Integration and Assessment of EPA 6 in ACOM Curriculum

Stephen Miller, DO, MPH; Emmanuel Segui, MS; James Foster, PhD; Maria Danzie, BS; Philip Reynolds, PhD
Alabama College of Osteopathic Medicine

PURPOSE
To assess students’ performance longitudinally on EPA 6 during pre-clinical and clinical years at the Alabama College of Osteopathic Medicine. EPA 6 states “the day-one resident should be able to concisely present a summary of a clinical encounter to one or more members of the health care team (including patients and families) in order to achieve a shared understanding of the patient’s current condition.” (EPA’s for Entering Residency, April 2016)

INTRODUCTION
The Alabama College of Osteopathic Medicine (ACOM) strives to incorporate the pre-clinical and clinical activities in all EPA areas. This poster focuses on the progression of student competencies in EPA 6 from pre-clinical to clinical settings.

METHODS
We gathered information about how students are performing on oral presentations during specific events in pre-clinical and clinical settings:

Year 1 and 2 in pre-clinical setting
- First patient presentations at the end of the first semester (OMS I) at ACOM for the Anatomical Sciences course: a total of 18 groups of 8-10 students each were tasked to perform an oral presentation, about their encounter with their First Patient, an anatomical donation to ACOM through the Willed Body program. Students were given group grades and guidance by faculty to develop their presentations. Archival data were gathered and analyzed.
- OSCEs: Students are assessed by clinical skills educators on oral case presentation skills after formative and summative Objective structured clinical examinations (OSCE). Clinical skills educators (CSEs), consisting of retired nurses, radiologists, and other medical professionals, are trained by ACOM faculty to assess students’ ability to accurately present (1) patient’s history, including active medical problems, (2) physical examination results, including positive and negative findings, (3) assessment and plan, including the presentation of a reasonable differential diagnosis and an action plan, (4) synthesis of information (i.e., presenting a clear picture of all issues), and (5) general aspects, such as overall organization, speaking style, time and thoroughness. An overall rating is given by the CSE about the presentation.

Archival data of oral presentations were gathered and summary statistics were performed on scores of 159 students.

Year 3 in clinical setting
- Preceptor Evaluations: Students’ ability to present a concise and accurate oral report is assessed by a preceptor or supervising physician at each patient encounter as a formative assessment. A summative assessment is given by the preceptor at the completion of each clerkship, including the student’s ability to perform effective oral presentations. Preceptors were trained and tasked to evaluate students through regular preceptor training events, as well as individually by ACOM clerkship chairs and the Associate Dean of Clinical Sciences.

A total of 935 preceptor evaluation forms (134 students across 7 core rotations), have been gathered and questions pertaining to presenting oral reports were analyzed.

RESULTS

Pre-clinical Setting: OMS I
Findings about the First patient presentations showed a consistent above average performance for 18 groups of 8-10 students tasked to perform an oral presentation about their encounter with their First Patient.

Pre-clinical Setting: OMS II
Findings about oral presentations during OSCE activities showed that a cohort of 159 students performed above average within five categories: (1) patient’s history, (2) physical examination, (3) assessment and plan, (4) synthesis of information, and (5) general aspects, such as speaking style and thoroughness.

Clinical Setting: OMS III
Findings about preceptor evaluations of 134 students across 7 core rotations showed that students were consistently scoring above average on presenting a concise and accurate oral report during their rotations.

CONCLUSIONS

1. In order to empower faculty and preceptors to perform quality evaluations, ACOM must continue to:
   a. Provide very clear and targeted assessment activities.
   b. Provide preceptors with simplified tools and educate them to become better assessors.

2. ACOM is able to consistently assess students’ activities to perform oral presentations at key points across the OMS I-III curriculum using simple assessment tools.

Challenge and future directions
One of our main challenges is to find appropriate focus for assessment purposes, given the limited time community preceptors have for this task. In future directions, we want to improve objective assessments to ensure reliable and valid student performances that will prepare them for residency. We also want to track students’ progress longitudinally and assess inter-observer reliability of assessments in pre-clinical and clinical years.