# The Surgical Critical Care Milestone Project

A Joint Initiative of

The Accreditation Council for Graduate Medical Education,

and

The American Board of Surgery





## The Surgical Critical Care Milestone Project

The Milestones are designed only for use in evaluation of fellows in the context of their participation in ACGME-accredited residency or fellowship programs. The Milestones provide a framework for assessment of the development of the fellow in key dimensions of the elements of physician competency in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competency, nor are they designed to be relevant in any other context.

#### **Surgical Critical Care Milestones**

Chair: Mark A. Malangoni, MD

### **Working Group**

Karen J. Brasel, MD
Laura Edgar, EdD, CAE
David N. Herndon, MD
Fred Luchette, MD, MS
Peggy Simpson, EdD
David Spain, MD
Steven C. Stain, MD
Samuel A. Tisherman, MD

### **Advisory Group**

Timothy P. Brigham, MDiv, PhD James C. Herbert, MD Lenworth Jacobs, MD John R. Potts III, MD

#### **Milestone Reporting**

This document presents milestones designed for programs to use in semi-annual review of fellow performance and reporting to the ACGME. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME competencies organized in a developmental framework from less to more advanced. They are descriptors and targets for fellow performance as a fellow moves from entry into fellowship through graduation. In the initial years of implementation, the Review Committee will examine milestone performance data for each program's fellows as one element in the Next Accreditation System (NAS) to determine whether fellows overall are progressing.

For each period, review and reporting will involve selecting milestone levels that best describe a fellow's current performance and attributes. Milestones are arranged into numbered levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert in the subspecialty.

Selection of a level implies that the fellow substantially demonstrates the milestones in that level, as well as those in lower levels (see the diagram on page v).

- **Level 1:** The fellow demonstrates milestones expected of an incoming fellow with little experience in the area of study.
- **Level 2:** The fellow is advancing and demonstrates additional milestones, but is not yet performing at a mid-fellowship level.
- **Level 3:** The fellow continues to advance and demonstrate additional milestones, consistently including the majority of milestones targeted for fellowship.
- **Level 4:** The fellow has advanced so that he or she now substantially demonstrates the milestones targeted for fellowship. This level is designed as the graduation target.
- **Level 5:** The fellow has advanced beyond performance targets set for fellowship and is demonstrating "aspirational" goals which might describe the performance of someone who has been in practice for several years. It is expected that only a few exceptional fellows will reach this level.

#### **Additional Notes**

Level 4 is designed as the graduation *target* and *does not* represent a graduation *requirement*. Making decisions about readiness for graduation is the purview of the fellowship program director. Study of Milestone performance data will be required before the ACGME and its partners will be able to determine whether milestones in the first four levels appropriately represent the developmental framework, and whether Milestone data are of sufficient quality to be used for high-stakes decisions.

Examples are provided with some milestones. Please note that the examples are not the required element or outcome; they are provided as a way to share the intent of the element.

Some milestone descriptions include statements about performing independently. These activities must occur in conformity to ACGME supervision guidelines, as well as to institutional and program policies. For example, a fellow who performs a procedure independently must, at a minimum, be supervised through oversight.

In addition, some milestones include a statement of limited knowledge and basic knowledge. The intent of these descriptions is that a fellow with limited knowledge is likely a fellow who has come from an area outside of surgery or who is completing the fellowship before finishing his or her surgery residency. A fellow who begins the program with basic knowledge will more likely have completed a general surgery residency program.

Answers to Frequently Asked Questions about Milestones are available on the Milestones web page: <a href="http://www.acqme.org/acqmeweb/Portals/0/MilestonesFAQ.pdf">http://www.acqme.org/acqmeweb/Portals/0/MilestonesFAQ.pdf</a>.

The diagram below presents an example set of milestones for one sub-competency in the same format as the ACGME Report Worksheet. For each reporting period, a fellow's performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that fellow's performance in relation to those milestones.

