Geriatric Psychiatry Milestones

The Accreditation Council for Graduate Medical Education
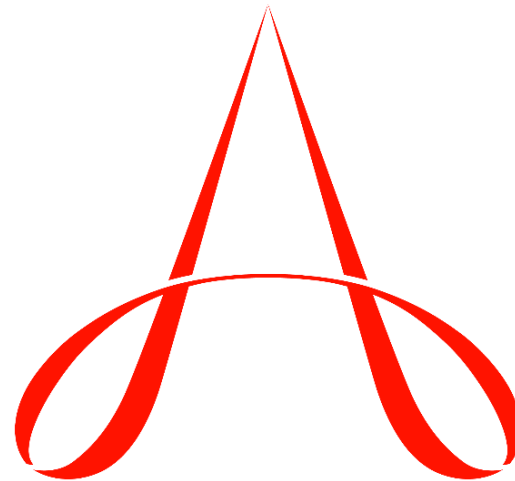
ACGME

Geriatric Psychiatry Milestones

The Milestones are designed only for use in evaluation of fellows in the context of their participation in ACGME-accredited residency or fellowship programs. The Milestones provide a framework for the assessment of the development of the fellow in key dimensions of the elements of physician competence in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competency, nor are they designed to be relevant in any other context.

Geriatric Psychiatry Milestones Work Group

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American Association for Geriatric Psychiatry

American Board of Psychiatry and Neurology

ACGME Review Committee for Psychiatry

Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of fellow performance, and then report to the ACGME. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME Competencies organized in a developmental framework. The narrative descriptions are targets for resident/fellow performance throughout their educational program.

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert fellow in the specialty or subspecialty. For each reporting period, the Clinical Competency Committee will review the completed evaluations to select the milestone levels that best describe each learner's current performance, abilities, and attributes for each subcompetency.

These levels *do not* correspond with post-graduate year of education. Depending on previous experience, a junior fellow may achieve higher levels early in the educational program just as a senior fellow may be at a lower level later in the educational program. There is no predetermined timing for a resident to attain any particular level. Fellows may also regress in achievement of their milestones. This may happen for many reasons, such as over scoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the fellow.

Selection of a level implies the fellow substantially demonstrates the milestones in that level, as well as those in lower levels (see the diagram on page vi).

Additional Notes

Level 4 is designed as a graduation *goal* but *does not* represent a graduation *requirement*. Making decisions about readiness for graduation and unsupervised practice is the purview of the program director. Furthermore, Milestones 2.0 include revisions and changes that preclude using Milestones as a sole assessment in high-stakes decisions (i.e., determination of eligibility for certification or credentialing). Level 5 is designed to represent an expert fellow whose achievements in a subcompetency are greater than the expectation. Milestones are primarily designed for formative, developmental purposes to support continuous quality improvement for individual learners, education programs, and the specialty. The ACGME and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

Some milestone descriptions include statements about performing independently. These activities must occur in conformity to ACGME supervision guidelines as described in the Program Requirements, as well as to institutional and program policies. For example, a fellow who performs a procedure independently must, at a minimum, be supervised through oversight.

A Supplemental Guide is also available to provide the intent of each subcompetency, examples for each level, assessment methods or tools, and other available resources. The Supplemental Guide, like examples contained within the Milestones, is designed only to assist the program director and Clinical Competency Committee and is not meant to demonstrate any required element or outcome.

Supplemental Guides and other resources are available on the Milestones page of each specialty section of the ACGME website. On www.acgme.org, choose the applicable specialty under the "Specialties" menu, then select the "Milestones" link in the lower navigation bar.

The diagram below presents an example set of milestones for one subcompetency in the same format as the ACGME Report Worksheet. For each reporting period, a fellow's performance on the milestones for each subcompetency will be indicated by selecting the level of milestones that best describes that fellow's performance in relation to those milestones.

