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Assessing competencies in the clinical workplace: Early lessons from the Flemish GP Training

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Background Rapid implementation of competency-based medical education and assessment necessitates a data-driven approach.

We aimed to investigate acceptability and feasibility of competency-based assessment in the workplace in the Flemish General Practitioner's (GP) Training.

Methods

We developed a competency-based workplacebased assessment intervention based on the CanMEDS to measure its acceptability defined as being useful and feasibility defined as being timeefficient.

Medical Expert

The GP trainee creates an inclusive and cultural safe practice environment.



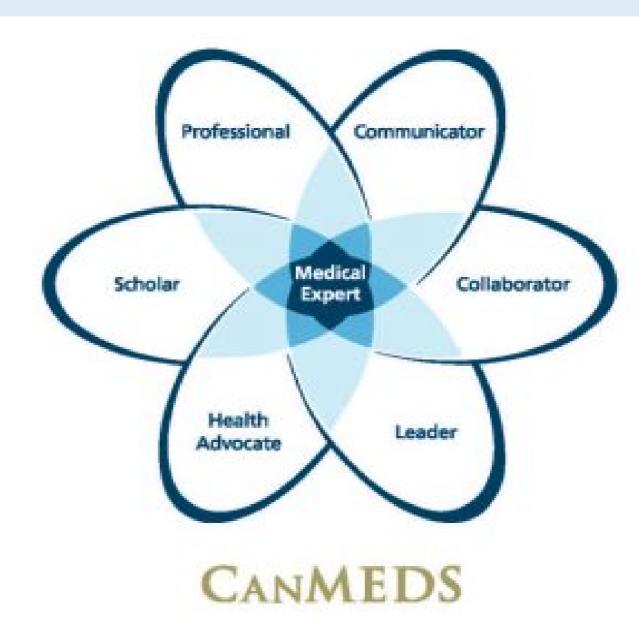
Shows humility and an open mind to the patient's ideas and knowledge.

Closed and open ended questions via Qualtrics

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2 competency-based instruments scoring on 4point Likert scale (excellent, sufficient, insufficient, not observed).





sufficient

Tries to understand and respect patient's views on health influenced by culture



Explores how patient's past experiences (including negative life events) influence individual clinical encounters

Fig. 1 Example of competency-based instrument

Key Competencies

CanMEDS roles

Enabling Competencies

Fig. 2 Structure of CanMEDS competency framework

Results

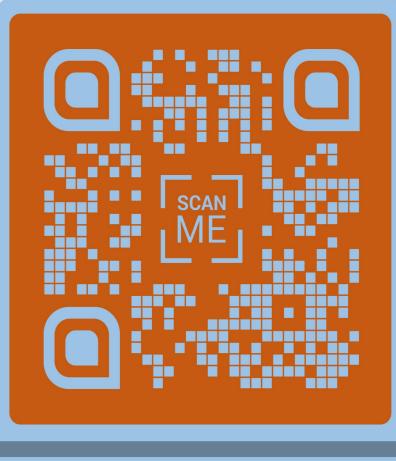
21 participants :11 trainees and 10 trainers; 12 female and 9 male; $70\% \le 35$ years old

80% of the participants found the intervention acceptable

Conclusions

Competency-based medical assessment in the workplace is acceptable and feasible.

However, using an easy-tounderstand and close to practice language is of great importance for implementation success.





of the participants found the intervention feasible

37 answers from open-ended questions:
30 comments about difficult language;
6 comments about visualising learning growth



of the comments focussed on difficulty of understanding the language of the CanMEDS competencies. Listen to my presentation

References

Anderson, H. L., Kurtz, J., & West, D. C. (2021). Implementation and Use of Workplace-Based Assessment in Clinical Learning Environments: A Scoping Review. *Academic Medicine, 96*(11S), S164-S174. doi:10.1097/acm.00000000004366

Bok, H. G. J., Teunissen, P. W., Favier, R. P., Rietbroek, N. J., Theyse, L. F. H., Brommer, H., . . . Jaarsma, D. A. D. C. (2013). Programmatic assessment of competency-based workplace learning: when theory meets practice. *BMC Medical Education*, *13*(1), 123. doi:10.1186/1472-6920-13-123

Carraccio, C., Englander, R., Van Melle, E., ten Cate, O., Lockyer, J., Chan, M.-K., . . . Collaborators, o. b. o. t. I. C.-B. M. E. (2016). Advancing Competency-Based Medical Education: A Charter for Clinician–Educators. *Academic Medicine, 91*(5), 645-649. doi:10.1097/acm.00000000001048

Nousiainen, M. T., Caverzagie, K. J., Ferguson, P. C., Frank, J. R., & Collaborators, I. (2017). Implementing competencybased medical education: What changes in curricular structure and processes are needed? *Medical Teacher, 39*(6), 594-598.