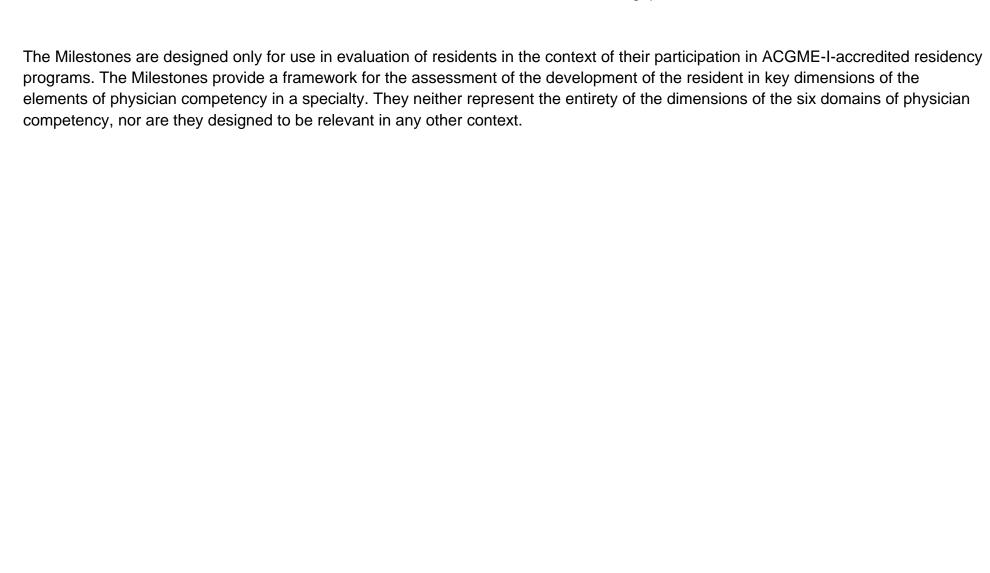
Preventive Medicine Milestones for Singapore



May 2017

The Preventive Medicine Milestones for Singapore



Milestones Reporting

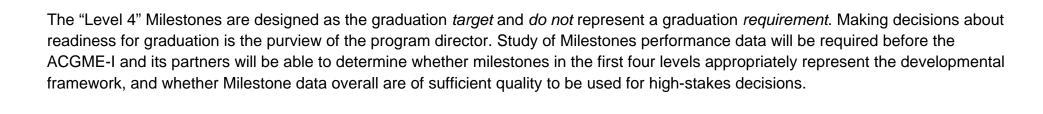
This document presents milestones designed for programs to use in semi-annual review of resident performance and reporting to the ACGME-I. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME-I competencies organized in a developmental framework from less to more advanced. They are descriptors and targets for resident performance as a learner moves from entry into their program through graduation.

For each period, review and reporting will involve selecting milestone levels that best describe each resident's current performance and attributes. Milestones are arranged in numbered levels. Tracking from "Level 1" to "Level 5" is synonymous with moving from novice to expert in the specialty. These levels do not correspond with time in the educational program. Dependent upon previous education and experience, residents may enter a program at varying points in the Milestones.

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

- **Level 1:** The resident demonstrates milestones expected of an incoming resident.
- **Level 2:** The resident is advancing and demonstrates additional milestones, but is not yet performing at a mid-residency level.
- **Level 3:** The resident continues to advance and demonstrate additional milestones, consistently including the majority of milestones targeted for residency.
- **Level 4:** The resident has advanced so that he or she now substantially demonstrates the milestones targeted for residency. This level is designed as the graduation target.
- **Level 5:** The resident has advanced beyond performance targets set for residency and is demonstrating "aspirational" goals, which might describe the performance of someone who has been in practice for several years. It is expected that only a few exceptional residents will reach this level.

Additional Notes



Answers to Frequently Asked Questions about Milestones are posted on the ACGME-I website.

