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Authors

Governatori, N J Wong, T Clark, M

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39 A Comparison of the Effectiveness of Daily Shift Evaluations with Biannual Evaluations of Residents

in an Emergency Medicine Training Program

Governatori NJ, Wong T, Clark M/St. Luke's / Roosevelt Hospital, Mount Sinai, New York, NY

Background: Despite many different methods to deliver feedback there is currently no standardized evaluation tool for residents in Emergency Medicine training programs.

Objectives: To determine if daily shift evaluations are more effective than biannual sit down evaluations in providing feedback and education to residents.

Methods: At our program daily shift evaluations were implemented using an online Web-based evaluation system. Two months later, residents and attending physicians were given an online survey based on a 5-point Likert scale to gauge whether or not the daily evaluations had a significant impact on training as compared to the prior evaluation system, which occurred biannually.

Results: Thirty-two residents and 16 attendings participated in the survey. Mean and median scores were calculated for each individual question and then paired student t-tests were performed to determine significance at 95% confidence intervals. Overall, both residents and attendings preferred daily shift evaluations to biannual evaluations (p<0.05) and felt that they provided more specific feedback (p<0.05). In addition, attendings felt that daily shift evaluations facilitate resident grown more than biannual evaluations. The remaining questions addressing increased time spent reading, improved procedural skills, better patient presentations, negative interactions with attendings, and change in daily practice did not achieve statistical significance. All of the mean responses, however, slightly favored daily shift evaluations.

Conclusions: Electronic daily shift evaluations are preferred and do not appear to have a negative impact on the work environment. Residents feel they receive more specific feedback; however, their daily practices have not changed significantly. Further data are required to see if daily shift evaluations will translate to improved measurable outcomes in national in-service exam, clinical performance and patient care.