

Dermatology Milestones

ACGME International, Inc. (ACGME-I)



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Dermatology Milestones

The Milestones are designed only for use in evaluation of residents and fellows in the context of their participation in ACGME-I-accredited residency and fellowship programs. The Milestones provide a framework for the assessment of the development of the resident or 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 competence, nor are they designed to be relevant in any other context.

Understanding Milestone Levels and Reporting

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

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert resident or 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, more junior residents/fellows may achieve higher levels early in their educational program just as more senior residents/fellows may be at a lower level later in their educational program. There is no predetermined timing for a resident or fellow to attain any particular level. Residents and 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 resident/fellow.

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

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 the Milestones as a sole assessment in high-stakes decisions. Level 5 is designed to represent an expert resident or 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. ACGME-I and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

Examples are provided for some milestones within this document. Note: The examples are not the required element or outcome; they are provided as a way to share the intent of the element.

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

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

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

| Systems-Based Practice | 1: Patient Safety and Qual | ity 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 their families (simulated or actual) | Discloses patient safety events to patients and their families (simulated or actual) | others in the disclosure of |
| 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 |
| | | $\overline{\mathbf{A}}$ \Box \Box | | |
| Comments: | | | Not Yet | Completed Level 1 |
| Selecting a responsible middle of a level milestones in that levels have been demonstrated. | implies that at level and in lower | Selecting a response l between levels indicat in lower levels have be demonstrated as well milestones in the high | es that milestones een substantially as some | |

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| Patient Care 1: Medical D | ermatology | | | |
|--|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Obtains basic dermatologic history and physical exam | Evaluates patients with common dermatologic conditions, with assistance | Independently evaluates patients with common dermatologic conditions | Independently evaluates patients with complex dermatologic conditions | Independently evaluates and manages patients with rare, atypical, or |
| Identifies management options for common dermatologic conditions | Manages patients with common dermatologic conditions, with assistance | Independently manages patients with common dermatologic conditions | Independently manages patients with complex dermatologic conditions and/or comorbidities | refractory dermatologic conditions |
| | | | | |
| Comments: | | | Not Yet Co Not Yet As | ompleted Level 1 |

| Patient Care 2: Pediatric | Dermatology | | | |
|--|---|---|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Obtains basic dermatologic history and physical exam in a pediatric patient | Evaluates patients with common pediatric dermatologic conditions, with assistance | Independently evaluates patients with common pediatric dermatologic conditions | Independently evaluates patients with complex pediatric dermatologic conditions | Independently evaluates and manages pediatric patients with rare, |
| Identifies management options for common pediatric dermatologic conditions | Manages patients with common pediatric dermatologic conditions, with attention to age, weight, and psychosocial considerations, with assistance | Independently manages patients with common pediatric dermatologic conditions with attention to age, weight, and psychosocial considerations | Independently manages patients with complex pediatric dermatologic conditions and/or comorbidities, with attention to age, weight, and psychosocial considerations | atypical, or refractory dermatologic conditions |
| Describes the challenges of procedures on pediatric patients | Assists in procedures on pediatric patients | Performs basic procedures on pediatric patients with assistance using patient comfort strategies | Independently performs basic procedures on pediatric patients using patient comfort strategies | Independently performs a range of procedures in pediatric patients using patient comfort strategies |
| | | | | |
| Comments: | | | | ompleted Level 1 |

| Patient Care 3: Dermato | logic Procedures and Surge | ery | | |
|--|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Performs pre-operative assessment for basic procedures, with guidance | Performs pre-operative assessment for basic procedures | Performs pre-operative assessment and counseling of risk for excisions and layered closures, with guidance | Performs pre-operative assessment and counseling of risk for complex procedures | |
| Performs basic procedures, with guidance | Performs basic procedures | Performs excisions and layered closures, with guidance | Performs excisions with layered closures; designs flaps and grafts where indicated | Performs flaps and grafts, micrographic surgery, or other advanced procedures |
| Provides basic wound care instructions | Provides anticipatory guidance for procedural outcomes | Identifies and manages procedural complications, with guidance | Identifies and manages procedural complications | |
| | | | | |
| Comments: | | | | ompleted Level 1 |

| Patient Care 4: Dermator | oathology | | | |
|---|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies key structural and cellular components of the skin, hair, and nails | Identifies microscopic features of common neoplasms and inflammatory reaction patterns | Interprets microscopic features of common disorders of the skin, hair, and nails, with guidance | Independently interprets microscopic features of common and uncommon disorders of the skin, hair, and nails | Independently interprets atypical or subtle microscopic features of disorders of the skin, hair, and nails |
| Reviews reported histologic findings | Performs clinicopathologic correlation, with guidance | Independently performs clinicopathologic correlation for straightforward presentations | Independently performs clinicopathologic correlation for atypical or complex presentations | |
| | | | | |
| Comments: | | | Not Yet C Not Yet A | ompleted Level 1 |