Systems-Based Practice 1: Patient Safety and Quality Improvement

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to modify systems to prevent patient safety events
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (simulated or actual)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Role models or mentors others in the disclosure of patient safety events
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes quality improvement initiatives at the institutional or departmental level	Participates in quality improvement initiatives at the institutional or departmental level	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses quality improvement initiatives at the institutional or community level

Comments:

Not Yet Completed Level 1 ☐

Selecting a response box in the middle of a level implies that milestones in that level and in lower levels have been substantially demonstrated.

Selecting a response box on the line in between levels indicates that milestones in lower levels have been substantially demonstrated as well as **some** milestones in the higher level(s).

Patient Care 1: Geriatric Psychiatric Evaluation
A: Gathers and organizes findings from the patient interview, mental status examination, and functional assessment
B: Gathers and organizes data from collateral sources
C: Performs neurocognitive assessment

Level 1	Level 2	Level 3	Level 4	Level 5
Consistently obtains complete, accurate, and relevant general psychiatry history and mental status and describes a functional assessment	Obtains complete and relevant geriatric psychiatry history and mental status and performs a comprehensive functional assessment	Identifies subtle and unusual findings in geriatric psychiatry history and mental status and performs a pertinent functional assessment	Integrates and synthesizes history, clinical data, and functional assessment to determine necessary additional steps in the evaluation	Serves as a role model for gathering subtle and accurate findings from the patient and collateral sources
Collects relevant information from collateral sources and orders screening laboratory and diagnostic tests	Orders appropriate additional laboratory and diagnostic tests, including and neuroimaging	Interprets collateral information and test results to determine necessary additional steps	Interprets collateral information and test results to determine necessary additional steps in the evaluation, while preserving patient autonomy	
Describes the elements of neurocognitive assessment	Performs the neurocognitive assessment	Interprets the findings from the neurocognitive assessment and refers for neuropsychological testing, as indicated	Integrates findings from neurocognitive assessment with other clinical data	Serves as a leader for neurocognitive testing, evaluation, and interpretation for treatment planning by the patient care team

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Comments:

Not Yet Completed Level 1　☐
Not Yet Assessable　☐

Patient Care 2: Psychiatric Formulation and Differential Diagnosis
A: Organizes and summarizes findings and generates differential diagnosis
B: Identifies contributing factors and contextual features and creates a formulation
C: Performs risk assessment

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies information from relevant sources to develop a basic differential diagnosis for common geriatric patient presentations	Integrates information from relevant sources to develop a basic differential diagnosis for common geriatric patient presentations	Develops a thorough and prioritized differential diagnosis while avoiding premature closure for a range of geriatric patient presentations	Develops differential diagnoses in complex cases and incorporates subtle, unusual, or conflicting findings	Serves as a role model in the development of accurate and complete differential diagnoses and formulations
Describes the role of biological, psychosocial, cultural, and developmental/life cycle factors for a geriatric patient	Identifies the specific biological, psychosocial, cultural, and developmental /life cycle factors that contribute to a geriatric patient's presentation	Synthesizes all information into a concise but comprehensive formulation, taking into account biological, psychosocial, cultural, and developmental/life cycle factors	Develops formulations based on multiple conceptual models	
Screens for safety and risk of harm to oneself, to others, or by others	Engages in a basic risk assessment and basic safety planning	Incorporates risk and protective factors into the assessment of imminent, short-, and long-term patient safety and the safety of others	Incorporates risk and protective factors into the assessment of complex patient presentations, including eliciting information not readily offered by the patient	Serves as a role model for safety and risk assessment

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Comments:

