

## **Data Overload: Best Practices for Reporting Assessment Data to the CCC Voices from 3 Programs**

Elisabeth Hudson, B.S., Administrative Manager, Vanderbilt University Hospital

Kristin Johnson, M.S., Medical Education Program Manager, Maine Medical Center

Faye Haggar, Ed.S., Instructional Designer, University of Nebraska Medical Center

### **Objectives:**

*Following this session, participants will be better able to:*

1. Identify program need for Clinical Competency Committee best practices.
2. Compare the characteristics of three Clinical Competency Committee programs (Vanderbilt, Univ of Nebraska Medical Center, Maine Medical Center).
3. Discuss how program best practices can enhance efficiency and effectiveness of the Clinical Competency Committee process.

*Overall, our hope is to provide attendees with real life examples of, and tools from, programs that utilize innovative ways to provide CCCs with data used to assess learners.*

### **Presentation Content:**

25 minutes

Questions for this panel session (presented by Leslie)

1. How are you involved in data collection for your program's CCC?
2. After all the data is collected, what are efficient practices for organizing your program's CCC?
3. How do you assist in ensuring effective communication between CCC members?
4. How is data presented during the CCC meetings?

TABLE CODE: [Maine Medical Center](#), [Vanderbilt University Hospital](#), University of Nebraska Medical Center

Collecting Data:	Organizing meeting:	Communication	Discussion of Milestones
<p>Residents complete self milestones 6 weeks prior, they are provided a copy of their previous milestones</p> <p>Advisors are given a sheet with the previous milestone and the resident self assessment. They also receive:</p> <ol style="list-style-type: none"> <li>1. Milestones spreadsheet</li> <li>2. Notations on Quality Improvement, Scholarly Activity, SCU rotation, RCA Attendance, Test scores, Pain rotation, RB rotation for that review period</li> <li>3. NI Documentation- showing evaluation comments, conference attendance, some milestones, and rotations scheduled</li> <li>4. ABA Milestones notations (if applicable)</li> <li>5. Supplemental Documentation- Pain etc.</li> <li>6. Internal Performance Documentation (ie. Emails received about performance)</li> <li>7. Advisor Meeting Minutes from previous meeting</li> <li>8. On demand evaluations</li> <li>9. Sim Session Evaluations (not created yet)</li> <li>10. QI Project update</li> <li>11. NI Scatter Plot – showing where they compared to peers</li> </ol> <p>The CCC members receive all of the above as well as the New Innovations Scatter plot and the agenda. The CCC's documentation is on the google site.</p> <p>CCC members go to a (secured) Google sheet and complete their evaluation using comments from evaluations, coordinator notes done independently</p>	<p>Coordinator combines CCC independent assessment into one document</p> <p>One meeting scheduled for each class over series of months =</p>	<p>All assessments done via google site</p> <p>CCC members given ipads to use for assessment and meeting</p> <p>All documentation loaded on google site for reference at later time</p>	<p>Mentors are scheduled to present their mentee</p> <p>Milestones where all assessors agree are reviewed quickly so discussion can be focused where assessors have different opinions</p>

Collecting Data:	Organizing meeting:	Communication	Discussion of Milestones
<p>Fellows are asked to complete self-report milestones 2 weeks prior as well as complete a Scholarly Activity Form</p> <p>Fellows are asked to also make sure their Case Logs are up to date</p> <p>Data collected:</p> <ul style="list-style-type: none"> <li>● Fellow self-reported milestones</li> <li>● Case Log Report (Minimum and actuals)</li> <li>● Fellow Scholarly Activity <ul style="list-style-type: none"> <li>a. Papers, manuscripts</li> <li>b. QI projects and status</li> <li>c. Research, etc.</li> <li>d. Presentations/Lectures</li> </ul> </li> <li>● Attendance during conferences</li> <li>● Evaluations reports from Faculty, Rotation, NPs, Techs</li> <li>● Duty Hour Compliance</li> <li>● Previous Milestones if applicable</li> <li>● Rotations</li> </ul>	<p>Meetings are scheduled quarterly, coordinator arranges location and invite</p> <p>Coordinator combines collected data on all fellows into a PDF document 1 week prior to CCC Meeting and distributes to all faculty via email</p>	<p>Each faculty member is randomly assigned one fellow's data and is asked to review all data and complete the milestones prior to the meeting</p>	<p>Faculty members present on their assigned fellow and discuss any issues or concerns gleaned from the data and then reviews milestone scores and asks for input from other CCC members</p> <p>Coordinator pulls up NI on conference room AV and enters milestones for each fellow as reviewed as well as any comments necessary</p> <p>Post CCC Meeting, the coordinator schedules quarterly reviews for each fellow with the PD and APD to review milestones and CCC report</p>
<p>Coordinator collects all data, all is eventually uploaded to NI **We just made a shift to this, after struggling with paper and email for far too long.</p> <p>Data includes: data sheet (license info, compliance completion, duty hours, meeting attendance, etc), case logs, rotations</p> <p>Summative report generated from NI (monthly evals, 360 evals, praise/concern cards)</p> <p>Resident Self assessment on milestones **This is new for us</p>	<p>Coordinator combines CCC data, all uploaded to NI</p> <p>One meeting scheduled for each class each month, so each class has 2 CCC meetings each year (we try to take the summer months off from CCC meetings)</p>	<p>Each faculty member is randomly assigned two residents to review</p> <p>Review scores are due to coordinator PRIOR to the CCC meeting, the coordinator compiles the scores</p>	<p>During the CCC meeting, scores are projected on screen and also printed for each team member</p> <p>Milestones where all team members agree are reviewed quickly so discussion can be focused where assessors have different opinions</p> <p>CCC chair sends letter to resident after the meeting, sharing the scores and any deficiencies</p>