



Competency-Based Time-Variable Resident Education: A Programmatic Update



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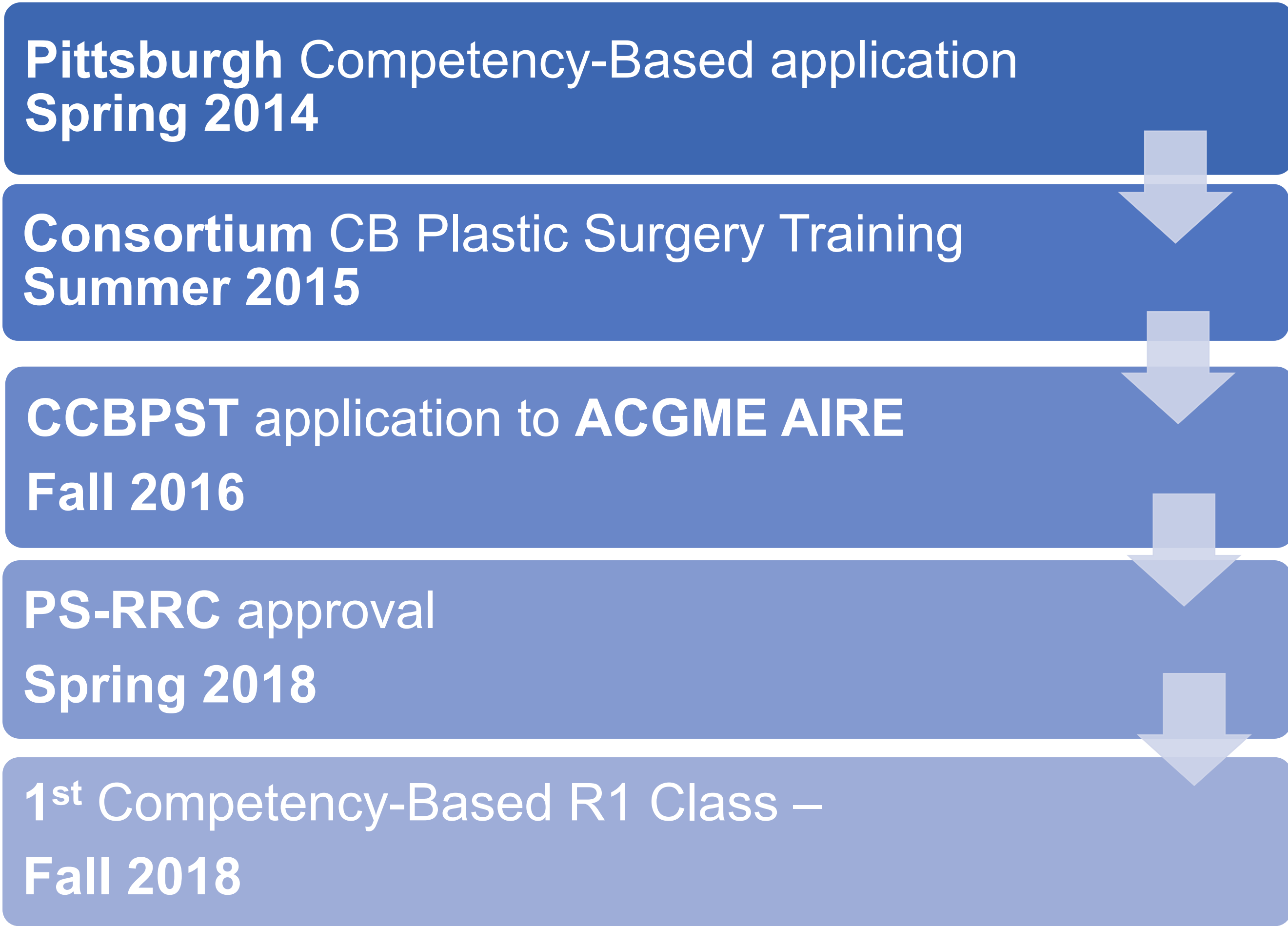
Background

More than 100 years after the Flexner Report established time-based residency training, our medical education system is on the brink of a paradigm shift towards competency-based evaluation of graduate medical trainees.

Program Goals

- To create a concrete, objective evaluation of resident competency.
- To make our training program adaptable to individual learner needs and goals.
- Proof-of-concept of time variability in plastic surgery graduate medical education.

