

## **Project Title**

Entrustable Professional Activities (EPA) for The Geriatric Medicine Senior Residency Training Programme - A National Delphi Study

## **Project Lead and Members**

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## **Organisation(s) Involved**

Tan Tock Seng Hospital, Singapore, Geriatric Education and Research Institute Limited, Woodlands Health Campus, Ministry of Health Singapore, Khoo Teck Puat Hospital

## **Healthcare Family Group(s) Involved in this Project**

Medical

## **Applicable Specialty or Discipline**

Geriatric Medicine

## **Aims**

To identify and describe EPAs suitable for our geriatric training in Singapore through a traditional Delphi technique.

## **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

## **Results**

See poster appended/ below

## **Lessons Learnt**

We have demonstrated how EPAs can be developed meaningfully for such an expansive and multi-disciplinary speciality which is mainly knowledge-based (as opposed to practical skills-based speciality such as anaesthesia, critical care medicine and surgery) and covers a large area, by using a Delphi approach. Practice based speciality can be objectively observed for their 'procedures and activities' and therefore EPAs are easier applied to them. Our approach was complemented by incorporating an inductive qualitative approach to the formulation of the EPAs.

## **Conclusion**

See poster appended/ below

## **Additional Information**

Singapore Health & Biomedical Congress (SHBC) 2022: Health Professions Education Research Investigator Award (Oral category) – (Bronze Award)

## **Project Category**

Applied/ Translational Research

Mixed-Methods

Training & Education

Assessment, Workplace Based Assessment

## **Keywords**

Entrustable Professional Activities, Delphi Method

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# Entrustable Professional Activities (EPA) for the Geriatric Medicine Senior Residency training programme - A National Delphi Study

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## 1. Background

Geriatric trainees who are meeting competencies during training are struggling with the practice of looking after complex frail older adults upon exit. Entrustable professional activities (EPAs) define the activities that are unique and descriptive of the individual specialties. They can bridge the gap between knowledge and practice. This study sets out to define and describe the EPAs for the Geriatric Medicine Senior Residency training in Singapore

### Objectives

To identify and describe EPAs suitable for our geriatric training in Singapore through a traditional Delphi technique.

### Key steps for the design of an EPA- based curriculum

- 1) Identifying suitable EPAs
- 2) Description of the competencies required to enable entrustment decision for each EPA
- 3) Guidance of trainees to understand what is required of each EPA and
- 4) Assessment and supervisory framework of the EPAs

## 2. Methodology

The development of EPAs occurred over 2 phases. The first phase utilised a three- round Delphi approach. It involved geriatric experts from residency advisory council (RAC) and programme directors of the geriatric medicine senior residency training programme. Phase 2 involved calibration of the EPAs amongst geriatric leaders and members from Ministry of Health Professional Training, Assessment and Standards (PTAS) division.

## 3. Results

### Participants

We engaged 23 geriatricians in phase 1 round 1 (definition). Six are programme directors or associate programme directors of the ACGME-I geriatric medicine residency programme. . Sixteen (69.6%) responded. For phase 1 round 3 (assessment), 37 geriatric experts were recruited and 16 (43.2%) responded.

### Process of developing EPAs

**Overview:** In Phase 1, 8 geriatric experts participated in round 1 and 16 participated in round 2 of the study. 247 items were derived from the first round of the Delphi process. After 3 rounds, consensus was achieved for 11 of the items. These 11 items were subsequently reworded and described as Geriatric Medicine's EPAs after phase 2.

#### Phase 1 EPAs Definition and moderation rounds

- 247 items reflecting the expected competencies of a geriatrician were emailed out to the experts.
- This was followed by the phase 1 round 2 (moderation round), when consensus was achieved to narrow this down to 215 items.

