A Practical Approach to Medical Student Assessment—A Sweet Approach to Assessment

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Workshop objectives

• Describe the RIME framework for performance assessment, giving examples of tasks that fall in each of the four parts of the framework (Reporter, Interpreter, Manager, Educator)

• Write descriptive comments for evaluations of medical students using the RIME framework
What is the purpose of assessment?

• Gather Evidence
• Facilitate Growth
• Inspire Excellence
• Make Decisions
Where we’re headed

• Narrative descriptions of learners:
  • Provide meaningful qualitative data
  • Can be used by program directors to match to milestones or other assessment frameworks
  • Provide a foundation for meaningful feedback
    • Help learners to progress
    • Document progress of learner
What we often see...

• Great student!
• Best student I have ever worked with!
• Would make a great addition to any residency program!

• Delicious!
• Best chocolate I have ever tasted!
• Would make a great addition to any trick-or-treat bag!
Assessing Chocolate

• What are some criteria that you could use for assessing chocolate?
Some criteria

• Creamy / chalky / powdery
• White / milk / dark
• Sweet / bitter
• Appearance
• Meltability
• Intensity
• Aftertaste
• Moreishness (I want more or I don’t want more)
Instructions

• Sample the chocolates
• Assess the chocolates: write descriptive comments for each chocolate on the worksheet
  • Match chocolates to numbers as indicated below
• You may taste the chocolates in any order you wish

1  2  3  4  5
Pair and Share

• Take a few minutes to compare your descriptive comments with someone sitting near you
Rater Bias

- Order of sampling
- Chewing vs sucking chocolates
- Drink of water – or soda or coffee – in between bites
- Small bites vs entire sample at once
- Chatting and discussing among participants
- Preferences
Chocolate vs Learners

• Who loves Dove chocolates?
• Just like chocolates, learners are more than just “delicious” or “great”
Criteria for Learners

• Information gathering
  • History
  • Physical Exam
• Presenting information
  • Oral presentations
  • Note writing
• Interpreting information
  • Interpreting items from history and physical
  • Incorporating additional information (labs, imaging)
  • Forming a reasonable differential diagnosis
• Managing patients
  • Accurate assessment
  • Basic management plan
• Professionalism
• Independent learning
RIME

- Reporter
- Interpreter
- Manager
- Educator
Reporter

• Takes ownership of working in patient care and monitoring own patients
• Answers “What?” questions

(Louis Pangaro, 2013)

• Gathers information (interview, physical exam, labs, records, radiographic studies)
• Presents organized patient data
• Presents accurate patient data
• Describes patient problems
Interpreter

• Takes ownership of the “Why?” questions
• Prioritizes, analyzes, synthesizes
  • Students: reasonable, not “right”

  (Louis Pangaro, 2013)

• Develops differential diagnosis
• Prioritizes patient problems
• Prioritizes diagnoses in differential
• Presents both data and interpretations
Manager

• Takes ownership of the “How?” questions
• Proposes actions and options applied to patients
• Negotiates with patients on plans

(Louis Pangaro, 2013)

• Offers diagnostic and treatment plans
• Suggests/makes appropriate referrals/consults
• Coordinates care
• Identifies system problems and solutions
• Advocates for patients and populations
Educator

- Takes ownership of becoming expert
- Leads patients in shared decision-making
- Poses questions, independently seeks answers
- Shares new knowledge, teaches others, leads

(Louis Pangaro, 2013)

- Develops individual learning goals
- Builds skills for life-long learning
The RIME rhythm is familiar

H&P  ....S.O....  Reporter

Assessment  ....A....  Interpreter

Plan  ....P....  Manager/
       Educator

(Louis Pangaro, 2013)
Example 1

- Proficient physical exam
- Good presentations
- Gets along with nurses and staff
- Patients like him
- A pleasure to work with
- Above average for his level of training
- Will be a great addition to any residency program
Example 2

- When approaching a 15-month-old child, (student) allowed the child to touch the otoscope. The child was then more cooperative with the ear exam. (Student) appropriately had mother help with restraining the child’s arms and had good technique looking in the ear.
- (Student) consistently gathers an accurate history and is able to pick up most physical findings on the exam, and then presents this information in an organized fashion. I rarely identified an exam finding that (student) had not reported.
- For each patient (student) provides a differential diagnosis of at least three items, but sometimes the differential focuses on more adult diagnoses.
- (Student) is able to provide a basic management plan for many common pediatric cases, including asthma, bronchiolitis, viral URI, and gastroenteritis. However, he still requires assistance for less common complaints.
[Example 2 – cont’d]

• On several occasions, (student) followed up on lab results for his patients and called parents with results (after first discussing with an attending).

• (Student) was hard working, diligent, and integrated well with our clinic team.

• Next, I would encourage (student) to continue working on expanding his pediatric differential and try to have at least three items on the differential of each patient that are real possibilities in a pediatric patient. You are comfortable with management plans for bronchiolitis and asthma. As you continue to see more patients, work on the nuances of these plans, as well as coming up with plans for other pediatric conditions.
Example 3

- Student was always on time, friendly, and had an energetic style that was appreciated by patients and staff.
- She has been working on gathering a history. She has excellent effort, but needs to work on completeness and organization. Sometimes she can lose the big picture by focusing on the wrong detail.
- She comes up with short differentials for each patient. She is working on how to prioritize the differential based on information from the history and physical.
- She did well following up labs and checking back in with patients. She was always spending additional time to assure the family understood the team’s plan for the day.
- Next, student should focus on obtaining a thorough history and presenting it in an organized fashion. She should also work on coming up with at least 3 items on the differential and prioritizing the differential with the most likely diagnosis first.
Video
Take Home Points

• When assessing learners
  • DESCRIBE what you observed
  • Provide DETAILS
  • You do NOT need to provide judgments
  • You are NOT expected to assign a grade
Did you know?

- The majority of a student’s grade is based on faculty preceptor and resident/fellow supervisor comments.
- The medical student third year starts in APRIL.
- The direct observation forms are NOT seen by the grading committee.
- Students are required to request an evaluation of any provider with whom they have worked at least 3 shifts.
- You can do an evaluation on anyone you work with – even if it’s just for one half day.