Level1	Level2	Level3	Level4	Level5
Requires direct supervision	Demonstrates proficiency in	Recognizes the need for and	Demonstrates proficiency in	Performs quality
in basic ventilation	basic ventilation	initiates appropriate	the management of patients	improvement or research
management (initiation,	management(initiation,	advanced ventilator	with respiratory failure who	project regarding
maintenance and weaning)	maintenance and weaning)	techniques	require advanced ventilator	management of patients
			techniques	with respiratory failure
Comments:  Not yet rotated				
Selecting a re	sponse box in the middle	of a	Selecting a response I	box on the line in between leve
level implies that milestones in that level and			indicates that milestones in lower levels have been	
in lower levels have been substantially		substantially demons	substantially demonstrated as well as <b>some</b> milestone	
demonstrated.			in the higher level(s).	

Patient Care — Respiratory Failure				
Level 1	Level 2	Level 3	Level 4	Level 5
Requires direct supervision	Demonstrates proficiency in	Recognizes the need for and	Demonstrates proficiency in	Completes quality
in basic ventilation	basic ventilation	initiates appropriate	the management of patients	improvement or research
management (initiation,	management (initiation,	advanced ventilator	with respiratory failure who	project regarding
maintenance, and	maintenance, and weaning)	techniques	require advanced ventilator	management of patients
weaning)			techniques	with respiratory failure
Comments:				Not yet rotated

Medical Knowledge — Respiratory Failure (Ventilator-Associated Events)				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates limited	Demonstrates limited	Demonstrates basic	Demonstrates	Completes quality
knowledge of the diagnosis	knowledge of techniques to	knowledge for identification,	comprehensive knowledge	improvement or research
of ventilator-associated	prevent and treat ventilator-	diagnosis, prevention, and	for identification, diagnosis,	project on the identification,
events	associated events	treatment of ventilator-	prevention, and treatment	diagnosis, prevention, or
		associated events	of ventilator-associated	treatment of ventilator-
			events	associated events
Comments:  Not yet rotated				

Patient Care — Nutritional Support				
Level 1	Level 2	Level 3	Level 4	Level 5
Can identify the	Requires direct supervision in	Independently performs	Demonstrates proficiency in	Completes quality
appropriate indications for	assessment and initial	assessment of nutritional	the nutritional assessment	improvement or research
nutritional support in	management of nutritional	needs and initiates	and management for special	project in nutritional
critically-ill patients	support in critically-ill	appropriate nutritional	populations of critically-ill	assessment or management
	patients	support in critically-ill	patients	of critically-ill patients
		patients		
Comments:				Not yet rotated

Medical Knowledge — Nutritional Support				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates limited	Demonstrates basic	Demonstrates knowledge of	Demonstrates	Completes quality
knowledge of nutritional	knowledge of nutritional	nutritional requirements for	comprehensive knowledge	improvement or research
assessment of critically-ill	requirements of critically-ill	special populations of	of nutritional requirements	project on the nutritional
patients	surgical patients	critically-ill surgical patients	for special populations of	requirements of critically-ill
		(e.g., those with liver failure,	critically-ill surgical patients	surgical patients
		GI tract fistulae, acute kidney		
		injury, sepsis, burns)		
Comments:				Not yet rotated

Patient Care — Shock/Resuscitation				
Level 1	Level 2	Level 3	Level 4	Level 5
Needs direct supervision to	Independently recognizes a	Demonstrates the ability to	Demonstrates proficiency in	Completes a quality
recognize and treat	patient in shock and initiates	individualize resuscitation	the resuscitation of all types	improvement or research
patients in shock	appropriate resuscitation	based on the type of shock	of shock in special patient	project or develops a
		and assessment of the	populations (e.g., those at	protocol for shock
		response to therapy with	extremes of age, with	resuscitation
		appropriate monitoring	complex co-morbidities, or	
			who are	
			immunosuppressed)	
			Utilizes and interprets	
			appropriate advanced	
			monitoring techniques (e.g.,	
			echocardiography, non-	
			invasive and invasive	
			hemodynamic monitoring)	
Comments:				Not yet rotated