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

| Systems-Based Practice | : Patient Safety and Quali | ty 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 (actual or simulated) | 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) Demonstrates the skills | Role models or mentors others in the disclosure of patient safety events |
| Demonstrates knowledge of basic quality improvement methodologies and metrics | Describes local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation) | Participates in local quality improvement initiatives | 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 y | et achieved Level 1 |
| Selecting a response box in of a level implies that mile that level and in lower leve substantially demonstrate | stones in els have been | Selecting a response between levels indicat lower levels have been demonstrated as well the higher level(s). | es that milestones in substantially | · |

| Patient Care 1: Emergency | Patient Care 1: Emergency Preparedness and Response – Apply skills in emergency preparedness and response | | | |
|---|--|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates basic skills in emergency medical care | Demonstrates knowledge of triage concepts. | Demonstrates and applies understanding of emergency preparedness programs. | Demonstrates ability to develop and evaluate the medical portion of an emergency plan. | Provides leadership in developing, implementing, and evaluating emergency preparedness programs. |
| | Demonstrates basic knowledge of emergency preparedness programs (e.g. pandemics, multiple casualty accidents at institutional and national level). | | | |
| | | | | |
| Comments: | | | Not \ | et Achieved Level 1 |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|--|---|--|---|
| Diagnoses disease and develops an individualized treatment plan. | Links individuals to needed personal health services including appropriate referrals and follow-ups. | Applies primary, secondary, and tertiary preventive approaches to disease prevention and health promotion for individuals or communities, with minimal supervision. | Applies primary, secondary, and tertiary preventive approaches to disease prevention and health promotion for the individuals and community. | Contributes to the development and/or implementation of a policy to improve community health efforts. |
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| Comments: | | | Not Yet | Achieved Level 1 |
| Patient Care 3: Health in the | ne Community – Monitor, diag | nose, and investigate commu | nity health problems | |
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies common health issues in a community. | Identifies basic health status measures to assess/investigate a community's health. | Selects and describes appropriate health status measures to assess a community's health. | Monitors and interprets single health status indicator of the community, and identifies groups with | Monitors and interprets multiple and/or complex health status indicators of the community, and |

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| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|--|---|---|---|
| Recognizes distinctions between population and individual health services. | Describes basic measures of effect (e.g. risk ratio). | Assesses evidence for effectiveness of a population-based health service. | Uses program goals and/or established performance criteria to evaluate a population-based health service. | Develops program goals and/or performance criteria to evaluate a population-based health service. |
| | Describes basic measures of quality (e.g. benchmarking). | Uses scientific literature to identify a target population for a given population-based health service. | Uses evaluation findings to recommend strategic or operational improvements. | |
| | Lists populations known to be underserved (e.g. low income). | Uses scientific literature to identify barriers to delivery of population-based health service. | Uses data to identify barriers to population-based health services. | |
| | | | | |

| Patient Care 5: Disease Outbreak Management | | | | |
|---|---|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Understands that clusters or outbreaks occur. | Understands common environmental, health, and behavioral risk factors associated with clusters or outbreaks occurring (e.g. congregate settings, immuno-compromised populations, and drug abuse). | Recognizes sentinel event; uses surveillance, hospital, vital statistics, or other data to establish the existence of a cluster or outbreak. | Implements a plan to investigate and collects data to describe a cluster or outbreak. | Designs a strategy to investigate a cluster or outbreak of a novel disease or atypical disease presentation. |
| Identifies most common methods for preventing individual disease spread (e.g. hand hygiene). | Understands aspects of disease that predispose to outbreak development (e.g. high infectivity, subclinical phase). | Establishes a case definition, including clinical and laboratory findings; participates in collection of demographic, clinical, and/or risk factor information from cases. | Characterizes and interprets data collected from a cluster or outbreak investigation. | Leads a team to investigate and manages an outbreak, including supervision of staff, assignment of roles, program design, monitoring of effectiveness, etc. |
| | Identifies most common methods for preventing disease spread in populations (e.g. quarantine, isolation). | Understands approaches for mitigating and responding to a cluster or outbreak. | Applies a strategy or plan for management of an outbreak (e.g. limiting spread, mitigating effects). | |
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| Comments: | | | Not \ | Yet Achieved Level 1 |

