

Developing Entrustable Professional Activities (EPAs) for the Competency-based Fellowship Program for Psychiatry in Australia & New Zealand

Dr Margaret Aimer¹, Elaine Halley²

¹ Ko Awatea, Counties Manukau District Health Board, NZ, Emerge Aotearoa, NZ ²The Royal Australian and New Zealand College of Psychiatrists (RANZCP), **Contact Details:** Elaine Halley, General Manager Education and Training, Elaine.Halley@ranzcp.org. **Website:** <https://www.ranzcp.org/Pre-Fellowship/2012-Fellowship-Program.aspx>

Introduction

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) introduced the Competency Based Fellowship Program (CBFP) in 2012, modelled on best practice for medical education.

Entrustable Professional Activities (EPAs) were introduced as summative assessment tools. EPAs are designed to help operationalise competency based education by integrating competencies into workplace activities. They are described as being observable and measureable in their process and their outcome reflects the trainee's competence. Trainees must demonstrate their ability to perform these specialised tasks with only distant (reactive) supervision.

Workplace-based Assessments (WBAs) are used formatively to provide structured feedback to trainees and to inform EPA sign off with a minimum of 3 WBAs per EPA.

EPAs were introduced to help supervisors determine the competence of their trainees and to provide trainees with a framework to monitor their progress. A total of 132 EPAs were developed across the three stages of training.

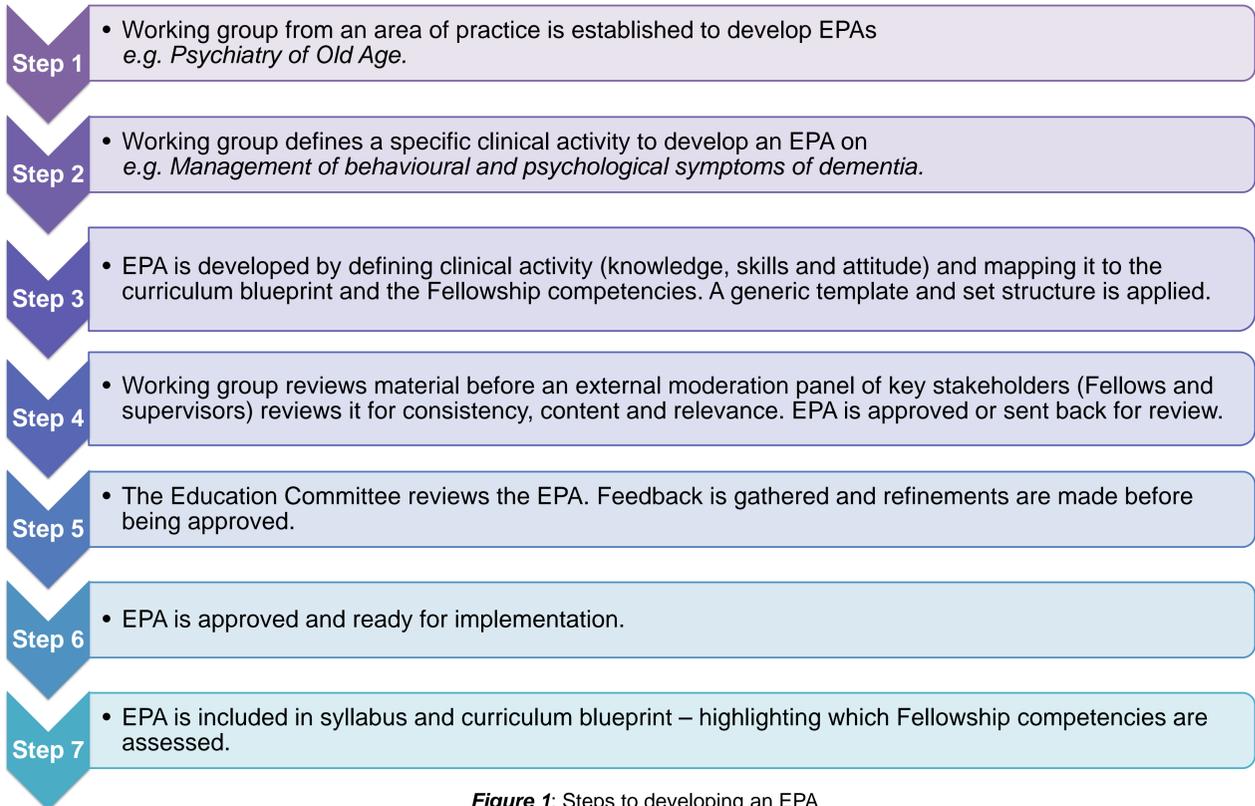


Figure 1: Steps to developing an EPA

Methods

The CanMEDs model and the seven CanMEDs competencies were adapted to the context of psychiatry. From this, key Learning Outcomes and Developmental Descriptors were constructed. The program and assessments were then comprehensively mapped to the competencies and Learning Outcomes.