Medical Knowledge — Shock/Resuscitation				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates limited	Demonstrates basic	Demonstrates advanced	Demonstrates	Demonstrates the ability to
knowledge of the types of	knowledge of multiple types	knowledge of multiple types	comprehensive knowledge	interpret current medical
shock	of shock and basic	of shock, as well as of	of the pathophysiology,	literature on shock and
	resuscitation regimens	appropriate options for	diagnosis, and treatment of	resuscitation to improve
		treatment	all types of shock in special	teaching, quality of care, or
			patient populations (e.g.,	research
			those at extremes of age,	
			with complex co-morbidities,	
			or who are	
			immunosuppressed)	
Comments:  Not yet rotated				

Patient Care — Acute Kidney Injury				
Level 1	Level 2	Level 3	Level 4	Level 5
Requires direct supervision to recognize and initially treat patients with acute kidney injury	Recognizes and initiates treatment of acute kidney injury	Diagnoses the causes and types of acute kidney injury; initiates management and assesses response to treatment  Independently provides care to prevent acute kidney injury	Demonstrates proficiency in the recognition and comprehensive management of patients with acute kidney injury  Demonstrates proficiency in management of patients requiring renal replacement therapy	Completes quality improvement or research project regarding management of patients with acute kidney injury
Comments:  Not yet rotated				

Medical Knowledge — Acute Kidney Injury				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates a limited	Demonstrates basic	Demonstrates advanced	Demonstrates	Demonstrates the ability to
knowledge of the types of acute kidney injury	knowledge of the various types of acute kidney injury	knowledge of the various types of and methods to manage acute kidney injury  Demonstrates knowledge of strategies to prevent acute kidney injury	comprehensive knowledge of pathophysiology, diagnosis, and treatment of all types and severities of acute kidney injury  Demonstrates knowledge of the physiologic	interpret current medical literature to improve teaching, quality of care, and research related to acute kidney injury
			perturbations of all forms of renal replacement therapy	
Comments:				Not yet rotated

Patient Care — Trauma and Burns				
Level 1	Level 2	Level 3	Level 4	Level 5
Requires direct supervision to recognize common critical care conditions in injured patients (e.g., brain injury, flail chest, compartment syndromes, rhabdomyolysis, coagulopathy, wound management)	Recognizes common critical care conditions in injured patients and provides initial management	Recognizes and appropriately treats critical care conditions in severely injured patients  Prioritizes treatment of the multiply injured patient  Recognizes and treats common complications in severely injured patients	Demonstrates proficiency in the comprehensive management of severely injured patients at the extremes of age and with complex co-morbidities  Recognizes and treats more unusual complications in severely injured patients	Completes quality improvement or research project regarding the critical care treatment of injured patients
Comments:  Not yet rotated				

Medical Knowledge — Trauma and Burns				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates limited	Demonstrates basic	Demonstrates basic	Demonstrates	Completes quality
knowledge of the	knowledge of the	knowledge of the	comprehensive knowledge	improvement or research
pathophysiology of injured	pathophysiology of severely	pathophysiology of and	of the pathophysiology,	project on pathophysiology
patients	injured patients	anticipated complications in	prevention, and	or complications in severely
		severely injured patients	management of	injured patients
			complications in severely	
			injured patients	
Comments:  Not yet rotated				