| Patient Care 6: Public Hea | Ith Communications – Inform | and educate populations abo | ut health threats and risks | |
|--|---|--|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Conveys basic health information to individuals or small groups. | Identifies proper communication techniques related to health threats and risks. | Prepares and delivers a basic health hazard/risk presentation. | Conveys complex health information to educate a community or group and responds to queries about risk. | Conveys sensitive/high- stakes health information to educate a community or group through a variety of media platforms. |
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| Comments: | | | Not Y | et Achieved Level 1 |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|--|---|--|---|
| Aware of the need to report selected diseases to public health authorities. | Identifies commonly used surveillance data sources (e.g. vital statistics, hospital discharge data) and the conditions typically monitored using such systems. | Thoroughly describes the components of an existing surveillance system (e.g. aims, stakeholders, data sources, quality, uses, etc). | Analyzes surveillance data to identify appropriate targets for individual, community, and/or systems interventions. | Independently designs and operates a new surveillance system. |
| Aware of the need for surveillance systems in a variety of settings (e.g. public health agencies, hospitals, clinics, nursing homes). | Recognizes difference between active and passive surveillance. | Develops a list of challenges in designing and maintaining a surveillance system. | Evaluates one or more aspects of the quality and effectiveness of a surveillance system (e.g. data completeness, ease of use, compliance). | Develops a comprehensive program plan for an actual workplace, including test selections, follow-up plans, marketing, and comparison of cost effectiveness of alternative strategies. |
| Demonstrates working knowledge of basic principles underlying screening (e.g. sensitivity, specificity, predictive value, positive/negative, etc). | Performs a medical surveillance examination following prescribed guidelines; communicates results in writing to patient (and employer, if relevant). | Independently determines which tests are appropriate, costeffective, and/or mandatory for a specific worker-patient. | Prepares a valid aggregate analysis and summary of actual medical surveillance examinations for a specific focus. | |
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| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|---|--|---|--|
| Describes the ethical and legal rights of patients to privacy and confidentiality of personal health information. | Informs individuals of sensitive or confidential information in an ethical manner consistent with legal requirements. | Distinguishes between personal health information protections and laws governing release of clinical information related to work-related injury/illness and medical surveillance programs. | Demonstrates the ability to protect the privacy and confidentiality rights of the individual patient. | Advocates for health, safety and social issues arising in the workplace and the community. |
| | Describes the legal and ethical uses of various types of medical information held in healthcare facilities. | | Communicates summary results and trends in disability, disease, or risks of public health significance without jeopardizing individual employee privacy rights. | Develops ethically sound policies and procedures fo programs including those related to substance abuse testing, fertility protection, fitness for duty evaluations, and safety sensitive positions. |
| | Describes the physician's role and responsibilities with respect to identification and reporting of relevant notifiable infections, illness and injuries. | | Understands and applies appropriate sharing and restriction of information for various aspects of public health and occupational medicine. | |
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| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|---|--|--|--|
| Understands basic epidemiologic concepts and recognizes that diseases and injuries occur in a social and environmental context. | Understands controls that can be used to reduce exposures in the workplace. | Works with a team to evaluate and identify workplace or environmental causes of injury or illness and recommends controls or programmes to reduce exposure, and to enhance the health and productivity of workers under substantial supervision. | Works with a team to evaluate and identify workplace or environmental causes of injury or illness and recommends controls or programmes to reduce exposure, and to enhance the health and productivity of workers under minimal supervision. | Leads a team to evaluate and identify a previously unrecognized workplace or environmental cause of injury or illness. |
| Acquires a history and performs a basic physical exam that may be related to workplace or environmental exposures. | Acquires an accurate and relevant history, including occupational history, and performs intermediate-level physical examination that may be related to workplace or environmental exposures under direct supervision; begins formulation of the differential diagnosis, assessment, and plan. | Acquires an accurate, organized, and relevant history, including occupational history, and performs advanced-level physical examination that may be related to workplace or environmental exposures under minimal direct supervision. | Acquires an accurate, organized, and relevant history, including occupational history, and performs advanced-level physical examination that may be related to workplace or environmental exposures. | Participates in cases of complex occupational injury and illness that require tertiary prevention measures such as multidisciplinary case management, specialty referral, and advanced accommodation systems, provides supervision of other independently licensed health care professionals, receives minimal oversight by attending physician. |