The 2012 Fellowship program comprises Stages 1, 2, and 3. In each stage, trainees are required to complete a minimum number of EPAs related to specific areas of practice, e.g. Child and Adolescent Psychiatry.

Figure 1 shows the steps to developing an EPA.

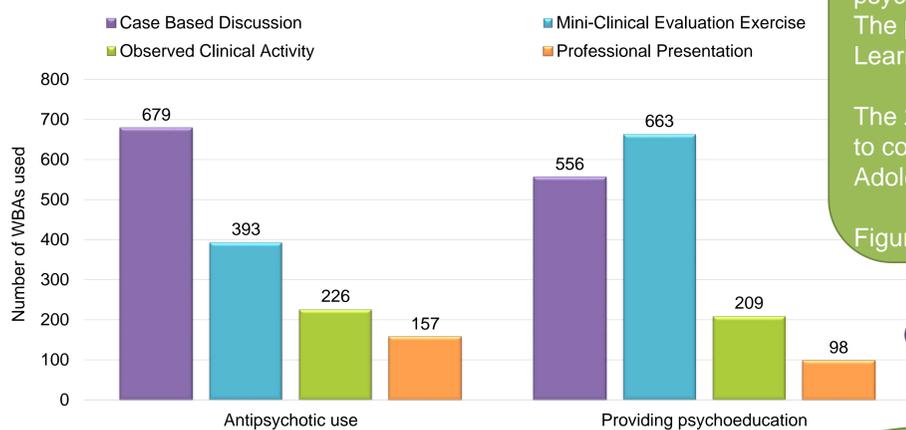


Figure 2. WBA tools used to entrust Stage 1 EPAs

Results and Discussion

Data from the training records for Stage 1 EPAs are summarised in Figure 2. Figure 3 shows trainees perceptions of WBAs from surveys conducted in 2015. Results and quotes from the trainee survey are also highlighted.

44% of trainees agreed, or strongly agreed, that WBAs help to progress their development; and improve their skills.

The majority of trainees agreed, or strongly agreed, that WBAs contributed to the development of their skills and knowledge, see Figure 3.

43% of trainees agreed, or strongly agreed, that each EPA they have attained was a good reflection of their capacity for independent practice in that activity.

71% of trainees agreed, or strongly agreed, that there was enough information provided on how to complete an EPA.

WBAs provide greater incentive to actively utilise the workplace and supervision as instruments for learning.

Formal feedback on work performance, allows for shaping of clinical skills and thinking

Feedback from the EPAs/WBAs is very helpful and it enables you to structure terms around assessments and formulate learning goals.

EPAs are very useful tools for assessing different aspects of clinical knowledge.

More supervision time...allowing time to be observed and critiqued. Really enjoy the WBAs and EPAs.

Authentic program which involves various types of EPAs. Trainees are able to identify strengths and areas of improvement with help of their supervisor very early on during their rotations. This gives them the opportunity to further improve and also become more confident

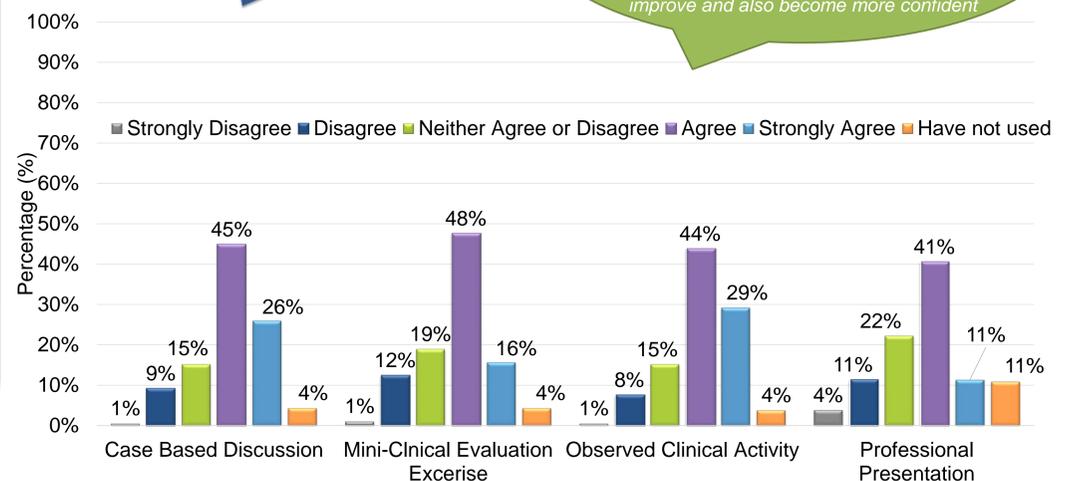


Figure 3: Trainees Perceptions of WBAs - % Contribution to the development of skills and knowledge

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