UCSF Educational Skills Workshop

Writing Effective Performance-Based Narrative Evaluations

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Logistics

Session link: [http://tiny.ucsf.edu/NarrativeEvals](http://tiny.ucsf.edu/NarrativeEvals)

**Writing Effective Narrative Evaluations**

**IMPORTANT WORKSHOP INFORMATION**

Date/Time: October 6, 2020, 3:00-5:00pm, Online

1. Virtual Sign-in Sheet
2. Skills Assessment Forms
   - Part 1 - Using Milestone Language
     - Resident: [https://www.acgme.org/What-We-Do/Accreditation/Milestones/Milestones-by-Specialty](https://www.acgme.org/What-We-Do/Accreditation/Milestones/Milestones-by-Specialty)
     - Medical student: [https://meded.ucsf.edu/md-program/current-students/curriculum/md-competency-milestones#Medical-Knowledge](https://meded.ucsf.edu/md-program/current-students/curriculum/md-competency-milestones#Medical-Knowledge)
     - Pharmacy student: [https://www.aacp.org/sites/default/files/2017-10/Appendix1CoreEntrustableProfessionalActivities%20%281%29.pdf](https://www.aacp.org/sites/default/files/2017-10/Appendix1CoreEntrustableProfessionalActivities%20%281%29.pdf)
   - Part 2 - Making a Plan
3. Evaluation Form
   a. NOTE: Do not use SAFARI as your browser – you will not be able to access all ratings.

**Links** (we’ll put these in the chat)

**Files**

- 1. 2014 twelve tips for completing quality in-training Dudek.pdf
  - Modified: Apr 29, 2018 by Elizabeth Joyce
- 1. Summary Guidelines for Writing Performance-based Narrative Evaluations.doc
  - Modified: Oct 25, 2019 by Elizabeth Joyce
- 1. Cliches and Traps-take home handout.doc
  - Modified: Oct 25, 2019 by Elizabeth Joyce
- 1. Writing Effective Performance Based Narrative Evaluations, 201008-1.pdf
  - Modified: Oct 05, 2020 by Maria Pappas
Zoom Etiquette

▪ Please **mute your microphone** when you are not speaking to minimize background noise

▪ **Unmute** when you want to ask a question or make a comment

▪ **Type** your questions into the **Chat** feature on Zoom

▪ We will be using **Breakout rooms** for small group activities
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### Poll #1

Which one do you find more useful? And why?
*(please enter your “why comments in the Chat)*

<table>
<thead>
<tr>
<th>#1: Laura had great clinical skills. She could benefit from reading more about gynecological issues. Keep up the good work!</th>
</tr>
</thead>
<tbody>
<tr>
<td>#2: This is my third clinic session with Laura in her first block. Over the course of 3 sessions, she has improved in her history taking skill, including directed questions given the specific complaint, such as abnormal uterine bleeding. She was well read on topics such as fibroids and polyps. I recommend that she read up on patient-specific issues such as evaluation tools for endometrial hyperplasia to provide more comprehensive care for her patient.</td>
</tr>
</tbody>
</table>
Today’s Agenda

- Introductions
- Key Elements of Narrative Evaluations
  - Observable Behaviors: Milestones & Competencies
- Frameworks for Narrative Evaluations

Break

- Skills Assessment I (Breakout rooms):
  - Writing behavior-based comments using specific examples
- Skills Assessment II (Breakout rooms):
  - Develop a strategy & time line for writing evaluations
- Wrap up & Workshop Evaluation
Poll #2

- Who’s in the "room" with us today?
  - What is your department?
  - Who do you primarily write evaluations for?

