



EPA

An Entrustable Professional Activity is a "unit of professional practice, defined as *tasks* or *responsibilities* to be entrusted to the unsupervised execution by a trainee once he or she has attained sufficient clinical competence."

-Olle ten Cate, 2013



11 Core Entrustable Professional Activities for Entering Residency

To delineate activities that all entering residents should be expected to perform on day 1 of residency without direct supervision, regardless of specialty.

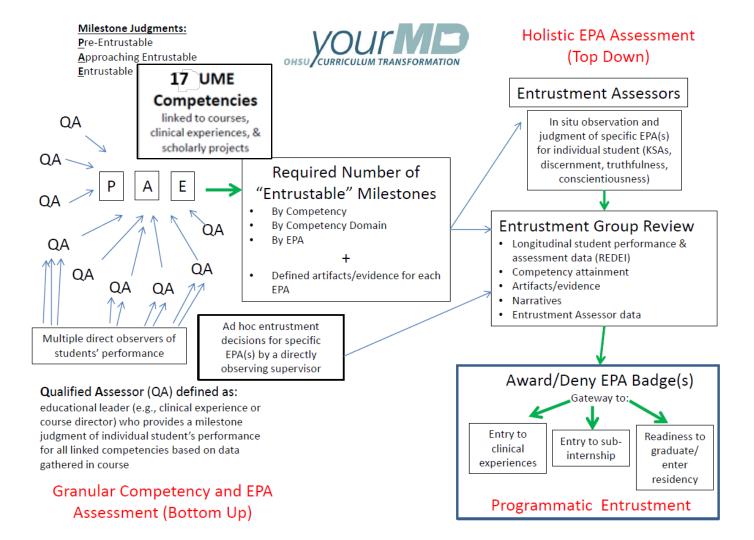
- 1a. Obtain a hypothesis-driven history
- 1b. Perform a tailored physical examination
- 2. Generate a prioritized **differential** diagnosis for a clinical encounter
- 3. Interpret diagnostic or screening **tests** for a clinical encounter
- 4. Enter orders including prescriptions for a clinical encounter
- 5. Document a clinical encounter in the patient record
- 6. Provide an **oral presentation** of a clinical encounter
- 7. Use **literature** to make a patient care recommendation
- 8. Communicate a patient handover to transition responsibility of care
- 9. Advance patient care through **interprofessional** collaboration
- 10. Recognize a patient requiring **urgent** assessment and escalate care
- 11. Lead shared decision making discussions for patient care





Reporter	EPA 1a: Obtain a hypothesis- driven history	EPA 1b: Perform a tailored physical examination	EPA 5: Document a clinical encounter in the patient record	EPA 6: Provide an oral presentation of a clinical encounter
Interpreter	EPA 2: Generate a prioritized differential diagnosis for a clinical encounter	EPA 3: Interpret diagnostic or screening tests for a clinical encounter	EPA 7: Use literature to make a patient care recommendation	EPA 9: Advance patient care through interprofessional collaboration
Manager	EPA 4: Enter orders including prescriptions for a clinical encounter.	EPA 8: Communicate a patient handover to transition responsibility of care	EPA 10: Recognize a patient requiring urgent assessment and escalate care	EPA 11: Lead shared decision-making discussions for patient care







Direct Observation

• Multiple observations -> picture of competence -> entrustment









 Assessment of dayto-day practice in the authentic clinical environment

 Assessment of what doctors actually do in practice





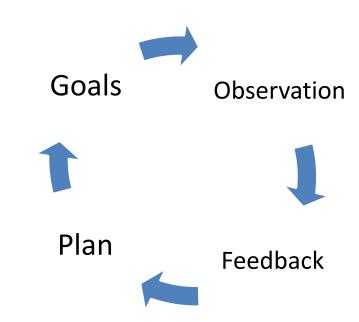
Clinical Supervisor's Ad Hoc Entrustment Decisions

- Coactivity Scale
 - Level 1: I did it
 - Level 2: I talked them through it
 - Level 3: I directed them from time to time
 - Level 4: I was available just in case



WBA Steps

- Student initiated
- Observe for a specific EPA
- Id strengths + improvement
- Determine the level of supervision
- Give feedback + action plan







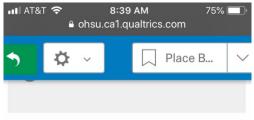
EPA 4:

- Compose orders efficiently and effectively verbally, on paper, and electronically
- Demonstrate an understanding of the patient's condition that underpins the provided orders
- Recognize and avoid errors by attending to patient-specific factors, using resources, and appropriately responding to safety alerts
- Discuss planned orders and prescriptions with team, patients, and families



What was your involvement with EPA 4: Enter and discuss orders and prescriptions

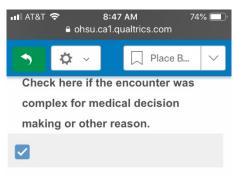




What does this student need to work on to become more independent?

Please be specific and try to limit your comments to 1 or 2 sentences.

Student had difficulty with medication dosing she needs to be specific about that arm prior to writing the admission orders



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+ displayed on MSPE and supplement





Goal of VOUT TRANSFORMATION

Effectively prepare the MD graduate for residency training and professional practice to best serve and meet the needs of society in the 21st century.

