The Development of Outcomes-Based Competencies and the Use of a Learning Portfolio to Support Competency Assessment

Lisabeth Maloney, M.D., M.S.; Marc Bertrand, M.D.; Carol Carraccio, M.D.

Dartmouth-Hitchcock Medical Center, Lebanon, New Hampshire

Learner audience: Resident and Fellow education/ACGME general competencies

Needs Assessment: The ACGME Outcomes Project identified six competencies that link patient care and resident educational outcomes and tasked each medical specialty with defining specialty specific language. Portfolios are tools which can hold a variety of evidence in which the learner is the driver and which can document the application of knowledge. Incorporating competency development and assessment into a portfolio can support autonomous and reflective learning, provide a process for both formative and summative evaluation, as well as a model for lifelong learning.

Curriculum: Evaluating competence can be accomplished through direct observation with criterion-referenced assessment with on-going input to the learner (formative feedback) and requires a variety of assessment tools (Carraccio and Englander). We developed competency-based benchmarks and thresholds for the six domains of knowledge defined by the ACGME (medical knowledge, patient care, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice) and defined "learning experiences" and tools for assessing competence for each domain. We have incorporated these experiences and tools into our curriculum and evaluation processes.

Impact: The transformation of this information into an electronic learning portfolio that includes a list of learning activities (e.g., rotations, logs, presentations, courses, quizzes), reflection (e.g., journaling, faculty mentoring) and evaluation generation and delivery/reporting by competency or other parameter (e.g., global, 360 degree, activity specific, certification, duty hours/attendance) is anticipated. This model developed at a program level could be reproduced with minimal specification at a broader level, either within Anesthesiology or across training programs in other disciplines.