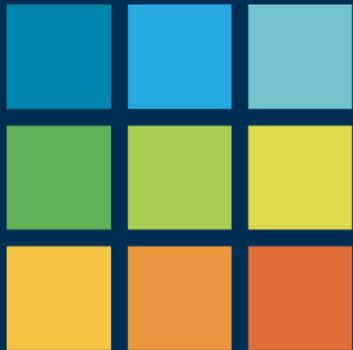




American Association of
Veterinary Medical Colleges



CBVE

Competency-Based
Veterinary Education

CBVE Newsletter – January 2023



Exciting News to Share

Happy New Year from the AAVMC Council on Outcomes-based Veterinary Education (COVE) and the CBVE Working Group members! We had a productive year and are looking forward to continuing to advance the implementation of competency-based education in 2023.

We have organized a series of events for 2023, which you can find at the end of the newsletter or on the [website](#). In addition, we want to hear from you and encourage you to use the following email address to reach us vetmed@cbve.org.

Tell us what's on your mind about CBVE, ask a question, make a suggestion, let us know what is going on in your colleges and sign up for the newsletter if you have not already done so.

The COVE and CBVE Working Group members thank you for your support of the CBVE Newsletter and your interest in competency-based veterinary education.

Happy New Year!



Tips for Implementation of CBVE

Words Matter! Outcomes-based Veterinary Education

As increasingly more programs are considering or transitioning to CBVE, we thought a few New Year's tips could help smooth the transition.

The first thing to remember is that outcomes-based education is all about outcomes!

Having a common understanding of terminology for these outcomes is critical to ensure fidelity of the CBVE Model of Education and truly grasp the connections between the three components: the CBVE Competency Framework, the Milestones, and the EPAs (Entrustable Professional Activities).

The creation of outcomes (i.e., the CBVE Competency Framework) gives us the 30,000-foot view of what a veterinary graduate should be able to do at the time of graduation. The framework is broken down into domains of competence, where each competency is considered an outcome. The context in which the learner performs the outcome determines how alternate terminology for the outcome might be applied.

Let's use an example: We express outcomes as **competencies** within the CBVE Framework (e.g., Competency 1.1 Gathers and assimilates relevant information about animals). These represent the broad outcomes we want our graduates to be able to achieve. However, when we want to define the stages of development for a learner related to a specific competency, we then describe the outcome as a series of **milestones**. When we want to determine whether a learner can be trusted to perform common entry-level, complex activities in a professional workplace setting, we use the term **entrustable professional activity** (EPA) to describe a collection of competencies that work together to allow a learner to perform a specific workplace activity.

*When the context of the outcome is changed,
the term used to describe the outcome also changes.*



Here are a few examples:

Consider an EPA:

An EPA is unit of veterinary professional work that combines multiple competencies from different domains and is performed in the clinical/authentic or workplace environment. The same activity should not be called an EPA if it is not performed in the workplace-based environment (e.g., simulated in a lab). The reason for this distinction is that the purpose of an EPA is to entrust a learner to perform the activity independently on a client's animal/s or problem/s in a workplace-based setting.

Simulated activities remove the “contextual” or “situational” complexities that learners must navigate in clinical training, making the entrustment of a learner to perform an EPA impossible. Veterinary students need the experience of taking full responsibility for providing appropriate care to patients in order to develop their confidence, competence and autonomy. EPAs are considered to create one of the best opportunities for assessing learners' readiness to be entrusted with responsibility for patient care. Furthermore, if the term EPA is applied to activities that are not performed in the workplace, or to multiple small activities in the workplace, this loses the significance of the term “entrustment” and subsequently the usefulness of EPAs in making entrustment decisions for learners in authentic, workplace-based settings.

A specific example of this could be EPA #7: *“Perform general anesthesia and recovery of a stable patient including monitoring and support”*. When this activity is performed by the learner in a clinical environment on an actual patient and evaluated using an entrustment-supervision scale, this would be an EPA. However, if this activity was performed in a clinical skills lab during the pre-clinical years, this would be a sub-competency under Competency 2.1: *“Performs veterinary procedures and post-procedural care”*.

