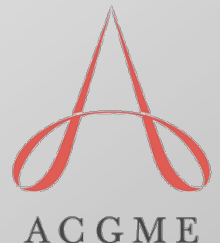


Osteopathic Recognition Milestones Project

August 20, 2015

**Natasha Bray, DO
Chair, Osteopathic Principles Milestones Committee**

**Laura Edgar, EdD, CAE
Executive Director, Milestone Development
ACGME**



Presentation Topics

- Milestone Background and Purpose
- Milestone Description
- Milestones for Osteopathic Recognition
- How Milestones Will Be Used
- Milestone Evaluations and Clinical Competency Committee

Milestones: What

- Milestones describe performance levels residents are expected to demonstrate for skills, knowledge, and behaviors in the six competency domains.
- Milestones will lay out a framework of observable behaviors and other attributes associated with fellows' development as physicians.
- Aggregate performance on the milestones will be used as one indicator of a program's educational effectiveness.

Nasca, TJ et. Al. The Next Accreditation System. 2012.366:1051-1056

Key Points: Milestones

- Articulate shared understanding of expectations
- Describe trajectory from beginner in the specialty to exceptional resident or practitioner
- Organized under six domains of clinical competency
- Represent a subset of all sub-competencies
- Set aspirational goals of excellence

Milestones: Why

- Fulfill the promise of the Outcome Project
- Increased use of educational outcome data in accreditation
- ACGME accountability to public
- Support the educational process

Uses and Implications

ACGME

- Accreditation – continuous monitoring of programs; lengthening of site visit cycles
- Public Accountability – report at a national level on competency outcomes
- Community of practice for evaluation and research, with focus on continuous improvement

Residency/Fellowship Programs

- Guide curriculum development
- More explicit expectations of learners
- Support better assessment
- Enhanced opportunities for early identification of under-performers

Milestones

Certification Boards

- Potential use – ascertain whether individuals have demonstrated qualifications needed to sit for Board exams

Residents/Fellows

- Increased transparency of performance requirements
- Encourage self-assessment and self-directed learning
- Better feedback to learners

Milestone Template - Specialty

Milestone Description: Template				
Level 1	Level 2	Level 3	Level 4	Level 5
What are the expectations for a beginning resident?	What are the milestones for a resident who has advanced over entry, but is performing at a lower level than expected at mid-residency?	What are the key developmental milestones mid-residency? What should they be able to do well in the realm of the specialty at this point?	What does a graduating resident look like? What additional knowledge, skills & attitudes have they obtained? Are they ready for certification?	Stretch Goals – Exceeds expectations
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

Milestones are progressive over time. There is no prescribed speed at which residents must complete a milestone set.

Level 1	Level 2	Level 3	Level 4	Level 5
Understands indications and contraindications for neuroradiologic invasive and non-invasive procedures	Appropriately performs pre-procedure review of imaging, as defined	Competently performs basic	Competently performs basic and advanced neuroradiologic invasive and non-invasive procedure independently	Able to teach procedures to junior learners
Recognizes and manages complications of contrast reactions		Recognizes complications of basic procedures	Anticipates, recognizes, and manages complications of advanced procedures	Competently performs complex procedures, modifies procedures as needed, and anticipates and
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:	Not yet achieved Level 1 <input type="checkbox"/>			
"Basic" an				

Selecting a response box in the middle of a level implies that milestones in that level and in lower levels have been substantially demonstrated.

Selecting a response box on the line in between levels indicates that milestones in lower levels have been substantially demonstrated as well as **some** milestones in the higher level(s).

Option to select "Not yet achieved Level 1"

OPC Milestone Development - Who

- Natasha Bray, DO , Chair
- John Bucholtz, DO
- Jane Carreiro, DO
- Constance Cashen, DO
- Cameron Kielhorn, DO
- Jill Patton, DO

