team. A key part of this leadership role is to provide supervision of physicians at various levels of training and other health professionals.

The specific functions which define this EPA include:

1. Providing medical direction, control, and advice to pre-hospital providers and ED staff
2. Determining level of emergency personnel supervision needed to ensure patient safety and deliver quality care in the ED
3. Communicating effectively with physicians and other health professionals
4. Providing real-time and post-event feedback
5. Triage and providing customer service

#### Judicious Mapping to Domains of Competence

- Patient Care
- Medical Knowledge
- Practice-Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice
- Personal and Professional Development

#### Competencies Within Each Domain Critical to Entrustment Decisions

- *Bolded competencies labeled in the format used on the Pediatric Emergency Medicine Milestone Project.*
- *Nonbolded competencies labeled in the format used on the Pediatric Subspecialty Milestone Project.*



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<b>PC 11:</b>	Provide appropriate supervision (milestones for the supervisor)
<b>SBP 1:</b>	Advocate for quality patient care and optimal patient care systems
<b>SBP 2:</b>	Participate in identifying system errors and implementing potential systems solutions
Pediatric Subspecialty SBP 2:	Not an ACGME required milestone for PEM: Coordinate patient care within the health system relevant to the clinical specialty
Pediatric Subspecialty SBP 4:	Not an ACGME required milestone for PEM: Work in interprofessional teams to enhance patient safety and improve patient care quality
<b>PROF 4:</b>	Provide leadership skills to enhance team functioning, the learning environment, and/or the health care delivery system/environment with the ultimate intent of improving care of patients
Pediatric Subspecialty ICS 1:	Not an ACGME required milestone for PEM: Communicate effectively with physicians, other health professionals, and health-related agencies

### Context for the EPA

**Rationale:** A pediatric emergency medicine physician functions as the leader of the emergency health care team. This includes real-time management of the ED and advocating for the needs of children across health care systems.

**Scope of Practice:** PEM physicians advocate for the improved health and safety of all children by identifying and addressing systems level safety concerns, improving the consistency and quality of care, identifying and closing gaps in knowledge around the care of children, and disseminating new knowledge to all providers that serve children in emergency settings. PEM physicians provide leadership in the supervision of physicians at various levels of training (medical students, residents, and fellows) and other allied health professionals (EMS providers, nurse practitioners, physician assistants, nurses, and respiratory therapists). In addition, PEM physicians provide departmental leadership or serve in administrative roles, advocating for safe and efficient care pathways within hospital systems. From these endeavors, the PEM leader must also pursue feasible opportunities to generate new knowledge, implement best practices, and advocate for the emergency care of pediatric patients.

### Curricular Components That Support the Functions of the EPA

1. Providing medical direction, control, and advice to pre-hospital providers and ED staff
  - Assists out-of-hospital EMS providers with interventions, triage, and transport decisions real-time, online, or on-site
  - Supports clinical and administrative decision making of other ED health care providers
  - Integrates EMS care into the best practices required to care for children
2. Determining level of emergency personnel supervision needed to ensure patient safety and delivery of quality care in the ED
  - Develops and demonstrates skills in leadership and management
  - Provides situational leadership that takes into account skills and roles of various personnel
  - Identifies and utilizes personnel strengths to enhance care delivery
  - Identifies and addresses personnel deficiencies and/or impairment that threatens patient safety



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- Delegates supervision when appropriate
  - Advocates for patient care commensurate with degree of illness or injury
  - Determines whether direct or indirect supervision is required in given situations and ensures appropriate learner education and development
3. Communicating effectively with physicians and other health professionals
- Develops and demonstrates collaborative skills necessary for fostering working relationships and functioning as a leader or member of a team
    - Demonstrates timely communication with consultants and facilitates their delivery of timely care to ED patients
    - Demonstrates effective use of skills in conflict management and negotiation
    - Recognizes and addresses conflicts of interest and diversity related issues
  - Utilizes technology (electronic communication and social media) mindfully; avoids Health Insurance Portability and Accountability Act (HIPAA) and Health Information Technology for Economic and Clinical Health (HITECH) violations
  - Advocates and negotiates for effective and efficient care pathways across systems
  - Develops skills required to disseminate novel information relevant to the emergency care of children
4. Providing real-time and post-event feedback and debriefing
- Delivers timely, objective, and focused feedback routinely
  - Debriefs the team after resuscitations and difficult situations
  - Performs standard observation of learner encounters with patients and their caregivers.
  - Performs scheduled evaluations
  - Performs continuous quality improvement on systems issues surrounding consistency of care
5. Triage and providing customer service
- Demonstrates and shares situational awareness
  - Manages conflicts
  - Manages complaints
  - Performs service recovery
  - Mitigates risk

## References

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- American Board of Emergency Medicine Core Content Task Force II. 2013 Model of the Clinical Practice of Emergency Medicine. <https://www.abem.org/public/publications/em-model/reference>
- American Board of Emergency Medicine Initial Certification Task Force. KSAs and Standards 2015.



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- Fleisher & Ludwig's Textbook of Pediatric Emergency Medicine 7<sup>th</sup> edition. Wolters Kluwer 2016
- Pediatric Emergency Medicine 3<sup>rd</sup> edition. Strange, et al. McGraw-Hill 2009
- ACGME Program Requirements for Graduate Medical Education in Pediatric Emergency Medicine.
- ACGME Program Requirements for Graduate Medical Education in Emergency Medicine.



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Pediatric Emergency Medicine Subspecialty Specific  
Entrustable Professional Activities (EPAs)  
March 2016

### Identification of PEM EPAs conducted by:

Hsu D, Nypaver M, Kou M,  
Dahl-Grove D, House J, Klasner A, Santen S, Stankovic C, Titus MO

### Descriptions of PEM EPAs developed by:

Hsu D, Nypaver M, Kou M,  
Chang T, Chapman J, Eldridge C, Fein DM, Heffner V, Herman B, Kennedy C,  
Langhan M, Lumba-Brown A, Madhok M, McAneney C, Nagler J,  
Ramirez J, Reynolds S, Roskind C, Zaveri P, Zuckerbraun N

### Competencies mapped to PEM EPAs by:

Hsu D, Chang T, Dahl-Grove D, Fein DM, Jacobs E, Klasner A, Kou M, Langhan M,  
Lumba-Brown A, Madhok M, McAneney C, Mittiga M, Nagler J, Nypaver M,  
Ramirez J, Reynolds S, Stankovic C, Thompson T, Zaveri P, Zuckerbraun N

### Curricular components written by:

Hsu D, Chang T, Chapman J, Dahl-Grove D, Fein DM, Klasner A,  
Kou M, Langhan M, McAneney C, Mittiga M, Nagler J,  
Nypaver M, Ramirez J, Reynolds S, Roskind C, Zuckerbraun N

### Pediatric emergency medicine subspecialty representatives to ABP EPAs for Subspecialties Meeting, March 2013:

Deborah Hsu, Chris Kennedy, and Richard Bachur

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