



FACULTY DEVELOPMENT NARRATIVE EVALUATIONS

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Narrative Evaluations

 Narrative evaluations add dimension and important details to numeric evaluations

HOWEVER

- Many faculty encounter barriers in writing good narrative descriptions of learner performance:
 - Knowledge about why narrative evaluations are important
 - Skill to write useful narrative comments
 - Time to add comments to every element of numeric evaluations



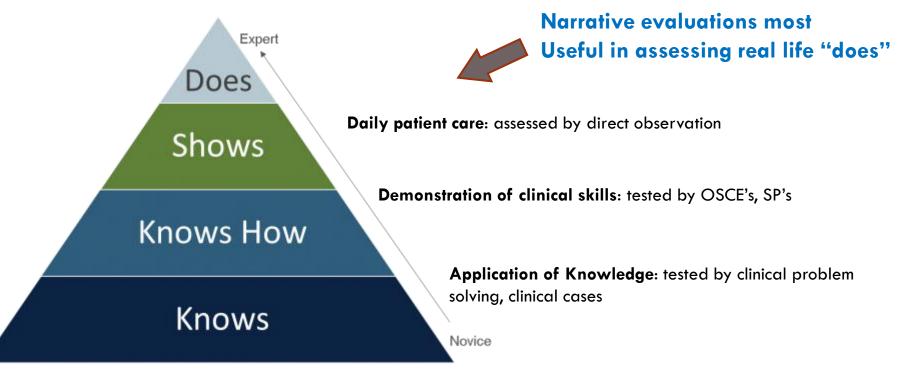
Why narrative evaluations?

- Add dimension to numeric evaluations
- □ Significantly improved physician performance with narrative evaluations (Westberg et al, 1991)
- □ Identified as a key tool in clinical teaching by experts in medical education (Irby et al, 2004)
- Narrative evaluations may inhibit entrenchment of undesirable performance traits and may enhance the development of learner strengths (Westberg et al 1991)
- Builds on strengths not just lack of numeric performance



Where do learners really need narrative evaluations?

Miller's Pyramid of Clinical Competency



Knowledge: tested by written exams



Good Narrative Evaluations

- Are descriptive
- Focus on a behavior that can be modified
- □ Are very specific
- Non-judgmental
- Are relevant to the knowledge/skills/attitude the learner is trying to achieve
- Offers suggestions for improvement or refinement



Examples of Helpful and Unhelpful Narrative Feedback

Unhelpful Feedback	Reason	Helpful Feedback	Reason
'Your body language wasn't very good at the start'	Judgmental	'At the beginning you were looking at the computer screen records and not at the patient as she started to tell her story'	Descriptive, detailed, behavioural
'You weren't very empathic'	Non- specific	'You didn't acknowledge the problems she has dealing with her husband's illness'	Identifies specific problem
'You're very abrupt'	Personality issue	'You interrupted a lot. For example' (give specific points in consultation)	Behavioural, specific
'It was really good' '	Non- specific	At the start you asked an open question and then allowed her to tell her story. You left silences so that she continued in her own words'	Positive, specific, descriptive



How to write useful Narrative Evaluations

■ Basic Framework:

- Strengths
 - "very thorough history taking"
- Areas needing improvement
 - "HPI is often disorganized, important details lost in irrelevant medical history"
- Suggestions for improvement
 - "Start to think of your differential diagnosis as you are asking the questions for your HPI"



How to write useful Narrative Evaluations

□ Alternative framework

- What was done well and should continue?
 - "Hysteroscopic assessment of the uterus was very thorough"
- What should be done differently?
 - "Utilize 30 degree lens to minimize trauma was scope insertion"
- What should be done more?
 - "practice putting the hysteroscope together to increase familiarity with equipment and trouble-shooting ability"
- What should be done less or eliminate?
 - "prophylactic antibiotics are not indicated for diagnostic hysteroscopy"



How to write useful Narrative Evaluations

ACGME Competency-based Framework

- Medical Knowledge
- Patient care
- Communication
- Problem-based learning and improvement
- Professionalism
- System-based practice
- "Articulates the rationale for antibiotic choice for lower genital infections. Needs to remember to solicit patient allergies before prescribing antibiotics and to consider using "teach back" strategies to make sure the patient understands the dosing. Was very respectful of the patient's privacy concerns and needs to remember to offer treatment to her partner"



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