## APPD Research Award 2015 – Abstract

HOW WELL DO RESIDENT MILESTONE SELF-ASSESSMENTS CORRELATE WITH CLINICAL COMPETENCY COMMITTEE MILESTONE ASSESSMENTS?

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Purpose: Determine level of correlation between resident self-assessment and Clinical Competency Committee (CCC) measures of competency using milestones. Methods: We conducted a prospective multi-institutional study through APPD LEARN over the 2013-2014 academic year. Two time periods were studied: Fall 2013 (July 1, 2013 to December 31, 2013) and Spring 2014 (January 1, 2014 to June 30, 2014). Residents completed self-assessments and residency programs submitted CCC data using milestones on their residents for the same time period. Programs could choose to enroll in one or both time periods. Pearson correlation coefficients (PCC) were calculated to determine the correlation between self-assessment and CCC assessment scores. Results: A total of 47 pediatric residency programs, representing 1741 unique residents had 2290 observations of both self-assessment and CCCassessment data. Overall correlation coefficients were fair (0.31-0.55). The highest overall PCCs were for patient care subcompetencies such as being able to organize and prioritize responsibilities (PC2: 0.55), gather information (PC1: 0.52), provide transfer of care (PC3: 0.50) and make informed diagnostic and therapeutic decisions (PC4: 0.50). The lowest PCCs were for professionalism subcompetencies such as humanism (Prof1: 0.30), self-awareness of one s limitations that leads to help-seeking behavior (Prof4: 0.30), ethical behavior (Prof3: 0.31), and incorporating feedback into daily practice (PBLI4: 0.31). Correlation coefficients were uniformly higher during the second assessment period (Figure). Conclusions: Correlations varied between subcompetencies, with improvement in PCC during the second assessment period. Subcompetencies that may be easiest to directly observe, such as patient care, had higher correlation coefficients than those which may be more difficult to directly observe, such as professionalism. Improvement in PCC in the second assessment period suggests that assessment skills in residents and CCC faculty may improve with practice/feedback.