|  |
| --- |
| **Medical Knowledge**: Demonstrate sufficient knowledge of the basic and clinically supportive sciences appropriate to pediatrics.  |
| **1. Novice 2. Beginner** | **3. Advanced 4. Beginning** **Beginner Competency** | **5. Competent 6. Advanced** **Competency** | **7. Proficient 8. Advanced** **Proficiency** | **9. Expert N/A** |
| Knows or remembers the basic content knowledge of common pediatric problems and illnesses. | Understands the basic content knowledge of pediatrics, but is still learning to apply it to clinical situations. | Synthesizes, analyzes, and applies knowledge in a way that allows meaningful discussion in within the given clinical situation. | Evaluates knowledge and uses it appropriately to develop meaningful conclusions about how to apply the knowledge to clinical situations.  | Analyzes and evaluates previous experiences, and refines their practice appropriately to new clinical scenarios. |

|  |
| --- |
| **Medical Knowledge**: Locate, appraise, and assimilate evidence from scientific studies related to their patients’ health problems. |
| **1. Novice 2. Beginner** | **3. Advanced 4. Beginning** **Beginner Competency** | **5. Competent 6. Advanced** **Competency** | **7. Proficient 8. Advanced** **Proficiency** | **9. Expert N/A** |
| Explains basic principles of EBM but relevance is limited due to lack of clinical experience. Not able to formulate a clinical question; does not have skill of critical appraisal of the literature.  | Recognizes the importance of use of current information to manage patients and responds to external prompts to do so. Able to formulate a clinical question; not yet efficient with on-line literature search. Starting to learn critical appraisal skills.  | Identifies knowledge gaps as learning opportunities. Increasing skill at formulating clinical questions, critically appraising topics by analyzing major outcomes, and seeks/ applies evidence when needed, not just when prompted.  | Increasing self-motivated to learn and regularly formulates clinical questions. Incorporates evidence on rounds and teaches. Performs advanced literature searches; advanced skill in critical appraisal; practices EBM.  | Teaches critical appraisal of topics to other learners. Able to easily formulate clinical questions and does so by habit. A role model for practicing EBM.  |

|  |
| --- |
| **Practice-based Learning and Improvement**: Develop the necessary skills to be an effective teacher. |
| **1. Novice 2. Beginner** | **3. Advanced 4. Beginning** **Beginner Competency** | **5. Competent 6. Advanced** **Competency** | **7. Proficient 8. Advanced** **Proficiency** | **9. Expert N/A** |
| Completely teacher-centered; teacher does not understand the learning needs of the students. Notable lack of content knowledge and lack of teaching skills. Fear of inadequacy, lacks confidence, and inability to adapt.  | Quite teacher-centered. Can identify a good teacher, but still without plan, technique, or mindful practice of teaching. Not adaptable to others’ learning needs. Feels inadequate due to limited teaching experience. | Exhibits some learner-centered teaching behaviors, but remains mostly teacher-centered. Identify some qualities of effective teaching. Teaching methods expanding and more adaptable. Gaining confidence in abilities and likes to teach. | Exhibits mostly a learner-centered approach to teaching. Assesses learner needs. Eager and enthusiastic to teach; obvious enjoyment. Understands some teaching concepts, adapts, modifies and is more relaxed and confident with teaching. | Exhibits a learner-centered approach to teaching. Understands and seeks new information regarding teaching and learning. Seen as a dedicated teacher Confidence in teaching skills allows for creative and adaptive teaching abilities. |

***Please complete reverse side* *Resident / Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evaluator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pediatric Milestones: JC/EBM Evaluation PAGE 3 of 4***

|  |
| --- |
| **Practice-based Learning and Improvement**: Participate in the education of other health professionals. |
| **1. Novice 2. Beginner** | **3. Advanced 4. Beginning** **Beginner Competency** | **5. Competent 6. Advanced** **Competency** | **7. Proficient 8. Advanced** **Proficiency** | **9. Expert N/A** |
| Individual-centered interaction: Has gaps in knowledge and experience resulting in rigid/scripted delivery of information. The delivery is not learner focused. | Individual-centered and centered on learning needs of others, based on dynamics of session: closing gaps of knowledge. Somewhat flexible in addressing learner needs.  | Majority learner-centered: has solid knowledge and experience. Able to modify teaching to the needs of the population being taught.. Inconsistently checks for learner understanding.  | Learner-centeredness is a priority: skillful and knowledgeable about needs of patient. Consistently checks for learner understanding. Empowers and motivates learners.  | Learner-centeredness is a habit: is able to motivate and empower with ability to confirm comprehension of counseling.  |

|  |
| --- |
| **Interpersonal and Communication Skills**: Communicate effectively with physicians, other health professionals, and related health related agencies.  |
| **1. Novice 2. Beginner** | **3. Advanced 4. Beginning** **Beginner Competency** | **5. Competent 6. Advanced** **Competency** | **7. Proficient 8. Advanced** **Proficiency** | **9. Expert N/A** |
| Rigid rules-based recitation of facts. Often communicates from a template. Communication does not change based on context, audience, or situation. Not aware of the purpose of the communication.  | Begins to understand the purpose of the communication and at times adjusts length to context. Will often still err on the side of inclusion of excess details. | Tailors communication strategy and message to the audience, purpose, and context in most situations. Aware of the purpose of the communication and can effectively make an argument. Beginning to improvise in unfamiliar situations.  | Uses the appropriate strategy for communication. Refines complex cases succinctly. Improvises and has expanded strategies for dealing with difficult communication scenarios. | Master of improvisation in any new or difficult communication scenario. Recognized as a highly effective public speaker. Sought out as a role model for difficult conversations and as a mediator. |

|  |
| --- |
| **Professionalism**: Demonstrate high standards of ethical behavior which includes maintaining appropriate professional boundaries.  |
| **1. Novice 2. Beginner** | **3. Advanced 4. Beginning** **Beginner Competency** | **5. Competent 6. Advanced** **Competency** | **7. Proficient 8. Advanced** **Proficiency** | **9. Expert N/A** |
| Repeated lapses in professional conduct. Responsibility to patients, peers and/or program consistently not met due to a lack of insight into behavior(s) or other conditions /causes.  | Documented lapses in professionalism when stressed or fatigued. Some insight into behavior(s) but unable to modify behavior when under stressful situations.  | Conducts interactions with a professional mindset in nearly all circumstances. Maintains a sense of duty and accountability. Has insight into own behavior and triggers for professionalism lapses; able to use this information to remain professional.  | Demonstrates an in-depth understanding of professionalism. Able to help others to identify potential triggers to professionalism lapses and uses this information to prevent lapses in conduct as part of his duty to help others.  | A model of professional conduct. Smooth interactions with patients, families, and peers. Maintains high ethical standards across settings and circumstances. Excellent emotional intelligence about human behavior and uses this information to help self and others.  |

***Please complete reverse side* *Resident / Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evaluator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pediatric Milestones: JC / EBM Evaluation PAGE 4 of 4***