

## Appendix to:

Jarrett JB, Antoun J, Hasnain M. Entrustable Professional Activity Utilization: A CERA Study of Family Medicine Residency Program Directors. [published online ahead of print April 23, 2019]. *Fam Med*. <https://doi.org/10.22454/FamMed.2019.876961>.

## Appendix A. CERA Survey Questions

1. Are you aware of Entrustable Professional Activities (EPAs) as an assessment framework for resident performance? Yes/No
2. Do you understand the principles of EPAs for assessment? Yes/No
3. Rate your confidence in utilizing EPAs as an assessment framework for resident performance.  
  
1-Not at all confident/2-Not very confident/3-Neutral/4-Somewhat confident/5-Extremely confident
4. Select the largest challenge to using EPAs as an assessment framework for resident performance:
  - a. The need for frequent documentation of direct observation by the faculty
  - b. Lack of faculty development about EPAs as an assessment framework
  - c. Need for resident education about EPAs as an assessment framework
  - d. Difficulty integrating EPAs into existing assessment framework

- e. Residency leadership do not believe this is a valuable assessment framework
5. Select the second largest challenge to using EPAs as an assessment framework for resident performance:

- a. The need for frequent documentation of direct observation by the faculty
- b. Lack of faculty development about EPAs as an assessment framework
- c. Need for resident education about EPAs as an assessment framework
- d. Difficulty integrating EPAs into existing assessment framework
- e. Residency leadership do not believe this is a valuable assessment framework

6. Does your residency program currently employ EPAs as an assessment framework?

Yes/No

7. Select the largest benefit from the use of EPAs as an assessment framework for resident performance in your program:

- a. Increases transparency and congruence of expectations between learners and residency training program
- b. Facilitates the use of specific feedback as a formative process in residency training
- c. Helps identify learners needing remediation earlier and build a personalized remediation approach
- d. Builds learner confidence and reduces learner stress
- e. Increases objectivity and decreased workload of summative evaluation decision of resident performance
- f. There are no benefits to using EPAs in my residency program

8. Select the second largest benefit from the use of EPAs as an assessment framework for resident performance in your program:

- a. Increases transparency and congruence of expectations between learners and residency training program
- b. Facilitates the use of specific feedback as a formative process in residency training
- c. Helps identify learners needing remediation earlier and build a personalized remediation approach
- d. Builds learner confidence and reduces learner stress
- e. Increases objectivity and decreased workload of summative evaluation decision of resident performance
- f. There are no benefits to using EPAs in my residency program

9. Which set of EPAs do you currently use within your residency program?

- a. Shaughnessy et al. EPAs (published 2013) – 76 EPAs described
- b. Family Medicine for America's Health (published 2015) – 20 EPAs described
- c. American Association of Medical Colleges EPAs for entering residency (published 2014) – 13 EPAs described
- d. We use a combination of EPAs from each of these lists

10. To what extent is your residency program using EPAs in assessment of resident performance:

- a. Currently trying to map EPAs to our current assessment structure

- b. Using EPAs as a single point in time assessment (at baseline, formatively or summatively)
- c. Using EPAs longitudinally over every year of the residency training
- d. Other (please specify):