Consider Milestones:

The CBVE Milestones represent competency progression of competence of the learner throughout training. A learner may be assessed for each competency, where applicable in training, using the milestones. The CBVE ITER (see Sept 2022 CBVE Town Hall on the [CBVE website](#)) is a great example of how milestones may be deployed in clinical training to provide learners with feedback on their progress towards achieving competence for each competency. It is important to remember that some competencies will be more appropriately assessed clinically while other competencies are best assessed in a non-clinical setting.

Milestones assess the level of learner progression for a particular competency.

Entrustment-supervision scales assess learner ability to independently perform integrated competencies that comprise the EPAs.

*Let's now focus on EPAs as a
component of the CBVE Model of Education.*



Why are EPAs helpful for evaluating our learners?

There are a number of important characteristics of EPAs that make them helpful for assessing our learners in workplace environments:

- EPAs are core activities that veterinarians perform in the workplace, and are typically applicable to a variety of workplace settings (e.g., different species, clients, and situations).
- EPAs are complex activities that involve the application and integration of multiple competencies from different domains.
- EPAs are activities that learners should be able to perform independently at graduation.
- EPAs are activities that require learners to take responsibility for their decisions where there are real consequences. This is one of the most challenging aspects for graduates making a successful transition to practice. Multiple opportunities to perform EPAs in different contexts help learners to develop competence and confidence.
- A variety of assessment scales have been used to assess EPAs. Entrustment-supervision (ES) scales are uniquely suited to address the variable complexities of the workplace because clinicians make ad hoc entrustment decisions multiple times throughout the day in the clinical setting.
- Assessment of an EPA represents a snapshot in time of a learner's performance; EPAs are most effective when assessed repeatedly across the clinical training experience in a variety of contexts and are useful in demonstrating longitudinal progression of an individual learner.



Tips for Implementing EPAs

When implementing EPAs as a component of CBVE, veterinary educational programs are recommended to:

- Implement no more than 8-12 EPAs across clinical training.

- Studies to date have shown that fewer numbers of EPAs are more realistic for achievement (for both the program and the learner).
 - Create short assessment rubrics, including entrustment-supervision scales, that take only a few minutes to provide feedback to the learner in the busy workplace.
 - Ensure EPAs have a defined beginning and end.
 - Encourage learners to initiate assessments of EPAs when they believe they are ready to be assessed.
 - Provide training for all staff who are involved with EPAs, including practice with using scenarios to learn to decide on critical thresholds of “entrusted” and “not yet entrusted”.
 - Ensure provision of in-the-moment feedback.
 - Coaching and conversation are the focus of what the learner needs.
 - Narrative feedback should include what the learner did right and should keep doing, as well as how the learner can improve next time.
 - Encourage all qualified personnel in the workplace to become comfortable assessing and/or providing feedback to learners as they perform EPAs (e.g. house officers/residents, technical/support staff, faculty).
 - Explain the entrustment-supervision scale in advance to learners to create a shared understanding of what trust means regarding EPA performance expectations.
 - The priority in assessing an EPA is to do no harm, with the outcome for the patient being the most important factor in making the entrustment decision.
 - Encourage learners to develop their own skills in accurately evaluating their ability to perform procedures with limited supervision.
 - Use an entrustment-supervision scale to assess EPAs and provide formative feedback to the learner in the moment. Use a number of assessments over time to assist with summative, progress decisions.
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Upcoming Events

CBVE Spring Town Hall - April 2023

CBVE Summer Workshop - June 2023

- Reboot Session - Wednesday June 28, (1/2 day workshop) 8AM-12PM EST (Designed for those brand- new to CBVE)
- Implementation 2.0 - CBVE from 2019 to Today! - Wednesday June 28 (begins at 1PM EST) through Friday June 30 (ends at 12PM EST)



- The Ohio State University, Columbus, Ohio, USA

Association for Medical Education in Europe (AMEE)

- August 26-30, 2023 Glasgow, Scotland

CBVE Fall Town Hall - September 2023

Veterinary Educator Collaborative

- September 16-17, 2023
- Texas Tech University

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