EVALUATION OF IN-TRAINING EVALUATION REPORTS (ITERs) IN ANESTHESIA EDUCATION

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ABSTRACT: Oral Presentation

Purpose: Postgraduate medical education requires assessment tools that facilitate the delivery of frequent and

effective feedback to trainees. In the Anesthesia residency program at Memorial University, in-training evaluation reports (ITERs) are currently administered on a daily basis. This project examines the

effectiveness of these ITERs in providing feedback for residents.

Methods: This project involved a mixed-methods approach to evaluating Anesthesia ITERs. We gathered

quantitative and qualitative data through administration of a survey to Anesthesia faculty (37) and

residents (20) at Memorial University.

Results: We received 23 responses to the survey, with a response rate = 40.4%. Results show that 41.7% of

faculty are dissatisfied with the current ITERs. No residents are dissatisfied, but 63.6% are neither satisfied nor dissatisfied. 66.7% of faculty are not comfortable providing negative feedback or constructive criticism to residents. And 58.3% of faculty and 27.3% of residents do not feel ITERs accurately reflect resident performance. In addition, residents and faculty have differing opinions about the effectiveness of ITERs as assessment/feedback tools for residents. For example, fewer residents (54.5%) than faculty (83.3%) feel that faculty are comfortable providing positive feedback to

residents; and fewer faculty (25%) than residents (63.6%) feel that ITERs encourage residents to reflect.

Conclusion: Based on a comparison of faculty and resident responses to the survey, faculty appear to have formed stronger and more critical opinions of ITERs and their effectiveness in providing feedback; whereas residents are generally more neutral in their responses. Neither group appear overly positive in their

assessment of the current ITERs. Based on this survey's results, the current ITERs used in Anesthesia education at Memorial University are being revised to make it easier for faculty to provide constructive

feedback and to more accurately reflect observed resident performance.