



Virginia Mason™

**Utilizing Organizational Infrastructure
for Residency Operations and Resident
Evaluation, Reflection and
Development**

*Ryan Pong, MD, Deputy DIO & Transitional Year PD
Christine Oryhan, MD, Pain Medicine Fellowship PD*

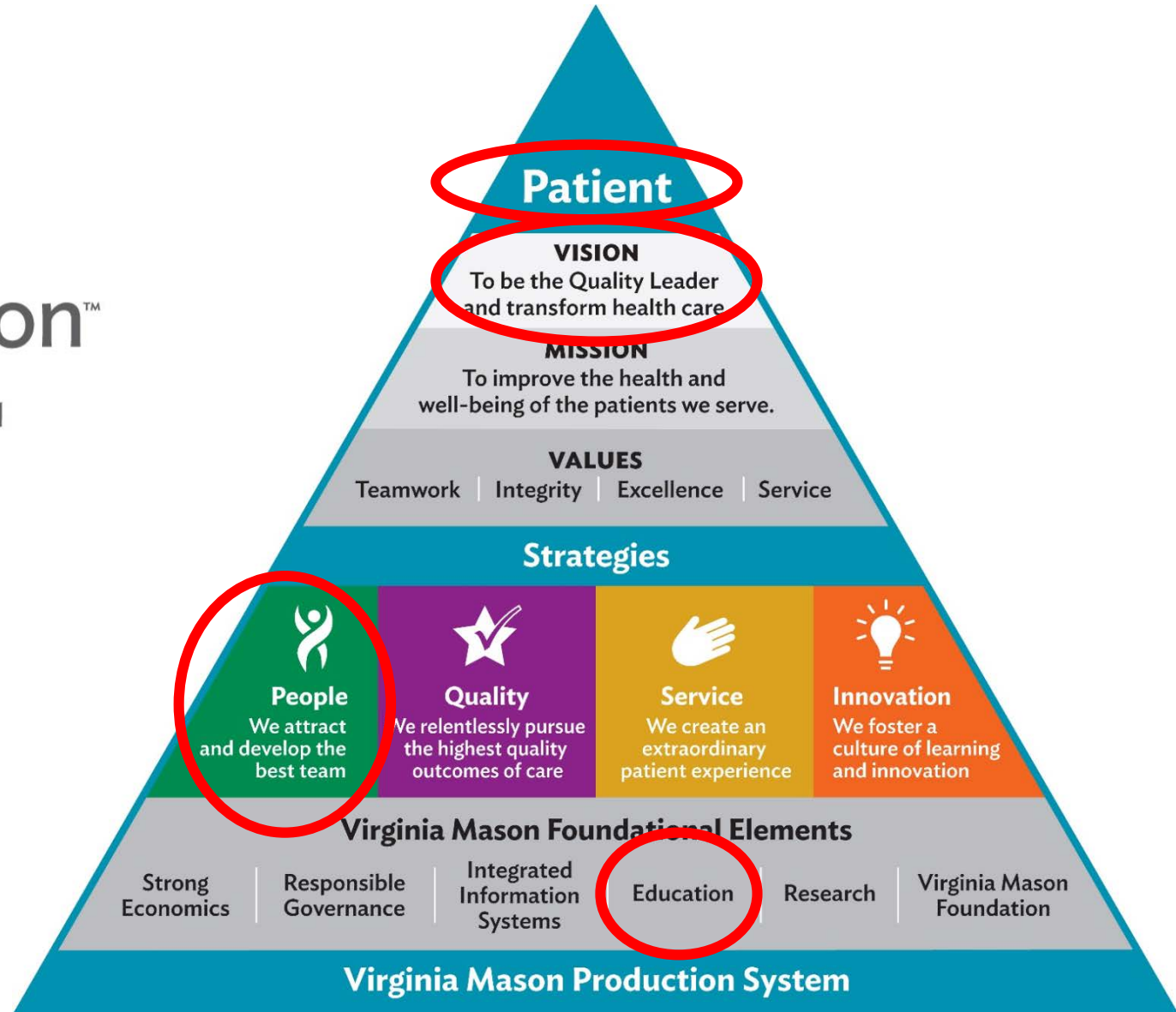
Disclosures

none



Virginia Mason™

OUR STRATEGIC PLAN



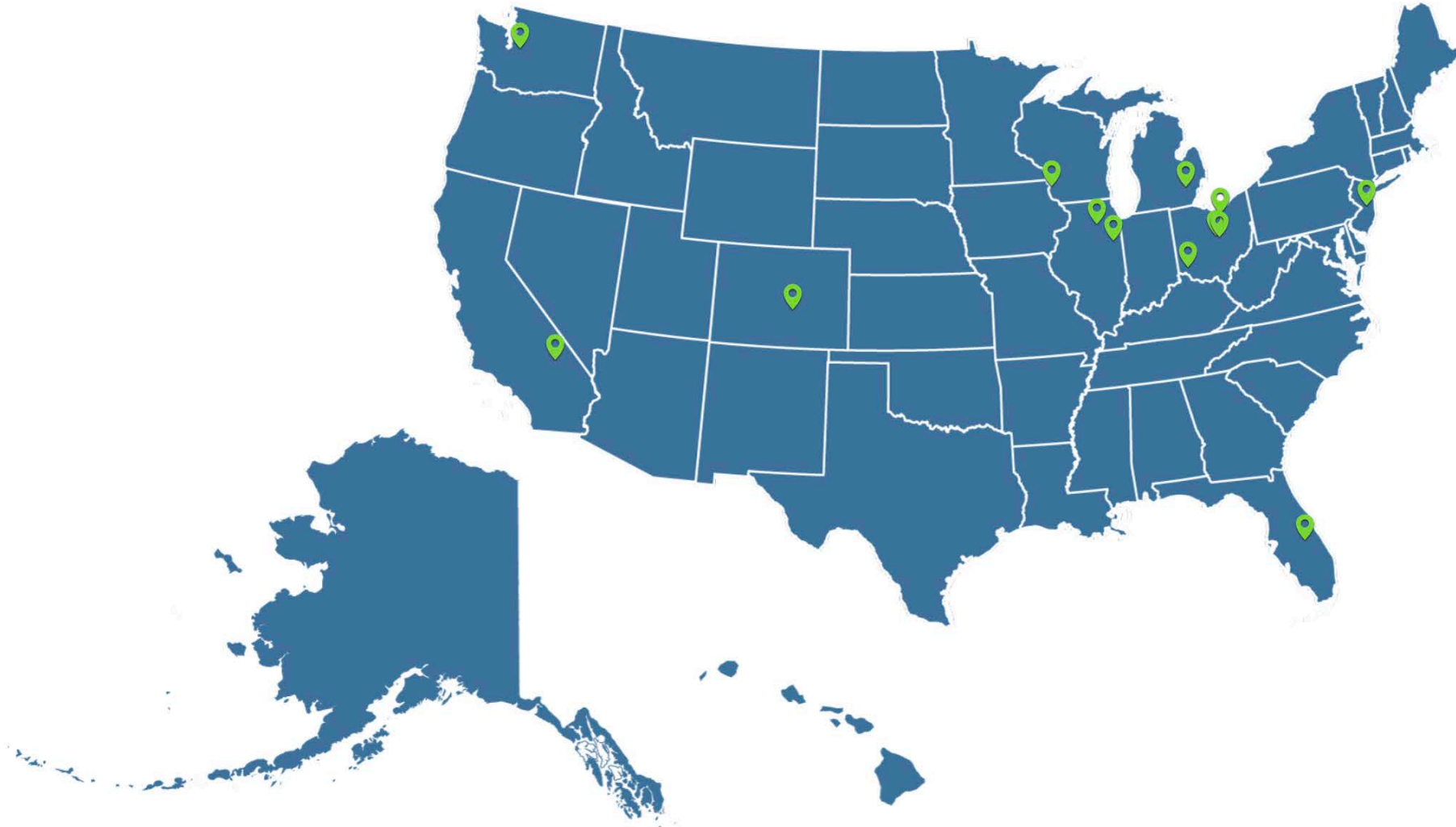
Goals and Objectives

In this session you will:

- Identify elements of an effective performance evaluation
- Assess the structure and content of resident performance evaluations from AIAMC organizations represented here
- Evaluate the differences between resident and professional performance evaluations within and across organizations
- Learn opportunities to leverage your organization's structures to align with GME processes

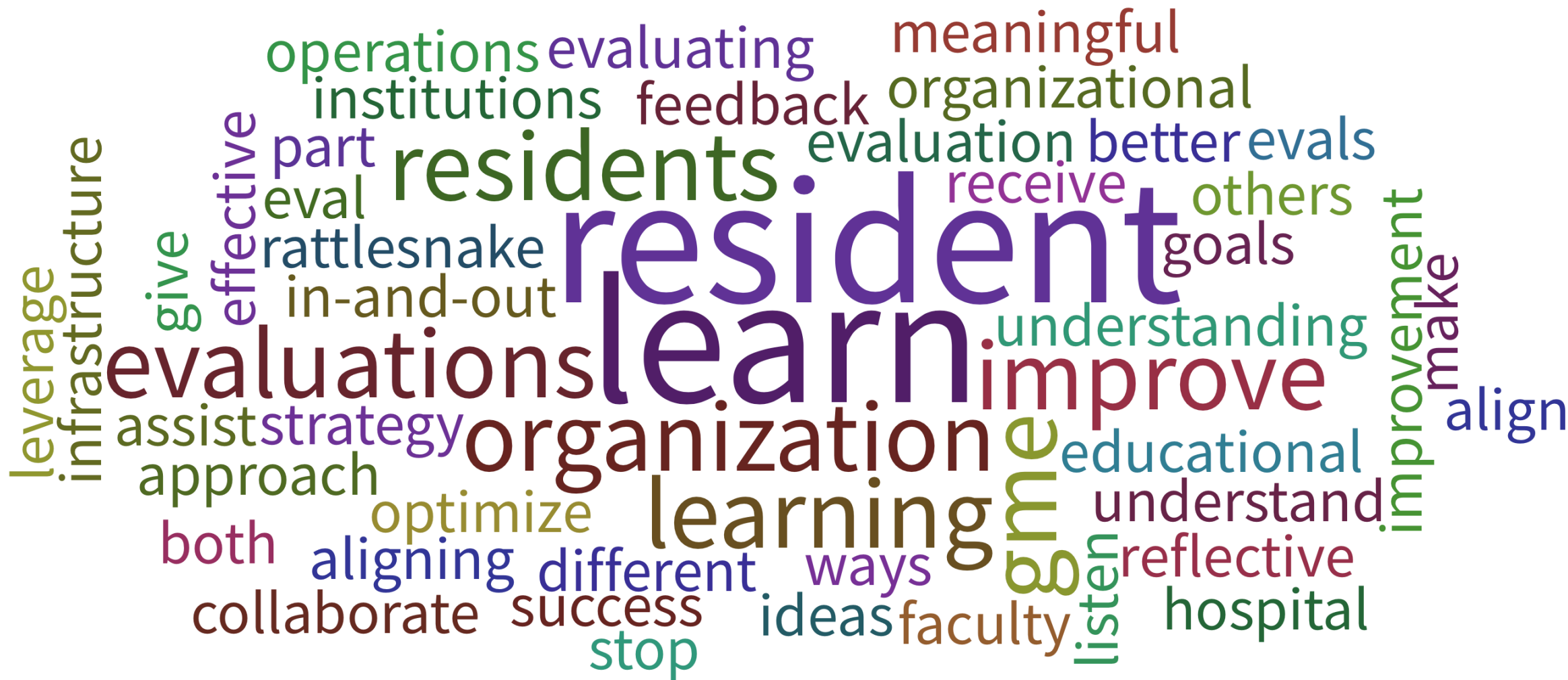
Where are you from?

 Respond at PollEv.com/ryanpong827



In a few words, what is your goal for attending this session?

🔒 Poll locked. Responses not accepted.