**Comments:** 

Patient Care — Cardiac Disorders of Critically-III Patients				
Level 1	Level 2	Level 3	Level 4	Level 5
Requires direct supervision	Applies the principles of	Independently recognizes	Demonstrates proficiency in	Completes quality
to identify and treat	Advanced Cardiac Life	and treats common cardiac	the diagnosis and treatment	improvement or research
common cardiac disorders	Support (ACLS)	disorders	of complex cardiac disorders	project in cardiac disorders
(e.g., acute myocardial			(e.g., valve disorders,	
infarction, dysrhythmias,			biventricular failure,	
heart failure)			pulmonary hypertension,	
			hypertensive crisis)	
Comments:				Not yet rotated
Medical Knowledge — Card	iac Disorders of Critically-III Pati	ents		
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates limited	Demonstrates basic	Demonstrates basic	Demonstrates	Completes quality
knowledge of cardiac	knowledge of cardiac	knowledge of cardiac	comprehensive knowledge	improvement or research
physiology	pathophysiology	pathophysiology and	of cardiac pathophysiology	project on pathophysiology
		treatment of common cardiac	and treatment of complex	or complications of cardiac
		disorders	cardiac disorders	disorders

Copyright (c) Pending. The Accreditation Council for Graduate Medical Education and The American Board of Surgery. All rights reserved. The copyright owners grant third parties the right to use the Surgical Critical Care Milestones on a non-exclusive basis for educational purposes.

Not yet rotated

coma, delirium, seizures)

Patient Care — Neurologic Disorders of Critically-Ill Patients

neurologic disorders

Level 1	Level 2	Level 3	Level 4	Level 5	
Requires direct supervision	Appropriately assesses	Recognizes and treats	Proficient in prevention,	Completes quality	
to recognize the stages and	patients with coma, delirium,	multiple etiologies of coma,	diagnosis and treatment of	improvement or research	
treatment of coma,	and other neurologic	delirium, and other	multiple etiologies of coma,	project regarding the critical	
delirium, and other	disorders	neurologic disorders	delirium, and other	care treatment of patients	
neurologic disorders			neurologic disorders	with coma, delirium, and	
				other neurologic disorders	
				_	
Comments:				Not yet rotated	
Medical Knowledge — Neurologic Disorders of Critically-III Patients					
Level 1	Level 2	Level 3	Level 4	Level 5	
Demonstrates limited	Demonstrates basic	Demonstrates basic	Demonstrates	Completes quality	
knowledge of physiology of	knowledge of	knowledge of	comprehensive knowledge	improvement or research	
neurologic disorders (e.g.,	pathophysiology of	pathophysiology and	of pathophysiology and	project on pathophysiology	

Comments:

Not yet rotated

treatment of neurologic

disorders

treatment of neurologic

disorders

or treatment of neurologic

disorders

Patient Care — Gastrointestinal (GI) Disorders of Critically-III Patients				
Level 1	Level 2	Level 3	Level 4	Level 5
Requires direct supervision to diagnose acute GI disorders (e.g., <i>C. difficile</i> colitis, GI bleeding, hepatic failure, intestinal ischemia, post-operative complications, pancreatitis)	Independently diagnoses acute GI disorders  Requires direct supervision to manage patients with acute GI disorders	Diagnoses and appropriately manages acute GI disorders without direct supervision	Demonstrates proficiency in the comprehensive management of acute GI disorders	Completes quality improvement or research project regarding management of acute GI disorders
Comments:				Not yet rotated
Medical Knowledge — GI Di	sorders of Critically-III Patients			
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates limited knowledge of acute GI disorders (e.g., <i>C. difficile</i> colitis, GI bleeding, hepatic failure, intestinal ischemia, post-operative complications, pancreatitis)	Demonstrates basic knowledge of the pathophysiology and diagnosis of acute GI disorders	Demonstrates knowledge of the pathophysiology, diagnosis, prevention, and treatment of acute GI disorders	Demonstrates comprehensive knowledge of the diagnosis, prevention, and treatment of acute GI disorders	Completes quality improvement or research project on the diagnosis, prevention, or treatment of acute GI disorders
Comments:				

Not yet rotated

Patient Care — Infectious Diseases of Critically-III Surgical Patients				
Level 1	Level 2	Level 3	Level 4	Level 5
Requires direct supervision	Demonstrates the ability to	Demonstrates the ability to	Demonstrates proficiency in	Completes quality
to diagnose common	diagnose and initiate	diagnose and manage most	the comprehensive	improvement or research
infectious diseases and	management for common	infectious diseases and	management (prevention,	project regarding
infectious complications	infectious diseases and	infectious complications	diagnosis, and treatment) of	management of an
	infectious complications		infectious diseases and	infectious complication
			infectious complications	
			Demonstrates appropriate	
			antimicrobial stewardship	
Comments:  Not yet rotated				

