

The award of CHF 50'000.-- is granted to the following project:

## **Which Tasks Do Residents Have to Master by The End of Postgraduate Training in General Internal Medicine?**

## **Defining postgraduate Entrustable Professional Activities: a Swiss, multicentric study**

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### **Abstract**

#### **Introduction and aim of the study:**

Setting clear expectations about the competences that have to be acquired by residents is a crucial question for anyone involved in the design of postgraduate training programs. Trainees too need to know for which tasks and responsibilities they head; supervisors need to know what they can expect from their trainees. In turn, the definition of clear expectations will allow to develop a common reference to assess trainees' progression and achievements during their training and by the end of postgraduate education.

Today, one of the most promising ways to describe these "training outcomes" implies the use of concrete, easily observable tasks reflecting the day-to-day clinical work. Trainees are entrusted to perform these tasks without supervision when they have attained sufficient competence. These tasks are therefore called "Entrustable Professional Activities" (EPAs). A consensus on the definition of EPAs for undergraduate training in Switzerland can be found in PROFILES (Principal Relevant Objectives and Framework for Integrative Learning and Education in Switzerland). PROFILES is the new reference document setting the objectives for undergraduate training in Switzerland. The Swiss medical schools are currently implementing PROFILES and the related EPAs.

The use of EPAs at the undergraduate level should be pursued at the postgraduate level, within an educational continuum. Therefore, EPAs should be defined for all the residency programs in Switzerland and for General Internal Medicine (GIM) in particular. Today, a limited number of publications exist about the development of EPAs in postgraduate GIM training. The aim of the current study is to define the EPAs for the residents in GIM.

Considering GIM training and practice in Switzerland, there will be

- EPAs common to both outpatient and inpatient-based practice
- EPAs specific to outpatient-based practice
- EPAs specific to inpatient-based practice

For each EPA, a detailed description of the expected task and responsibility will be provided.

**Methods:**

To provide an explicit definition of each EPA for GIM in Switzerland, we will use a modified RAND appropriateness method. The method will comprise five major steps.

- The first step will be a comprehensive literature review with the aim of identifying articles targeting the development / selection / definition of EPAs in postgraduate GIM.
- Second, we will conduct 3 focus groups with 6-12 relevant stakeholders, namely physicians from in- and outpatient-based practice, across the German, French and Italian-speaking areas of Switzerland involved in postgraduate training. The goal will be to explore and identify possible additional EPAs. A guide will be developed to provide a framework for discussions. Focus groups will be moderated by a specialist in medical education with experience in qualitative research methods. The summary of focus groups discussions and the results of the literature review will help us to prepare all the documents that will be submitted to the experts for the first rating round.
- Third, we will build a panel of 12-24 “experts” selected among clinicians from the three linguistic areas, directly involved in the organization and/or delivery of postgraduate education. We will also include residents in this step to broaden the perspectives. We will try as much as possible to include other experts than those involved in the focus groups.
- Fourth, we will conduct the first round of voting. In this round, we will ask the experts to individually and independently vote on the relevance of the EPAs using a 9-point scale.
- Fifth, we will conduct a second round of voting during a face-to-face panel meeting. Based on the results of the first round, experts will be asked to re-rate on the relevance of EPAs. The goal will be to achieve a maximal set of 30 EPAs.

**Expected results and benefits:**

The result consists in the publication of a list of EPAs for GIM training in Switzerland. This list will include common EPAs for GIM, specific EPAs for outpatient-based practice and specific EPAs for inpatient-based practice. For each EPA, a detailed description will be provided to make sure there is common understanding of what is expected from the residents.

The final goal is to offer a common reference for both trainees and supervisors, as well as a useful resource to guide residents’ assessment. This common reference will also show to which extent current GIM training programs prepare for independent practice. The implementation phase of GIM EPAs goes beyond the scope of this study but is a logical continuum.

Basel, 06.06.2019