
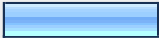



Competency Working Group Survey

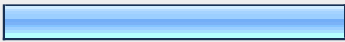
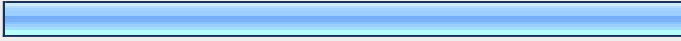
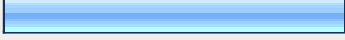
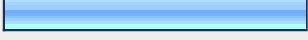
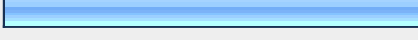
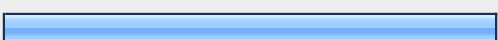

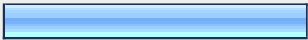
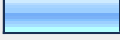

1. Is your organization delivering competency-based or outcomes-based learning or assessment or planning to do so?			
		Response Percent	Response Count
currently doing		75.0%	18
planning to do		16.7%	4
don't do and don't plan to		0.0%	0
unsure/not applicable		8.3%	2
		answered question	24
		skipped question	0

2. What do you see as the barriers to implementing competency-based or outcomes-based learning or assessment?		
		Response Count
		23
		answered question
		23
		skipped question
		1

2. What do you see as the barriers to implementing competency-based or outcomes-based learning or assessment?

1. Challenges of evaluating attainment of competencies - requires many mentors and evaluators. Another barrier is the large-scale curriculum reform required. Faculty and student education as to the value of competency-based education is another.
2. Assessing outcomes at higher levels of learning, ie actual patient encounters.
3. Faculty time for the creation, implementation/oversight and validation of outcomes or assessments.
4. Deciding on a competency framework. Adjusting assessment instruments to the framework (once decided). Maintaining and updating the competency framework. Establishing a review process for competency framework as well as maintaining adherence to the framework.
5. Resources required; data collection, analysis of outcomes
6. lack of clear valid definitions of competency. Lack of structured frameworks for organizing curricula into a competency based format Silo mentality- many of the competencies are transdisciplinary but there is no cooperative development work going on
7. Time involved in changing from objective-based learning
8. competency of the staff
9. -historical alienation to setting formalized objectives -labour and time required
10. traditional course-based organization
11. faculty time and ability to assess whether the competency has been reached
12. Ensuring that there is sufficient underpinning evidence. Attempting to 'value' areas that students see as important, that are not covered through outcomes/competencies. Ensuring that students to not only value the areas that are assessed.
13. Consensus on definitions of competency and grading of competency. Manual mechanisms of assessment that do not scale.
14. Documenting it appropriately within the curricula documents and defining exactly where and when and how aspects of the competencies are delivered.
15. Ensuring we're addressing competencies required by various professional organizations.
16. Lack of software to allow selection of assessment material based on competency or outcome. Lack of manpower to tag assessment material against competency or outcome. Lack of medical education personnel who understand competency or outcomes based assessment.
17. Creating the solutions to track and inform competency progression and improvement.
18. gathering, storing and organizing the additional evidence needed to measure competency.
19. Shared understanding about the competencies among the faculty or assessors responsible for evaluating learners; moving technology from simply an electronic file to a truly interactive process. I honestly disagree with your definition of a portfolio above - in education, portfolio should be thought of more as a "verb" instead of a "noun."
20. Lack of adequate tools for teaching and assessment, particularly in Professionalism, Communication, Systems Based Practice, and Practice Based Learning
21. Flexibility of databases
22. Getting teachers to collect data systematically on discrete episodes of student performance related to a particular competency and recording that.
23. Time, resources, expertise

**3. In what context would you consider using technology standards to support competency-based education and assessment?
Check all that apply.**

		Response Percent	Response Count
Undergraduate education		37.5%	9
Medical education		75.0%	18
Nursing education		37.5%	9
Allied health professions education		33.3%	8
Postgraduate education		45.8%	11
Continuing professional development (continuing education)		54.2%	13
To ensure the ongoing competence of health professions staff within an organization		33.3%	8
Certification or licensure		33.3%	8
Would not consider using technology standards at this time		12.5%	3
Other (please specify)		4.2%	1
		answered question	24
		skipped question	0

4. The working group has drafted the following ways technology standards for competencies might be used (please see [use cases](#)). Please rate these in order of importance for you. (high to low, 7 point scale for each statement)

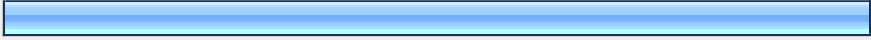
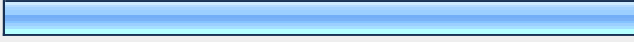
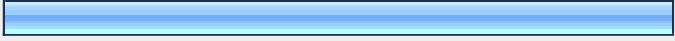

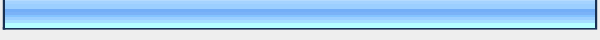

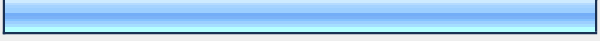
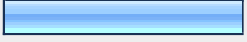

