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Medical Education Scholarship Forum Proceedings

Bridging the gap: Comparing pediatric faculty and residents perspectives on the in-training evaluation report (ITER)

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Background The In-training evaluation report (ITER) is a reflection of the seven CanMEDS roles established by the Royal College of Physicians and Surgeons of Canada and plays a significant role in resident assessment and determining overall competency. However, unfortunately, ITERs have been shown to be inaccurate and unreliable. This unreliability has been sited due to a variety of factors including: lack of defined standards leading to subjectivity between evaluators; fragmented observation of residents and lack of timeliness in feedback delivery. As a result of the multiple challenges surrounding ITERs there has been a growing interest in examining faculty and resident attitudes toward the ITER process. **Objectives** To compare pediatric faculty and resident perspectives on the structure and process of the ITER to improve the ITER as an evaluation tool for Memorial University's pediatric residency training program **Methods** Two separate focus groups were conducted involving both residents and faculty with preset discussion questions. Eight residents (7 female, 1 male), representing a spectrum of training years (3 PGY-1; 3 PGY-2; 2 PGY-3) and nine staff faculty (5 female, 4 male) from a variety of specialties participated. Each focus group was recorded and transcribed verbatim without identifying data. Multiple analyses of the focus group data yielded themes were sub-divided into two categories: 1. ITER Structure & Format and 2. ITER Process & Culture. **Results** Quotes from faculty and residents highlighted the following themes within structure and format: the importance of written feedback, contextualizing the evaluation and the importance of follow up. Within process and culture, the following themes were highlighted: engagement and timeliness, need for more observation, level of interaction, accountability and the importance of giving and receiving verbal feedback. **Conclusion** Residents and faculty shared many similar suggestions on how the ITER as an evaluation tool could be improved. The biggest challenge continues to be the discrepancy in the quality of feedback sought by the residents through the ITER and the faculty members ability to do so in a time effective way. Further research is needed on how residents self-assess and how this process is impacted by receiving constructive or negative feedback.