Not Yet Completed Level 1　☐
Not Yet Assessable　☐

Patient Care 3: Geriatric Therapeutic Modalities

Level 1	Level 2	Level 3	Level 4	Level 5
Applies knowledge of the general principles of psychopharmacology	Applies knowledge of the geriatric psychopharmacology principles	Applies principles of geriatric psychopharmacology and treatment response in the selection and management of somatic therapies	Selects and manages appropriate psychopharmacologic and other somatic treatment options in patients with significant medical comorbidities and treatment refractory disorders	Explains less common somatic treatment choices to patients and patient families in terms of proposed mechanisms of action
Establishes and maintains a therapeutic alliance and professional boundaries while providing psychotherapies to patients with uncomplicated problems	Establishes and maintains a therapeutic alliance with older adults	Integrates the selected psychotherapy with other treatment modalities and other providers of care	Selects a psychotherapeutic modality and tailors the selected psychotherapy to the patient based on an appropriate case formulation	
	Identifies behavioral and environmental factors that impact psychiatric presentations	Provides behavioral and environmental interventions when clinically appropriate	Integrates behavioral and environmental setting intervention appropriately with other treatment modalities	Integrates emerging studies of geriatric therapeutic modalities into clinical practice

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Comments:

Not Yet Completed Level 1 ◻
Not Yet Assessable ◻

Patient Care 4: Treatment Planning and Management
A. Participates in the development, management, and periodic review of inter-professional treatment plans
B. Manages geriatric patient safety issues, substance use, and medical comorbidities
C. Provides culturally competent care to socioeconomically disadvantaged, racial minorities, and LGBTQI+ geriatric patients

Level 1	Level 2	Level 3	Level 4	Level 5
Establishes treatment goals with the patient	Identifies additional disciplines to address treatment goals specific to the needs of a geriatric patient	Devises and modifies, as needed, individualized patient-centered treatment plans for common presentations	Integrates multiple modalities in a comprehensive approach to provide patient-centered treatment plans for complex presentations	Supervises treatment planning of other learners and multidisciplinary care practitioners
Recognizes geriatric patient in crises, acute, or chronic presentation of psychiatric and medical conditions	Manages geriatric patient in crises, acute, or chronic presentation with supervision using appropriate interventions	Manages patients' comorbid conditions, such as substance use and medical problems related to the psychiatric presentation, treatment, and prognosis, utilizing consultation services	Consistently identifies and manages patient safety issues and comorbid substance use and medical conditions while utilizing consultation for refractory cases or complicated cases	Creates and leads a comprehensive patient - centered management plan for the patient with highly complex conditions, safety issues, medical, and substance use comorbidities
Recognizes cultural factors and social determinants of health and issues of racial, gender, and sexual diversity impacting the care of all patients	Recognizes the cultural factors and social determinants of health and issues of racial, gender, and sexual diversity impacting the care of geriatric patients	Provides sensitive and culturally competent care to socioeconomically disadvantaged patients, racial minority patients, and LGBTQI+ patients	Provides comprehensive management of multiple and complex conditions, while addressing social determinants of health	Creates and leads a comprehensive patient-centered management plan for multiple conditions while addressing social determinants of health

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Comments:

Not Yet Completed Level 1   ☐
Not Yet Assessable   ☐

Patient Care 5: Telepsychiatry **A. Uses the electronic health record (EHR) in virtual clinical care** **B. Conducts care in a virtual clinical setting**				
Level 1	**Level 2**	Level 3	Level 4	Level 5
Uses the EHR for routine patient care activities	Accesses secondary data sources for use in patient care activities	Effectively manages therapeutic relationship through virtual environment and asynchronous communication	Supports an interdisciplinary care team through the use of the EHR and asynchronous communication	Leads improvements to the EHR
Describes potential benefits, challenges, and appropriate clinical usage of telehealth visits for older adults	Performs assigned telehealth visits using approved technology, including establishing therapeutic alliance and, obtaining basic history and mental status exam	Adjusts interview and cognitive evaluation to address technological difficulties and patient needs and preferences	Recognizes and evaluates complex physical and mental status exam findings via video visit	Develops and innovates new ways to use emerging technologies to augment telehealth visits
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Comments:
Not Yet Completed Level 1　☐ Not Yet Assessable　☐

