The ACGME Core Competencies: An Introduction

It is the mission of our training program to ensure that our graduates have demonstrated competency in the six core areas as designated by the ACGME. It is the goal of our program to develop life-long self-evaluation and self-improvement skill. To accomplish these goals, the resident's progress toward competency throughout their three years of neurology training will be evaluated both by faculty, program director, and by the resident. At the time of each 6-month evaluation with the program director, the resident will formulate an action plan to move towards competency and proficiency in the following areas:

1.) Patient Care
2.) Medical Knowledge
3.) Interpersonal Communication
4.) Professionalism
5.) Practice-Based Learning and Improvement
6.) Systems-Based Practice.

What follow will be the expectations for our residents in regards to each competency.

**Patient Care:**
Neurology residents must be able to provide scientifically based, comprehensive, and effective diagnosis and management for patients with neurologic disease. The resident is expected to progress to full clinical competence as a neurologist during the three year training program. Clinical skills include the ability to perform a complete history and physical examination, and generate a rational differential diagnosis, workup, and management plan. Technical skills will include the ability to identify and describe abnormalities on neuro-imaging studies, the ability to perform LPs and EMGs, and the ability to appropriately interpret the results of imaging, EMG, EEG, LP, etc. in the context of patient care. Expectations will vary by year of training, as residents will develop competence at different rates.

**Medical Knowledge:**
This competency is self-explanatory. The resident is expected to develop an extensive, detailed body of knowledge regarding the neurosciences, neuroanatomy, and clinical neurology. It is expected that this knowledge be demonstrated and applied to patient care. Knowledge will be gained via didactic teaching (required and non-required conferences, educational conferences, national meetings) and by independent study and reading. Expectations will again vary by year of training, but certain standards of knowledge are required for promotion. The resident must continually assess areas of strength and weakness so as to properly focus further learning (see Practice-Based Learning and Improvement below).

**Interpersonal and Communication Skills:**
This competency is also self-explanatory. Excellent physicians communicate clearly and succinctly with patients, families, other physicians, and all other allied health staff. The ability to successfully interact with others during routine work time as well as
during times of stress is crucial for optimal patient care. This includes maintaining accurate, timely, and legible medical records. Neurologists must also be able to provide genetic counseling and palliative care when appropriate. All patient-related communication must remain within the guidelines of HIPAA rules and regulations.

**Professionalism:**

It is our belief that the three equal parts of successful neurologic training are knowledge, skills, and behaviors. To this end, it is the expectation of our training program that neurology residents will behave in a professional manner at all times in which they represent the OHSU and Portland VA Hospitals.

This includes the following six essential elements of professionalism:

1. **Be present**—the resident must be in attendance for all patient care duties and for all didactic teaching. If illness or other circumstances prevent attendance, the appropriate persons should be notified.

2. **Be presentable**—the resident will dress in a manner that signifies professionalism. The wearing of scrubs is discouraged except after hours.

3. **Be punctual**—residents should strive to arrive on time for all clinical duties and didactic sessions. As befits a responsible professional, knowledge that the resident will be late should result in notification of the appropriate persons (i.e. the resident might call ahead to clinic and ask the MA to notify all patients that he/she will be arriving late). Furthermore, it is appropriate to apologize to those who are inconvenienced by tardiness.

4. **Be prepared**—the resident should accomplish all assigned tasks related to clinical patient care within the limitations of the ACGME duty hour regulations (see below). Paperwork and dictations must be completed in a timely fashion.

5. **Be positive (and respectful)**—the resident shall strive to be respectful of patients, staff, and colleagues at all times. At times, every person experiences emotions such as anger/frustration, etc. that must be successfully suppressed in interactions with patients, families, and with other health care professionals.

6. **Be proficient**—the resident will be expected to consistently demonstrate appropriate knowledge and procedural skills for his/her level of training. The resident must understand his/her limitations and know when to ask for help.

Included in the concept of professionalism are the virtues of integrity, honesty, and compassion. The resident must be committed to lifelong learning habits and continuing medical education. The resident will comply with the regulations set forth by OHSU and VA Departments of Neurology and other bodies governing graduate medical education. Finally, the resident must exhibit respect for all persons regardless of their cultural, ethnic, religious, and socioeconomic background.

No one is perfect, and all of us will have moments of unprofessional behavior. It is the expectation of the OHSU Department Of Neurology that any breaches in professionalism that occur are met with remorse on the part of the resident. Furthermore, it is expected that the resident will use such breaches as lessons to prevent similar problems in the future.
Failure to comply with the above standards of professionalism shall result in a resident entering remediation. Consistent non-compliance with the above standards, or failure to remediate, shall result in dismissal.

**Practice-Based Learning and Improvement:**
Neurology residents must be able to investigate and evaluate their patient care practices, and appraise and assimilate scientific evidence to improve their patient care practices. Residents should participate in the collection and analysis of patient data via patient logs and as part of quality assurance projects. Residents will be encouraged to create and maintain a portfolio that guides their long term educational plan and profiles their attainment of core competencies.

**Systems-Based Practice:**
Neurology residents must be trained to recognize that they are part of a large and intricate health system that has implications for their ability to care for patients and impacts upon their patients’ human needs and financial resources. This awareness of the context in which we practice as neurologists requires competence in the following areas:
- Recognize the limitation of resources for health care and demonstrate the ability to act as an advocate for patients within their social and financial constraints.
- Willingness to participate in utilization review and comply with documentation requirements in medical records.
- Develop awareness of practice guidelines and utilize them as appropriate.
- Develop awareness of local and national resources that may enhance our patients’ quality of life in dealing with chronic neurologic diseases.
- Develop the ability to lead health care teams and delegate authority in a responsible and appropriate manner.
- Develop skills for the practice of ambulatory medicine (time management, clinic scheduling, effective communication with referring physicians).
- Utilization of consultants and referrals for optimal management of patients with complicated medical illnesses.
- Demonstrate awareness of the importance of cross-coverage and accurate medical data transfer in caring for patients with neurologic illnesses.