	Not important						Important	Rating Average	Response Count
Search a system to develop a report that details what competencies are addressed in the curriculum	4.3% (1)	0.0% (0)	0.0% (0)	13.0% (3)	21.7% (5)	17.4% (4)	43.5% (10)	5.74	23
Use a machine readable set of competencies or learning outcomes developed by a collaboration or another organization (import it into the system)	8.7% (2)	13.0% (3)	8.7% (2)	17.4% (4)	4.3% (1)	30.4% (7)	17.4% (4)	4.57	23
Map one set of competencies to another	4.3% (1)	0.0% (0)	13.0% (3)	13.0% (3)	26.1% (6)	21.7% (5)	21.7% (5)	5.09	23
Search a system to find curricular components (for example learning activities or assessments) addressing a particular competency	4.3% (1)	4.3% (1)	0.0% (0)	8.7% (2)	17.4% (4)	13.0% (3)	52.2% (12)	5.78	23
Record activities related to and evidence of competence within a portfolio that details the expected competencies and how the individual has progressed relative to each competency.	9.1% (2)	4.5% (1)	0.0% (0)	0.0% (0)	13.6% (3)	18.2% (4)	54.5% (12)	5.77	23
Record performance data as evidence of competence for learning or assessment.	4.3% (1)	4.3% (1)	0.0% (0)	0.0% (0)	17.4% (4)	17.4% (4)	56.5% (13)	6.00	23
Direct a clinician to learning based on gaps in competence (remediation)	4.3% (1)	4.3% (1)	0.0% (0)	17.4% (4)	17.4% (4)	13.0% (3)	43.5% (10)	5.52	23
Compare competence data for a clinician against a benchmark (gap analysis)	13.0% (3)	4.3% (1)	0.0% (0)	8.7% (2)	17.4% (4)	8.7% (2)	47.8% (11)	5.30	23
Export a portfolio or portion of a portfolio	9.5% (2)	4.8% (1)	0.0% (0)	9.5% (2)	23.8% (5)	14.3% (3)	38.1% (8)	5.29	23
Index a competency framework against a controlled vocabulary, terminology, or ontology.	4.3% (1)	4.3% (1)	8.7% (2)	13.0% (3)	4.3% (1)	26.1% (6)	39.1% (9)	5.43	23
Qualify the link between a competency/ontology and a person or curricular component, (e.g. the degree to which a learner has	8.7% (2)	0.0% (0)	0.0% (0)	8.7% (2)	26.1% (6)	21.7% (5)	34.8% (8)	5.48	23

5. Please indicate any additional ways that technical standards for competencies might be used that you feel should be addressed in the near term.

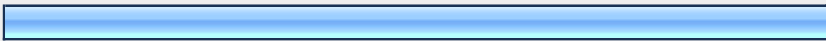

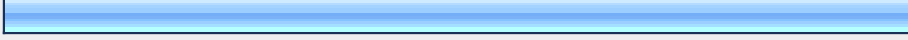
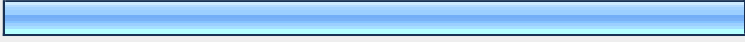


1. Federated search strategies for finding articles, resources or activities linked to competencies.
2. The group could bear in mind that, in trying to be all things to all people, other learning standards have become overly large, confusing and difficult to work with. It is for this sole reason that I have indicated a certain lack of interest in many of the ideas proposed. The elements in a framework should be clear, definitive, unambiguous and dis-ambiguated from each other. The hierarchy should be as simple as is possible for the subject (i.e. not requiring multiple pages of text just for the framework). I feel that many XML schemas for learning objects fail in this ideal and become overly cumbersome to implement. This inability to 'separate the wheat from the chaff' will definitely limit widespread adoption of any framework proposed.

	<i>skipped question</i>	1
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7. For the purpose of this discussion, a competency definition is a statement defining a single competency that is part of a larger framework. From your perspective, what should be included in a competency definition? Check all that apply.

		Response Percent	Response Count
Competency statement (for example, the physician is able to...)		95.7%	22
More detailed narrative description of the competency		69.6%	16
Typing of some kind (knowledge, skill, attitude, role or other type description)		73.9%	17
Conditions of performance (for example, using a body mass index calculator)		56.5%	13
Performance criteria indicating competence (for example, within +/- 5mm Hg accuracy)		65.2%	15
Outcome criteria indicating competence (patient health data)		52.2%	12
Recommended evaluation and assessment methods		65.2%	15
The ability to represent a competency in multiple languages within a single framework		26.1%	6
Other (please specify)		4.3%	1
	<i>answered question</i>		23
	<i>skipped question</i>		1

8. For the purpose of this discussion, a competency framework is a set of competencies that are interrelated. From your perspective, what should be included in a competency framework? Check all that apply.

		Response Percent	Response Count
Description of hierarchical relationships among competencies (parent/child)		90.9%	20
Description of non-hierarchical relationships (e.g. equivalent to, similar to, enabling, prerequisite)		68.2%	15
Groupings of competencies under a category, role, or other organizational structure		100.0%	22
Narrative descriptions/introduction for categories or other components		81.8%	18
References/associations to outside resources		45.5%	10
Other (please specify)		4.5%	1
	answered question		22
	skipped question		2

9. How useful would you find technology standards for a competency framework?

	Not useful						Useful	Rating Average	Response Count
I would find technology standards:	0.0% (0)	0.0% (0)	4.3% (1)	17.4% (4)	17.4% (4)	26.1% (6)	34.8% (8)	5.70	23
	answered question								23
	skipped question								1

7. For the purpose of this discussion, a competency definition is a statement defining a single competency that is part of a larger framework. From your perspective, what should be included in a competency definition? Check all that apply.

1. Define different levels of achievement based on the level of the learner (beginner, intermediate, advanced)

8. For the purpose of this discussion, a competency framework is a set of competencies that are interrelated. From your perspective, what should be included in a competency framework? Check all that apply.

1. Evidence base (related to references)