Internal Medicine

Family Medicine

Neuromusculoskeletal Medicine

Surgery

Resident, Family Medicine

Internal Medicine

Milestone Template – Osteopathic Recognition

Milestone Description: Template for Osteopathic Recognition				
Level 1	Level 2	Level 3	Level 4	Level 5
What are the expectations for a resident in a TY program?	<p>What does a resident completing a TY or intern year look like?</p> <p>What additional knowledge, skills & attitudes have they obtained?</p> <p>What should they be able to do well at this point?</p>	<p>What does a graduating resident look like?</p> <p>What additional knowledge, skills & attitudes have they obtained?</p> <p>Are they ready for certification?</p>	<p>What does a graduating fellow look like?</p> <p>What additional knowledge, skills & attitudes have they obtained?</p> <p>Are they ready for certification?</p>	Stretch Goals – Exceeds expectations
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

OPC Milestone Development

- Osteopathic Principles for Patient Care
- Examination, Diagnosis, and Treatment (Patient Care)
- Osteopathic Principles for Medical Knowledge

OPC Milestone Development

- Osteopathic Principles of Practice-based Learning and Improvement
- Osteopathic Principles for Interpersonal and Communication Skills
- Osteopathic Principles for Systems-Based Practice
- Osteopathic Principles for Professionalism

How Osteopathic Milestones Will Be Used

- Residents and Fellows will be evaluated by osteopathic faculty for these skills, abilities, and behaviors
- Completed for all residents and fellows in the Osteopathic Recognition Track
- Completed by the Clinical Competency Committee in addition to specialty specific Milestones

What is the Clinical Competency Committee?

Clinical Competency Committee

- Composed of a minimum of 3 faculty members - may be a shared committee with the core CCC
- At least two members of the CCC must be Osteopathic Physicians
- Non-physician members can be appointed

Clinical Competency Committee

- Reviews all evaluations by all evaluators semi-annually
- Reviews residents against milestones semi-annually
- Make recommendations for progress – promotion, remediation and dismissal

How does the CCC actually work?

Who should be on the CCC?

- Decision for PD
- *Consider:*
 - Representation from each major site
 - Subspecialty/Site representation
 - Dedication to education

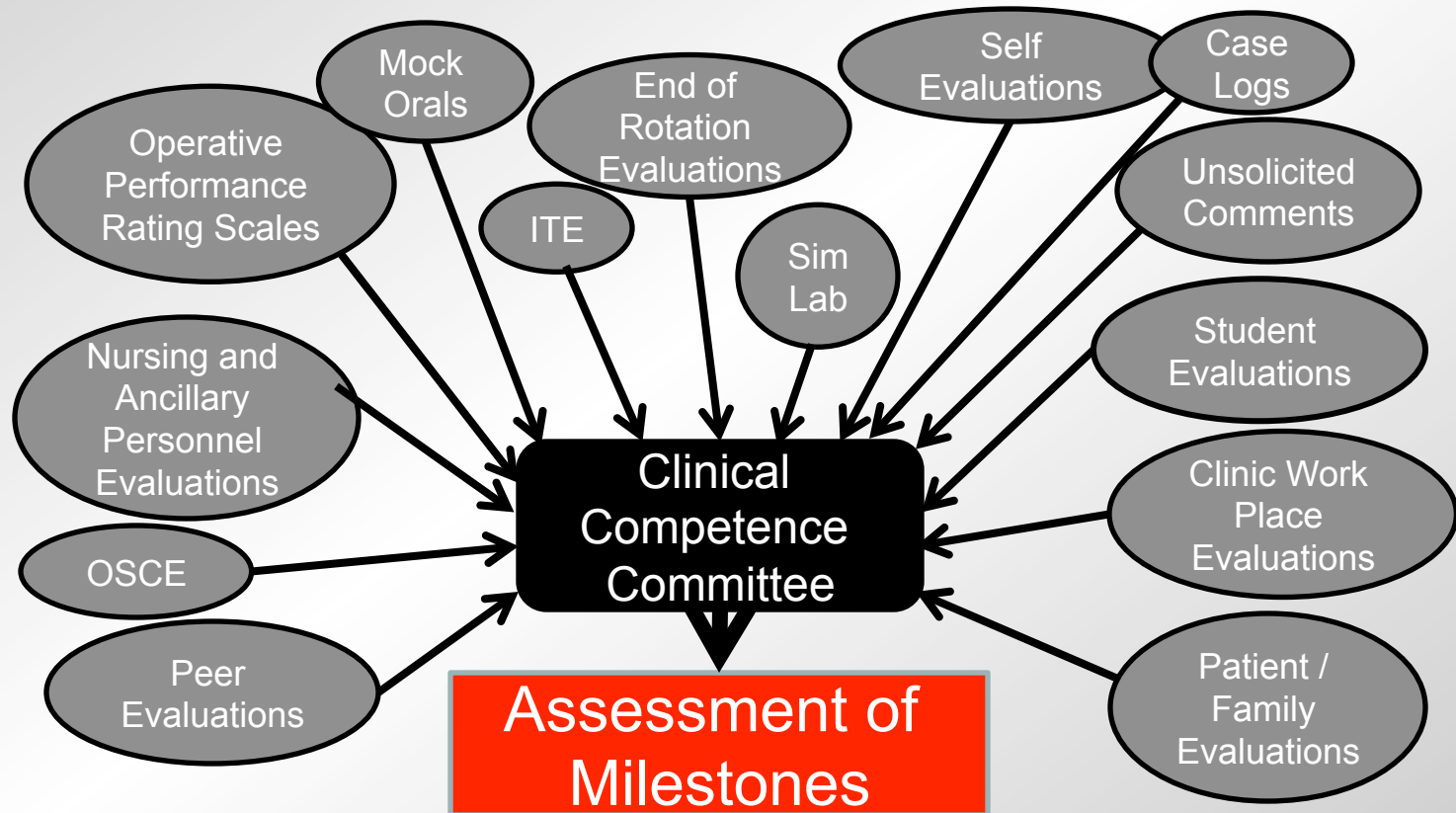
How do we DO the evaluation?