Medical Knowledge 1: Development through Later Life
A. Knowledge of physiologic changes with aging and developmental theories of later life
B. Knowledge of pathological and environmental influences on later life
C. Knowledge of the impact of life events, functional change, social determinants of health, and general medical health on later life

Level 1	Level 2	Level 3	Level 4	Level 5
Describes physiological changes associated with normal aging and developmental theories of later life	Applies developmental theories to explain transitions in later life	Identifies major deviations from typical later-life development	Incorporates knowledge of later-life development into the clinical formulation	Incorporates new scientific knowledge into understanding of later-life development
Describes the influence of biological, psychosocial, and cultural factors on personality development	Identifies pathological and environmental factors that commonly occur in later life and may impact later-life development	Describes the impact of pathological and environmental factors on later life	Analyzes and discusses the influence of pathological and environmental factors on later life	
Describes common life events, functional change, and general medical conditions occurring in later life	Demonstrates basic knowledge of the role of cultural context and social determinants in later life	Describes the impact of cultural context and social determinants on mental health conditions occurring in later life.	Evaluates the impact of life events, functional change, and general medical health on the expression of psychopathology in later life	

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Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

Medical Knowledge 2: Psychopathology
A. Knowledge to identify and treat psychiatric conditions in older adults in a variety of treatment settings
B. Knowledge to assess risk and determine level of care
C. Knowledge regarding the interface of geriatric psychiatry and other clinical disciplines

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates sufficient knowledge to identify and treat most psychiatric conditions throughout the life cycles	Demonstrates sufficient knowledge to identify and treat common psychiatric conditions in later life	Demonstrates sufficient knowledge to identify and treat complex psychiatric conditions in later life	Synthesizes knowledge to identify and treat atypical and complex psychiatric conditions in later life	Teaches risk assessment and determination of level of care for geriatric patients
Identifies risk and protective factors for danger to oneself and/or others across the life cycle	Weighs the risk and protective factors in older adults and determines the appropriate level of care	Recognizes the impact of functional and neurocognitive impairments on safety in older adults	Determines the appropriate level of care for functionally or neurocognitively impaired patients	
Demonstrates knowledge of screening and evaluation tools to identify psychiatric conditions in the general medical patient population	Selects relevant screening and evaluation tools to identify geriatric psychiatric conditions in the general medical patient population	Recognizes medical conditions in geriatric psychiatry patients in collaboration with other clinical disciplines	Diagnoses complex clinical conditions in geriatric psychiatric patients in collaboration with other clinical disciplines	Develops protocols for risk assessment and determination of appropriate level of care in collaboration with other clinical disciplines
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Comments:

Not Yet Completed Level 1   ☐
Not Yet Assessable   ☐

Medical Knowledge 3: Treatment and Management
A. Knowledge of psychotropic and somatic treatments
B. Knowledge of psychotherapeutic, behavioral, and environmental interventions
C. Knowledge of delivery and of integration of treatment modalities across systems and settings

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates an evidence-based understanding of psychotropic and somatic treatment modalities for common psychiatric disorders	Connects the changes in pharmacokinetics, pharmacodynamics, and physiology of aging to modifications of somatic treatments	Describes evidence-based psychotropic and somatic treatment modalities for complex psychiatric disorders	Synthesizes knowledge of geriatric physiology and psychopharmacology for management of somatic therapies	Incorporates emerging studies and new theoretical developments of geriatric therapeutic modalities into knowledge base
Demonstrates an understanding of the basic principles, indications, and contraindications of psychotherapeutic modalities	Describes the basic techniques of evidence-based individual psychotherapies and approaches to behavioral disturbances in geriatric patients	Describes principles of behavioral management and environmental interventions in various clinical care settings	Critically appraises the evidence for efficacy of non-pharmacological therapies with and without concomitant pharmacotherapy	Demonstrates sufficient knowledge of geriatric therapeutic modalities to teach others effectively
Describes characteristics of diverse treatment settings and models of care	Describes the applicable regulations for billing and reimbursement	Describes federal and state regulations regarding the care of geriatric psychiatric patients in different clinical care settings	Describes how to seek out and integrate new information on the practice of geriatric psychiatry	

