Entrustable Professional Activities (EPAs): Update

Agenda -Why -How to assess -Proposed pilot

Chair: Stephen Yang, MD Co-Chair; Susan Moffatt-Bruce, MD

TSDA General Session Jan 26, 2024, San Antonio







American Board of Medical Specialties

Higher standards. Better care.®

ACGME ABMS Competency Based Medical Education Symposium

August 11-12, 2022 February 25, 2023 June 15, 2023 September 1-2, 2023 (ABS Workshop)

Current ABMS EPAs

Specialty	#EPAs	Status
ABPS	4 program consortium	Pilot since 2017
ABU	25	Implemented 2018
ABOS	Knowledge/Skills/ Behavior Program	Launched 2021, 50 residencies adopted
ABS	18/14 more in dev't	Went live July 2023
Vascular surgery	17	Launch 2024
Pediatric surgery	Mid stage of dev't	
Complex gen surg onc	Mid stage of dev't	
Surgical critical care	Mid stage of dev't	
ABOHNS	Early stage of dev't	

How do we access?





- ABTS-led "EPA Council" to develop of EPAs, methodologies of competencies for evaluation and certification
- "KISS"
- Focus on procedures: Align EPAs with case logs, STS-DB
- Start small with a pilot trial with a limited number of programs

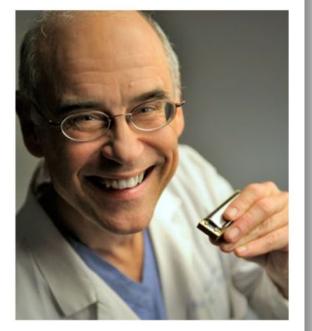
Miller's Pyramid of Clinical Competency



The "Zwisch" Scale

4 levels of operative guidance

- Show & Tell
- Active Help
- Passive Help
- Supervision Only



DaRosa, D. A. *et al.* A Theory-Based Model for Teaching and Assessing Residents in the Operating Room. *Journal of Surgical Education* 70, 24– 30 (2013).



Making assessment, feedback, and resident assessment easy

A 501(c)3, volunteer-led, collaborative network

Over 800,000 assessments and growing

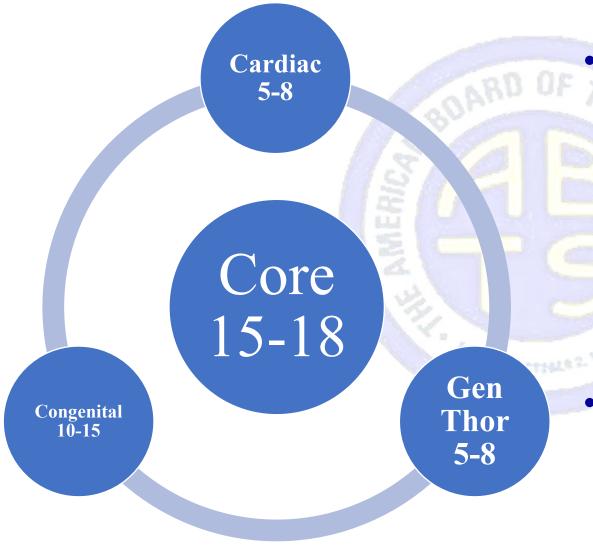


200 residencies 11,500 physicians 20 specialties 7 countries

Funded by member programs + grants

Governed by **40** medical educators

"Big Picture" Vision for TS EPAs



Core Domains

- Foundations (basic procedures)
- Consultations (in- & out-pts)
- **Operative** Techniques
- Teaching
- Scholarly Work
- Transition to Practice
- Align with ABS EPAs for continuity
- Specialty Domains
 - Follow 3 ABTS training pathways
 - Level 5 Milestones

Short-Term Beta-Testing Thoracic EPA Timeline

Jan 2024

- Proposed three EPAs
 - CABG
 - Anatomic lung resection
 - Consult/ clinic

Feb 2024

 Develop SIMPL app specifics for TS

• Develop list of 10-15 interested programs

Mar 2024

- Zoom with selected programs
 Device on a second second
- Review app

April 2024

 Faculty development SIMPL app in-person during AATS

May-July 2024

• Training use of app at beta-test sites

Aug 1, 2024

• Go live with beta-testing of 3 EPAs

Documentation of EPAs





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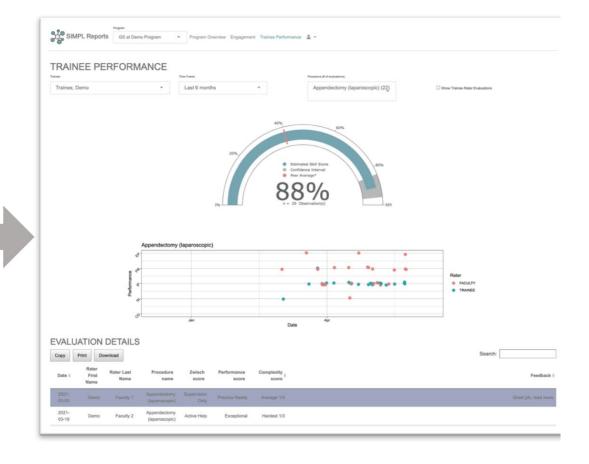
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- Requires frequent daily microassessments (OR, clinic/consults)
- Initiated by trainee and/or faculty
- Potential source of data for residency interviews, certification and job search
 Will reduce work by CCC

Program Director and CCC Competency Reports

Evaluations by Faculty @	- PGY 4	Search:
	Procedure	Documented Competence Performance Autonomy Observations Raters
INVIL U	1 Exploratory laparotomy	71%
	2 Appendectomy (laparoscopic)	71% 9 6
	3 Cholecystectomy (laparoscopic)	65% 14 7
	4 Mastectomy, simple	46% 7 2
	5 Umbilical hernia repair (open)	40% 4 3
	6 Ventral hernia repair (open)	39% 1 1
	7 Mastectomy, partial	37% 3 1
	8 Breast biopsylexcision +/- needle localization	37%
	9 Inguinal hernia repair (open)	29% 3 2
	10 Small bowel resection with anastomosis (open)	26% 2 2
	11 Inguinal hernia repair (laparoscopic)	14%
	12 Renal transplant without recipient nephrectomy	No Benchmark Available



Resident Overview

Activity-Specific Analytics

Summary - EPAs



- Mandate by ACGME/ABMS
- Collaborative "Council" with ABTS, TS-RRC, TSDA, TSRA
- Pilot 3 EPAs select programs Aug 2024
- Develop remaining EPAs over next 3 years
- Challenges: faculty development, costs, increased micro-assessments (ave 14 sec)