GME Alignment with the Organization

Silo Mentality: “mindset present when certain departments or sectors do not wish to share information with others in the same company. This type of mentality will reduce efficiency in the overall operation, reduce morale, and may contribute to the demise of a productive company culture.” ~ Business Dictionary/Forbes



ACGME CLER Findings 2018 - Six themes

(Clinical Learning Environment Review)

1. Engaging residents and fellows in the CLE's **quality improvement and patient safety activities** is essential
2. CLE governance has an important role to play in **ensuring that GME is integrated into the CLE's strategic goals** for improving patient care
3. CLEs must ensure that their **entire medical staff** are engaged in and able to provide a constructive role in teaching patient safety and quality improvement

ACGME CLER Findings 2018 - Six themes

(Clinical Learning Environment Review)

4. CLEs should excel in providing team-based, **interdisciplinary**, collaborative care
5. Burnout needs to be addressed at the **highest levels of the organization** including strategic planning by CLE executive leaders
6. Health system reorganization requires **GME programs and their respective CLEs to collaboratively define and improve** the value that medical education brings to the organization

2019 Organizational Goals

Quality and Safety

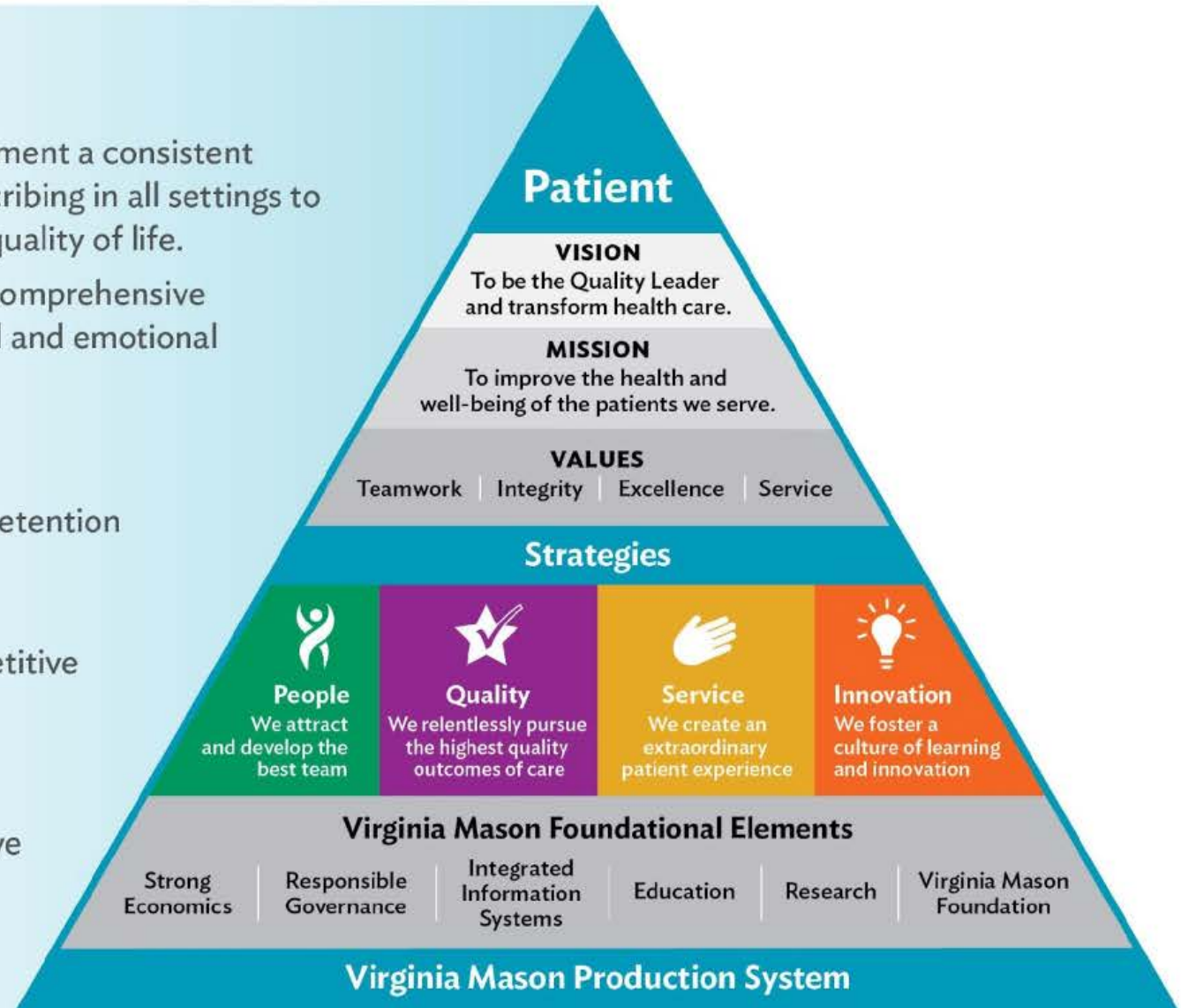
- **Pain Management: Taking on Opioids.** Implement a consistent approach to pain management and opioid prescribing in all settings to improve quality of care, patient outcomes and quality of life.
- **Workplace Safety.** Develop and implement a comprehensive workplace safety program that prevents physical and emotional harm to our team members.

Growth

- **Growth Initiatives.** Implement multi-faceted retention and growth strategies.
- **Patient Centered Access.** Provide access and convenience as key differentiators in our competitive health care market.

The Virginia Mason Experience

- Increase team member engagement and improve patient experiences in an environment where people feel valued, included and respected.



Contents of a Performance Evaluation



The Mission of the ACGME is to improve health care and population health by assessing and advancing the quality of resident physicians' education through accreditation.

Background and Intent: Feedback is ongoing information provided regarding aspects of one's performance, knowledge, or understanding. The faculty empower residents to provide much of that feedback themselves in a spirit of **continuous learning** and **self-reflection**. Feedback from faculty members in the context of routine clinical care should be frequent, and need not always be formally documented.

Formative and summative evaluation have distinct definitions. **Formative evaluation** is *monitoring resident learning* and providing ongoing feedback that can be used by residents to improve their learning in the context of provision of patient care or other educational opportunities. More specifically, formative evaluations help:

- residents identify their strengths and weaknesses and target areas that need work
- program directors and faculty members recognize where residents are struggling and address problems immediately

Summative evaluation is *evaluating a resident's learning* by comparing the residents against the goals and objectives of the rotation and program, respectively. Summative evaluation is utilized to make decisions about promotion to the next level of training, or program completion.

End-of-rotation and **end-of-year evaluations** have both summative and formative components. Information from a summative evaluation can be used formatively when residents or faculty members use it to guide their efforts and activities in subsequent rotations and to successfully complete the residency program.

Feedback, formative evaluation, and summative evaluation compare **intentions with accomplishments**, enabling the transformation of a neophyte physician to one with growing expertise.

V.A.1.c)

The program must provide an objective performance evaluation based on the Competencies and the specialty-specific Milestones, and must: (Core)

V.A.1.c).(1)

use multiple evaluators (e.g., faculty members, peers, patients, self, and other professional staff members); and, (Core)

V.A.1.d)

The program director or their designee, with input from the Clinical Competency Committee, must:

V.A.1.d).(1)

meet with and review with each resident their documented **semi-annual evaluation** of performance, including progress along the specialty-specific Milestones; ^(Core)

V.A.1.d).(2)

assist residents in developing individualized learning plans to **capitalize on their strengths** and **identify areas for growth;** and, ^(Core)

V.A.1.d).(3)

develop plans for residents failing to progress, following institutional policies and procedures. ^(Core)

Group Work

Get into groups--

Introduce yourself

What organization are you from and role

Something you are grateful for

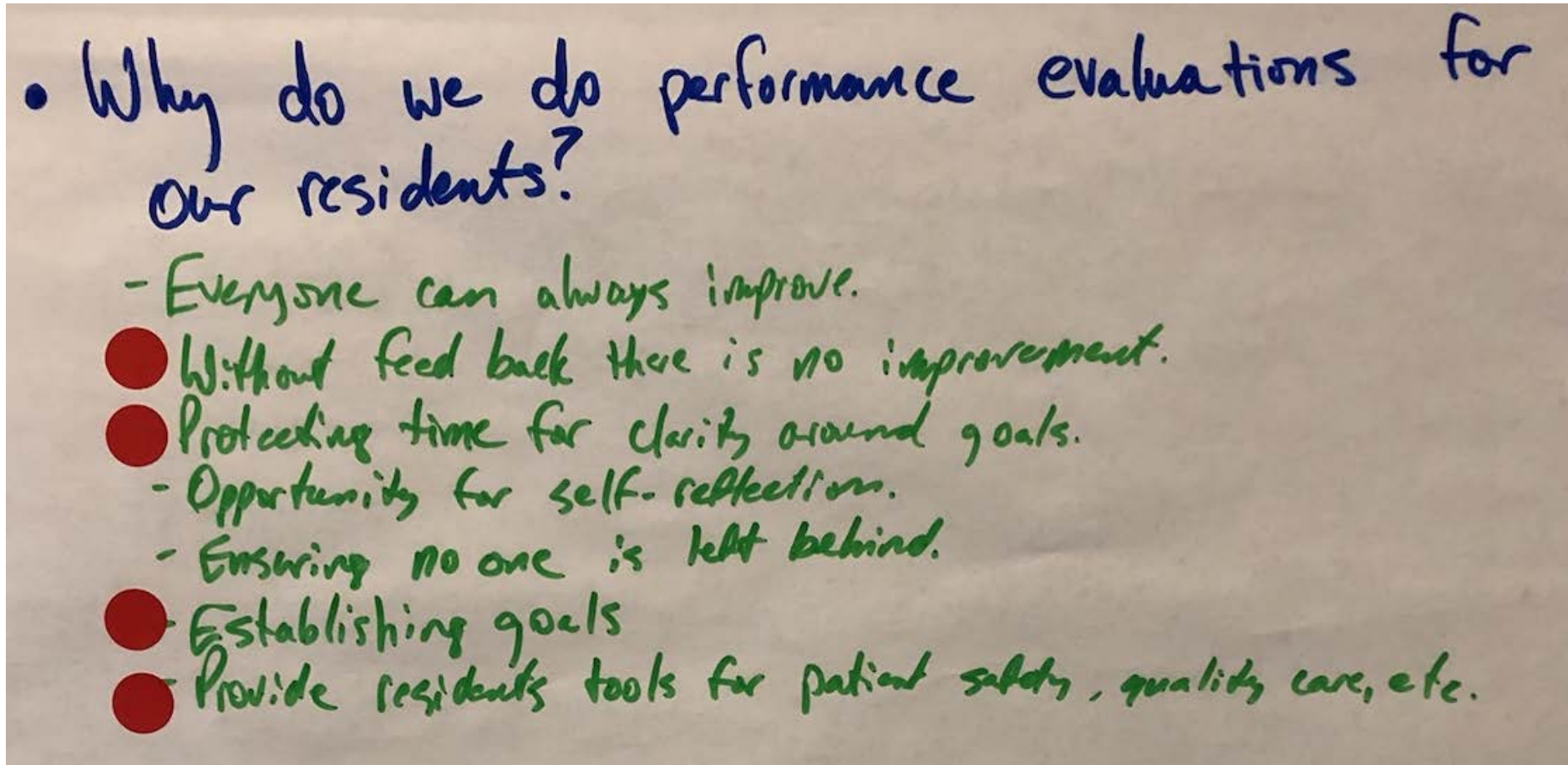
What should be the focus of discussion during a performance evaluation?

 Poll locked. Responses not accepted.