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Comments:

Not Yet Completed Level 1   ☐
Not Yet Assessable   ☐

Systems-Based Practice 1: Patient Safety and Quality Improvement
A. Recognizes patient safety events in older adults
B. Appropriately discloses patient safety events
C. Participates in quality improvement

Level 1	Level 2	Level 3	Level 4	Level 5
Describes common patient safety events	Identifies factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to improve systems to prevent patient safety events
Describes process of patient safety event reporting	Reports patient safety events through institutional reporting systems (simulated or actual)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Serve as a role model to others in the disclosure of patient safety events
Discusses basic quality improvement methodologies and metrics	Describes quality improvement initiatives (e.g., reduced restraint rates, falls risk, suicide rates)	Participates in quality improvement initiatives	Identifies, develops, implements, and analyzes a quality improvement project	Leads quality improvement initiatives at the institutional or community level

Comments:

Not Yet Completed Level 1 ▢

Systems-Based Practice 2: System Navigation for Patient-Centered Care
A. Coordinates patient care
B. Safely transitions care
C. Population and community health needs

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of care coordination	Coordinates care of patients in routine clinical situations effectively using the roles of the interprofessional team members	Coordinates care of patients in complex clinical situations effectively using the roles of their interprofessional team members	Effectively coordinates patient-centered care among different disciplines and specialties	Analyzes the process of care coordination and leads in the design and implementation of improvements
Identifies key elements for safe and effective transitions of care and hand-offs	Performs safe and effective transitions of care/hand-offs in routine clinical situations	Performs safe and effective transitions of care/hand-offs in complex clinical situations	Effectively manages and advocates for safe transitions of care/hand-offs within and across health care delivery systems	Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes
Demonstrates knowledge of population and community health needs and disparities	Identifies specific population and community health needs and inequities for their local population	Uses local resources effectively to meet the needs of a patient population and community	Participates in changing and adapting practice to provide for the needs of specific populations	Leads innovations and advocates for populations and communities with health care inequities

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Comments:

Not Yet Completed Level 1   ⬚

Systems-Based Practice 3: Physician Role in Health Care Systems
A. Understanding and working within the health care system
B. Health care financing and advocacy
C. Transition to practice

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the complex health care system	Describes how components of a complex health care system are interrelated, and how this impacts patient care	Discusses how individual practice affects the broader system	Manages components of the complex health care system to provide high-value, efficient, and effective patient care and transition of care	Leads systems change that enhances high-value, efficient, and effective patient care and transition of care
Describes practice models and basic mental health payment systems	Identifies barriers to care in different health care systems	Engages with patients in shared decision making and advocates for appropriate care and parity	Advocates for patient care needs, including mobilizing community resources	Participates in advocacy activities for access to care in mental health and reimbursement
Identifies basic concepts for effective transition to fellowship	Demonstrates use of information technology and documentation required for medical practice, billing, and coding	Demonstrates knowledge of credentialing, certification, licensure, and other regulatory requirements for transition to independent practice	Identifies and evaluates practice habits and patterns in preparation for independent practice	Educates others to prepare them for transition to practice

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Comments:

Not Yet Completed Level 1　☐

Systems-Based Practice 4: Elder Law
 A. Assessment and management of self-determination and decisional capacity
 B. Identification and management of elder abuse, exploitation, and neglect

Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes issues of self-determination and lists criteria for decisional capacity in a patient	Recognizes issues of self-determination and decisional capacity in the geriatric patient and identifies the health care decision maker in a patient's care	Routinely identifies and manages issues of patient self-determination and decisional capacity	Proactively identifies and manages complex issues of patient self-determination and decisional capacity	Conducts educational programs/modules on mental health issues related to elder law
Discusses types of elder abuse, including exploitation, neglect, and physical, emotional, and financial abuse	Recognizes the potential for elder abuse and the role of the physician in addressing these issues	Identifies the occurrence of elder abuse and/or undue influence and initiates management plan, including mandatory reporting	Advocates against elder abuse through collaboration with community programs and state agencies	Conducts assessment in formal investigations of elder abuse

