As part of the ACGME’s Next Accreditation System, residency programs are transitioning to milestone based assessment systems. National work among Internal Medicine leaders has helped to define curricular milestones[[1]](#endnote-1). In addition to these, a collaborative project between the ACGME and ABIM defined reporting milestones which have been grouped into sub-competencies of the general competencies.[[2]](#endnote-2)

Among the published milestones, the following have been deemed to be related to High Value Care along with the potential setting for assessment:

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| --- | --- | --- | --- |
| **Competency** | **Sub-Competency** | **Reporting Milestone** | **Sample Assessment Settings** |
| Patient Care | PC1(gathers and synthesizes information) | Effectively uses history and physical examination skills to minimize the need for further diagnostic testing. | Direct observation of H&P, chart audit, summative monthly rotation assessments and continuity clinic assessments |
| Medical Knowledge | MK2(diagnostic testing and procedures) | Interprets complex diagnostic tests accurately. | Medical knowledge tests, summative monthly rotation assessments |
|  | MK2(diagnostic testing and procedures) | Understands the concepts of pre-test probability and test performance characteristics. | Medical knowledge tests, summative monthly rotation assessments |
|  | MK2(diagnostic testing and procedures) | Fully understands the rationale and risks associated with common procedures. | Medical knowledge tests, summative monthly rotation assessments |
| Systems Based Practice | SBP3 (cost-effective care.) | Consistently works to address patient specific barriers to cost-effective care. | Summative monthly rotation assessments and continuity clinic assessments |
|  | SBP3 (cost-effective care) | Advocates for cost-conscious utilization of resources (i.e. emergency department visits, hospital readmissions). | Summative monthly rotation assessments and continuity clinic assessments |
|  | SBP3 (cost-effective care) | Incorporates cost-awareness principles into standard clinical judgments and decision-making, including screening tests. | Summative monthly rotation assessments and continuity clinic assessments |
|  | SBP4 (transitions) | Appropriately utilizes available resources to coordinate care and ensures safe and effective patient care within and across delivery systems. | Discharge summary assessment, direct observation of patient handoff, patient feedback after patient discharge |
|  | SBP 4 (transitions) | Proactively communicates with past and future caregivers to ensure continuity of care. | Discharge summary assessment, direct observation of patient handoff, patient feedback after patient discharge |

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| Practice Based Learning and Improvement | PBLI2 (performance audit): | Analyzes own clinical performance data and actively works to improve performance. | Quality improvement assessment, chart audit, self reflection |
|  | PBLI2 | Actively engages in quality improvement initiatives | Separate assessment of QI activity |
|  | PBLI2 | Demonstrates the ability to apply common principles and techniques of quality improvement to improve care for a panel of patients. | Quality improvement assessment, chart audit, self reflection |
| Professionalism | PROF3 (responds to patient’s unique needs): | Recognizes and accounts for the unique characteristics and needs of the patient/caregiver. | Direct obs of H&P, chart audit, summative monthly rotation assessments and continuity clinic assessments |
|  | PROF3 (responds to patient’s unique needs): | Appropriately modifies care plan to account for a patient’s unique characteristics and needs. | Direct obs of H&P, chart audit, summative monthly rotation assessments and continuity clinic assessments |
| Interpersonal and Communication Skills | ICS1 (communicates effectively) | Identifies and incorporates patient preference in shared decision making across a wide variety of patient care conversations. | Direct obs , chart audit, summative monthly rotation assessments and continuity clinic assessments |
|  | ICS1 (communicates effectively) | Quickly establishes a therapeutic relationship with patients and caregivers, including persons of different socioeconomic and cultural backgrounds | Direct obs, summative monthly rotation assessments and continuity clinic assessments |
|  | ICS1 (communicates effectively) | Incorporates patient-specific preferences into plan of care. | Direct obs, summative monthly rotation assessments and continuity clinic assessments |

1. Green ML, Aagaard EM, Caverzagie KJ, et al. Charting the road to competence: developmental milestones for internal medicine. *J Grad Med Educ.* Sep 2009;1(1):5-20. [↑](#endnote-ref-1)
2. The Internal Medicine Milestone Project: A Joint Initiative of The Accreditation Council for Graduate Medical Education and The American Board of Internal Medicine. Accessed on August 28, 2013 at <http://www.acgme-nas.org/assets/pdf/Milestones/InternalMedicineMilestones.pdf> [↑](#endnote-ref-2)