**Appendix B**

*Unperceived needs as assessed through a series of CBME knowledge-based multiple choice questions (correct responses are italicized and bolded)*

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| **Question** | **N** | **%** |
| 1. All of the following have influenced the shift from a structure/process paradigm in medical education to one based on competencies EXCEPT: | 44 |  |
| * The movement towards “learner-centered” training | 0 | 0 |
| * Concern over an increasing gap between graduate’s performance and the requirements of those graduates to meet the needs of the public | 8 | 18.2 |
| * ***The Flexner report on the state of medical education in the US and Canada*** | 13 | 29.5 |
| * The public call for increased accountability for funding of undergraduate medical education and postgraduate medical education | 16 | 36.4 |
| * An expanding notion of the requisite abilities of a physician of the 21st century beyond medical knowledge and patient care skills | 7 | 15.9 |
| 2. A competency is: | 46 |  |
| * An observable ability of a health professional that integrates knowledge, skills, values, and attitudes | 17 | 37.0 |
| * A defined, observable marker of an individual’s ability along a developmental continuum | 4 | 8.7 |
| * An essential task of a discipline (profession, specialty, or sub-specialty) that an individual can be trusted to perform without supervision in a given health care context, once sufficient competence has been demonstrated | 16 | 34.8 |
| * ***The array of abilities (knowledge, skills, and attitudes or KSA) across multiple domains or aspects of performance in a certain context*** | 6 | 13.0 |
| * None of the above | 0 | 0 |
| * I don’t know | 3 | 6.5 |
| 3. Which of the following is TRUE of work-based assessments in CBME? | 47 |  |
| * They have a summative focus and allow clinical teachers to make decisions about learner promotion | 4 | 8.5 |
| * ***They can only be based on some element of direct observation of clinical encounters.*** | 5 | 10.6 |
| * They can only be used as a learning tool and are shared with the trainees | 26 | 55.3 |
| * They consist only of narrative comments and do not include any specific scale of rating of performance | 1 | 2.1 |
| * They are performed at the end of a clinical rotation in order to determine if the trainee adequately completed the rotation’s objectives | 2 | 4.3 |
| * I don’t know | 9 | 19.1 |
| 4. A “milestone,” as used in CBD, is: | 46 |  |
| * An observable ability of a health professional that integrates knowledge, skills, values, and attitudes | 5 | 10.9 |
| * ***A defined, observable marker of an individual’s ability along a developmental continuum*** | 32 | 69.6 |
| * An essential task of a discipline (profession, specialty, or sub-specialty) that an individual can be trusted to perform without supervision in a given health care context, once sufficient competence has been demonstrated | 5 | 10.9 |
| * The array of abilities (knowledge, skills, and attitudes or KSA) across multiple domains or aspects of performance in a certain context | 1 | 2.2 |
| * None of the above | 0 | 0 |
| * I don’t know | 3 | 6.5 |
| 5. As a frontline clinical teacher I will be expected to do all of the following EXCEPT: | 47 |  |
| * ***Make overall competence judgements about learners and their readiness to progress across stages of training*** | 33 | 70.2 |
| * Observe trainees in practice and provide written feedback designed to promote learner growth | 2 | 4.3 |
| * Rate a trainee’s ability to safely and independently perform practice activities | 2 | 4.3 |
| * Use an entrustment scale to rate a learner’s performance in the workplace | 7 | 14.9 |
| * Provide trainees with narrative comments focused on behaviour specifics | 0 | 0 |
| * I don’t know | 3 | 6.4 |
| 6. Which of the following is FALSE regarding the stages of training under the CBD model? | 47 |  |
| * There will be 4 main stages of training during the discipline-specific residency | 1 | 2.1 |
| * Competence committees will make the decision whether a learner is ready to move across the various stages of training, using work-based assessments and EPAs | 1 | 2.1 |
| * ***The Royal College specialty-specific examination marks the end of the ‘Transition to Discipline’ phase*** | 35 | 74.5 |
| * The competency continuum expands beyond residency into professional practice | 2 | 4.3 |
| * The decision on successful completion of each stage of training is based on multiple observations of stage-specific EPAs | 1 | 2.1 |
| * I don’t know | 7 | 14.9 |