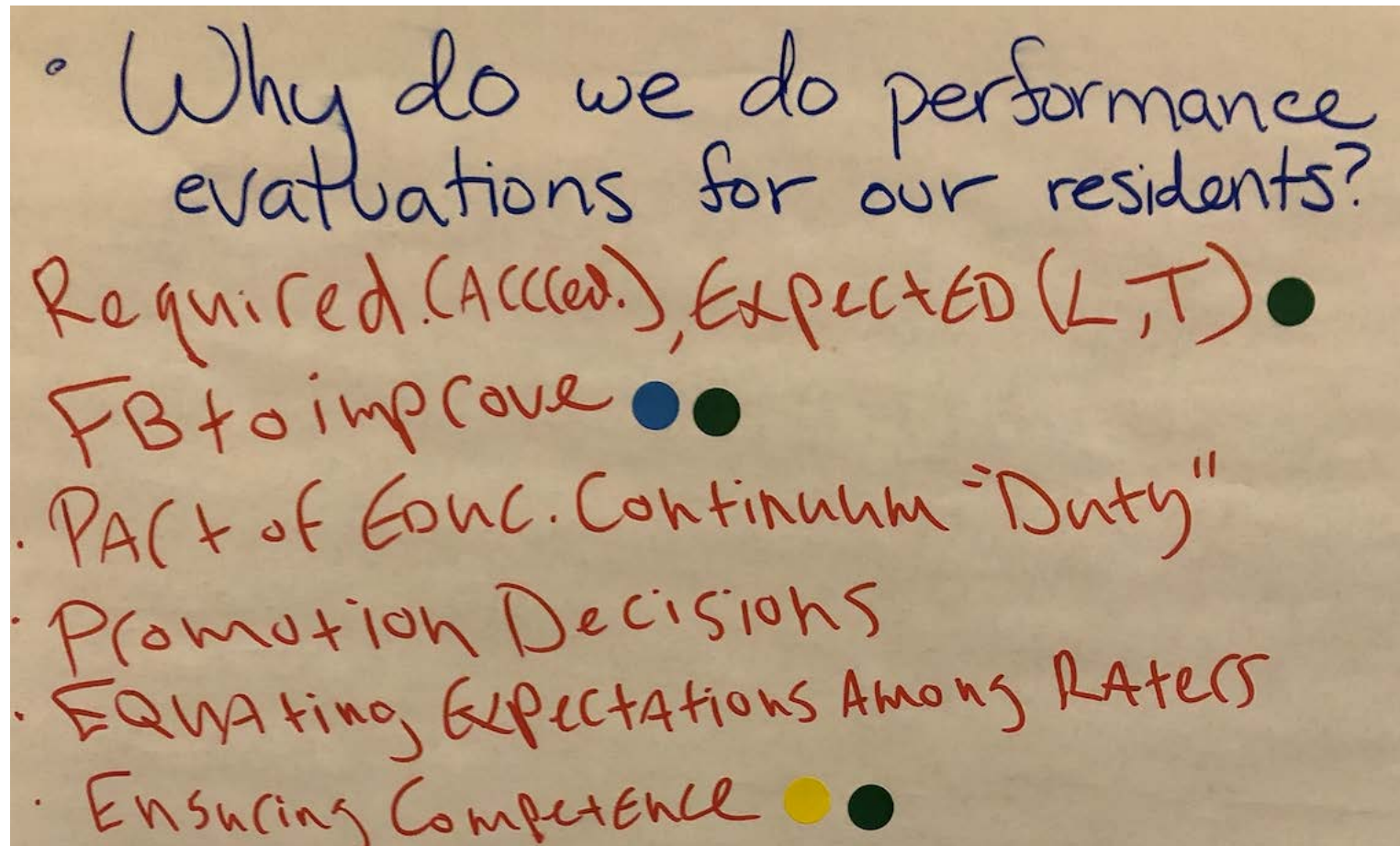
Resident Evaluations Report Out

- Why do we do performance evaluations for our residents?



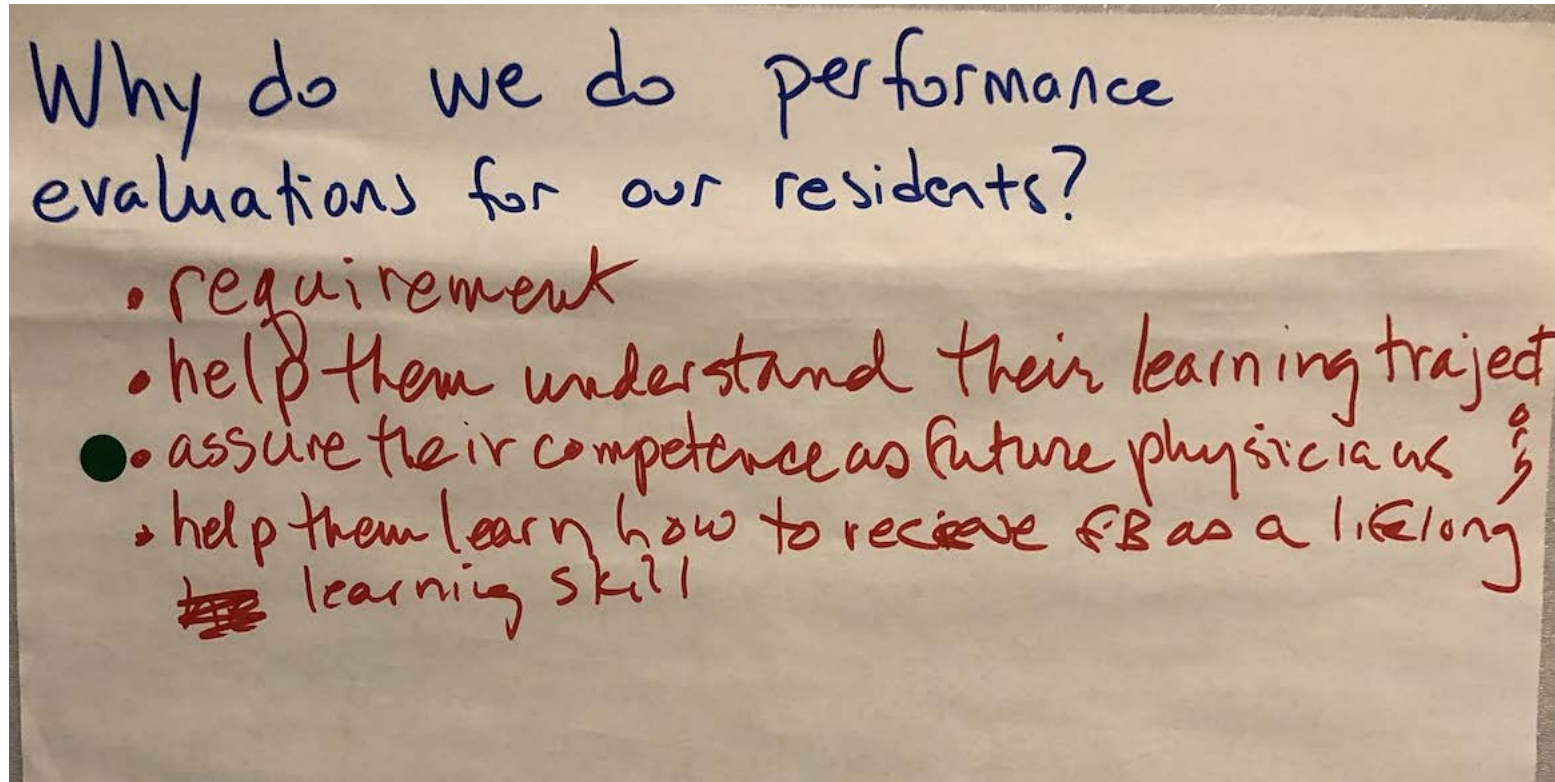
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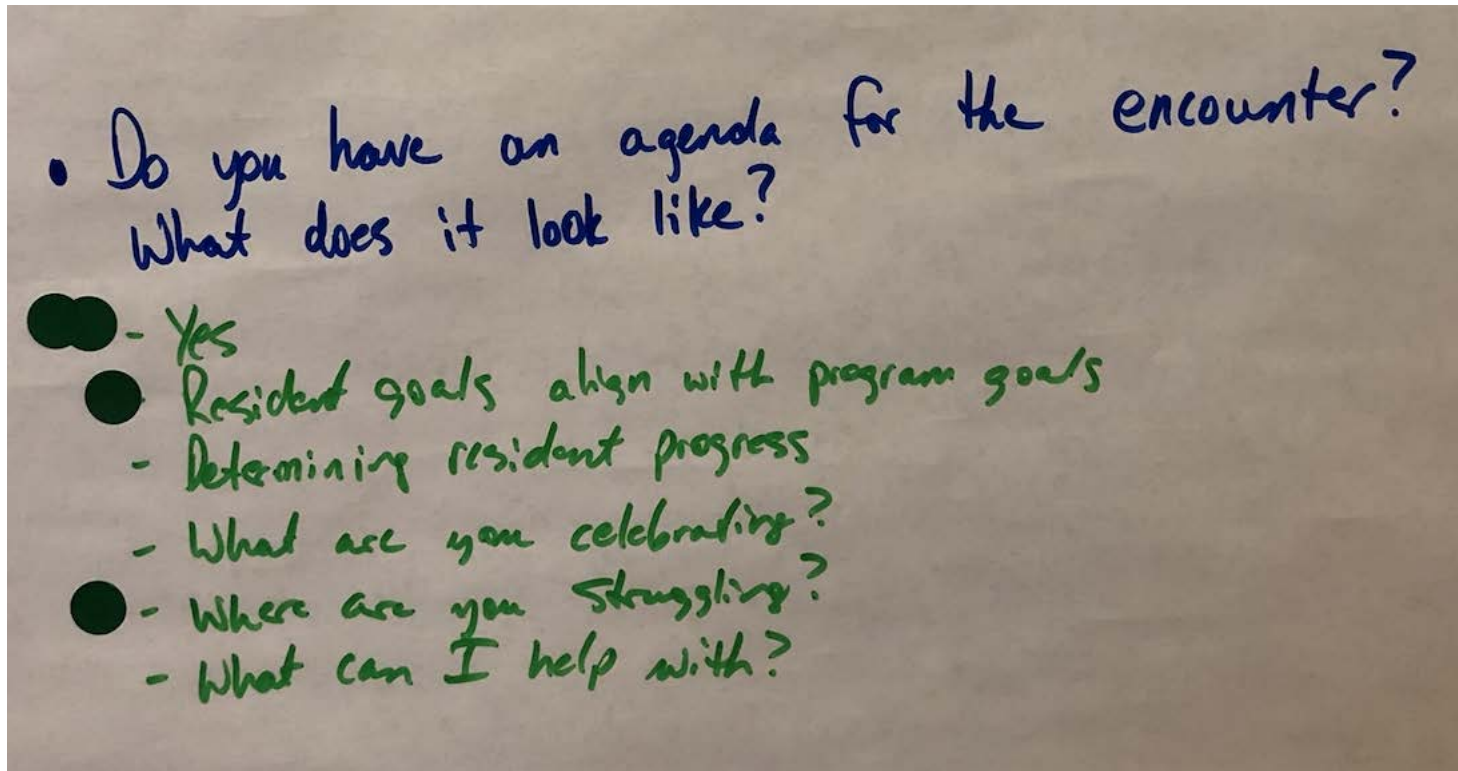
* Why do we do performance evaluations for our residents?

To ensure residents meet competency milestones
to support residents in personal + professional growth

organizational benefit: ensure competent workforce +
learn about program processes, areas of improvement

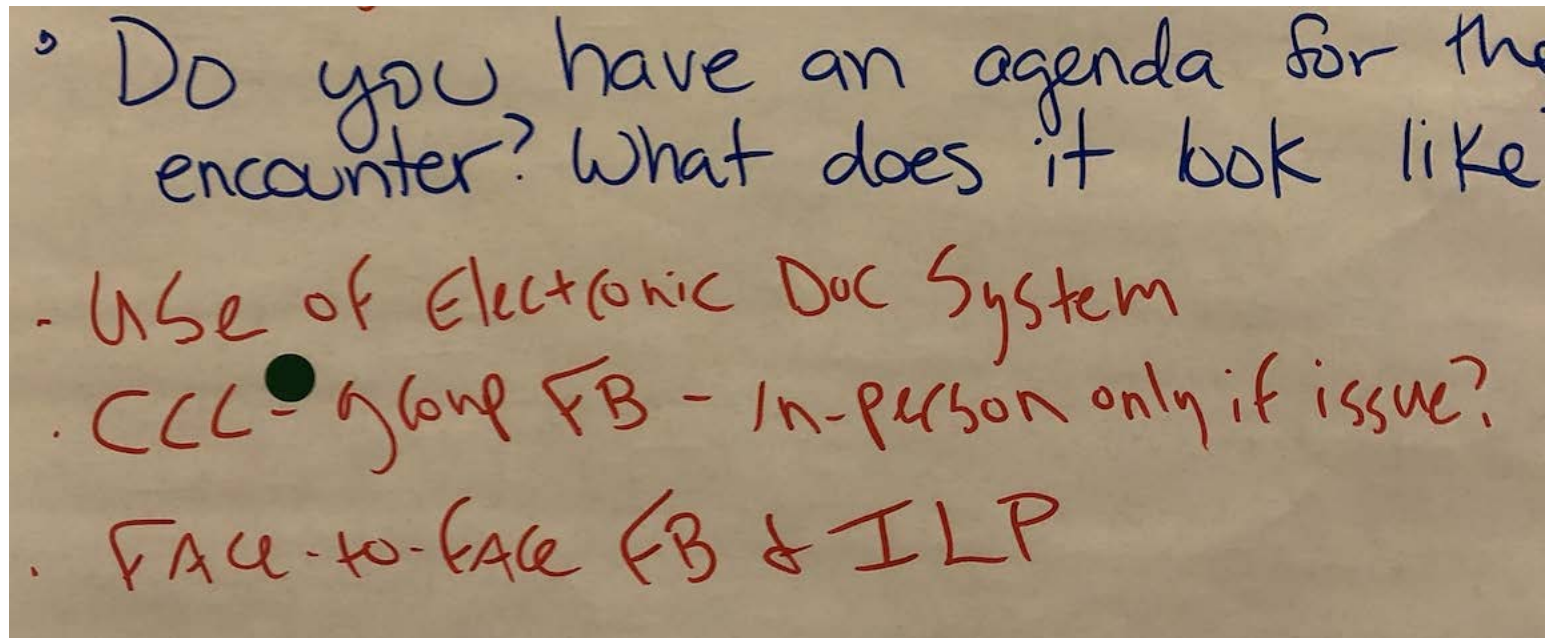
Resident Evaluations Report Out

- Do you have an agenda for the encounter?
What does it look like?