Timeline



Determination of Competency

1. Milestone Modular Examinations
2. Case-by-Case Technical Assessments: Resident v Faculty
3. End-of-Rotation Evaluation

Programmatic Development

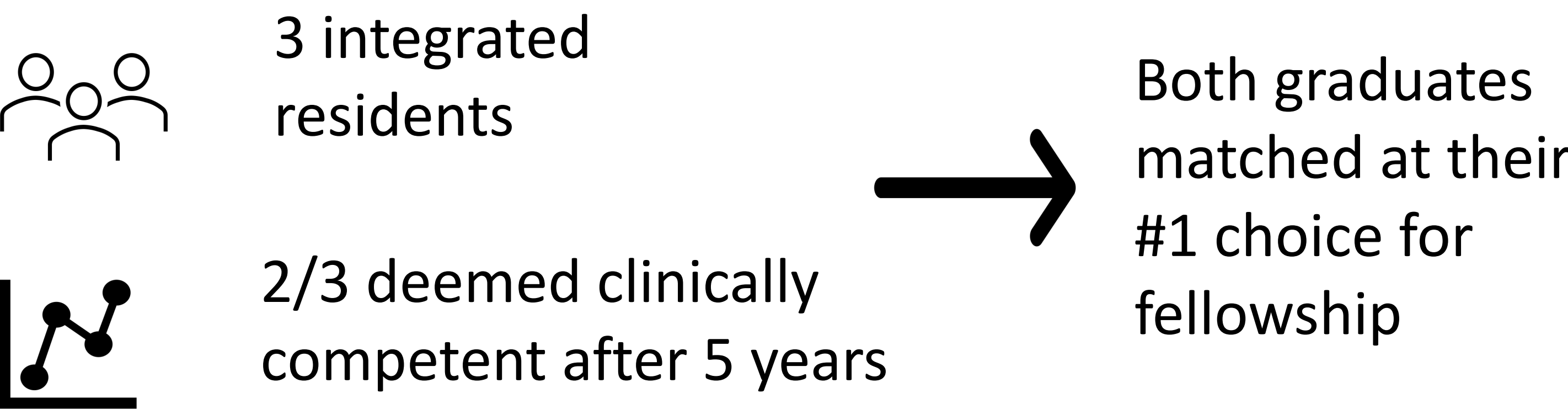
- Frontloading plastic surgery exposure and learning.
- Night float in R1 and R2 provides junior residents with increased exposure to core plastic surgery.
- R5 is now a dedicated Chief year.
- R6 is self directed, with residents able to scout uncovered or interesting cases based on their educational needs or interests.

R5 Residents					
	Block 1	Block 2	Block 3	Block 4	Block 5
Integrated 1	Body Contouring Chief	Children’s Chief	Head & Neck Chief	AGH Recon Chief	Magee Women’s Chief
Integrated 2	Magee Women’s Chief	Body Contouring Chief	Children’s Chief	Head & Neck Chief	AGH Recon Chief
Integrated 3	AGH Recon Chief	Magee Women’s Chief	Body Contouring Chief	Children’s Chief	Head & Neck Chief

R6 Residents				
	Block 1	Block 2	Block 3	Block 4
Integrated 1	Aesthetics	Career Dev	Community	Elective
Integrated 2	Elective	Aesthetics	Career Dev	Community

Exam	Initiation	Milestone Level	Faculty
Non-Clinical	R1	Level 1 + 2 Level 3 + 4	Losee Nguyen
General Recon	R1	Level 1 + 2 Level 3 + 4	Admin Chief Resident Egro
Hand	R2	Level 1 + 2 Level 3 + 4	Teunis Davit
Breast	R3	Level 1 + 2 Level 3 + 4	De La Cruz Gimbel
Craniofacial	R3	Level 1 + 2 Level 3 + 4	Bykowski Goldstein
Aesthetic	R3	Level 1 + 2 Level 3 + 4	Admin Chief Resident Gusenoff

Results



Conclusions

- CBTV model has resulted in:
- improved **methods** of resident assessment
 - timely identification of **accelerated** residents and residents needing **assistance**
 - in-folded **education** vs. post-residency **remediation**
 - improved resident **well-being**
 - *Training for **self-motivated**, life-long learning*