- Understand the milestones & their use
- Leave personal bias at the door
- Review all evaluations for each fellow
- “Consider the source(s)”
- For each fellow, decide the milestone narrative that best fits that resident

Clinical Competency Committee

- ✿ Avoids common problematic issues:
 - ✿ “I don’t like to give negative evaluations”
 - ✿ “I spent little time working with this resident”
 - ✿ “Herd” mentality: positive or negative
 - ✿ Grade inflation
 - ✿ Vague statements:
 - ✿ “I just didn’t like this resident, but I can’t put my finger on it”
 - ✿ Hearsay: I’ve heard she is lazy

Clinical Competence Committee



Implementation

- Specialty-Specific Milestones for programs with a status of Pre-Accreditation will begin reporting May/June 2016
- Milestones for Osteopathic Recognition start July 1, 2016
- First Milestone reporting for Osteopathic Recognition is December 2016

Milestones: Reporting

- Programs will report semi-annually
- Milestone data will be reported to ACGME through direct entry into the Accreditation Data System (ADS)



Program Name

Resident Name:
Year in Program:
Position Type:
Start Date:
Expected End Date:



Select the level corresponding to the resident's knowledge, skills, attitudes, and other attributes demonstrated throughout the program with updates to reflect recent progress. Evaluations must be based on the resident's demonstration of milestones over the course of the evaluation period. Milestone levels do not correspond to the resident's year in your program. Selecting a level in a lower level than the level previously demonstrated indicates that milestones in lower levels have been substantially demonstrated as well as those in the higher level. Selecting a radio button between levels indicates that milestones in lower levels have been substantially demonstrated. Selecting a radio button over the radio buttons to read the milestones for each level. After completing that evaluation, click the "Submit" button at the bottom of the form to finalize it. Alternatively, click the "Save" button to save your current changes and complete the form later. You MUST use the "Submit" button to finalize the form before the deadline for this evaluation period. Incomplete evaluations will NOT be accepted.

There may be cases in which a resident had no experiences within a subcompetency area during the previous six months. In this case, the reported milestone level should remain the same as the one reported during the previous evaluation. Do not increase (or decrease) the milestone level simply because time has passed; an evaluation of each subcompetency area must occur every six months. To review previously completed milestone evaluations, go to the "Reports" tab in ADS and select "Milestone Evaluations".