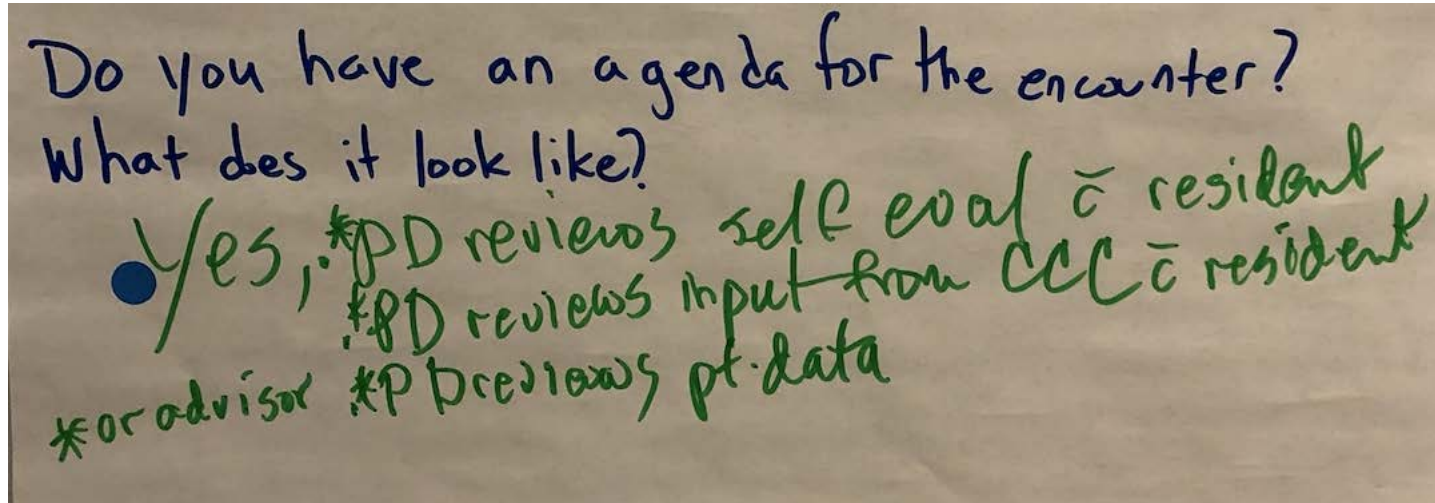
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Resident Evaluations Report Out

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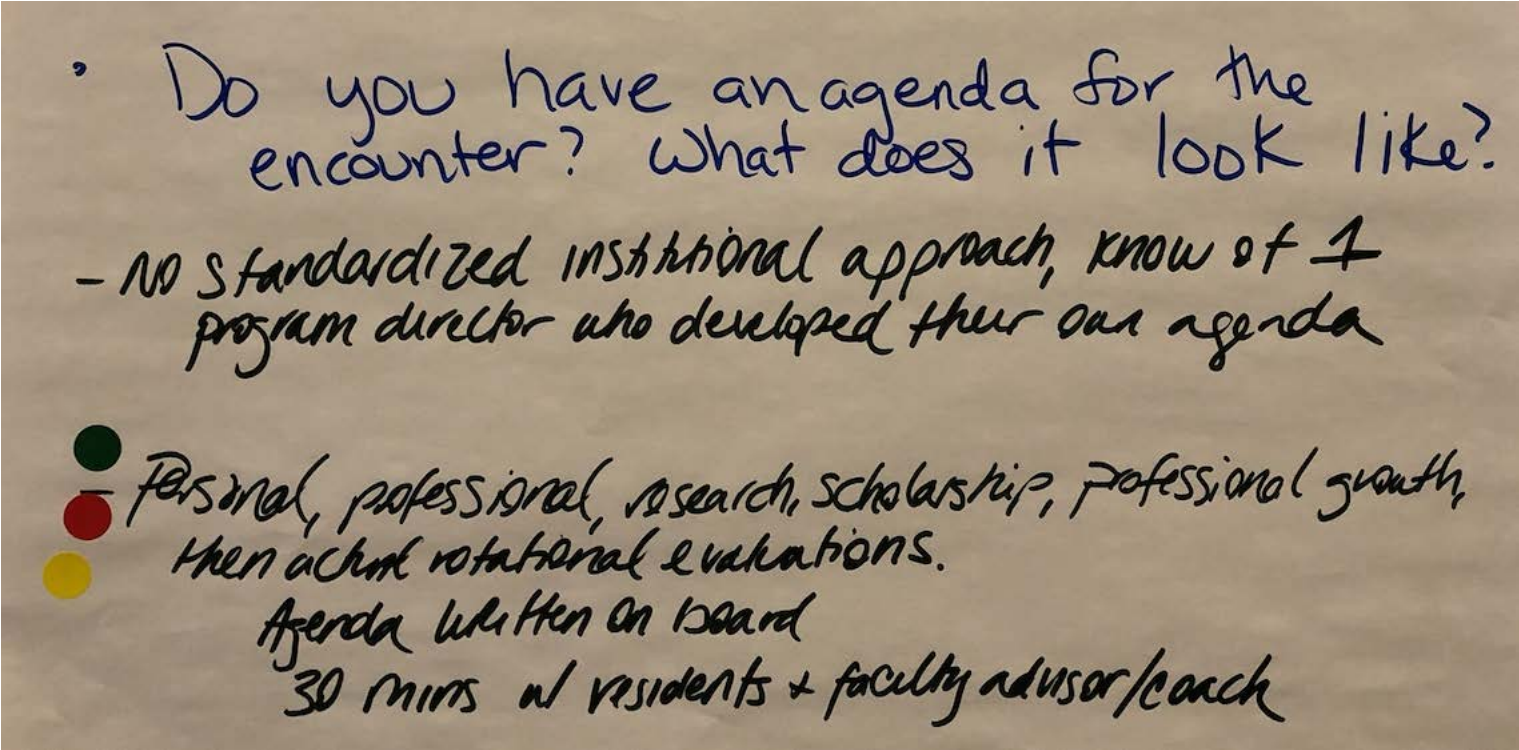


Do you have an agenda for the encounter?
What does it look like?

- Yes, *PD reviews self eval c resident
- *PD reviews input from CCC c resident
- *or advisor *P previous pt. data

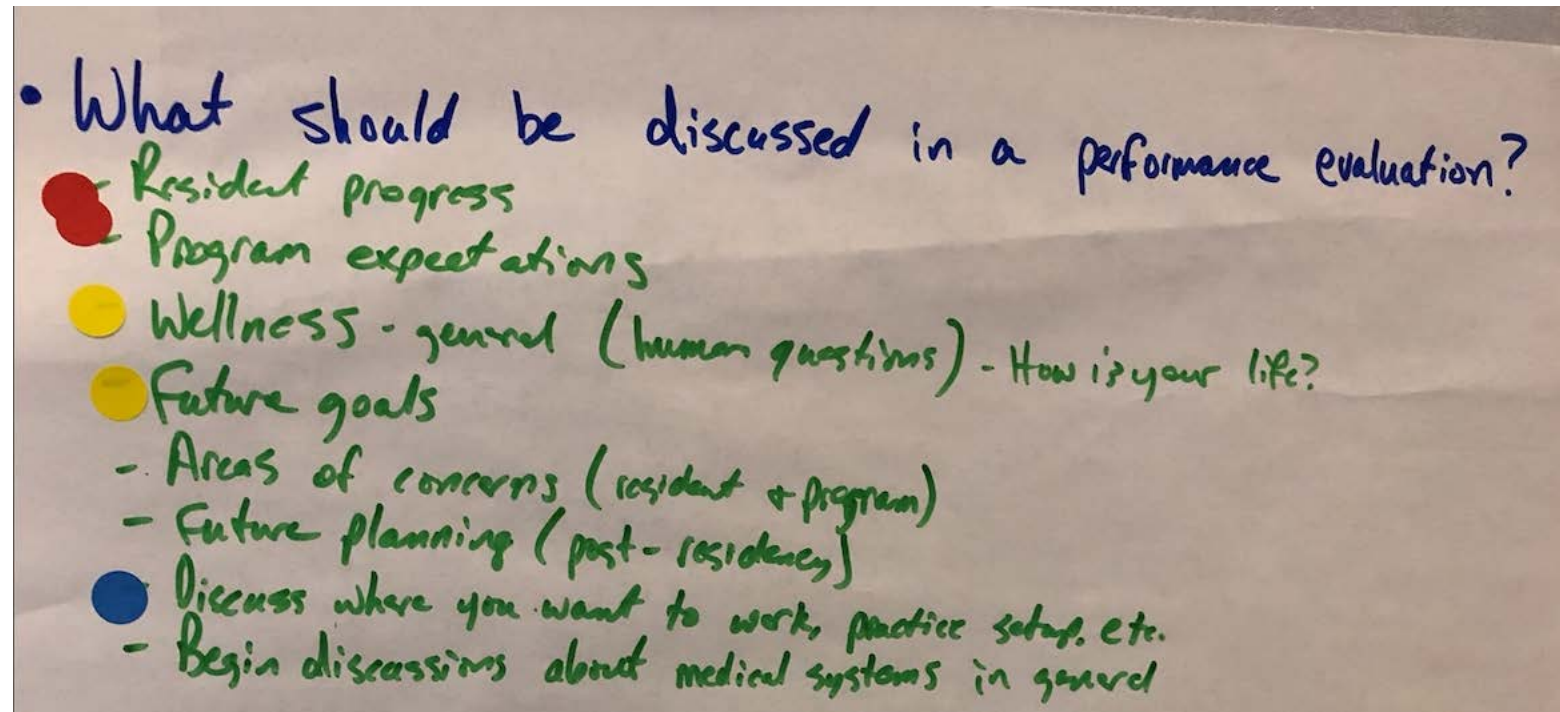
Resident Evaluations Report Out

- Do you have an agenda for the encounter?
What does it look like?

- 
- Do you have an agenda for the encounter? What does it look like?
- NO standardized institutional approach, know of 1 program director who developed their own agenda
 - Personal, professional, research, scholarship, professional growth, then actual rotational evaluations.
 - Agenda written on board
 - 30 mins w/ residents + faculty advisor/coach

