Curricular Components That Support the Functions of EPA 6: Teach, Provide Feedback, and Assess Learners Across a Competency Based Medical Education Continuum and Engage in Interprofessional Education

1. Knowing the theoretical basis for competency-based medical education and assessment
   - Describes how assessment of milestones and competencies, as required by the Accreditation Council for Graduate Medical Education (ACGME) and the American Board of Medical Specialties (ABMS), as well as entrustable professional activities (EPAs) drive undergraduate and graduate medical education
   - Explains how competency-based learning extends throughout a professional career and illustrates the benefits and challenges of this expectation
   - Utilizes adult learning principles to facilitate trainee attainment of milestones

2. Planning for teaching or curriculum development by identifying appropriate timing, setting, learner-centered objectives, teaching strategies, and assessment methods
   - Identifies level of the learner and context of learning environment and uses this information to select educational objectives, content, and strategies for teaching and assessment
   - Orients trainees to rotation expectations, including learning goals and objectives, patient care and team responsibilities, systems, policies, and procedures for the rotation
   - Plans the methods for learner assessment and evaluation of teaching activity, curriculum, or program
   - Secures the materials and resources necessary for effective teaching

3. Demonstrating a repertoire of effective and efficient teaching strategies that are engaging, innovative, and learner-centered for trainees and interprofessional colleagues
   - Describes one’s own preferred teaching and learning style and discusses how this may affect learners with different learning styles
   - Teaches how to elicit and interpret physical exam findings at the bedside
   - Teaches in large or small groups using active instructional strategies to engage different levels of learners
   - Utilizes a blended learning approach, such as a combination of independent reading, eLearning, and simulation, to encourage both acquisition and application of knowledge and skills
   - Uses different types of questioning (broadening, justifying, hypothetical, and alternative) to stimulate clinical reasoning
   - Uses role-modeling and deliberate practice to teach new skills or procedures

4. Applying an appropriate level of supervision based on assessment of the learner’s skills
   - Assesses the learner’s level of competence through direct observation to determine the appropriate level of supervision
   - Facilitates learning by pushing trainees to the edges of their competence under supervision, stepping in as
needed to ensure patient safety
  • Provides graduated autonomy as the learner’s knowledge and skills advance
  • Affirms competence when the learner demonstrates a predetermined performance level of a skill that has been equated with competence
  • Recognizes learners in difficulty and initiates remediation plans when necessary

5. Effectively and efficiently managing patient care and educational responsibilities on family-centered rounds
  • Demonstrates efficient and flexible use of time when teaching, adapting the mix of teaching and independent learning activities for optimal learning outcomes
  • Role-models clinical reasoning for learners
  • Teaches the patients and the family/caregiver about the diagnosis, planned investigation, management plan, and prognosis in an interactive, family-centered manner
  • Models effective and empathetic communication with patients and the family/caregiver

6. Encouraging reflection and engaging in mutual constructive feedback with learners and interprofessional colleagues based on direct observation
  • Provides frequent, timely, effective feedback based upon direct observation of trainee knowledge, skills, attitudes, and level of professionalism
  • Uses reflection to identify and address one’s own learning needs
  • Promotes a climate of continuous learning by openly acknowledging one’s own knowledge gaps, prompting shared learning among team members
  • Uses reflection to enhance trainee’s understanding and remembering of experiential learning opportunities with patients

7. Synthesizing information from direct observation and other sources to generate verbal feedback and written behaviorally based assessments of learners
  • Compares and contrasts formative feedback with summative evaluation
  • Defines competencies, performance indicators, goals, and objectives, and explains their role in the evaluation of physicians
  • Provides honest feedback and summative evaluation based on observed behaviors, that includes reinforcing as well as corrective feedback

Curricular Components Authors
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