| relate simp mana displ fracte surve | ins to assess work- tedness (e.g. repair of ble laceration, initial tragement of non- laced distal extremity ture, interpretation of reillance pure-tone ometry). | Formulates an appropriate differential diagnosis and assessment; provides appropriate treatment and plan, including fitness for duty and accommodations, for simple cases. Applies evidence-based clinical practice guidelines in treatment and management (e.g. management of work-related asthma and interpretation of spirometry). | Formulates an appropriate differential diagnosis and assessment; provides appropriate treatment and plan, including fitness for duty and accommodations, for complex cases under indirect supervision. Applies evidence-based clinical practice guidelines in treatment and management. Provides care efficiently (e.g. implementing an evidence-based treatment approach for a patient with work-related low back pain unresponsive to evidence-based treatments). | |
|--|---|--|--|---------------------|
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| Comments: | | | Not Y | et Achieved Level 1 |

Patient Care 10: Industrial Hygiene, Safety and Ergonomics and Risk/Hazard Control, and Communication - Assess if there is risk of an adverse event from exposure to physical, chemical, or biological hazards in the workplace or environment, and characterize, make recommendations for control of, and communicate the risk.

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|--|--|---|---|
| Acquires accurate and complete history and performs appropriate physical examination of patients with injuries and illnesses that may be related to workplace hazard exposures. | Demonstrates understanding of core principles of industrial hygiene, ergonomics, occupational safety, and risk/hazard control and communication (e.g. recognition of regulatory standards and guidelines). | Participates in activities or consultations that include application of the principles of industrial hygiene, ergonomics, occupational safety, and risk/hazard control to patients, populations, and employer organizations under supervision. | Applies the principles of the hierarchy of controls to reduce risks from industrial hygiene, ergonomic, and safety hazards to patients, populations, and employer organizations under minimal supervision. | Interprets, analyses, and applies principles of industrial hygiene, ergonomics, occupational safety, and risk/hazard control in complex occupational or community environments. |
| | | | Communicates risk from hazards to patients in a clear and effective manner both orally and in writing; communicates same to labour and employer organizations (these latter two communications to groups/organizations may be achieved through simulation). | Communicates risk from hazards to groups (e.g. health professionals, the public, public agencies, and the media) in a clear and effective manner both orally and in writing. |
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| Comments: | | | Not Ye | et Achieved Level 1 |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|---|---|---|---|
| Acquires an accurate and relevant history with pertinent physical examination findings of injuries and diseases, which may result in an impairment, disability, or limitation to perform required job tasks. | Opens, manages, and directs straightforward workers' compensation treatment plans, and close workers' compensation injury/illness cases following the relevant workers' compensation insurance rules. | Opens, manages, and directs complicated workers' compensation treatment plans, and close workers' compensation injury/illness cases following the relevant workers' compensation insurance rules. | Provides advice and remediation strategies concerning summary results or trends in disability, disease, or risk that may have public health significance to maximize worker productivity—this may be achieved through simulation. | Performs an independent medical evaluation, including an impairment formulation following the relevant workers' compensation insurance rules. |
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| Comments: | | | Not Ye | t Achieved Level 1 |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|--|--|--|--|
| Understands the basic use of information technology to prepare simple reports, present data, and communicate with colleagues and patients | Adopts protocols to manage patient records and protect confidentiality. | Identifies and implements, under supervision, process and outcome measures for work populations and benchmarks with other organizations. | Designs, with supervision, cost containment strategies for workers' compensation, health benefits, and disability management programs. | Plans, designs, implements, manages, and evaluates comprehensive occupational/environmental health programs, projects, and protocols that enhance the health, safety, and productivity of workers, their families, and members of the community. |
