

# Teaching Tips

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## Department of Family & Social Medicine Faculty Development E-Newsletter



### Entrustable Professional Activities : The Basics

In 2013, the Accreditation Council for Graduate Medical Education (ACGME) in partnership with the American Board of Medical Specialties (ABMS) started the Milestone Project to define competency-based developmental outcomes that can be demonstrated progressively by residents before graduating from training. In response to concerns that some medical students are not prepared for residency, the ACGME has also worked to identify a list of activities to be expected of all MD graduates transitioning from medical school to residency. In May 2014, the Association of American Medical Colleges (AAMC) published a guide to this list of activities entitled, "Core Entrustable Activities for Entering Residency." These activities will supplement, not supplant, mission-specific or specialty-specific graduation competencies at individual schools or those promoted by specialty societies or boards. This issue of teaching tips provides the basic context and vocabulary for understanding Entrustable Professional Activities or EPAs.

- 1) Competency: Learner descriptor - observable ability of a health professional, integrating multiple components such as knowledge, skills, values, and attitudes. Since competencies are observable, they can be measured and assessed to ensure their acquisition.
- 2) Milestone: Behavioral descriptor - marks a level of performance for a given competency (derived from the ACGME Milestones project.) Milestones may be linked to a supervisor's EPA decisions regarding supervision of tasks.
- 3) Entrustable Professional Activity (EPA): Task descriptor - units of professional practice, defined as responsibilities that trainees perform **unsupervised** once they have attained sufficient specific competence. EPAs are independently executable, observable, and measurable in their process and outcome, and, therefore, suitable for entrustment decisions. EPAs translate competencies into clinical practice.

"The primary reason for [developing the EPAs] is for patient safety. But we think an equally strong benefit will be to increase the confidence of the learners as they start their residencies."

Carol Aschenbrener, MD

#### References / Resources:

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Example EPA	Competency	Milestones	
		M1 (pre-entrustable)	M2 (entrustable)
Perform a History and Physical exam	<b>Patient Care: History Taking</b>	Accurately gathers clinical information.	Elicits an organized history including information that may not be readily volunteered by the patient
	<b>Professionalism: Sensitivity to patient diversity</b>	Ethnocentric but with guidance, open to understanding cultural differences.	Elicits and seeks to understand each patient's unique characteristics and cultural influences on health.