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Comments:

Not Yet Completed Level 1   ☐

Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice

Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates how to access and summarize available evidence for routine conditions	Articulates clinical questions and initiates literature searches to provide evidence-based care	Locates and applies the best available evidence to the care of patients applying a hierarchy of evidence	Critically appraises and applies evidence even in the face of uncertainty and conflicting evidence to guide care, tailored to the individual patient	Coaches others to critically appraise and apply evidence for complex patients; and/or participates in the development of guidelines
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Comments:

Not Yet Completed Level 1   ☐

Practice-Based Learning and Improvement 2: Reflective Practice and Commitment to Personal Growth

Level 1	Level 2	Level 3	Level 4	Level 5
Accepts responsibility for personal and professional development by establishing goals	Demonstrates openness to performance data (feedback and other input) to inform goals	Seeks performance data episodically, with openness and humility	Intentionally seeks performance data consistently, with openness and humility	Role models consistently seeking performance data with openness and humility
Identifies the factors that contribute to gap(s) between one's expected and actual performance	Analyzes and reflects on the factors that contribute to gap(s) between one's expected and actual performance	Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between one's expected and actual performance	Challenges one's own assumptions and considers alternatives in narrowing the gap(s) between their expected and actual performance	Coaches others on reflective practice
Actively seeks opportunities to improve	Designs and implements a learning plan, with prompting	Independently creates and implements a learning plan	Uses performance data to measure the effectiveness of the learning plan and, when necessary, improves it	Facilitates the design and implementation of learning plans for others

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Comments:

Not Yet Completed Level 1   ☐

Professionalism 1: Professional Behavior and Ethical Principles

Level 1	Level 2	Level 3	Level 4	Level 5
Identifies and describes core professional behavior	Demonstrates professional behavior in routine situations	Demonstrates professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in oneself and others	Role models professional behavior and ethical principles
Recognizes that one's behavior in professional settings affects others	Takes responsibility for one's own professionalism lapses and responds appropriately	Describes when and how to appropriately report professionalism lapses in others, including strategies for addressing common barriers to reporting	Responds appropriately to professionalism lapses of colleagues	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution
Demonstrates knowledge of core ethical principles	Analyzes straightforward situations using ethical principles	Analyzes complex situations using ethical principles and recognizes when help is needed	Recognizes and uses appropriate resources for managing and resolving ethical dilemmas as needed. (e.g., ethics consultations, literature review, risk management/legal consultation)	

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Comments:

Not Yet Completed Level 1   ☐

Professionalism 2: Accountability/Conscientiousness

Level 1	Level 2	Level 3	Level 4	Level 5
Takes responsibility to complete tasks and responsibilities, identifies potential contributing factors for lapses, and describes strategies for ensuring timely task completion in the future	Performs tasks and responsibilities in a timely manner, with appropriate attention to detail, in routine situations	Performs tasks and responsibilities in a timely manner, with appropriate attention to detail, in complex or stressful situations	Recognizes when others are unable to complete tasks and responsibilities in a timely manner and assists in problem solving	
Introduces oneself as the patient's primary psychiatrist	Accepts the role of the patient's physician and takes responsibility (under supervision) for ensuring the patient receives the best possible care	Is recognized by oneself, the patient, the patient's family, and medical staff members as the patient's primary psychiatrist	Displays increasing autonomy and leadership in taking responsibility for ensuring the patients receive the best possible care	Serves as a role model in demonstrating responsibility for ensuring that patients receive the best possible care

Comments:

Not Yet Completed Level 1 ☐

Professionalism 3: Well-Being

Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the importance of addressing personal and professional well-being	Identifies available resources for personal and professional well-being	With assistance, proposes a plan to promote personal and professional well-being	Independently develops a plan to promote personal and professional well-being	Creates institutional level interventions that promote colleagues' well-being
	Describes institutional resources designed to promote well-being	Describes institutional factors that positively and/or negatively affect well-being	Suggests potential solutions to institutional factors that affect well-being	Implements institutional programs designed to examine systemic contributors to burnout

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Comments:

Not Yet Completed Level 1   ☐

This subcompetency is not intended to evaluate a fellow's well-being, but to ensure each fellow has the fundamental knowledge of factors that impact well-being, the mechanisms by which those factors impact well-being, and available resources and tools to improve well-being.

Interpersonal and Communication Skills 1: Patient- and Family-Centered Communication

Level 1	Level 2	Level 3	Level 4	Level 5
Uses language and non-verbal communication to demonstrate empathic curiosity, respect, and to establish rapport	Establishes a therapeutic relationship in straightforward encounters using active listening and clear language	Establishes a therapeutic relationship in challenging patient encounters; uses non-verbal communication skills effectively	Effectively establishes and sustains therapeutic relationships, with attention to the patient's/patient's family's concerns and context, regardless of complexity	Mentors others in situational awareness and critical self-reflection to consistently develop positive therapeutic relationships
Identifies common barriers to effective communication; accurately communicates one's own role within the health care system	Identifies complex barriers to effective communication	When prompted, reflects on personal biases that may contribute to communication barriers	Independently recognizes personal biases and attempts to proactively minimize their contribution to communication barriers	Role models self-awareness practice while identifying and teaching a contextual approach to minimize communication barriers
Recognizes communication strategies may need to be adjusted based on clinical context	Organizes and initiates communication with the patient and patient's family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying understanding of the clinical situation	With guidance, sensitively and compassionately delivers medical information, elicits the patient's/patient's family's values, goals, and preferences; acknowledges uncertainty and conflict	Independently, uses shared decision making to align the patient's/patient's family's values, goals, and preferences with treatment options to make a personalized care plan	Role models shared decision making in patient/family communication including those with a high degree of uncertainty/conflict

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Comments:

Not Yet Completed Level 1　☐

Interpersonal and Communication Skills 2: Interprofessional and Team Communication

Level 1	Level 2	Level 3	Level 4	Level 5
Uses language that values all members of the health care team	Communicates information effectively with all health care team members	Uses active listening to adapt communication style to fit team needs	Coordinates recommendations from different members of the health care team to optimize patient care	Role models flexible communication strategies that value input from all health care team members, resolving conflict when needed
Recognizes the need for ongoing feedback with the health care team	Solicits feedback on performance as a member of the health care team	Communicates concerns and provides feedback to peers and learners	Respectfully communicates feedback and constructive criticism to superiors	Facilitates regular health care team-based feedback in complex situations

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Comments:

Not Yet Completed Level 1   ☐

Interpersonal and Communication Skills 3: Communication within Health Care Systems

Level 1	Level 2	Level 3	Level 4	Level 5
Accurately records information in the patient record	Demonstrates organized diagnostic and therapeutic reasoning through notes in the patient record	Concisely reports diagnostic and therapeutic reasoning in the patient record	Communicates clearly and concisely, in an organized written form, including anticipatory guidance	Contributes to departmental or organizational initiatives to improve communication systems
Safeguards patient personal health information	Uses documentation shortcuts accurately and appropriately to enhance efficiency of communication	Appropriately selects forms of communication based on context	Achieves written or verbal communication that serves as an example for others to follow	
Communicates about administrative issues through appropriate channels, as required by institutional policy	Respectfully communicates concerns about the system	Uses appropriate channels to offer clear and constructive suggestions to improve the system	Initiates difficult conversations with appropriate stakeholders to improve the system	Facilitates dialogue regarding systems issues among larger community stakeholders

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Comments:

Not Yet Completed Level 1   ☐