| | Demonstrates an understanding of the roles of various professionals in an occupational health service, including other independent licensed health care professionals. | Applies techniques of process improvement in uncomplicated circumstances. | Communicates technical and clinical information to professionals and lay audiences, including labour and management with supervision. | |
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| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|---|---|--|--|
| Provide care for patients in outpatient and inpatient settings and demonstrates knowledge of anatomy, physiology, pathophysiology, and pharmacological principles, including metabolism of drugs and other hazardous agents under supervision. | Demonstrates core foundation knowledge of toxicological principles, including toxicokinetics, routes of exposure and absorption, preclinical and clinical effects of toxins, evaluation and treatment of acute or chronic exposure to occupational or environmental chemical agents, screening and surveillance for exposed populations, and use and interpretation of relevant scientific literature and data bases. | Recognizes, evaluates, and treats (or refers) patients whose health may be affected by acute or chronic exposure to occupational or environmental chemical agents, including interpretation of laboratory and/or environmental monitoring test results under supervision. | Recognizes, evaluates, and treats (or refers) exposures to toxicants at work or in the general environment, including interpretation of laboratory or environmental monitoring test results and applying toxicokinetic data under minimal supervision. | Performs complex causation analysis (e.g. Independent Medical Evaluations (IME), toxicology consultations, etc) of patients with symptoms or conditions that may be related to toxic exposures from work or the general environment. |
| | | Assesses clinical, worksite, and environmental data, and performs appropriate scientific literature reviews in performance of patient evaluations under supervision. | | Communicates risk from real or potential hazards to groups, including health professionals, the public, and the media, in a clear and effective manner both orally and in writing. |
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| Patient Care 14: OEM Related Law and Regulations | | | | |
|--|---|---|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies relevant regulatory agencies with jurisdiction for regulating exposure in the geographic area and industry/agent. | Lists the criteria/regulatory levels for exposures to the specific substance or hazard. | Reviews actual exposure monitoring data and prepares written reports about compliance for managers, workers, or government. | Able to apply the relevant laws and regulations to prepare a written exposure monitoring and reporting system plan for a specific workplace or other defined entity. | Based on personal research (empirical data or systematic literature review), prepares a proposal for modifying an existing regulatory standard. |
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| Comments: | | | Not Ye | et Achieved Level 1 |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|-------------------------------------|--|--|--|---|
| Obtains history and basic physical. | Generates a differential diagnosis for a disease or condition of public health significance and proposes a treatment plan. | Accurately diagnoses and effectively treats common presentations of diseases/conditions of public health significance with direct supervision. | Accurately diagnoses and effectively treats common presentations of diseases/conditions of public health significance. | Accurately diagnoses and effectively treats complex conditions and unusual presentations of diseases/conditions of public health significance |
| Prescribes indicated medications. | Identifies diseases and conditions that require a public health response | Participates in an appropriate public health intervention for a disease or condition that requires a public health response | Initiates an appropriate public health intervention for a disease or condition that requires a public health response. | |
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| Comments: | | | Not Ye | et Achieved Level 1 |