Medical Knowledge — Infectious Diseases of Critically-Ill Surgical Patients					
Level 1	Level 2	Level 3	Level 4	Level 5	
Demonstrates limited	Demonstrates basic	Demonstrates knowledge of	Demonstrates	Completes quality	
knowledge needed to	knowledge of the	the pathophysiology,	comprehensive knowledge	improvement or research	
diagnose infectious	pathophysiology and	diagnosis, prevention, and	of diagnosis, prevention, and	project on the diagnosis,	
diseases in critically-ill	diagnosis of infectious	treatment of most infectious	treatment of infectious	prevention or treatment of	
surgical patients	diseases in critically-ill	diseases and infectious	disease and infectious	infectious complications	
	surgical patients	complications	complications		
			Demonstrates		
			comprehensive knowledge		
			of antimicrobial stewardship		
Comments:	Comments:  Not yet rotated				

Patient Care — Procedural Competence*				
Level 1	Level 2	Level 3	Level 4	Level 5
Requires direct supervision	Performs some common ICU	Demonstrates proficiency in	Proficient in performance of	Performs advanced
to perform common	procedures independently	the performance of common	ICU procedures in patients at	procedures (e.g.,
intensive care unit (ICU)		ICU procedures	high risk for complications	extracorporeal membrane
procedures		Can identify when a patient is at high risk for complications from a common ICU procedure	Proficient in management of procedural complications	oxygenation [ECMO], intra- aortic balloon pump [IABP], transvenous pacing, inferior vena cava filter placement)
Comments:  Not yet rotated				

<sup>\*</sup>Procedural competence includes the following:

- airway management (e.g., bag valve mask, supraglottic airways, intubation, surgical airway)
- catheter placement (e.g., arterial, central venous, dialysis access, pulmonary artery)
- ultrasound evaluation and procedural guidance
- chest tubes and thoracentesis
- bronchoscopy
- complex wound care (e.g., fasciotomy, negative pressure therapy, burn wound care)

Systems-based Practice — Administrative Responsibility				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates basic	Understands how patient	Makes suggestions for	Participates in work groups	Leads a performance
knowledge of how health	care is provided in the health	changes in the health care	or performance	improvement team to
care systems operate	care system and identifies	system that may improve	improvement teams	reduce errors and/or
	specific system failures that	patient care	designed to reduce errors,	improve health outcomes
Can identify system factors	can affect patient care		improve patient safety, and	
that contribute to medical		Reports problems with	improve health outcomes	
errors and is aware of the	Follows protocols and	technology (e.g., devices and		
impact of variations in care	guidelines for patient care	automated systems) or	Understands the appropriate	
		processes that could produce	use of standardized	
		medical errors	approaches to care, and	
			participates in creating	
			protocols of care	
Comments:  Not yet achieved Level 1				

Systems-based Practice — Coordination and Transitions of Care					
Level 1	Level 2	Level 3	Level 4	Level 5	
Requires direct supervision	Usually utilizes appropriate	Effectively and regularly	Takes a leadership role in	Completes quality	
to provide effective written	forms of communication	utilizes all appropriate forms	ensuring accurate transitions	improvement or research	
and verbal communication	(e.g., face-to-face, telephone,	of communication (e.g., face-	of care and optimizing	project regarding	
to prevent medical errors	and electronic) to ensure	to-face, telephone, and	communication across	coordination or transitions	
	accurate transitions of care	electronic) to ensure accurate	systems and the continuum	of care	
	and optimize communication	transitions of care and	of care		
	across systems and the	optimize communication			
	continuum of care	across systems and the			
		continuum of care			
Comments:	Comments:  Not yet achieved Level 1				

