

Pediatric Hospital Medicine EPA/Competencies evaluations:

Common (COM) Subspecialty EPAs

1. Executing clinical handovers within or across settings
2. Promoting equitable care at the level of each individual patient and the population to address racism and other contributors to health inequities
3. Leading interprofessional teams to provide collaborative, family centered care
4. Providing or requesting consultations
5. Applying principles of scholarship to support practice and lifelong learning

Subspecialty (Hospital Medicine/PHM) Specific EPAs

1. Managing acutely ill patients in the hospital setting
2. Directing and coordinating care for medically complex patients in hospital settings
3. Performing common procedures associated with the practice of pediatric hospital medicine
4. Facilitating safe transitions of care within or across healthcare settings
5. Promoting high-value, safe, and equitable care in hospital settings
6. Teaching, providing feedback, and assessing learners in hospital settings

0	EPA Not observed/Not applicable to rotation
1	Trusted to observe only
2	Trusted to execute with direct supervision and coaching
3	Trusted to execute with indirect supervision and discussion of information conveyed for selected simple and complex cases
4	Trusted to execute with indirect supervision and may require discussion of information conveyed but only for selected complex cases
5a	Trusted to execute without supervision but not yet ready to also supervise others in the execution of this EPA*
5b	Trusted to execute without supervision and also trusted also supervise others in the execution of this EPA*
<i>*where supervision means: ability to assess patient and learner needs ensuring safe, effective care and further trainee development by tailoring supervision level for this EPA</i>	

COM-EPA 1: Executing Clinical Handovers Within or Across Settings

The specific functions of the pediatric subspecialist handing over the care of a patient include:

- Reviewing the medical record to prepare for the handover and avoid errors of omission and updating a written tool as needed
- Using a structured and evidence-based approach or template
- Soliciting and encouraging questions and clarifications from the receiving provider
- Conveying patient and caregiver preferences

The specific functions of the pediatric subspecialist receiving a handover and accepting responsibility for the patient include:

- Summarizing the information heard and asking questions as needed to provide clarity and fill perceived gaps
- Restating key action items to avoid omission and ensure follow-up
- Providing feedback to the individual initiating the handover on any concerns or questions

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COM-EPA 2: Promoting Equitable Care at the Level of Each Individual Patient and the Population to Address Racism and Other Contributors to Health Inequities

The specific functions that define this EPA include:

- Identifying populations and individual patients at risk for poor health outcomes and the systemic factors that contribute to those poor health outcomes (e.g., social drivers of health)
- Appraises literature with an understanding of generalizability and relevance to patient populations
- Honoring and supporting patients'/families' racial, ethnic, cultural, sexual orientation, gender identity, linguistic, spiritual, religious, socioeconomic and/or other social identities and their influence on their lived experience and perception of care
- Understanding that race is a social, not biologic, construct and that racism, not race, is a source of health inequities
- Recognizing and employing strategies to mitigate interpersonal, internalized, institutional and ideological contributors to inequitable patient care and health outcomes
- Advocating for the needs of individual patients and/or populations
- Tailoring communication to the health literacy and preferred language of patients and families to facilitate their access to necessary information

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COM-EPA 3: Leading Interprofessional Teams to Provide Collaborative, Family Centered Care

The specific functions that define this EPA include:

- Engaging team members, including patients and families, in a way that respects and empowers their unique roles and contributions
- Using evidence-based strategies to optimize team performance and dynamics
- Supervising team members as required in one's practice setting
- Teaching to address the specific needs of team members
- Seeking and incorporating feedback from team members with a commitment to continuous learning to improve individual and team performance and optimize patient care

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COM-EPA 4: Providing or Requesting Consultations

The specific functions that define this EPA include:

- Determining when consultation is indicated and applying relevant subspecialty expertise to address the clinical question(s) related to the patient's care
- Communicating to patients, caregivers, other healthcare providers, and other team members the rationale for a consultation
- Recognizing personal limits and scope of practice to determine when additional expertise or referral to another provider or subspecialty is required
- Adapting the consultation approach based on the urgency, complexity, and clinical context of the consultation or referral
- Gathering and synthesizing essential clinical information to develop a clear diagnostic impression and evidence-informed care plan
- Determining the appropriate level of ongoing involvement, including providing one-time recommendations, subsequent consultation, co-managing care, or arranging follow-up as needed
- Communicating rationale for consultation and communicating findings and recommendations clearly and effectively to the referring provider and other involved clinicians, using appropriate written and/or verbal communication
- Partnering with the interprofessional care team to communicate with patients and caregivers, explaining the purpose of the consultation or referral and how it fits into the overall care plan

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COM-EPA 5: Applying Principles of Scholarship to Support Practice and Lifelong Learning

The specific functions that define this EPA include:

- Understanding the foundational components of scholarly inquiry (e.g., formulating meaningful questions, identifying appropriate methods, and interpreting results). Note, this does not necessarily mean independently leading research studies.
- Identifying, appraising, and interpreting scholarly work relevant to one's discipline (including clinical research, educational scholarship, quality improvement, and policy-related work), with attention to the quality, strength, potential sources of bias, and limitations of the evidence and its applicability to pediatric practice
- Recognizing ethical, legal, and professional principles related to scholarship, including authorship, data integrity, conflicts of interest, and responsible conduct
- Applying scholarly knowledge to professional practice across settings (e.g., clinical care, education, systems improvement, and advocacy)
- Communicating scholarly work as part of a team or in a leadership role (e.g., journal clubs, quality improvement, advocacy efforts, educational projects, presentations, or manuscripts)

