Delivering Feedback to Residents Using a Documentation Assessment Tool

Danita Hahn, MD
Julie Kolinski, MD
Heather Toth, MD
Michael Weisgerber, MD
Caitlin Pilon, BA
Amalia Wegner, MD

Financial Disclosures

We have no financial disclosures.
Background

- Feedback is a crucial element of resident education, and pediatric residents at our institution (as well as many others), wish for more feedback.
- Inpatient progress notes are a key component of patient care for hospitalized patients, though resident progress notes can be inaccurate and imprecise
  - As such, the Accreditation Council for Graduate Medical Education (ACGME) has emphasized high-quality documentation for residents.

Objectives

- The objectives of this study were to:
  - Provide frequent, high-quality faculty feedback to residents regarding their progress notes using a standardized tool, the Physician Documentation Quality Instrument 9-item version (PDQI-9).
  - Evaluate Pediatric Hospital Medicine (PHM) faculty’s perceived ease and effectiveness of the tool.
  - Assess faculty clinical teaching evaluation scores before and after initiation of this process.
PDQI-9

- Developed by Dr. Paul Stetson (Columbia University)
- Validated for H&Ps and inpatient progress notes for internal medicine residents
- Obtained from a published article in 2012.

PDQI-9 Tool

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Score</th>
<th>Description of Ideal Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Up-to-date</td>
<td>Not at all 1 2 3 4 5</td>
<td>Extremely 5</td>
</tr>
<tr>
<td>2. Accurate</td>
<td>Not at all 1 2 3 4 5</td>
<td>Extremely 5</td>
</tr>
<tr>
<td>3. Thorough</td>
<td>Not at all 1 2 3 4 5</td>
<td>Extremely 5</td>
</tr>
<tr>
<td>4. Useful</td>
<td>Not at all 1 2 3 4 5</td>
<td>Extremely 5</td>
</tr>
<tr>
<td>5. Organized</td>
<td>Not at all 1 2 3 4 5</td>
<td>Extremely 5</td>
</tr>
</tbody>
</table>
PDQI-9 Tool

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Scale</th>
<th>Not at all</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Extremely</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Comprehensible</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>The note is clear, without ambiguity or sections that are difficult to understand.</td>
</tr>
<tr>
<td>7. Succinct</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>The note is brief, to the point, and without redundancy.</td>
</tr>
<tr>
<td>8. Synthesized</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>The note reflects the author’s understanding of the patient’s status and ability to develop a plan of care.</td>
</tr>
<tr>
<td>9. Internally</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>No part of the note ignores or contradicts any other part.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Consistent</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Score</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Previous Work

- Analyzed resident scores on each of the 9 attributes on the PDQI-9 tool from data collection October 2015 to June 2016.

- Resident PDQI-9 total scores statistically correlated with resident evaluation scores pertaining to documentation.

  Evaluation score was drawn from interpersonal communication skills subcompetency 6 (ICS-6) of the AAP/ACGME pediatric milestones, with the locally revised version stating: “Maintains comprehensive and timely medical records.”

Methods

• Before initiating the use of the PDQI-9 tool as a framework for feedback on documentation, education was provided:
  ➢ To residents regarding high-quality documentation.
  ➢ To PHM faculty on the use of the PDQI-9 tool.

Methods

• Beginning October 2016, PHM faculty were asked to:
  ➢ Evaluate one progress note per week for each daytime intern on the PHM rotation using the PDQI-9.
  ➢ Fill out an electronic version of the tool (available for resident review).
  ➢ Provide dedicated feedback to the resident (verbal or email).
Methods

- Surveys were sent monthly to faculty regarding:
  - Satisfaction regarding the process.
  - Time spent on this process.
  - Whether or not the resident progress notes improved.
  - Whether or not the faculty’s own progress notes improved.
- Clinical teaching evaluations of PHM faculty by pediatric residents from before and after the intervention were assessed.

Results

- Faculty were surveyed from February 2016 to December 2016 resulting in 45 responses.
  - 75% return rate
- 87% of faculty indicated they were “extremely satisfied” or “mostly satisfied” with the process.
- Survey data indicated that 62% of faculty gave feedback with varying amount of time spent.

![Time Taken to Give Feedback](chart.png)
Results

- 50% of faculty perceived that resident notes improved over the course of the month.
- 73% felt that their own documentation improved as a part of this process.

Results

- Faculty evaluation scores were analyzed:
  - Likert scale of 1 (Major Strength) to 5 (Major Weakness)
  - Analyzed using ANOVA

<table>
<thead>
<tr>
<th></th>
<th>Pre-Intervention October 2014-September 2015</th>
<th>Post-Intervention October 2015-September 2016</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provided Timely and Constructive Feedback</td>
<td>1.81</td>
<td>1.59</td>
<td>&lt;0.008</td>
</tr>
<tr>
<td>Overall Teaching Effectiveness</td>
<td>1.66</td>
<td>1.56</td>
<td>&lt;0.126</td>
</tr>
<tr>
<td>Answered Questions Clearly</td>
<td>1.50</td>
<td>1.45</td>
<td>&lt;0.414</td>
</tr>
</tbody>
</table>
Conclusions

• After launching the use of the standardized tool (PDQI-9) as a framework for faculty feedback of progress notes, the majority of PHM faculty delivered feedback to residents on their progress notes.
• The amount of time taken to give feedback was generally low.
• Satisfaction with the process was noted to be high.
• There were statistically significant improvements in resident evaluation scores of faculty pertaining to feedback.

Limitations

• Few survey responses (small sample size).
• Skipped answers on completed surveys (data incomplete).
• Many inputs go into resident clinical evaluation scores of faculty, so cannot completely attribute improvement in scores to this process.
Next Steps

- As more data is collected, future plans include:
  - More dedicated analysis of the trajectory of resident PDQI-9 total scores and individual attribute scores, both across a given rotation and over the course of an academic year
  - Validation of the PDQI-9 tool for pediatric residents (the tool is validated in internal medicine residents only).
  - Expanding this initiative to other inpatient pediatric services and to senior resident and student notes.

Thank you!

Questions?