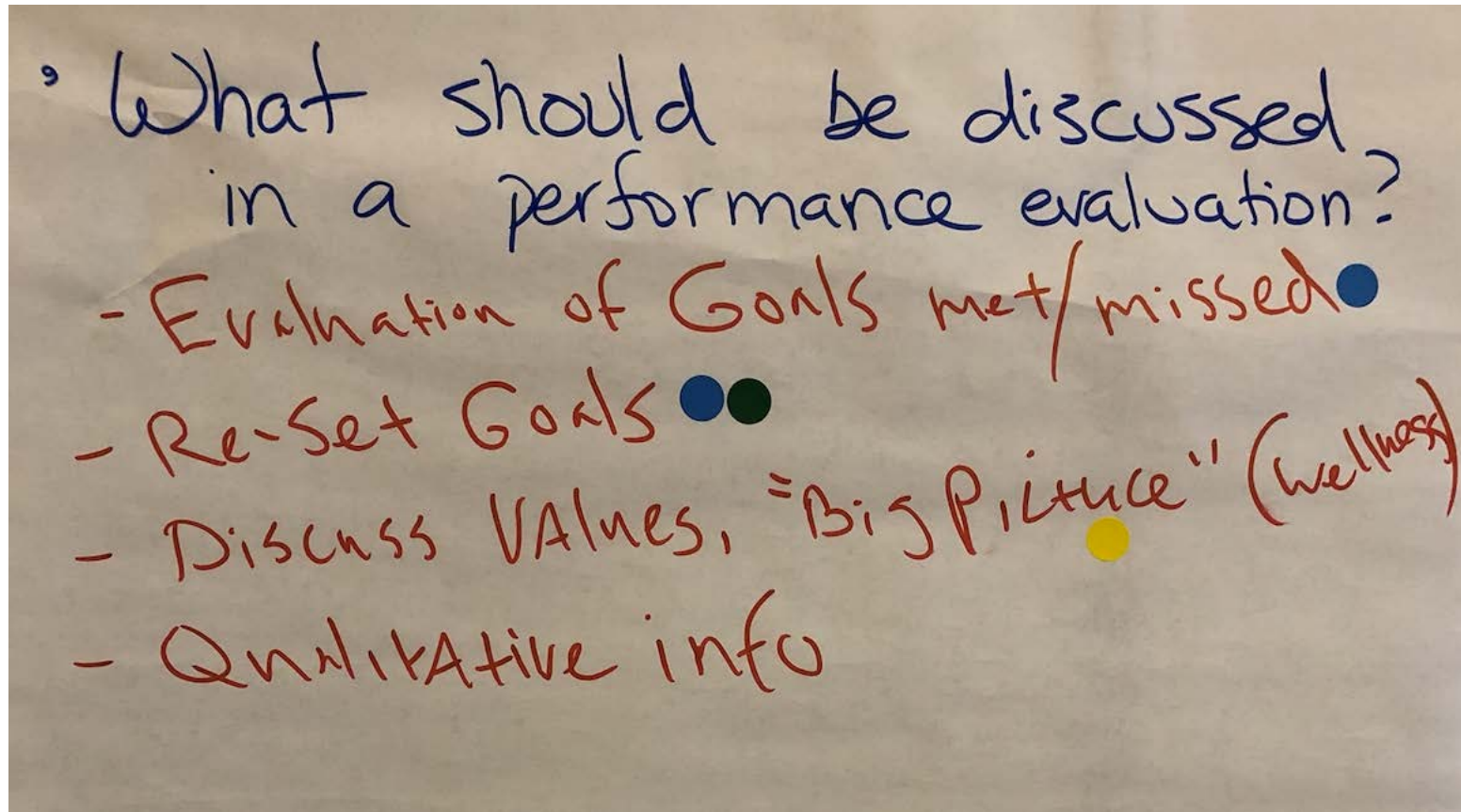
Resident Evaluations Report Out

- What should be discussed in a performance evaluation?



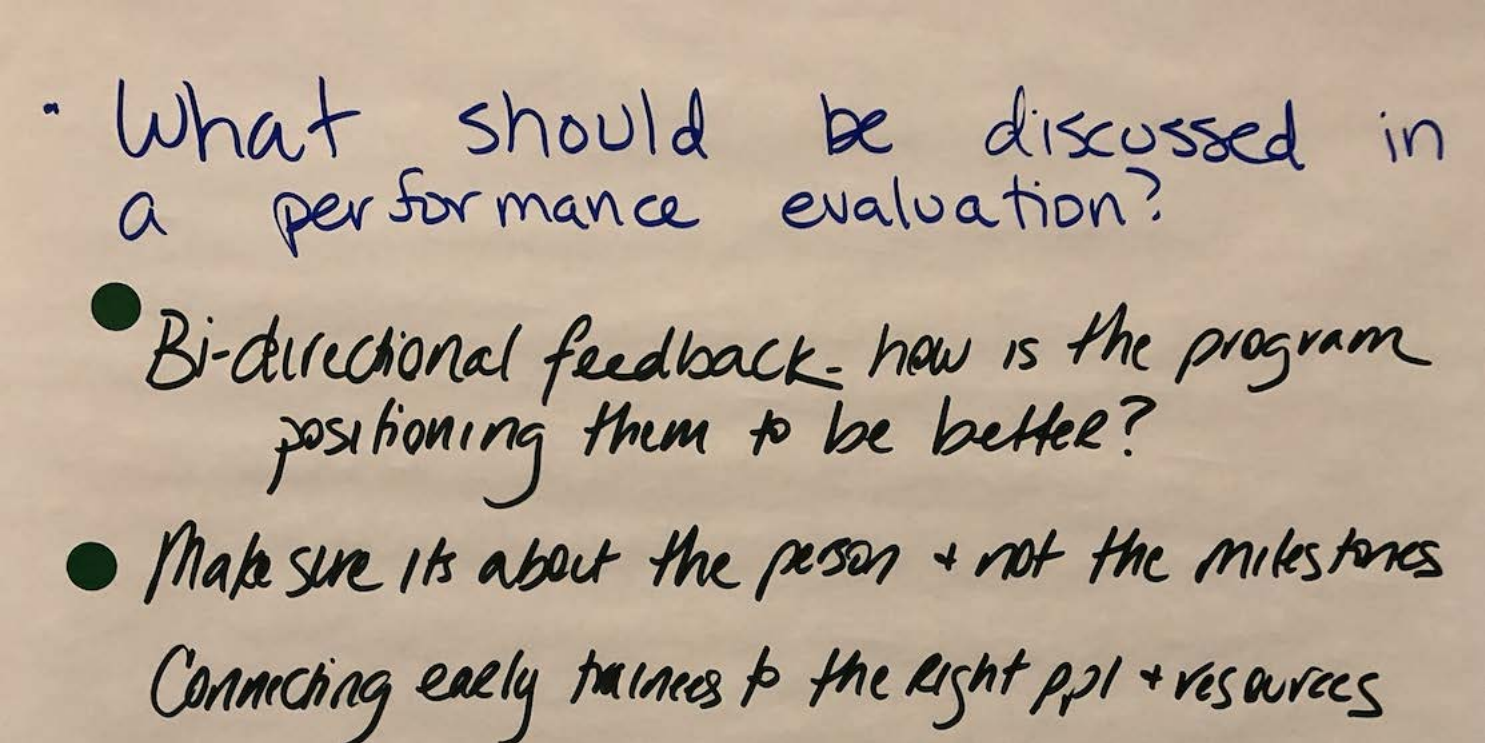
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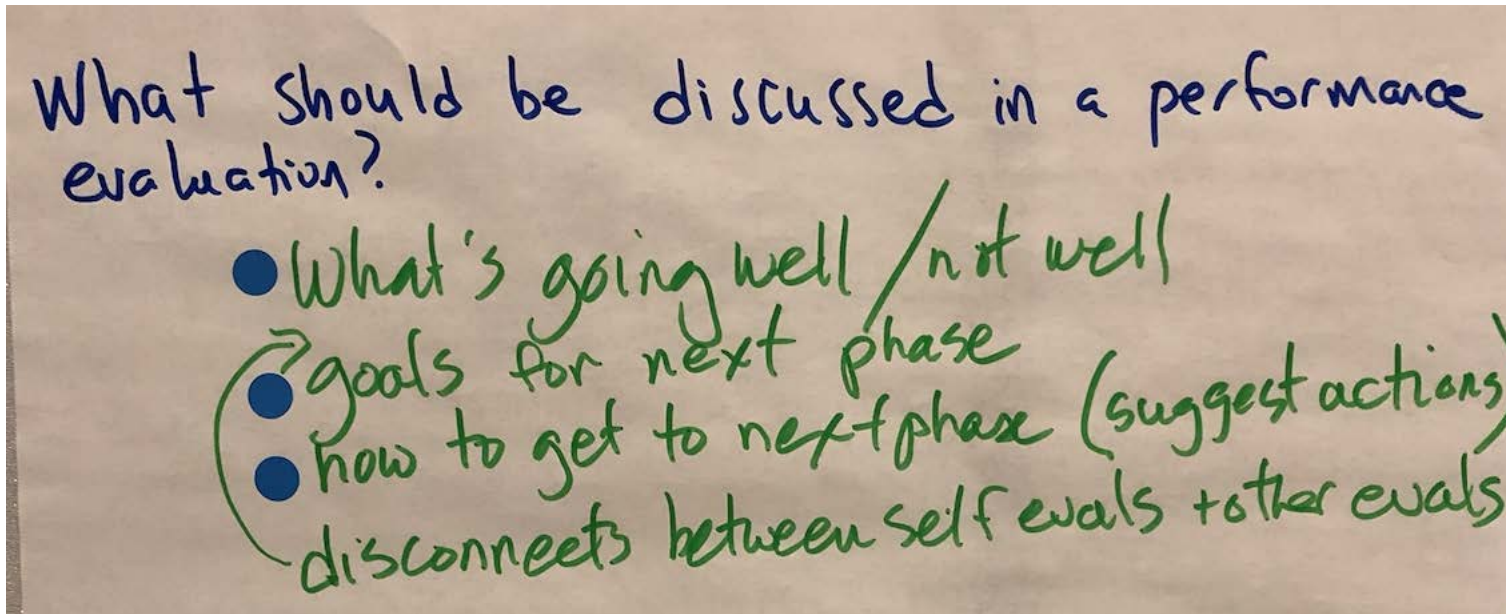
Resident Evaluations Report Out

- What should be discussed in a performance evaluation?

- 
- What should be discussed in a performance evaluation?
- Bi-directional feedback - how is the program positioning them to be better?
 - Make sure its about the person + not the milestones
Connecting early trainees to the right ppl + resources

