Monitoring Resident Progress Through Mentored Portfolios

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The Challenge

Educational portfolios have been recommended for use in residency programs[1,2] and are used in other fields of education.[3] In its pure form, an educational portfolio is a tool for learners to review their learning, reflect on progress, and develop a learning plan.[4] Reflective learning is a key tenet of portfolios in medicine,[5] and it encourages residents to reflect on their learning as they progress toward Milestones in the 6 Accreditation Council for Graduate Medical Education (ACGME) competencies.[6] Whether in electronic or paper form, a portfolio is a collection of documents that is used to conduct formative and summative evaluation[6] and to promote self-directed learning.[7] Another key factor in residents' personal and professional development is the active involvement of faculty mentors, yet it is often absent in today's environment.[8,9] With increasing time constraints in training, many residents report a lack of mentoring relationships.[8] The purpose of this article is to introduce the reader to a structured mentoring program.

What Is Known

Incorporating faculty as portfolio mentors can provide residents with a structured mentoring experience[10] and meet the requirements that faculty provide formative feedback and document evaluations at the end of rotations or assignments.[11] Use of structured reflective learning, with guidance from a faculty mentor, has been found to be beneficial for residents' development.[12] Furthermore, portfolios are most successful when combined with a structured mentoring program.[11,12] Assigning mentors early in training increases the likelihood that a productive relationship develops.[9]

To ensure the success of a mentored portfolio, mentors should receive detailed information about the goals and structure of the educational portfolio.[13] In addition, mentors need to understand the components and content of the educational portfolio (BOX).

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Rip Out action items

Program directors must:

1. Support and provide resources to develop faculty to serve as portfolio mentors within your program.
2. Provide a system or framework for portfolio scope and content; feedback about Milestone achievement should be a major goal.
3. Use feedback from portfolio review sessions to improve your program.

Unfortunately, not all faculty members make good mentors, so careful selection of mentors is recommended.[9] In addition, compared with the resident population, female and international physicians may be underrepresented in the faculty, so care should be taken to ensure that female and international medical graduate residents receive mentoring that is empathetic and sensitive to their needs. Faculty development and institutional support have been recommended to ensure an optimal mentoring relationship for all learners.[8]

How You Can Start TODAY

1. Review current recommendations for the format and content of educational portfolios. Does your program follow guidelines for a true portfolio?
2. Establish the content of the educational portfolio. Does it include instruments for reflective learning in all 6 competencies? Depending on the specialty, does it also facilitate tracking of operative or procedure logs or adequacy of patient volume and variety?
3. Determine how the portfolio will be used as an assessment. How will your program use the portfolio to facilitate the structured review of individual residents' performance on at least a semiannual basis?
4. Encourage faculty to become portfolio mentors, and ensure that the members selected are interested and have sufficient time to devote to mentoring.

What You Can Do LONG TERM

For Program Leadership:

1. Provide clear guidelines on portfolio content that make sense to both faculty and residents.

BOX Suggested Components of a Portfolio

Competency Reflection Tool

- Residents describe what they have learned or how they have improved since the last portfolio meeting in each of the 6 general competencies as applied to their medical specialty.
- Resident describes the plan for improvement in each of the 6 general competencies for the next 6 months (until the next portfolio meeting).

Incident Reflection Tool

- Resident describes an episode or incident, either good or bad, and reflects on what went well or poorly and describes how a bad episode could have been improved or how a good episode could be repeated.

Procedure Assessment Tool

- Assessment of resident performance giving a presentation, which may be either a PowerPoint to a large group or a small group discussion. Feedback is given to allow the resident to reflect and improve on presentation performance.

Rotation Assessment Form

- Assessment by faculty is a standard performance assessment for residents and should be included in the portfolio for review with the portfolio mentor to guide future performance improvement.

In-Service Examinations

- These should be available for review with the portfolio mentor. The goal of most in-service examinations is to prepare the resident for the board certification examinations. The medical knowledge demonstrated in most in-service examinations correlates to board passage rates. If a resident does poorly, an educational program should be initiated.

Procedure Logs

- These are included with review of the portfolio to ensure that the resident has sufficient opportunity to perform procedures (or operative cases, depending on specialty) that are essential for the specialty.

2. Select mentors carefully. Done well, this is a time-intensive process. Lack of buy-in or a personality clash may lead to failure of the mentoring relationship.
3. Ensure that mentoring addresses the needs of different types of mentees.
4. Ensure that a key part of the resident evaluation can be performed by the portfolio mentor.
5. Provide faculty with guidance about the use of portfolios in resident education and evaluation, as some faculty members may be less familiar with the scope, purpose, and content of portfolios.
6. Provide protected time for meetings. Formal portfolio reviews should occur at least twice a year with each resident. More frequent meetings to discuss problems or topics such as research require protected time for residents and faculty.

For Residents:

1. Review the portfolio requirements of your program.
2. Review the 6 ACGME competencies for your program. How are they defined, taught, and evaluated?
3. Ensure that your operative log or procedure log is up to date.
4. Review your current research and scholarly work.
5. Think ahead when scheduling meetings with your portfolio mentor. Understand that most portfolio mentors are willing to meet more often than the scheduled meetings to address questions or issues that arise.

Resources

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