



Verification of Proficiency

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Learning Objective

- The participant will be able to:
 - Describe Verification of Proficiency (VOP)
 - Apply the example to the educational objectives in their own program
 - Develop the teaching module
 - Develop the evaluation tool
 - Implement the curriculum
 - Evaluate resident performance of the skill



Verification of Proficiency (VOP)

- Determination that trainee can perform a skill to a predetermined target level of ability
- Does not imply “mastery” or ability to perform independently, but a **safe** level of skill
- Why?
 - Duty hour limits, efficiency, patient safety



Steps

- Instructional module is developed
- Proficiency exam is developed
- Curriculum is taught and learned
- Application of the skill is tested in a simulated environment
- Performance is videotaped and evaluated
 - Pass – ok to perform in real life
 - Fail – trainee needs additional practice



Instructional Module

- Objectives
- Assumptions
- References
- Description of the Laboratory Module
- Description of the Procedure
- Common Errors
- Video
- Supplies and Preparation



Anesthesia Consent VOP

- Curriculum taught to CA1 residents (orientation)
- Guided practice in clinical setting (first 2-4 months)
- Facilitated practice with “patients” (video-taped) and debriefed (month 2)
- VOP (video-taped) and debriefed (month 4)



Anesthesia Consent VOP

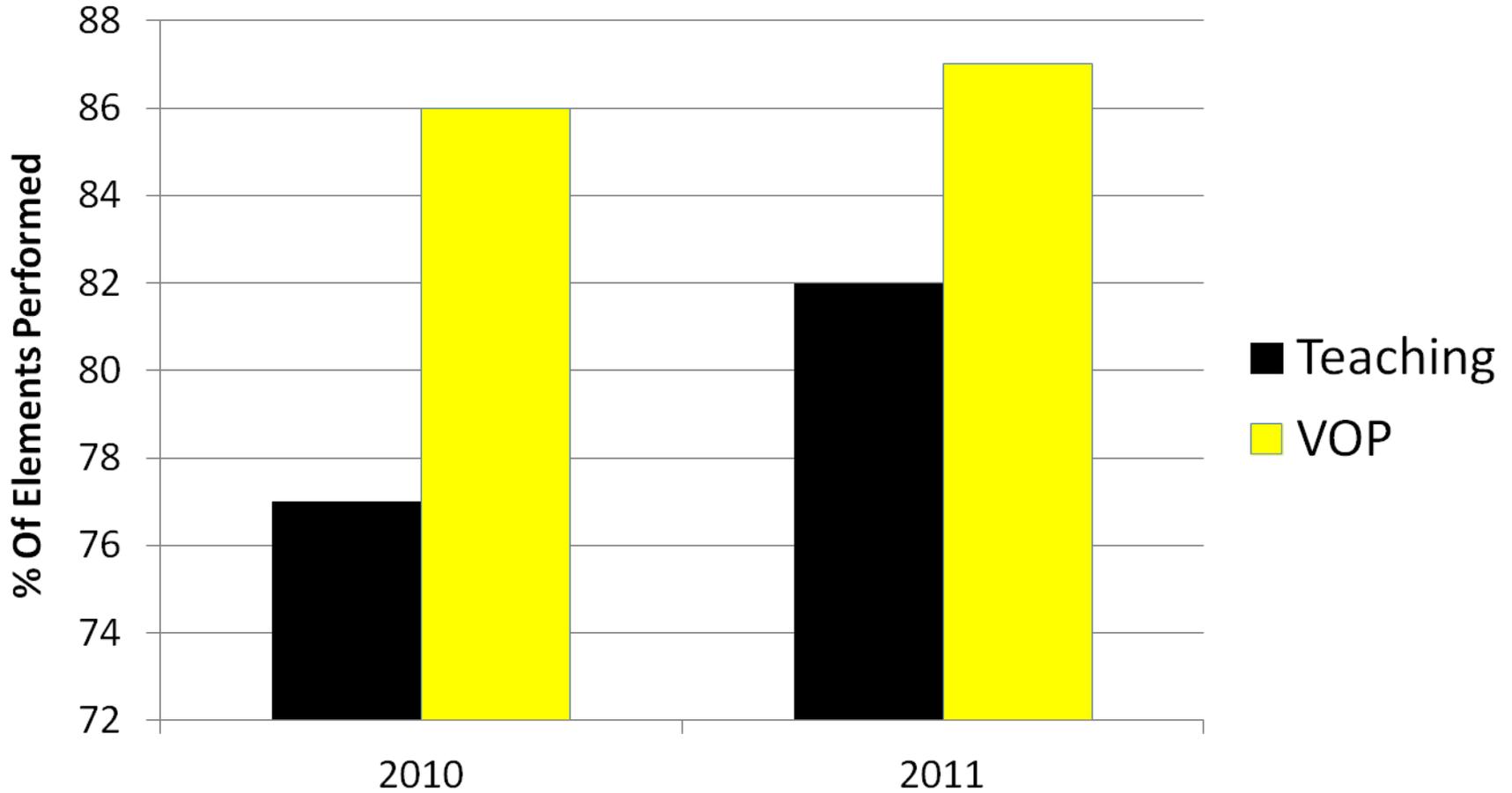
- Communication
 - Content
 - Tone
 - Non-verbal
 - Calm, confident, caring
- Introduction
 - Confirm patient identity
 - Introduce self and name faculty



Anesthesia Consent VOP

- Basic Information
 - Review pertinent history
 - Examine airway, heart and lungs
- Consent
 - Explain the anesthesia plan (options) in sufficient detail and without medical jargon
 - Review major risks
 - Review minor risks
 - Offer opportunity for questions

Anesthesia Consent VOP





Anesthesia Consent VOP

- Feedback
 - From residents:
 - great experience
 - self reflection of performance
 - From “patient”:
 - level of confidence
 - establishment of rapport
 - use of jargon
 - (no comments about medical content)



Anesthesia Consent VOP

- Feedback from faculty:
 - reaffirmed patient safety
 - described to patient what they would see in OR
 - good use of humor
 - introduce self as Dr....
 - incomplete airway/lung/heart exam
 - incomplete review of risks
 - avoid jargon