



Authors' Response to "Transitioning From AFMRD Entrustable Professional Activities to ABFM Core Outcomes to Measure Clinical Preparedness"

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HOW TO CITE: Carney PA, Eiff MP. Authors' Response to "Transitioning From AFMRD Entrustable Professional Activities to ABFM Core Outcomes to Measure Clinical Preparedness". Fam Med. 2024;56(4):1-1.

doi: 10.22454/FamMed.2024.657114

PUBLISHED: 21 February 2024

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TO THE EDITOR:

We were grateful to receive the letter to the editor regarding our paper, "Measuring Clinical Preparedness After Residency Training: Development of a New Instrument." The author rightly points out that we chose the 2015 Association of Family Medicine Residency Directors (AFMRD) Entrustable Professional Activities (EPAs) during tool development because these EPAs represented the best existing measurements for clinical preparedness. Data collection for this measure, as part of the Length of Training Pilot (LoTP), ran from 2016 through 2023.

The Core Outcomes of Residency Training, initially published in 2022, are provisional (so even these may change)³ and are based on the development of Competency-Based Medical Education (CBME). CBME was not implemented during the LoTP,⁴ and the ABFM core outcomes went into effect in July 2023, our last year of data collection. If these had emerged earlier, it is likely that CBME would have also been in place, and we would certainly have used them—timing is everything.

We agree that the joint development of the ABFM core outcomes by the Accreditation Council for Graduate Medical Education Family Medicine Review Committee in conjunction with the American Board of Family Medicine (ABFM) will result in more acceptance across family medicine residency programs, and we also agree that the transition from workbased assessments and toward individual-level measurements is an important and exciting one.

Though we cannot change the data we have collected using the tool we developed, it will be important to work on aligning our tool with the new ABFM core outcomes toward understanding family medicine physician preparedness for independent practice. Thus, we are grateful for the insights provided via this letter and are inspired to advance measurements in this direction.

REFERENCES

- 1. Carney PA, Ericson A, Conry C, Martin JC, Douglass AB, Eiff MP. Measuring clinical preparedness after residency training: development of a new instrument. Fam Med. 2024;56(1):16-23.
- 2. Twenty entrustable professional activities for family medicine end of residency training. Association of Family Medicine Residency Directors. 2015. https://www.afmrd.org/page/epa.
- 3. Newton W, Cagno C, Hoekzema GS, Edje L. Core outcomes of residency training 2022 (Provisional). *Ann Fam Med*. 2023;21:191-194.
- 4. Newton W, Magill M, Barr W, Hoekzema G, Karuppiah S, Stutzman K. Implementing competency based ABFM board eligibility. *J Am Board Fam Med.* 2023;36(4):703-707.