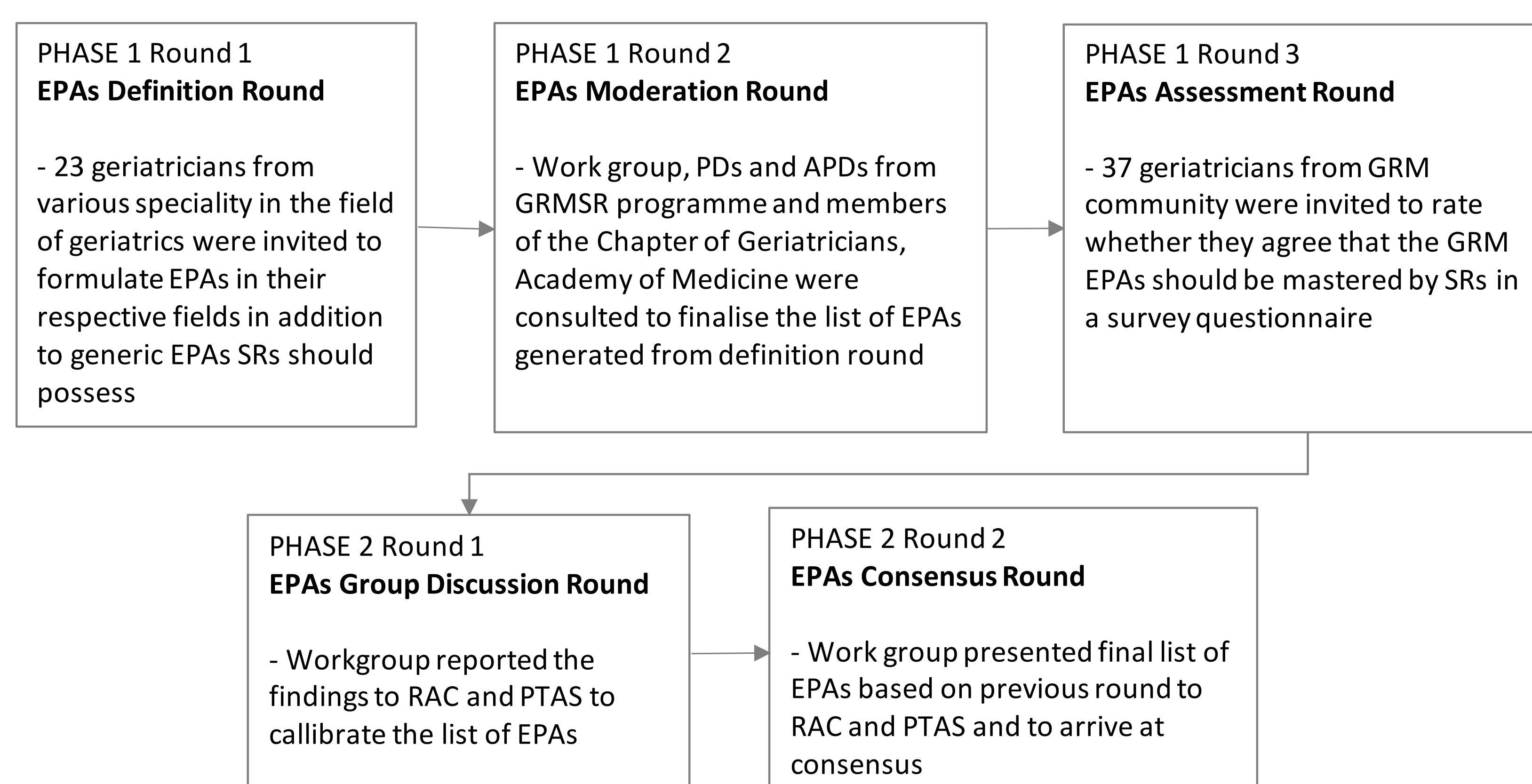
#### Phase 1: EPAs Assessment Round

- During this round, consensus was achieved to retain 200 of the items. The workgroup (consisting of the study team) decided to drop the 14 that did not achieve any consensus.
- During the discussion session, higher level domains were generated based on the 200 items identified in the previous rounds.
- 200 items were consolidated into 11 higher level domain items that met the definition of entrustable professional activities.

#### Phase 2

- With the 11 EPAs and 200 items, the workgroup met with RAC and PTAS in focus group discussion to further refine EPAs and the required knowledge, skills, attitudes and experience (KSAE) of each EPA. The eventual list of 11 EPAs is shown in table 1.

### Overview of modified Delphi technique and calibration discussion in study



### Table 1 Entrustable Professional Activities (EPA) for the Geriatric Medicine Senior Residency training programme

- 1) Conducting of comprehensive geriatric assessment
- 2) Diagnosing, managing and preventing geriatric syndromes
- 3) Providing acute care for older adults
- 4) Assessing of rehabilitation potential for older adults and setting of realistic rehabilitation goals for existing older adults undergoing therapy
- 5) Providing holistic end-of-life care for older adults.
- 6) Communicating with patients and families to clarify goals of care and care decisions
- 7) Providing geriatric specialist advice to professionals from other disciplines when consulted and if necessary, to co-manage and advocate for geriatric care principles in the management of older patients.
- 8) Collaborating and working as a leader or member of an interprofessional healthcare team
- 9) Coordinating healthcare in different settings and managing healthcare transitions for older adults with multiple chronic conditions and multiple service providers
- 10) Providing care and management of older adults in the community including nursing homes and home
- 11) Practicing and applying of the principles of preventive health at an individual level

## 4. Discussion and Conclusion

1

Delphi process relies on multiple rounds of questionnaires sent to a group of experts with the aim of achieving consensus. This method of evaluating entrustable professional activities has been used in many of the subspecialties including family medicine, respiratory medicine and critical care and neonatology.

2

A key advantage of this method is that it allows the indispensable judgement of experts while avoiding direct confrontation between them

3

A recent scoping review on EPAs revealed limitations of evidence from specific target groups and also geographical regions like Asia. Our study contributes to the knowledge by situating the concept of EPAs into the training of geriatricians in the Asian context and may be a useful reference for other geriatric medicine programmes within the region. The clear steps we have taken could also form the foundation for other specialties who are embarking on developing their own set of EPAs

4

We have demonstrated how EPAs can be developed meaningfully for such an expansive and multi-disciplinary speciality which is mainly knowledge-based (as opposed to practical skills-based speciality such as anaesthesia, critical care medicine and surgery) and covers a large area, by using a Delphi approach. Practice based speciality can be objectively observed for their 'procedures and activities' and therefore EPAs are easier applied to them. Our approach was complemented by incorporating an inductive qualitative approach to the formulation of the EPAs.

**Limitations of study.** We have chosen geriatric practitioners as experts but these were mainly limited to those who are practicing in the acute public hospital and did not include the opinions of those who are practicing in the private sectors or in other areas of practice.