Evaluation to be completed: Sep 1, 2010 - Jan 1, 2020

Patient Care

	Not Yet Rotated	Level 1	Level 2	Level 3	Level 4	Level 5
a) Lymphoma — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Head and Neck — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Genitourinary (GU) — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Palliation — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Breast — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Gastrointestinal (GI) — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Gynecologic (GYN) — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Lung — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Adult Brain Tumor — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j) Brachytherapy — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k) Stereotactic Radiosurgery (SRS)/Stereotactic Body Radiotherapy (SBRT) — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Level 2

Performs a detailed directed history and physical examination; integrates pathology and imaging reports; accurately stages a patient and designates prognostic factors

Identifies treatment options

Lists organs at risk; understands proper patient positioning and immobilization

Recognizes toxicities/symptoms seen in head and neck cancer patients treated with radiotherapy

Medical Knowledge

	Not Yet Rotated	Level 1	Level 2	Level 3	Level 4	Level 5
a) Medical Physics — Medical Knowledge	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Program Name

Resident Name:
Year in Program:
Position Type:
Start Date:
Expected End Date:

Select the level corresponding to the resident's knowledge, skills, attitudes, and other attributes in each area below. Your selections should take into account the resident's demonstration of milestones throughout the program with updates to reflect recent progress. Evaluations must be based on evidence with an emphasis on that obtained by direct observation.

Milestone levels do not correspond to the resident's year in your program. Selecting a level implies that milestones in that level and in lower levels have been substantially demonstrated. Selecting a radio button between levels indicates that milestones in lower levels have been substantially demonstrated as well as some milestones in the higher level(s). Mouse over the radio buttons to read the milestones for each level. After completing that evaluation, click the "Submit" button at the bottom of the form to finalize it. Alternatively, click the "Save Progress" button to save your current changes and complete the form later. You **MUST** use the "Submit" button to finalize the form before the deadline for this evaluation period. Incomplete evaluations will NOT be accepted.

There may be cases in which a resident had no experiences within a subcompetency area during the previous six months. In these cases, you may select "Not Yet Rotated" for the milestone. Do not increase (or decrease) the milestone level simply because time has passed; an evaluation should be based on the resident's performance during the previous evaluation. Do not increase (or decrease) the milestone level simply because time has passed; an evaluation should be based on the resident's performance during the previous evaluation. Do not increase (or decrease) the milestone level simply because time has passed; an evaluation should be based on the resident's performance during the previous evaluation. Do not increase (or decrease) the milestone level simply because time has passed; an evaluation should be based on the resident's performance during the previous evaluation.

Evaluation to be completed: Sep 1, 2010 - Jan 1, 2020

Hover mouse over radio-buttons to show narratives

Patient Care

	Not Yet Rotated	Level 1	Level 2	Level 3	Level 4	Level 5
a) Lymphoma — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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h) Lung — Patient Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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What the Milestones Are

- An attempt to define explicit, practical, relevant, and manageable set of domains of clinical competence
- An attempt to describe levels of competency development during training, leading to unsupervised practice
- A way to better inform trainees of some of the expectations of training

What the Milestones are Not

- Not everything a graduate needs to know or be able to do
- Not a mandate for specific rotations or durations of experience
- Not a replacement for regular assessment and evaluation

What's Next?

- Milestones have been drafted and reviewed by the Milestones Working Group and the Osteopathic Recognition Committee
- A pilot will be sent to Program Directors with dual programs
- Final draft of the Milestones available by the end of 2015

Where do I find...?



Milestone Information

- Specialty specific Milestones are available on the specialty specific pages
- Osteopathic Recognition Milestones will be available this fall
- FAQs and other helpful tools are available on the Milestones web page

Milestone Resources

Milestone Webpage:

<http://www.acgme.org/acgmeweb/tabid/430/ProgramandInstitutionalAccreditation/NextAccreditationSystem/Milestones.aspx>

Milestone FAQs:

<http://www.acgme.org/acgmeweb/Portals/o/MilestonesFAQ.pdf>

Clinical Competency Committee Guidebook:

<http://www.acgme.org/acgmeweb/Portals/o/ACGMEClinicalCompetencyCommitteeGuidebook.pdf>

We are here to help

Milestones:

milestones@acgme.org

Laura Edgar

ledgar@acgme.org

Osteopathic Recognition Questions:

Tiffany Moss tmoss@acgme.org

Thank you!