| ntifies major risk factors andividual patients that all benefit from ventive services. | Assesses relevant risks for disease and injury in individual patients and uses patient information, scientific evidence, and clinical judgment to select | Comprehensively assesses risks for diseases and injuries, and appropriately evidence-based guidelines regarding screening, counselling, preventive | Comprehensively assesses risks for diseases and injuries, and appropriately applies evidence-based guidelines regarding clinical |
|--|--|--|---|
| able preventive vices. | appropriate preventive services for individual patients | medications, and immunization to individual patients | preventive services in individual patients with complex health or social conditions (e.g., hospitalized, homeless, or nursing home patients). |
| | | | |
| | • | vices. services for individual | vices. services for individual immunization to individual |

| Patient Care 17: Clinical P | reventive Services | | | |
|--|--|---|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Locates and appraises evidence from a scientific study related to a patient's health problem | Leads a discussion with peers of the strengths and weaknesses of an individual study relevant to CPS | Participates in the examination of evidence to address a proposed clinical preventive service | Participates in the development or analysis of a guideline to address a proposed clinical preventive service | Systematically examines scientific evidence and develops an evidence-based guideline to address a proposed clinical preventive service. |
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| Comments: | | | Not Ye | et Achieved Level 1 |

| Patient Care 18: Health in the Community - Monitor, diagnose, and investigate community health problems. | | | | |
|--|---|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies common health issues in a community. | Identifies basic health status measures to assess/investigate a community's health. | Selects and describes appropriate health status measures to assess a community's health. | Monitors and interprets single health status indicator of the community, and identifies groups with poorer health. | Monitors and interprets multiple and/or complex health status indicators of the community, and develops and implements appropriate measures to address health improvement needs. |
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| Comments: | | | Not Ye | et Achieved Level 1 |

| Medical Knowledge 1: B | ehavioral Health | | | |
|--|---|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Lists major effects of individual behavior on health. | Identifies social and behavioral factors that affect health of individuals. | Identifies best practice and tools to assess risk behaviors. | Integrates best practices and tools to assess risk behaviors. | Develops and evaluates programs to change health behaviors of individuals. |
| Recognizes that social and behavioral factors influence population health. | Identifies social and behavioral factors that affect health of populations | Describes effective approaches to modify individual health behaviors. | Implements effective approaches to modify individual health behaviors. | |
| | | Describes effective approaches to modify population health behaviors. | Integrates best practices and tools to assess population risk behaviors. | |
| | | Identifies the causes of social and behavioral factors that affect health of populations | Implements effective approaches to modify population health behaviors. | |
| | | | Develops, implements and evaluates programs to promote health and modify individual and population risk behaviors. | |
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| Comments: | | | Not ' | Yet Achieved Level 1 |

| Medical Knowledge 2: Environmental Health | | | | |
|--|---|---|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies major routes of human exposure to environmental toxicants | Identifies common illnesses that may be caused or influenced by environmental exposures. | Describes individual factors that impact susceptibility to adverse health effects from environmental exposures. | Recommends methods of reducing adverse environmental health effects for individuals. | Recommends, interprets, and explains the results of individual environmental monitoring. |
| | Identifies broad environmental factors that may impact the health of a community | Identifies potential population health effects from exposure to chemical, physical, and biological hazards | Identifies sources and routes of environmental exposures to chemical, physical, and biological hazards for defined populations | Interprets and explains population level environmental monitoring results |
| | | | | |
| Comments: | | | Not Yet Achieved | Level 1 |

| Medical Knowledge 3: Bios | tatistics | | | |
|---|---|---|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Recognizes common statistical concepts (e.g. measures of central tendency, p-values, and confidence intervals). | Defines common statistical concepts (e.g. p-values and confidence intervals). | Independently utilizes simple statistical methods (e.g. paired and unpaired t-tests, chi-square tests, and appropriate non-parametric tests) to describe small data sets. | Selects appropriate methods for analysing data; performs data analyses using more advanced statistical methods (e.g. linear and logistic regression) | Independently analyses large data sets using complex statistical methods. |
| | Describes frequently used statistical tests (e.g. paired and unpaired t-tests, chisquare tests, and others). [from PH, added to OM] | Participates in the use of statistical software to perform statistical tests. | Utilizes appropriate software for data management and statistical analyses | |
| | | Understands more advanced statistical methods (e.g. linear and logistic regression) | Recognizes the need to use complex statistical analyses (e.g. survival analysis, repeated measures). | |
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| Comments: | | | Not Yet Achieved | d Level 1 |

| Medical Knowledge 4: Des | criptive Epidemiology | | | |
|---|---|--|--|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies and recognizes basic measures of disease frequency (incidence, prevalence, mortality) and risk (risk ratios, odds ratios). | Knows methods for calculating basic measures of disease frequency and risk. | For a defined population, uses data to calculate measures of disease frequency and one or more risk factors for a specified disease or condition | Uses data to characterize the health of a local population, compares it with that of other populations, identifies localities or groups with poorer health, and identifies and assesses the importance of different risk factors, for at least one disease or condition. | Uses data to fully characterize the health of a population, compares it with that of other populations, identifies localities or groups with poorer health, and identifies and assesses the importance of different risk factors, for a range of diseases and conditions. |
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| Comments: | | | Not Y | et Achieved Level 1 |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|--|--|---|---|
| Distinguishes between experimental and observational studies. | Explains what is meant by validity, bias, confounding, and effect modification. | Critically reviews and interprets epidemiologic literature for commonly used study designs, identifying purpose, population, design, and biases. | Able to design and conduct a basic epidemiological study (defines aims; selects appropriate study designs; collects, analyses, and interprets data; identifies limitations; summarizes and discusses findings). | Independently designs and conducts a complex epidemiological study that addresses confounding and effect modification analytically, suitable for peer-reviewed publication. |
| | Describes commonly used study designs (e.g., randomized controlled trial, cohort, case-control, cross-sectional). Distinguishes between association and causation; lists criteria for causal inference. | | | |
| | | | | |