- Name one of the most &/or least helpful comments you’ve seen on an evaluation
  - Write your answers in the Chat
Writing Performance-Based Narrative Evaluations: Today’s Objectives

- Identify & discuss common challenges in writing evaluations
- Review Competency, Milestone, & EPA language
- Recognize & correct instances of unconscious bias
- Apply a set of guidelines or “tips” to improve written evaluation
- Practice composing a narrative evaluation based on behaviors & observations of a learner
Icebreaker

1. Go into Breakout Room (please note your room #)

2. Introduce yourselves & name a food that reminds you of home

3. Discuss the following questions & write your responses on the Google Slide with your room #:
   - Why are YOU interested in Narrative Evaluations & why are narrative evaluations important?
   - What are some of the barriers you face in writing evaluations?

4. We will pull you back in ~ 10 minutes
Report out

• Why are YOU interested in narrative evaluations & why are narrative evaluations important?

• What are some of the barriers you face in writing evaluations?

Let’s hear some of our groups share their thoughts from their Google Slides
Why are *YOU* interested in Narrative Evaluations & why are narrative evaluations important?

- It’s required for XXX!!
- Learners *want & need* feedback about their performance
- Written feedback can be tracked; provides opportunity for continual reflection by learner
- Documents if feedback has been incorporated
- Provides the basis for early intervention if problems occur

What are some of the barriers you face in writing evaluations?

- It takes time! You’re busy!
- You don’t have good documentation with specific examples
- It’s uncomfortable to give critical feedback
- You’re not sure if you're giving effective feedback that’s significant to the learner
- You’re not entirely sure how the evaluations are used by the programs
Narrative Evaluations focus on behaviors & abilities

- Assess *competence* related to expected developmental levels
- Provide *feedback* to help the trainee improve:
  - Explicit
  - Positive
  - Corrective
Why is it important to assess competence?

- The goal of medical education is to produce a physician workforce that is capable of & committed to providing reliably safe, timely, effective, efficient, equitable, & patient-centered care*

- So as medical educators, we need to demonstrate to the public that our graduating physicians are competent & capable of performing these tasks

In competency-based education, we need to look at the outcomes goal, then develop a curriculum to meet that goal.

- In a *competency-based system*, *assessment is not a grade* that one receives from an expert at the end of a rotation or after fearfully taking a periodic, knowledge-focused, high-stakes exam.
- Instead, it is a *process of both ongoing assessment & coaching* that guides personal learning & improvement (e.g. self-directed learning).
Thus, a Competency-based Medical Education Framework is **Outcomes-focused & learner-centered**

How do we deem a learner to be competent?

Ideally- We evaluate **how** learners **apply** their knowledge to clinical situations
Poll #3

Please rate your comfort with each of the following terms:

- Competency domain
- Subcompetency
- Milestone
- Entrustable Professional Activities (EPA)
A Competency-based Medical Education Framework is *Outcomes*-focused & learner-centered

**Competency Domain:** Patient Care

- Competency 1
- Competency 2
- Competency 3
- Competency 4
- Competency 5
- Competency 6

**Various Other Competency Domains**
A Competency-based Medical Education Framework is Outcomes-focused & learner-centered

Subcompetency

Competency Domain: Patient Care

Competency 1
- Milestone 1
- Milestone 2
- Milestone 3

Competency 2
- Milestone 1
- Milestone 2
- Milestone 3

Competency 3
- Milestone 1
- Milestone 2
- Milestone 3

Competency 4
- Milestone 1
- Milestone 2
- Milestone 3

Competency 5
- Milestone 1
- Milestone 2
- Milestone 3

Competency 6
- Milestone 1
- Milestone 2
- Milestone 3

Various Other Competency Domains


Observations & narrative description of a learner

1 2 3 4 5

Novice performer

Unsupervised Practice
A Competency-based Medical Education Framework is Outcomes-focused and learner-centered

Competency Domain: Patient Care

- Competency 1
  - Milestone 1
  - Milestone 2
  - Milestone 3
- Competency 2
  - Milestone 1
  - Milestone 2
  - Milestone 3
- Competency 3
  - Milestone 1
  - Milestone 2
  - Milestone 3
- Competency 4
  - Milestone 1
  - Milestone 2
  - Milestone 3
- Competency 5
  - Milestone 1
  - Milestone 2
  - Milestone 3
- Competency 6
  - Milestone 1
  - Milestone 2
  - Milestone 3

Various Other Competency Domains

Subcompetency

Entrustable Professional Activities: (Usually requires integration of multiple Competency Domains)

1 2 3 4 5

Novice performer

Unsupervised Practice

Observations & narrative description of a learner
Entrustable Professional Activities can be thought of as a bridge connecting the Competencies to the “real world” practice of medicine.