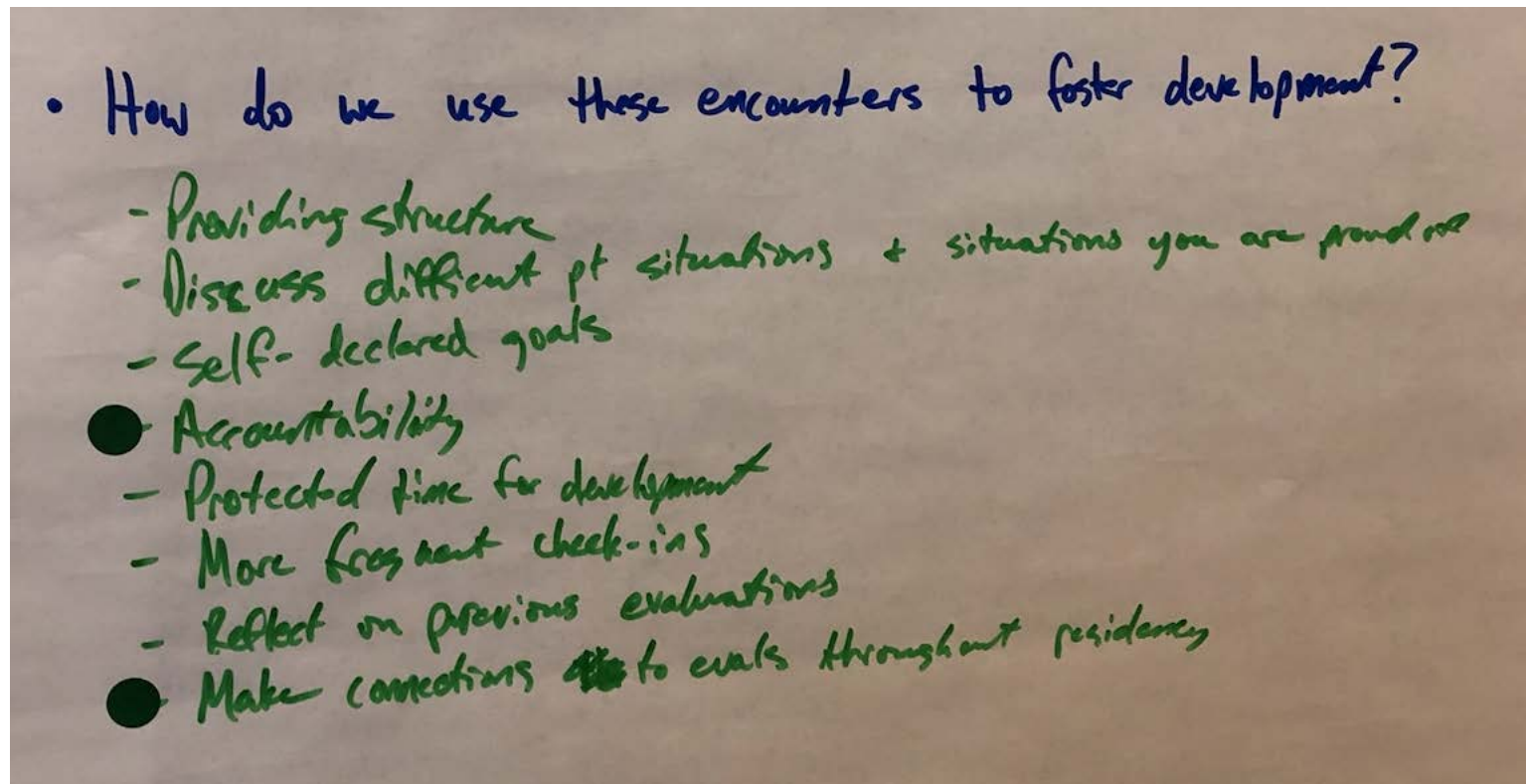
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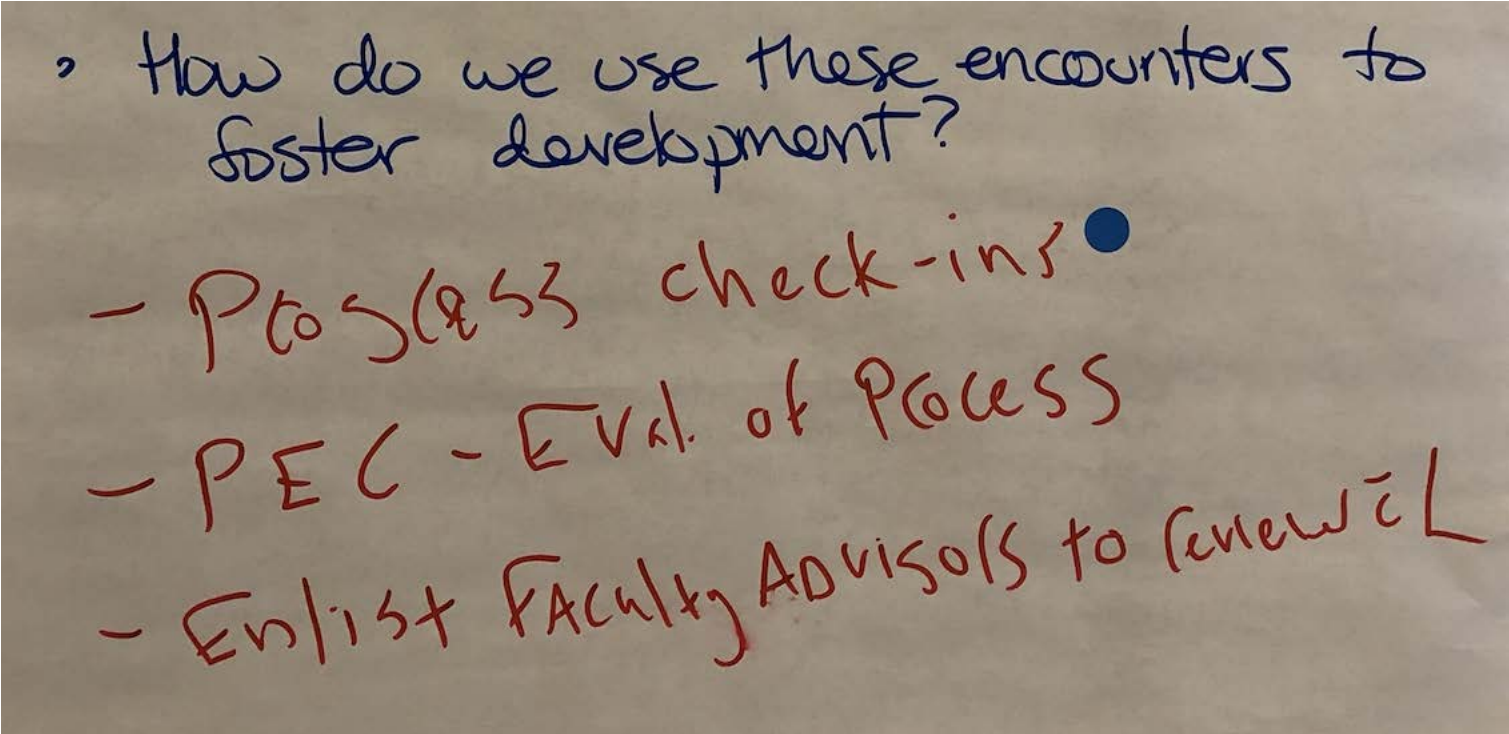
Resident Evaluations Report Out

- How do we use these encounters to foster development?



Resident Evaluations Report Out

- How do we use these encounters to foster development?

- 
- How do we use these encounters to foster development?
- Progress check-ins •
 - PEC - Eval. of Process
 - Enlist Faculty Advisors to Renew CL

Resident Evaluations Report Out

- How do we use these encounters to foster development?

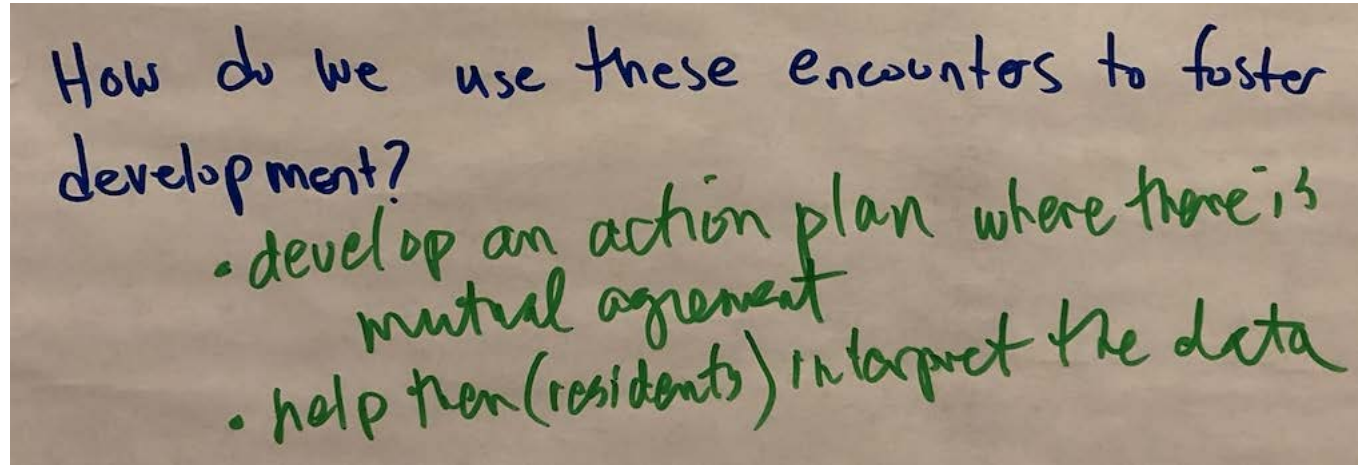
• How do we use these encounters to foster development?

Change the power dynamic. foster open communication

Ensure the person gets the right supports to achieve becoming the best physician

Resident Evaluations Report Out

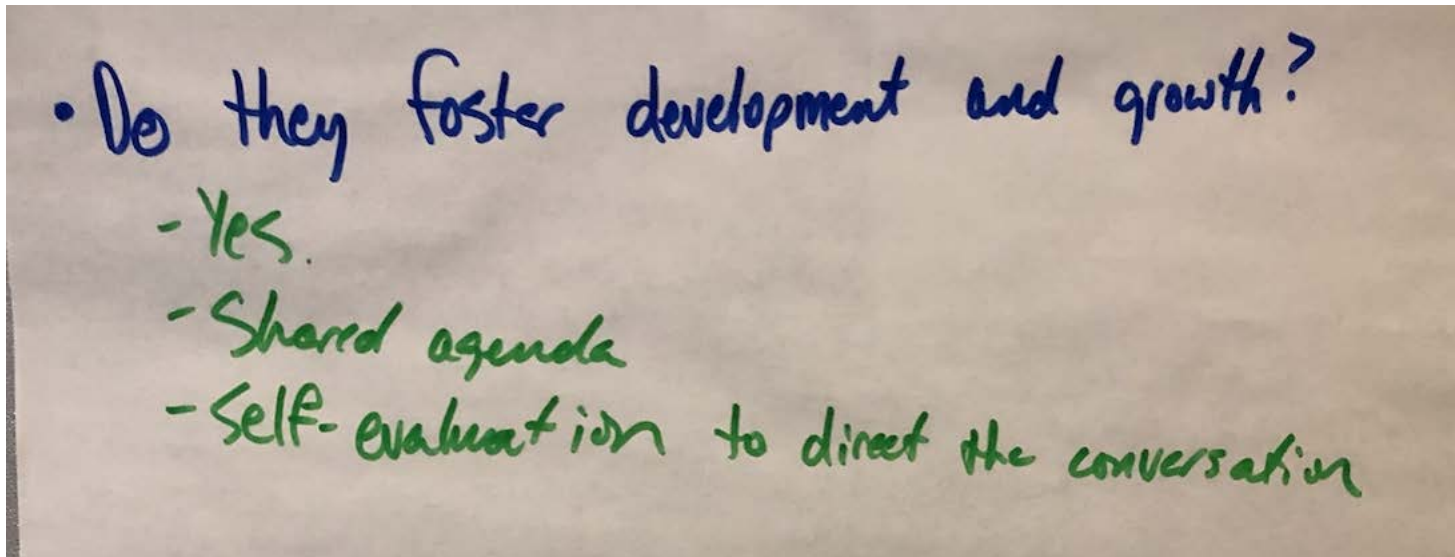
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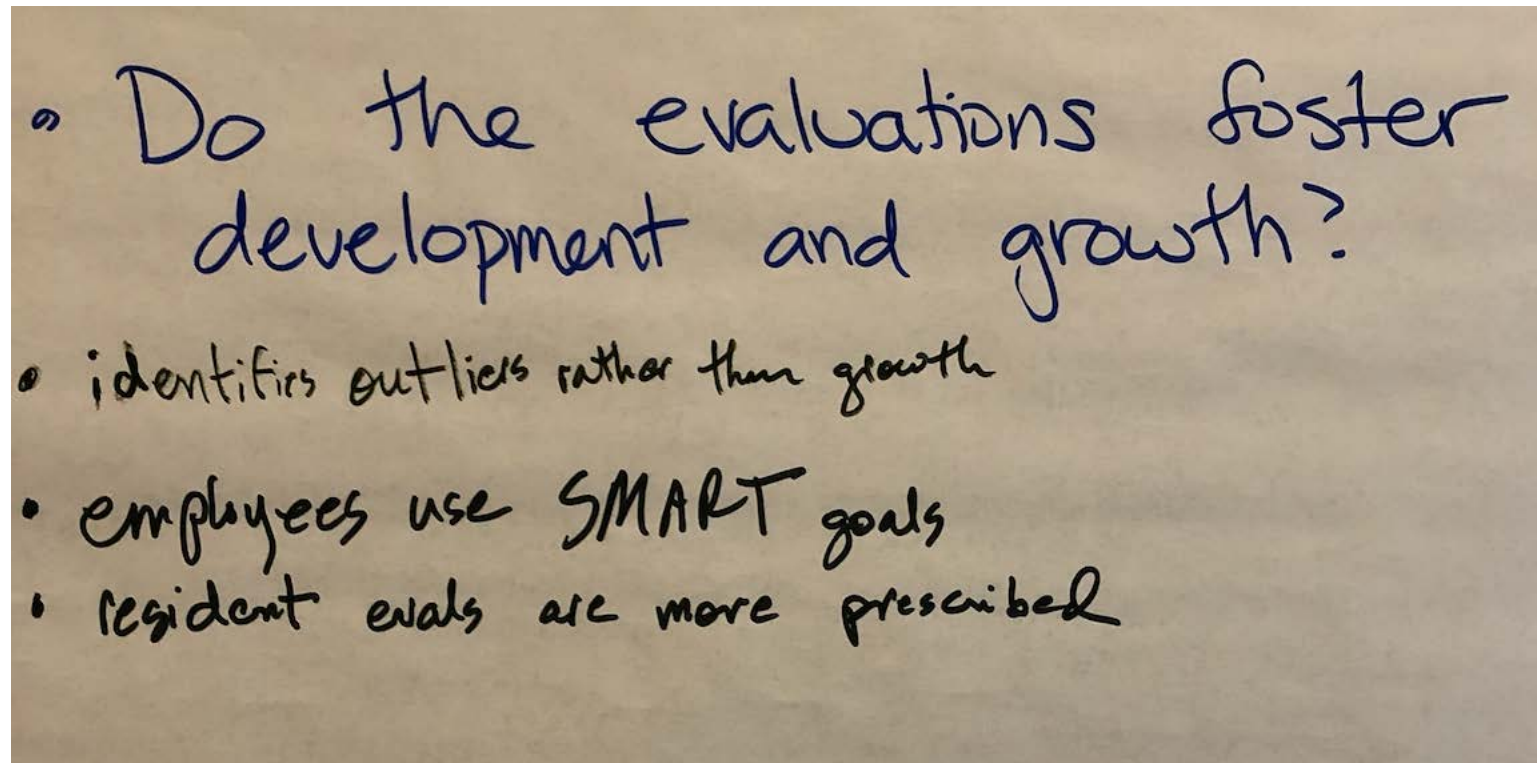
Compare the evaluation forms you brought with the standards the group just reported out:

Do they foster development and growth?