| 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 (actual or simulated) | 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 local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation) | Participates in local quality improvement initiatives | 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 |
| | | | | |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|--|--|---|---|
| Demonstrates knowledge of care coordination | Coordinates care of patients in routine clinical situations effectively utilizing the roles of the interprofessional teams | Coordinates care of patients in complex clinical situations effectively utilizing the roles of their interprofessional teams | Role models effective coordination of patient-centered care among different disciplines and specialties | Analyses 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 | Role models and advocates for safe and effective transitions of care/hand-offs within and across health care delivery systems, including in outpatient settings | 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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| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|--|---|--|--|
| Identifies components of the complex health care system | Describes the physician's role and how the interrelated components of complex health care system impact patient care | Analyzes how personal practice affects the system (e.g., length of stay, readmission rates, clinical efficiency) | Manages the interrelated components of the complex health care systems for efficient and effective patient care | Advocates for or leads change to enhance systems for high value, efficient, and effective patient care |
| Describes basic health payment systems, including government, private, public, and uninsured care and different practice models | Delivers care informed by patient specific payment model | Utilizes shared decision making in patient care, taking into consideration payment models | Advocates for patient care understanding the limitations of each patient's payment model (e.g., community resources, patient assistance resources) | Participates in advocacy activities for health policy to better align payment systems with high value care |
| | | Identifies resources and effectively plans for transition to practice (e.g., information technology, legal, billing and coding, financial, personnel) | Describes basic elements needed to transition to practice (e.g., contract negotiations, malpractice insurance, government regulation, compliance) | |
| | | | | |

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| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|---|--|---|---|
| Demonstrates how to access and use available evidence, and to incorporate patient preferences and values in order to take care of a routine patient | Articulates clinical questions and elicits patient preferences and values in order to guide evidence-based care | Locates and applies the best available evidence, integrated with patient preference, to the care of complex patients | 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 | Achieved Level 1 |

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| 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) in order to inform goals | Seeks performance data episodically, with adaptability and humility | Intentionally seeks performance data consistently, with adaptability and humility | Role models consistently seeking performance data, with adaptability and humility |
| Identifies the factors that contribute to gap(s) between expectations and actual performance | Analyzes and reflects on the factors that contribute to gap(s) between expectations and actual performance | Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance | Challenges assumptions and considers alternatives in narrowing the gap(s) between expectations 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 |
| | | | | |
| Comments: | | | Not Yet | Achieved Level 1 |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|--|---|---|---|---|
| Identifies and describes potential triggers for professionalism lapses | Demonstrates insight into 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 self and others | Coaches others when their behavior fails to meet professional expectations |
| Describes when and how to appropriately report professionalism lapses, including strategies for addressing common barriers | Takes responsibility for own professionalism lapses | Analyzes complex situations using ethical principles | Recognizes and utilizes appropriate resources for managing and resolving ethical dilemmas as needed (e.g., ethics consultations, literature review, risk management/legal consultation) | Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution |
| Demonstrates knowledge of the ethical principles underlying informed consent, surrogate decision making, advance directives, confidentiality, error disclosure, stewardship of limited resources, and related topics | Analyzes straightforward situations using ethical principles | Recognizes need to seek help in managing and resolving complex ethical situations | | |
| | | | | |