This is where the Entrustable Professional Activities come in…
Why the use of the word “Entrustable”?

It designates that a practitioner has demonstrated the necessary skills & attitudes to be trusted to independently perform this activity.

Simply put, EPAs are supposed to be the routine professional life activities of a physician based on their specialty & subspecialty.
An example of an EPA for a pediatric hospitalist could then be

“to serve as the primary admitting pediatrician for previously well children suffering from common acute problems”
Competencies, Milestones, & EPAs can Serve as Frameworks to Improve your Evaluations

• After the break, we will have you open one of the lists below relevant to your specialty (look in the chat room for these links; if you find something more relevant for your specialty feel free to use that instead)
• Identify adjectives & adverbs to help you describe the behavior &/or performance
• Use these words in your evaluation

Med student: https://meded.ucsf.edu/md-program/current-students/curriculum/md-competency-milestones#Medical-Knowledge

Pharmacy student: https://www.aacp.org/sites/default/files/2017-10/Appendix1CoreEntrustableProfessionalActivities%20%281%29.pdf

Nursing Student: https://cdn.ymaws.com/nonpf.site-ym.com/resource/resmgr/competencies/20170516_NPCoreCompsContentF.pdf

Resident: https://www.acgme.org/What-We-Do/Accreditation/Milestones/Milestones-by-Specialty

Dentistry: https://dentistry.ucsf.edu/students/education/competency-standards
A narrative evaluation also needs to provide feedback for trainee improvement.

*Formative assessment* should provide guidance for how a learner can improve & grow:

- ‘You didn’t take a complete history’ doesn’t provide *guidance* that will help get the learner to the next level.

Instead:

- ‘You obtained an appropriate medical history, but for future encounters you should include a surgical history. This is important because…..’
Key elements of an effective narrative evaluation include the following:

- They provide **specific examples of observed behaviors**
- Comments are **based on actions** & not personalities
- Comments should be **relevant** to the learner & the evaluator
- **May include suggestions for improvement** if appropriate

For more information & examples, see the UCSF wiki page for this workshop:
- Twelve tips for completing quality in-training evaluation reports
- Summary guidelines for writing performance-based narrative evaluations
Please return in 5 minutes
Activity: Edit the general comment below to make it behavior-based & more specific to a learner using milestone language

“This learner needs to read more”

Examples of Relevant Milestones:

- *Medical Knowledge 1*: Demonstrates clinical knowledge
- *Medical Knowledge 2*: Demonstrates knowledge of diagnostic testing & procedures
Breakout Room Activity: Skills Assessment Part 1

Edit the general comment below to make it behavior-based & more specific to a learner using milestone language

“This learner needs to read more”

1. Go into Breakout Room (note your room #)

2. Access the Skills Assessment Part 1 link & the milestone link that aligns with your field in the Chat

3. As a group, identify 1 or 2 milestones that resonate with you & use them to rewrite the above sentence

4. Record your work on the Google Slide with your room # (found in Chat). Please designate one person in your group as the reporter.

5. All individuals will need to submit something to receive credit for this workshop (but everyone in your group can submit the same thing)

6. We will pull you back in ~ 10 minutes (Don’t forget to submit!)
“This learner needs to read more”

What does “Needs to read more” actually mean to you?

Let’s hear some of our groups share their thoughts from their Google Slides
How can we differentiate our evaluations depending upon the level of the learner?

**Early Learner:**
This learner took a focused history but needs to expand their differential diagnosis on nausea & right lower quadrant abdominal pain beyond appendicitis.

