Numerous schools are working on methods to incorporate the framework of Entrustable Professional Activities (EPAs) in their undergraduate medical education programs. Despite rapid acceptance of the EPA framework and associated concepts, faculty and staff are struggling with the granular aspects of implementation. This session will describe how one medical school and its faculty have begun actual implementation of all 13 EPAs, including the process of securing resources and managing change to ensure success.

Oregon Health & Science University (OHSU) is one of the ten medical schools in the AAMC’s Core EPAs for Entering Residency pilot program. Despite the resources and support of the pilot, numerous barriers and challenges had to be overcome in order to implement the Core EPAs. Leadership buy-in was crucial to securing institutional resources, including faculty time and compensation to participate in the pilot. Team expansion to include residents, students and junior faculty has proven to be an important step in implementation. Creation of “heat maps” showed where content is being taught and highlighted opportunities for assessment of the functions of each EPA. A learner-driven electronic portfolio app was developed so that students could initiate and log EPA assessment encounters, and to inform the school’s Entrustment Committee decisions, and digital badges were created so that students who earn entrustment will be able to show attending physicians and residency program directors what they have achieved.

The lessons we’ve learned from the pilot and from our own experience include the following: (a) building coalitions across numerous stakeholders is key to obtaining buy-in; (b) securing resources shows commitment by the medical school’s leadership; (c) using a systematic approach to implementation helps determine what needs to be taught and assessed, as well as provide opportunities to create early wins; (d) committing to forward progress provides momentum and helps faculty and learners overcome doubts regarding implementation; and (e) showing synergy with campus and school-wide initiatives helps to align people and resources toward shared goals.

Medical schools are struggling with how to implement the Core EPAs. Experimenting with one or two is very different than implementing all 13 EPAs. Our experience will help other medical schools by showing a path towards buy in and implementation, despite the many challenges that need to be overcome.

Level of Audience: Mid-career
Focus of Presentation: UME

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