

The ACGME Milestones: Assessments, Roadmaps, or Both?

Two recent articles from the *Journal of Graduate Medical Education* presented conflicting perspectives on the definition and roles of milestones. Bartlett and colleagues¹ demonstrated advantages to using milestone-based assessment of their trainees. Conversely, Colbert et al² contended that milestones are “not assessments.” Rather, they describe the milestones as “developmental markers on the path to independent practice.” Are the Accreditation Council for Graduate Medical Education milestones assessments or not? More importantly, does it matter?

The controversy regarding the milestones’ definition and use may detract from the potential of this new approach to provide residents and their mentors with a shared road map for professional development. In our department, we use milestones both as an assessment tool and as a developmental blueprint. Our core faculty attend staff development sessions to better understand each of the milestones. Subsets of the milestones are evaluated by the faculty on a daily basis, and our trainees review and self-report on their progress toward each of the 25 milestones semiannually. Residents present their completed self-evaluation to the summative feedback sessions with the clinical competency committee (CCC). By comparing the CCC’s assessment to the residents’ self-evaluations, we may discern whether perceived deficits are due to lack of insight into a problem or lack of training opportunities and clinical experiences.

We anticipate that this dual purpose integration of the milestones will help us create better, more individualized education plans for each resident. We hope that by providing opportunities and activities for the faculty, residents, and support staff to familiarize themselves with the expectations set by the milestones, we may yield more useful feedback for

trainees and increase transparency within the evaluation process. Additionally, we believe that the milestones have significant untapped potential for the ongoing assessment and development of resident physicians and for faculty as well. The inclusion of the aspirational Level 5 within each milestone hints at this intention.

Can we progress toward these higher goals by keeping an open mind? Let us not argue about what the milestones are; instead, let’s shift the focus to what they can become.

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References

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2. Colbert CY, Dannefer EF, French JC. Clinical competency committees and assessment: changing the conversation in graduate medical education. *J Grad Med Educ*. 2015;7(2):162–165.