| | Level 3 | Level 4 | Level 5 |
|---|---|---|--|
| 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 situations that may impact others' ability to complete tasks and responsibilities in a timely manner | Takes ownership of system outcomes |
| Recognizes situations that may impact own ability to complete tasks and responsibilities in a timely manner | Proactively implements strategies to ensure that the needs of patients, teams, and systems are met | | |
| | | | |
| | timely manner with appropriate attention to detail in routine situations Recognizes situations that may impact own ability to complete tasks and responsibilities in a | timely manner with appropriate attention to detail in routine situations Recognizes situations that may impact own ability to complete tasks and responsibilities in a timely manner with appropriate attention to detail in complex or stressful situations Proactively implements strategies to ensure that the needs of patients, teams, and systems are | timely manner with appropriate attention to detail in routine situations The detail in routine situations The detail in routine situations The detail in complex or stressful situations The detail in complex or |

| Professionalism 3: Self-Av | Professionalism 3: Self-Awareness and Help-Seeking | | | | |
|--|---|---|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | |
| Recognizes status of personal and professional well-being, with assistance | Independently recognizes status of personal and professional well-being | With assistance, proposes a plan to optimize personal and professional well-being | Independently develops a plan to optimize personal and professional well-being | Coaches others when emotional responses or limitations in knowledge/skills do not meet professional expectations | |
| Recognizes limits in the knowledge/skills of self or team, with assistance | Independently recognizes limits in the knowledge/skills of self or team | With assistance, proposes a plan to remediate or improve limits in the knowledge/skills of self or team | Independently develops a plan to remediate or improve limits in the knowledge/skills of self or team | | |
| | Demonstrates appropriate help-seeking behaviors | | | | |
| | | | | | |
| Comments: | | | Not Yet | Achieved Level 1 | |

| Interpersonal and Communi | 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 behavior to demonstrate respect and establish rapport | Establishes a therapeutic relationship in straightforward encounters using active listening and clear language | Establishes a therapeutic relationship in challenging patient encounters | Easily establishes therapeutic relationships, with attention to patient/family 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 (e.g., language, disability) while accurately communicating own role within the health care system | Identifies complex barriers to effective communication (e.g. health literacy, cultural) | When prompted, reflects on personal biases while attempting to minimize communication barriers | Independently recognizes personal biases while attempting to proactively minimize communication barriers | Role models self- awareness practice while identifying teaching a contextual approach to minimize communication barriers | |
| Identifies the need to adjust communication strategies based on assessment of patient/family expectations and understanding of their health status and treatment options | Organizes and initiates communication with patient/family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying an understanding of the clinical situation | With guidance, sensitively and compassionately delivers medical information; elicits patient/family values, goals, and preferences; and acknowledges uncertainty and conflict | Independently uses shared decision making to align patient/family values, goals, and preferences with treatment options to make a personalized care plan | Role models shared decision making in patient/family communication in situations with a high degree of uncertainty/conflict | |
| | | | | | |
| Comments: | | | Not Ye | et Achieved Level 1 | |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|--|--|---|---|
| Respectfully requests a consultation | Clearly and concisely requests a consultation | Checks own understanding of consultant recommendations | 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 |
| Respectfully receives a consultation request | Clearly and concisely responds to a consultation request | Checks understanding of recommendations when providing consultation | Communicates feedback and constructive criticism to superiors | Facilitates regular health care team-based feedback in complex situations |
| 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 | | |
| | Solicits feedback on performance as a member of the health care team | Communicates concerns and provides feedback to peers and learners | | |
| | | | | |

| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
|---|--|---|---|---|
| Accurately records | Demonstrates organized | Concisely reports | Communicates clearly, | Models feedback to |
| information in the patient record | diagnostic and therapeutic reasoning through notes in the patient record | diagnostic and therapeutic reasoning in the patient record | concisely, in a timely manner, and in an organized written form, including anticipatory guidance | improve others' written communication |
| Safeguards patient personal health information | Demonstrates accurate, timely, and appropriate use of documentation shortcuts | Appropriately selects direct (e.g., telephone, inperson) and indirect (e.g., progress notes, text messages) forms of communication based on context | Produces written or verbal communication (e.g., patient notes, e-mail, etc.) that serves as an example for others to follow | Guides departmental or institutional communication around policies and procedures |
| Communicates through appropriate channels as required by institutional policy (e.g. patient safety reports, cell phone/pager usage) | Documents required data in formats specified by institutional policy Respectfully communicates concerns | 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 (e.g., institution, health care system, field) |
| | about the system | | | |