**More advanced Learner:**
This learner consistently takes focused histories & developed a broad differential diagnosis. To get to the next level, they should prioritize their differential & clearly describe next steps in the management of the patient.
How you craft your evaluation has a big impact on its strength & impact

- Ask the trainee for his/her self-assessment
- Document specific dates & examples of quantitative, measurable information about learner performance that demonstrate an obvious connection to a milestone &/or competency
- Provide your observations to the learner with ongoing feedback so that both you & the learner can monitor improvement and chart progress over time
- Keep comments descriptive & succinct – Use adjectives & adverbs!

For more information & examples, see the UCSF wiki page for this workshop:
- Summary guidelines for writing performance-based narrative evaluations
Language Traps to Avoid:

- **Repetitive**: “very” “excellent” “always”
  - The more you use a word, the more you dilute its impact

- **Passive & conditional language**:
  - “The team depended upon her as a valuable member” *rather than* “She could always be depended on as a member of the team”

- **Judgmental language**: “smart” “kind” “thoughtful”
  - Don’t use adjectives that are not performance-based

- **Wordiness & vague language**:
  - “He effectively managed 3 patients from intake to hand off” *instead of* “He participated in all of the aspects of the care of his patients”

For more information & examples, see the UCSF wiki page for this workshop:
- **Cliches and traps-take home handout**
Two words about clichés: Avoid them!

• The trouble with using clichés is that they are unspecific: “He/she went the extra mile”
• So they often end up as filler rather than describing & evaluating a learner’s performance
• If you suspect a cliché, put it to the what/how test:
  – Does the phrase describe exactly what the learner did? (e.g. writing up notes, following up on labs, researching literature)
  – Does the phrase describe how the learner performed? (e.g. was the student adept & concise in taking notes, where they compassionate & empathetic in talking with patients)

For more information & examples, see the UCSF wiki page for this workshop:
- Cliches and traps-take home handout
Beware of Unconscious Bias

Please write in Chat examples of unconscious biases that you have either seen, experienced, &/or heard about

- Clichés are often associated with unconscious bias
- Examples include gender bias & racial bias
- Gendered language:
  - Men are often judged based on knowledge, skills, abilities, & talents
  - Women are often judged based on work effort, personality, & interpersonal traits

Please write in Chat examples of what gendered language might look like
Unconscious Bias Resources

- Article about linguistic comparison of letters of recommendation:
  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2572075/

- Strategies to avoid bias in letter writing
  https://files.constantcontact.com/3d9bbb87701/a2e9d0e4-1c10-4a5b-9ee4-09859f6fe35e.pdf

- Gender bias calculator
  http://slowe.github.io/genderbias/
Breakout Room Activity: Skills Assessment Part 2

1. Access the Skills Assessment Part 2 link in Chat: (Part 2- Making a plan)

2. We will be in groups of 2-3 for this activity. Each person should share one challenge & one tip you are thinking about implementing.

3. Follow the instructions in this section to make a list of what you need to do (or the information you need) in order to write a narrative evaluation, then write a rough timeline of how you will accomplish this with specific steps & goals that can help you write effective evaluations.

4. Each person needs to submit something on the “Part 2 – Making a Plan site” to get credit for the workshop.

5. Share a goal or 2 with your group & record your work on the Google Slide (found in Chat) with your room #. Please designate one person in your group as your reporter.

6. We will pull you back in ~15 minutes
Report out: Making a Plan

Let’s hear some of our groups share their thoughts from their Google Slides
Wrap Up

- Writing effective Performance-Based Narratives is important to both learner & evaluator
- Provides important feedback back to learners
- Transparent & descriptive assessment that can be easily interpreted by supervisors
- We have provided you with tools to help you write explicit, positive, competency-based evaluations
- Understand what framework you are being asked to evaluate within
- Be aware of unconscious biases!
- Please take a moment to compete the Evaluation Form on the Chat