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49 The Carrot and the Stick: Utilizing an Incentive Based Program to Increase Resident Evaluation Completion in an Academic Emergency Department

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Background: EM faculty evaluation of resident performance is a key element to track ACGME milestone progression during training. Obtaining a sufficient quantity of resident evaluation data is a challenge shared by many residency programs. Prior quality improvement projects have shown that policies penalizing faculty for failing to participate in resident evaluation (‘the stick’) result in increased compliance. To date there is a paucity of EM-specific research on the impact of incentive-based programs (‘the carrot’) for faculty with regards to resident evaluation completion.

Objectives: We hypothesize that a departmental policy both financially incentivizing EM faculty to complete resident evaluations as well as penalizing those who do not maintain a minimum number of evaluations per resident shift (EPRS) will lead to an increase in resident evaluation data. **Methods:** This stepwise departmental quality improvement project engaged 44 academic EM physicians who work regularly with 32 EM residents. The initial intervention was a financial incentive for faculty members who completed resident evaluations. This ‘carrot’ process was subsequently amended to include a ‘stick’ component- a minimum EPRS threshold required participate in a preexisting incentive program. Data displaying all EPRS information was provided at monthly meetings. Average EPRS information as well as number of resident evaluations completed per quarter were compared to the previous academic year. The objective of this study is to determine the effects of implementing a departmental policy both incentivizing faculty to complete resident evaluations as well as penalizing those who do not adequately participate in resident evaluation.

Results: During the first academic quarter of 2019, we found that our total number of evaluations increased 70% from 252 to 429 ($p < 0.05$), while EPRS increased from 0.36 to 0.53 during the same time period. **Conclusions:** By utilizing departmental policies that provide a financial incentive as well as a concomitant potential penalty it is possible to drastically improve the number of faculty-completed resident evaluations and thereby, increase the amount of available data to track resident milestone progression.



Figure 1. Evaluations per resident shift by month.

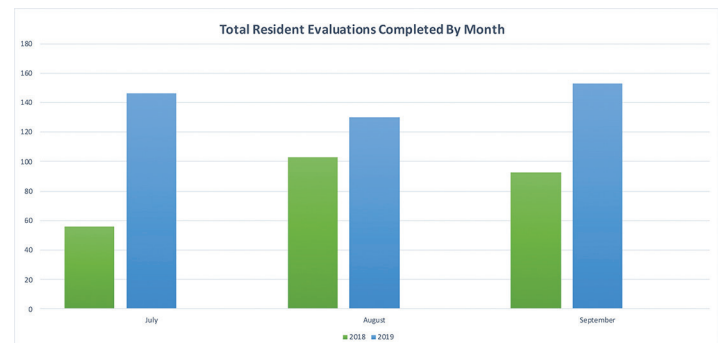


Figure 2. Total resident evaluations completed by month.

50 The Effect of QR Code Implementation on Resident Feedback in the Emergency Department

White J, Stowens J, Caplan R / Christiana Care Health System

Background: Feedback on resident performance is critical to resident graduate education. In the emergency department, many programs use daily paper “shift cards” as a method for feedback, although this has its limitations.

Objective: We hypothesized that creating a Quick Response (QR) electronic shift card system would yield improved feedback in both quality and quantity to paper shift cards. Upon reading this abstract, the reader would gain insight into an easy, innovative way to reduce the burden associated with collecting and documenting feedback while providing meaningful, constructive feedback that learners and educators prefer.

Methods: We compared the academic years before (2017-