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PHM-EPA 1: Managing Acutely Ill Patients in Hospital Settings

The specific functions that define this EPA include:

- Identifying key features from the history and physical examination to develop a prioritized differential diagnosis using evidence-based diagnostic frameworks
- Determining the level of acuity, stabilizing, and triaging the patient to the appropriate care setting
- Developing and executing a prioritized, evidence-based, high-value, patient-centered diagnostic evaluation and therapeutic management plan
- Recognizing and managing diagnostic and therapeutic ambiguity and uncertainty
- Documenting and succinctly communicating the assessment, therapeutic plan, and clinical reasoning to the care team, in compliance with established standards
- Discussing the assessment, treatment plan, and underlying clinical reasoning with patients and caregivers using patient-centered communication
- Re-evaluating the diagnosis and plan of care at appropriate intervals based on clinical progress or illness progression

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PHM-EPA 2: Directing and Coordinating Care for Medically Complex Patients in Hospital Settings

The specific functions that define this EPA include:

- Reviewing, synthesizing, and applying pertinent patient information from past health records, consultants, and patients/families to formulate diagnoses and manage acute and chronic conditions
- Applying knowledge of the chronic disease processes and associated medical devices and technologies to anticipate complications and effectively manage the patient
- Coordinating and synthesizing input from consultants and other interprofessional health care partners to develop efficient, collaborative, and patient-centered care plans
- Promoting and role modeling empathetic, patient and family-centered communication and shared decision-making
- Leading care conferences and guiding sensitive discussions regarding goals of care, prognosis, and end-of-life considerations to ensure care plans reflect patient and family priorities
- Recognizing, navigating, and resolving disagreements when conflicting recommendations or goals arise among consultants or between the medical team and patients/caregivers, maintaining professionalism and patient-centered focus

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PHM-EPA 3: Performing Common Procedures Associated with the Practice of Pediatric Hospital Medicine

The specific functions that define this EPA include:

- Performing patient-centered informed consent including describing indications, contraindications, risks, benefits and alternative options for common pediatric hospital medicine procedures
- Preparing and utilizing appropriate equipment, personnel, and settings to perform procedures safely and effectively, and actively collaborating and coordinating with the interprofessional team to ensure procedural readiness and shared situational awareness to ensure procedures run smoothly
- Anticipating, recognizing, and managing potential complications of common pediatric hospital medicine procedures
- Documenting procedures in a timely and accurate manner in compliance with established standards

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PHM-EPA 4: Facilitating Safe Transitions of Care Within or Across Healthcare Settings

The specific functions that define this EPA include:

- Triaging and determining appropriateness of admission or transfer by aligning patient needs with the capabilities and services available at the receiving hospital or unit
- Identifying, communicating, and addressing transition and discharge needs early in the care plan with caregivers and the multidisciplinary team to optimize patient care and use of healthcare resources
- Reviewing and updating the medical record to ensure accuracy and completeness prior to transitions of care
- Using standardized and evidence-based approaches to transitions of care including soliciting and summarizing information accurately, encouraging questions and clarifications, and determining immediate action items and follow-up needs
- Managing both incoming and outgoing transitions of care using respectful multidisciplinary and interprofessional communication and collaboration
- Recognizing and mitigating the inherent risks involved in patient transport and other care transitions using systems-based approaches

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PHM-EPA 5: Promoting High-Value, Safe, and Equitable Care in Hospital Settings

The specific functions that define this EPA include:

- Identifying, disclosing, and addressing medical errors using systems-based approaches
- Utilizing safety frameworks and tools, including reporting systems, to address patient safety, health equity, and quality issues while maintaining psychological safety of staff
- Promoting and role modeling the principles of high-value and equitable care across patient populations, including stewardship of hospital resources, patient-centered decision-making, and reducing overuse
- Advocating for pediatric-specific patient safety, quality, and high value care initiatives at the unit, hospital, or health system level

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PHM-EPA 6: Teaching, Providing Feedback, and Assessing Learners in Hospital Settings

The specific functions that define this EPA include:

- Planning for teaching by identifying appropriate timing, setting, learner-centered objectives, teaching strategies, and assessment methods
- Demonstrating a repertoire of effective, efficient, multilevel teaching strategies for medical trainees and other interprofessional colleagues
- Applying an appropriate level of supervision based on assessment of the learner's competency
- Effectively and efficiently managing patient care and educational responsibilities on family centered rounds
- Encouraging reflection and engaging in mutually constructive and timely feedback with learners and interprofessional colleagues based on direct observation
- Synthesizing information from direct observation and other sources to deliver feedback and generate competency-based assessments of learners

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Strengths during rotation:

Areas for Improvement during rotation:

Any confidential comments

Overall Evaluation:

☐ Fellow performance is concerning – (please schedule a meeting with Dr. Abney or Dr. Surujdyal if you check this box)

☐ Fellow is below expectations

☐ Fellow meets expectations

☐ Fellow exceeds expectations

☐ Fellow excelled and should be recognized