

Less is More: Simplifying Faculty Evaluations to Increase Completion Rate

First Author: Molly Trowbridge, MD
Institutional Program: Texoma Medical Center

Additional Authors & Affiliations: Ahmed Sheikh, DO; Umesh Kumar, MD

BACKGROUND/INTRODUCTION:

Feedback is essential for improvement; regular, timely feedback is a necessary component of medical education. Our program was using a web-based, 35 question resident evaluation tool to be completed by the supervising faculty for each resident per rotation. Our response rate for the 2018-2019 academic year utilizing this system was only 32% for the two-week window following the completion of the rotation. In order to increase the rate of timely feedback from rotation faculty to our residents, we initially sent e-mail reminders and discussed the importance of completing evaluations in meetings. This, however, only resulted in a two-week completion rate of 53%, still short of our program goal of above 80%. In order to further increase feedback to residents, we sought to change our resident evaluation tool.

METHODOLOGY:

The two-week completion rate of resident evaluations on the web-based platform by faculty was our primary concern. We obtained our pre-intervention completion rate. We then surveyed our residency faculty regarding their perceptions of the resident evaluations to help identify why there was a low completion rate using an anonymous survey. Using this information, we created a new web-based resident evaluation which shortened, simplified and increased the perceived value of completing the evaluation. ACGME core competencies remained embedded in the new evaluation while still allowing for narrative feedback. After implementing this for at least 3 months, the new simplified evaluation completion rate was then obtained and compared to the initial completion rate. Finally, the faculty were surveyed again using a similar survey to assess their perceptions of the new resident evaluation tool. Those results were then compared with the first survey.

RESULTS:

Our primary outcome of the two-week completion rate of resident evaluations by faculty increased to 85% with the change in resident evaluation tool. We also saw increases in the overall compliance (70% baseline to 98% post-change) and decreases in the late completions (47% baseline to 28% post-change). Furthermore, our survey of faculty demonstrated that more faculty believe rotation evaluations are valuable. Faculty opinion on whether important aspects of rotations could be evaluated increased as well. The majority of faculty who were surveyed also no longer felt there were too many questions.

CONCLUSION/DISCUSSION:

Implementing a new resident evaluation tool resulted in both an increase in the two-week completion rate as well as an improved faculty perception of the evaluation tool itself. We believe that the reduced number of questions and simplified format are responsible for the increased timely feedback residents received from faculty.

REFERENCES:

1. Hattie, J. & Timperley, H. The Power of Feedback. Review of Educational Research; 2007; 77(1); 81–112.
2. Edgar, L. et al. Milestones 2.0: A Step Forward. Journal of Graduate Medical Education; 2018 June; 10(3); 367-369.
3. Myerholtz, L. et al. Residency Faculty Teaching Evaluation: What Do Faculty, Residents, and Program Directors Want? Family Medicine; 2019 June; 51(6); 509-515.
4. Ramani, S. & Krackov S.K. Twelve tips for giving feedback effectively in the clinical environment. Medical Teacher; 2012; 34:787-791.

Your Abstract submission is **limited to this one page only** (approximately 400 words).

Only this page will be included in the printed proceedings and judging packets.

Please be sure to correct any errors before final submission.