Level 1	Level 2	Level 3	Level 4	Level 5
Actively participates in morbidity and mortality (M&M) and/or other quality improvement (QI) conferences with comments, questions, and accurate presentation of cases  Changes personal behaviors in response to feedback from supervisors  Delineates when and how errors or adverse events affect the care of patients	Evaluates own patient outcomes and the quality and efficacy of care of patients through appraisal and assimilation of scientific evidence  Uses relevant literature to support discussions and conclusions at M&M and/or other QI conferences  Performs basic steps of a QI project (e.g., generates a hypothesis, conducts a cause-effect analysis, develops method for study)  Demonstrates how to modify care practices to avoid errors	Evaluates own patient care outcomes in a systematic manner and identifies opportunities for improvement  Identifies probable causes for complications and deaths at M&M and/or other QI conferences, as well as appropriate strategies for improving care	Exhibits ongoing self- evaluation and improvement that includes reflection on practice, tracking, and analyzing patient outcomes, integrating evidence-based practice guidelines, and identifying opportunities to make practice improvements  Discusses or demonstrates application of M&M and/or other QI conference conclusions to own patient care  Leads a QI activity relevant to patient care outcomes	Participates in an institutional committee that is responsible for performance in practice improvement, and helps develop QI activities  Publishes the results of a QI project or clinical trial  Recognizes opportunities for improvement in patient care using process analysis and initiates a corrective action plan
Comments:				

Practice-based Learning and Improvement — Teaching				
Level 1	Level 2	Level 3	Level 4	Level 5
Requires prompting to	Communicates educational	Demonstrates an effective	Recognizes teachable	Demonstrates highly
impart educational	material accurately and	teaching style when	moments and readily and	effective teaching with an
information clearly and	effectively at the appropriate	responsible for a conference	respectfully engages the	interactive educational style
effectively to other health	level for learner	or formal presentation	learner	and engages in constructive
care team members	understanding		Facilitates conferences and	educational dialogue
	Accurately and succinctly		case discussions based on	Develops an educational
	presents patient cases		assimilation of evidence	curriculum or an evaluation
	appropriate for learning		from the literature	system for other learners
	environment			Presents or publishes educational research
Comments:  Not yet achieved Level 1				

Practice-based Learning and Improvement — Self-Directed Learning				
Level 1	Level 2	Level 3	Level 4	Level 5
Completes learning	Selects an appropriate	Demonstrates the ability to	Routinely synthesizes	Presents at local, regional, or
assignments as directed	evidence-based information	use multiple resources to	current scientific literature	national activity; optional
	tool to answer specific	improve patient care	and other resources for self-	conferences; and/or self-
	questions while providing		directed learning and	assessment programs
	care		improvement of patient care	
Comments:			ľ	Not yet achieved Level 1

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates behavior that conveys caring, honesty, and genuine interest in patients and families in most circumstances Requires reminders to respect patient confidentiality and privacy	Demonstrates an understanding of the importance of compassion, integrity, respect, sensitivity and responsiveness to patients and families, and is able to exhibit these behaviors consistently in common and uncomplicated situations  Demonstrates a commitment to continuity of care by taking personal responsibility for patient care outcomes  Recognizes the limits of his or her knowledge and asks for help when needed	Manifests these behaviors consistently in complex and complicated situations  Ensures patient care responsibilities are performed and continuity of care is maintained  Accepts responsibility for errors in patient care and can initiate corrective action  Consistently demonstrates integrity in all aspects of care and professional relationships	Serves as a role model for ethical and professional behavior  Consistently places the interests of patients ahead of self-interests when appropriate  Maintains composure in accordance with ethical principles even in stressful situations	Demonstrates leadership and mentoring regarding these principles  Develops organizational policies and education to support the application of these principles in the practice of medicine
Comments:  Not yet achieved Level 1				