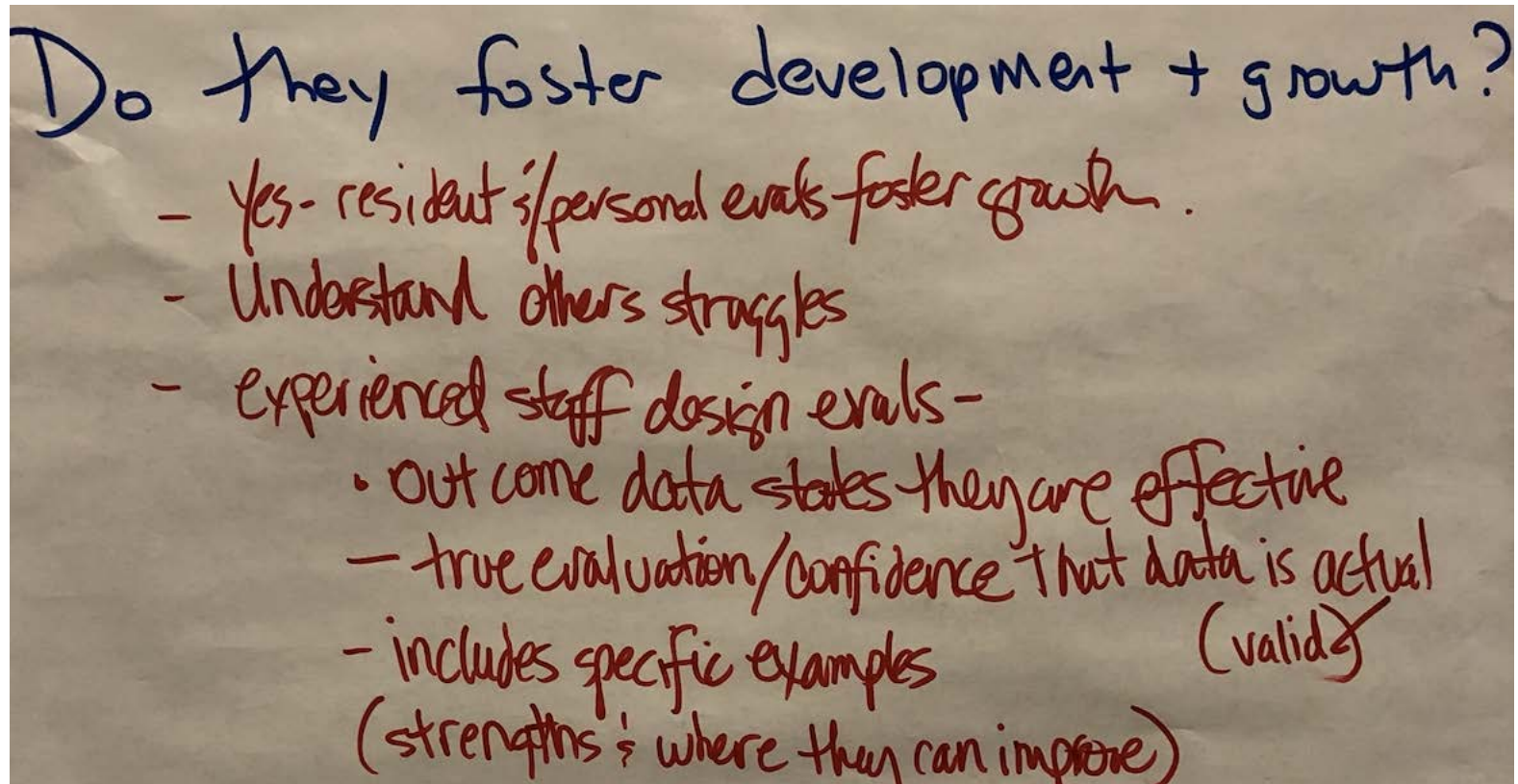
Compare the evaluation forms you brought with the standards the group just reported out:

Do they foster development and growth?

- 
- Handwritten notes on a piece of paper:
- Do the evaluations foster development and growth?
 - identifies outliers rather than growth
 - employees use SMART goals
 - resident evals are more prescribed

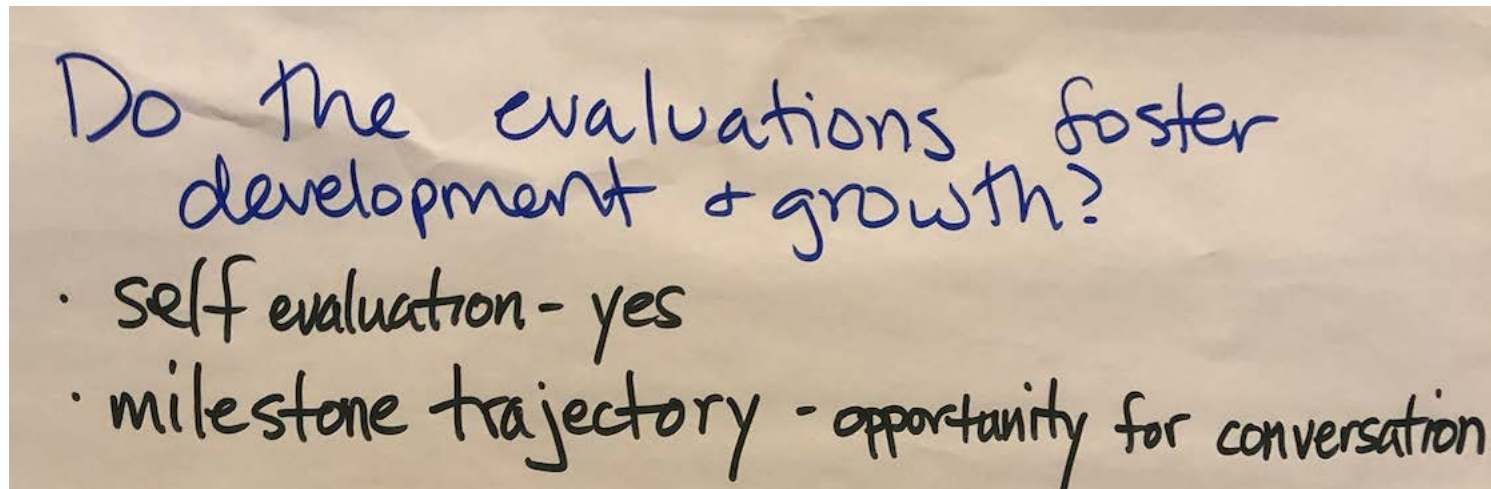
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Compare the evaluation forms you brought with the standards the group just reported out:

Do they foster development and growth?



Compare the evaluation forms you brought with the standards the group just reported out:

What are they missing?

- What are they missing?
 - Human Questions
 - Structured discussion of goals
 - Standardization
 - Training for how to conduct an eval

- What are they missing?
 - 'anchors' - quantifiable measures
 - Formal direct observations

- What are they missing?
- what are your long-term personal goals/dreams?
? Personal wellbeing (should it be included?)

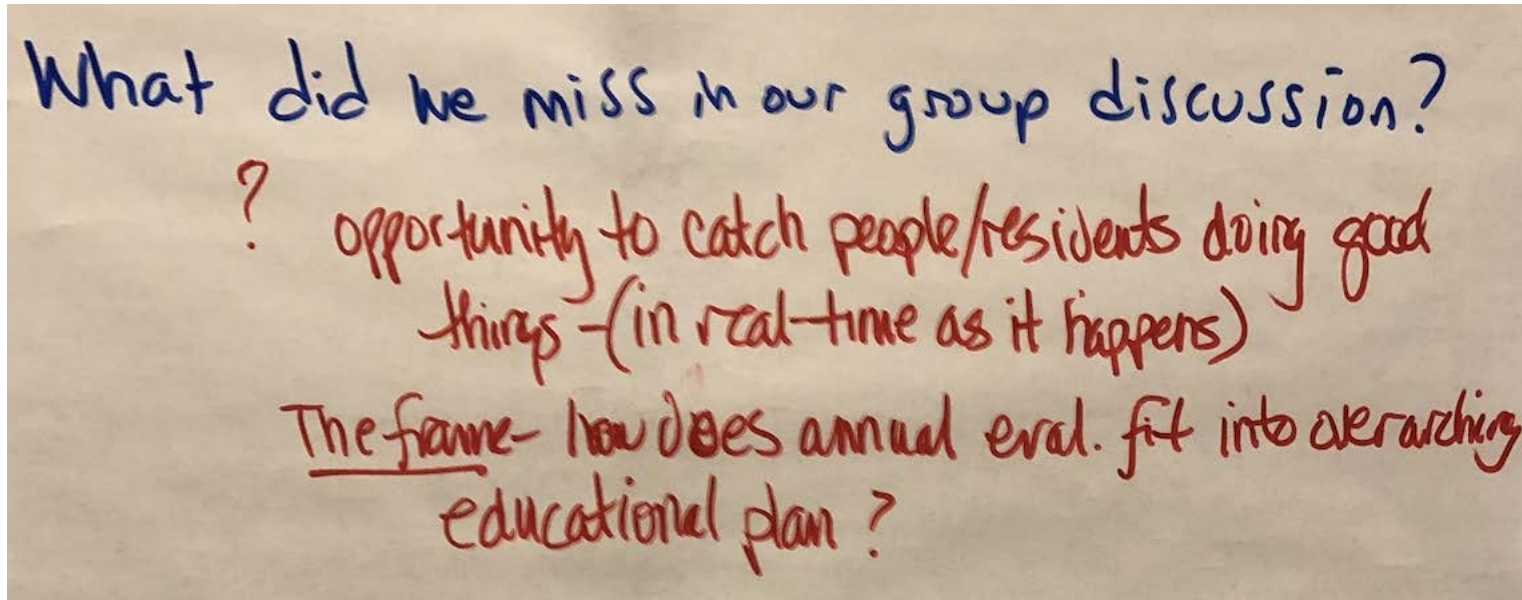
Compare the evaluation forms you brought with the standards the group just reported out:

What are they missing?

- What are they missing?
 - consistency: completion, roles, milestones
 - qualitative feedback
 - global perspective from others (nurses, students (360° evaluations))

Compare the evaluation forms you brought with the standards the group just reported out:

What did we miss in our group discussion?



Compare the evaluation forms you brought with the standards the group just reported out:

What are the differences between the residents' evaluation and the organization's?

What are the differences between the resident's evaluation and the organization's?

- Sometimes None
- Depends on the organization

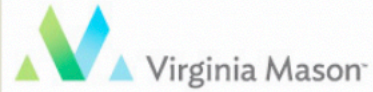
- lack of anchors/quantifiable

on different continuums

- employee vs. medical staff vs learner
- different framework
- " goals



Our Approach



Transitional Year Performance Evaluation Summary
Resident: Jesse Jones, MD

Program Director/Evaluator: Ryan Pong, MD

Training Dates: 6/20/2017-6/24/2018
 Future specialty: Anesthesiology

- 1st Performance Evaluation
- Mid-Year Performance Evaluation
- 3rd Performance Evaluation
- Summative Performance Evaluation

The following table is based on the demonstrated performance of this physician during residency training, personal observation by members of the Transitional Year Clinical Competency Committee, and a composite of multiple evaluations by supervisors. Unless otherwise noted, there were no suspensions or disciplinary actions involving this physician. The scale corresponds to the ACGME Reporting Milestone levels for Transitional Year.

	No information	Entrance into TY Level 1				Level 2		Graduation Target for TY Level 3		Completion of Categorical Residency Level 4		Aspirational Level 5	
Patient Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Systems based practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Practice-based learning and Improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professionalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal Skills and communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reinventing Performance Management

by Marcus Buckingham and Ashley Goodall

Deloitte.

- Too many hours
- Too batched
- Too variable

Understanding the Latent Structure of Job Performance Ratings

Steven E. Scullen
North Carolina State University

Michael K. Mount
University of Iowa

Maynard Goff
Personnel Decisions International

performance dimensions from 7 raters (2 bosses, 2 peers, 2 subordinates, and self) were used. Results indicated that **idiosyncratic rater effects (62% and 53%)** accounted for over half of the rating variance in both data sets. The combined effects of general and dimensional **ratee performance (21% and 25%)** were less than half the size of the idiosyncratic rater effects. Small perspective-related effects were found in

($n = 2,350$ and $n = 2,142$)

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Deloitte.