Professionalism — Ethical Issues in Critically-III Patients				
Level 1	Level 2	Level 3	Level 4	Level 5
Can describe basic	Consistently identifies ethical	Able to effectively analyze	Serves as a role model for	Serves as a member of an
bioethical principles	issues in practice	and manage ethical issues in	consistently considering and	institutional Ethics
Able to identify ethical issues (e.g., end-of-life care, surrogacy, futility)	Able to discuss, analyze, and manage common clinical situations	complicated and challenging clinical situations	managing ethical issues in practice	Performs research or presents locally, regionally, or nationally on ethical problems in critically-ill patients
Comments:  Not yet achieved Level 1				

operative Case Logs, duty hour logs, or perform other assigned and required administrative tasks (e.g., visa renewal, credentialing, obtaining a medical license) in a timely fashion without excessive written and  conferences, meetings, operations, and other activities  responsibilities in a timely responds promptly to requests from faculty and departmental staff members  or her supervision respond appropriately to their responsibilities in a timely fashion  Exhibits a clear understanding of personal responsibilities (clinical and responsibilities (clinical and administrative)	,			
prodding administrative) caempiary in prompting	nical and ve			

Professionalism — Healthy Work Environment					
Level 1	Level 2	Level 3	Level 4	Level 5	
Requires frequent direct	Demonstrates knowledge of	Monitors personal health and	Sets an example by	Recognizes and	
supervision to comply with	the institutional resources	wellness, and appropriately	promoting healthy habits	appropriately addresses	
duty hours and to	available to manage	mitigates fatigue and/or	and creating an emotionally	health issues in other	
recognize personal health	personal, physical, and	stress	healthy environment for co-	members of the health care	
issues	emotional health (e.g., acute and chronic disease,	Is effective and efficient in	workers  Models appropriate	team	
	substance abuse, mental	time management and	Models appropriate	Is proactive in modifying	
	health problems)  Complies with duty hours standards  Can identify the principles of physician wellness and fatigue mitigation	consistently arrives fit for duty	management of personal health issues, fatigue, and stress	schedules or intervening in other ways (e.g., required nap, counseling, referral for services, report to program director) to ensure that caregivers and those under his or her supervision maintain personal wellness and do not compromise	
Comments:				Not yet achieved Level 1	

Interpersonal and Communication Skills — Effective Communication with Patients and Families						
Level 1	Level 2	Level 3	Level 4	Level 5		
Communicates with patients and their families in an understandable and respectful manner  Effectively communicates basic health care information to patients and families	Customizes communication, taking into account patient and family characteristics (e.g., age, literacy, cognitive disabilities, cultural differences)  Provides timely updates to patients and families	Effectively delivers complex and difficult information to patients and families  Can delineate strategies for negotiating conflict	Proficiently individualizes and leads difficult discussions specific to patient and family needs, (e.g., end-of-life, explaining complications)  Effectively negotiates and manages conflict among patients, families, and the health care team	Develops novel tools for effective communication with patients and families  Effectively mentors other health care providers in communication skills and conflict management		
Comments:  Not yet achieved Level 1						

Interpersonal and Communication Skills — Effective Communication with the Health Care Team					
Level 1	Level 2	Level 3	Level 4	Level 5	
Exchanges limited patient	Effectively shares and	Anticipates and plans for	Effectively leads a health	Serves as a resource for	
information with team	exchanges patient	effective communication of	care team responsible for	negotiating and managing	
members	information with some	relevant information to all	the care of critically-ill	conflict within the health	
	members of the health care	members of the health care	patients using individualized	care system	
Responds politely and promptly to requests for	team	team	communication strategies	Effectively mentors other	
care coordination activities		Demonstrates basic ability to	Utilizes strategies to prevent	health care providers in	
		lead a health care team using	conflict within the health	leadership, communication	
		effective communication	care team	skills, and conflict	
		styles	Effectively negotiates and	management	
		Can delineate strategies for	manages conflict within the		
		negotiating conflict within	health care team		
		the health care team			
Comments:  Not yet achieved Level 1					