- ~~Too many hours~~
- ~~Too batched~~
- ~~Too variable~~

- To recognize performance
- To see performance
- To fuel performance

Who are our learners:

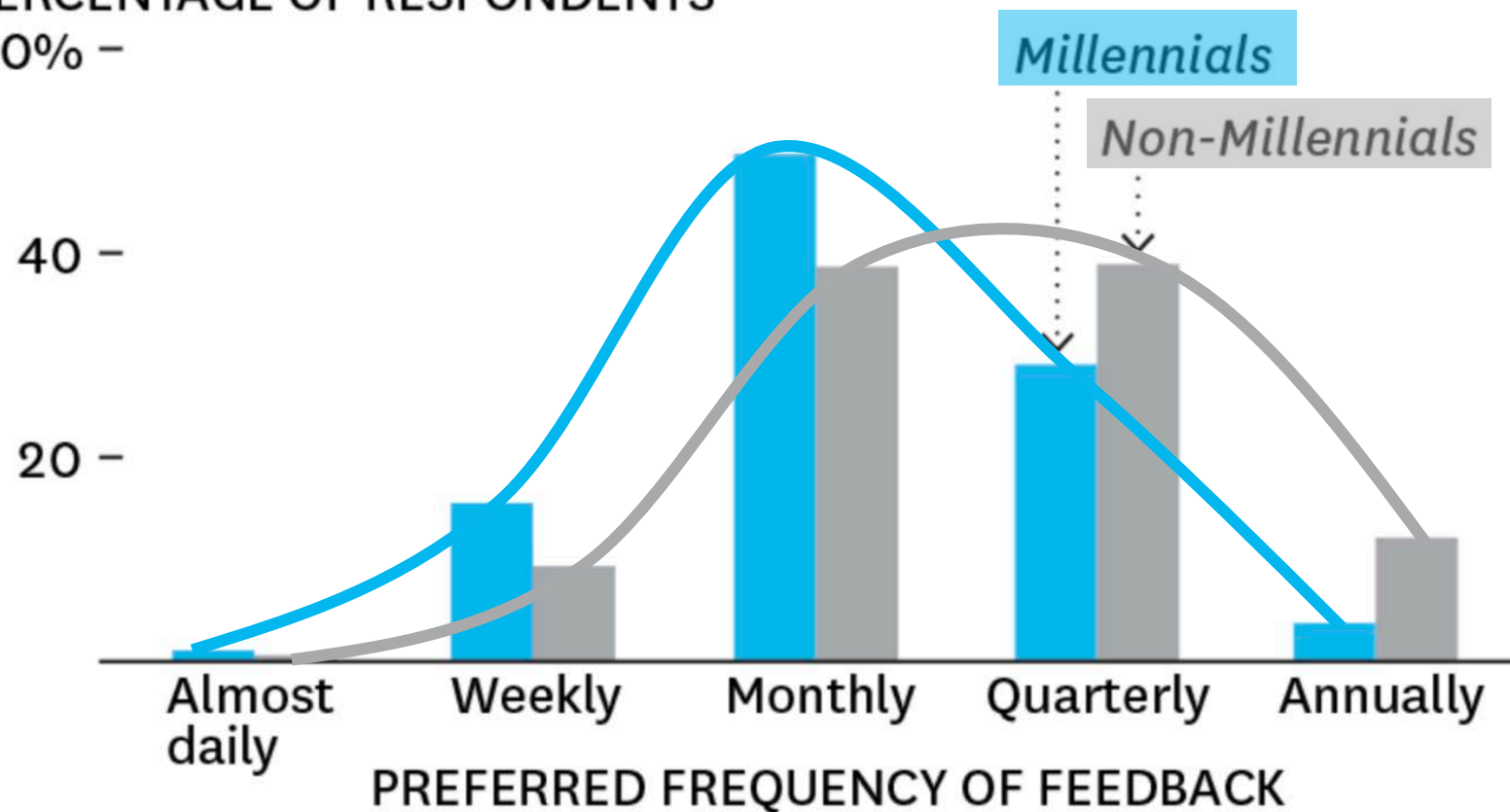
- Approximately 80 million millennials
- Born between 1981 and 1997: ages 22-38 years old
- By 2025, they will comprise 75% of the workforce

HOW OFTEN EMPLOYEES WANT FEEDBACK FROM MANAGERS

Most millennials prefer monthly.

PERCENTAGE OF RESPONDENTS

60% -



Harvard Business Review

140 Sell Direct or Through Amazon?
by THALES TEIXEIRA

135 Manage Your Mid-Career Crisis
by KIERAN SETIYA

40 The Future of Leadership Development
by MIHNEA MOLDOVEANU and DAS NARAYANDAS



Why Feedback Fails

Criticizing people doesn't help them excel. There's a better way.

92



Marcus Buckingham

Head of the ADP
Research Institute,
People & Performance

Ashley Goodall

Senior vice
president,
Cisco Systems

- We aren't the reliable raters of other people's performance that we think
- Criticism inhibits the brain's ability to learn
- Excellence is idiosyncratic, can't be defined in advance, and isn't the opposite of failure. Managers can't "correct" a person's way to excellence.

Harvard Business Review

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- Look for outcomes: "Yes, that!"
- Replay your instinctive reactions

INSTEAD OF	TRY
Can I give you some feedback?	Here's my reaction.
Good job!	Here are three things that really worked for me. What was going through your mind when you did them?
Here's what you should do.	Here's what I would do.
Here's where you need to improve.	Here's what worked best for me, and here's why.
That didn't really work.	When you did x, I felt y or I didn't get that.
You need to improve your communication skills.	Here's exactly where you started to lose me.
You need to be more responsive.	When I don't hear from you, I worry that we're not on the same page.
You lack strategic thinking.	I'm struggling to understand your plan.
You should do x [in response to a request for advice].	What do you feel you're struggling with, and what have you done in the past that's worked in a similar situation?

- Look for outcomes: "Yes, that!"
- Replay your instinctive reactions

Harvard Business Review

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- Look for outcomes: “Yes, that!”
- Replay your instinctive reactions
- Never lose sight of your highest-priority interrupt
- Explore the present, past, and future.

Annual Performance Summary and Self-Assessment

Summarize performance for the review period.

- Team Member Completes **Green Sections**
- Leader Completes **Blue Sections**

Performance Year:	2018	
Team Member Name:	Ryan Pong	
Team Member Position Title:	Anesthesiologist	
Employee Number:	20438	
Reports To:	Wyn Strodbeck	
Leader Position Title:	Chief	
Department:	Anesthesiology	
Attestation Checklist: Leader		Attestation Checklist: Team Member
<input type="checkbox"/>	This team member is fully compliant with all mandatory requirements and required licenses and/or certifications on the date this form was signed.	<input type="checkbox"/>
<input type="checkbox"/>	Performance Success goals are current and regular check-in conversations have occurred.	Review Physician Job Description, Physician Compact, Leadership Compact
<p>1. Please provide 3-5 specific examples of this team member's KEY ACCOMPLISHMENTS for this performance period.</p> <p>Team Member Self-Assessment: Click here to enter text.</p>		
<p>Leader Comments: Click here to enter text.</p>		
<p>2. Please provide 2-3 specific examples of this team member's key STRENGTHS for this performance period.</p> <p>Team Member Self-Assessment: Click here to enter text.</p>		
<p>Leader Comments: Click here to enter text.</p>		
<p>3. Please provide 2-3 specific examples of this team member's AREAS FOR DEVELOPMENT for this performance period.</p> <p>Team Member Self-Assessment: Click here to enter text.</p>		
<p>Leader Comments: Click here to enter text.</p>		
<p>4. Please provide a BRIEF SUMMARY OF PROGRESS and WORK TO BE COMPLETED for this performance period.</p> <p>Team Member Self-Assessment: Click here to enter text.</p>		
<p>Leader Comments: Click here to enter text.</p>		
<p>5. Please provide, plans for the coming year. Include ideas for RESULTS-BASED and DEVELOPMENT GOALS.</p> <p>Team Member Self-Assessment: Click here to enter text.</p>		

Quarterly TY Performance Summary and Self-Assessment

Summarize performance for the review period.

- Team Member Completes **Green Sections**
- Leader Completes **Blue Sections**

Performance Period (circle one): <u>Q1 (Jul-Aug-Sep)</u> Q2 (Oct-Nov-Dec) Q3 (Jan-Feb-Mar) Q4 (Apr-May-Jun)	
Resident Name:	
Attestation Checklist: Leader	
<input type="checkbox"/>	This resident is fully compliant with all mandatory requirements and required licenses and/or certifications on the date this form was signed.
<input type="checkbox"/>	Performance Success goals are current and regular check-in conversations have occurred.
Attestation Checklist: Resident	
<input type="checkbox"/>	We have reviewed the role-specific competencies and principal accountabilities for this resident. We have reviewed clinical evaluations on the myevaluation's platform. If applicable, role-specific competencies, accountabilities and expectations that do not meet minimum standards are documented in a Performance Improvement Plan.
1. Please provide 3-5 specific examples of this resident's KEY ACCOMPLISHMENTS for this performance period. Resident Self-Assessment: Click here to enter text.	
Program Director Comments: Click here to enter text.	
2. Please provide 2-3 specific examples of this resident's key STRENGTHS for this performance period. Resident Self-Assessment: Click here to enter text.	
Program Director Comments: How do you fill the gap in knowledge?	
3. Please provide 2-3 specific examples of this resident's AREAS FOR DEVELOPMENT for this performance period. Resident Self-Assessment: Click here to enter text.	
Program Director Comments: Click here to enter text.	
4. Please provide a BRIEF SUMMARY OF PROGRESS and WORK TO BE COMPLETED for this performance period. Resident Self-Assessment: Believe I completed graduation requirements	
Program Director Comments: Click here to enter text.	
5. Please provide, plans for the coming year. Include ideas for RESULTS-BASED and DEVELOPMENT GOALS . Resident Self-Assessment:	
Program Director Comments: Click here to enter text.	
6. Please provide ADDITIONAL COMMENTS : Resident Self-Assessment: Click here to enter text.	
Program Director Comments: Click here to enter text.	

TY PERFORMANCE SUMMARY AND SELF-ASSESSMENT

Resident Name:

1st evaluation date:

2nd evaluation date:

3rd evaluation date:

Please provide 3 5 specific examples of this your **KEY ACCOMPLISHMENTS** for this performance period.

	Resident Self-Assessment	Program Director Comments
1 st Eval		
2 nd Eval		
3 rd Eval		

Please provide 2 3 specific examples of my key **STRENGTHS** for this performance period.

	Resident Self-Assessment	Program Director Comments
1 st Eval		
2 nd Eval		
3 rd Eval		

Please provide 2 3 specific examples of this resident's **AREAS FOR DEVELOPMENT** for this performance period.

	Resident Self-Assessment	Program Director Comments
1 st Eval		
2 nd Eval		
3 rd Eval		

Observations-longitudinal growth



Action Plan

As a result of attending this CME session, the primary thing I will do differently is:

As a result of attending this CME session, the primary thing I will do differently is:



Respond at **PollEv.com/ryanpong827**



Text **RYANPONG827** to **37607** once to join, then text your message

“I will revisit getting patient information to residents ”

“Ask for an evaluation for myself from senior management ”

“Training on giving/receiving feedback ”

“More engagement, change the conversation from requirements to growth and development, work on coaching skills ”

“survey instruments used ”

“Discuss faculty development opportunities about developing evaluations, new ideas.”

“Apply a psychometrically sound process to subjective evals ”

“Share the 'why' of the evaluation process and use it with program directors too ”

“I will review our rivals, be sure that allow for residents to CV complete a portion re self eval, goals, etc. I will also try to assure that both faculty and residents have a good understanding of the procesd. ”

As a result of attending this CME session, the primary thing I will do differently is:

 Respond at **PollEv.com/ryanpong827**  Text **RYANPONG827** to **37607** once to join, then text your message

“Take a more active roll in giving and receiving feedback.”

“Attempt to standardize my feedback to the junior residents on a more frequent basis”

“Suggest changes to improve evaluations”

“Look at how we do our evals and upgrade them to make them more meaningful.”

“Survey each program's evaluation system”

“Narrative not performance. Use endorse to capture being good”

“Residents will write narrative of personal growth into semiannual evals.”

“I don't work ins GME office. (Sorry!)”

“I will revisit getting patient information to residents”