| Patient Care 5: Cosmetic | : Care | | | |
|---|---|---|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies patients with a cosmetic concern | Gathers patient data, including cosmetic and relevant medical history | Evaluates patient and recommends interventions to meet patient goals for cosmetic care, with assistance | Independently evaluates routine patient and recommends interventions to meet patient goals for cosmetic care | Independently evaluates and counsels the patient with complex cosmetic concerns |
| | Describes available cosmetic treatments | Selects cosmetic treatment, with assistance | Delivers cosmetic treatment and manages complications, with assistance | Delivers cosmetic treatment and manages complications |
| | | | | |
| Comments: | | | | ompleted Level 1 |

| Patient Care 6: Diagnost | ics | | | |
|--|---|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Describes indications and steps involved in in- office testing | Selects and performs in- office tests, with assistance | Independently selects and performs in-office tests; interprets in-office diagnostic tests, with assistance | Independently selects, performs, and interprets a full spectrum of in- office tests | Evaluates the application of novel and emerging diagnostic tests |
| Describes laboratory, imaging, and other diagnostic testing used in dermatology | Selects laboratory, imaging, and other diagnostic tests for common presentations, with assistance | Independently interprets laboratory, imaging, and other diagnostic tests for common presentations | Independently interprets laboratory, imaging, and other diagnostic tests for complex or rare presentations | |
| | | | | |
| Comments: | | | Not Yet C Not Yet As | ompleted Level 1 |

| Patient Care 7: Critical T | hinking/Differential Diagno | sis | | |
|--|--|--|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Develops a differential diagnosis for common presentations, with guidance | Independently develops a differential diagnosis for common presentations | Develops a prioritized differential diagnosis for complex presentations and identifies clinical reasoning errors | Pursues and synthesizes additional information to reach high-probability diagnoses with continuous re-appraisal | Integrates additional data and coaches others to minimize clinical reasoning errors |
| | | | | |
| Comments: | | | Not Yet C Not Yet A | ompleted Level 1 |

| Patient Care 8: Therapeu | itics Management | | | |
|---|---|--|---|---|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies patients who are candidates for topical and systemic therapy | Provides appropriate counseling regarding adverse effects and reasonable risks | Consistently evaluates treatment response and counsels patients on expectations of therapy | Consistently identifies refractory disease and independently escalates therapy as necessary | Independently manages rare and complex diseases based on emerging evidence |
| Identifies available treatment options for common skin disorders | Selects treatment options for common skin disorders, with guidance | With guidance, selects therapeutic modalities for common and uncommon skin disorders while balancing risks and benefits | Independently selects therapeutic modalities for common and uncommon skin disorders based on stepwise therapeutic ladders | Evaluates the application of novel and emerging therapeutic modalities or unique applications of existing drugs |
| Identifies therapeutic agents which require laboratory monitoring | Selects appropriate laboratory monitoring for systemic treatments, with guidance | Selects appropriate laboratory monitoring and manages adverse effects, with guidance | Independently orders appropriate laboratory monitoring and manages adverse effects | Develops systems for safety monitoring |
| | | | | |
| Comments: | | | Not Yet C Not Yet A | ompleted Level 1 |

| Medical Knowledge 1: K | nowledge of Dermatologic | Disease | | |
|---|--|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Describes fundamental cutaneous anatomy and physiology | Describes pathophysiology of common skin disorders | Demonstrates knowledge of the pathophysiology of complex skin disorders | Synthesizes knowledge of pathophysiology of skin disorders from multiple sources | Teaches emerging concepts in cutaneous pathophysiology |
| Demonstrates knowledge of the clinical features of common dermatologic disorders | Demonstrates knowledge of the clinical features, associations, treatments, and expected course of common dermatologic disorders | Demonstrates knowledge of the clinical features, associations, treatments, and expected course of uncommon and complex dermatologic disorders | Demonstrates comprehensive knowledge of the clinical features, associations, treatments, and expected course of common, uncommon, and complex dermatologic disorders | Teaches emerging concepts in clinical features, associations, treatments, or expected course of common, uncommon, and complex dermatologic disorders |
| | | | | |
| Comments: | | | | ompleted Level 1 |

| Medical Knowledge 2: V | sual Recognition | | | |
|---|---|---|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Identifies common diseases with characteristic findings | Identifies uncommon diseases with characteristic findings | Identifies variable presentations of common disease | Identifies variable presentations of uncommon and rare disease | |
| Defines primary lesions and secondary features | Describes morphology, with assistance | Describes morphology with fluency Integrates visual diagnostic tools (e.g., dermoscopy), with assistance | Identifies subtle morphologic variability Independently integrates visual diagnostic tools | Integrates visual diagnostic tools for a wide range of diagnoses of the skin, hair, and nails |
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| Comments: | | | | completed Level 1 |

| knowledge of common that lead patient safety events events | to patient safety patient (simula | safety events patient sa ted or actual) and offers prevention | fety events and process | |
|--|--|---|---|--|
| knowledge of common that lead patient safety events events | to patient safety patient (simula | safety events patient sa ted or actual) and offers prevention | and process s error systems to n strategies safety even | ses to modify prevent patient |
| Demonstrates Reports | | | , | |
| | nrough of patien nal reporting patients | nt safety events to events to | patients and others in the lies (simulated patient safe | s or mentors e disclosure of ty events |
| knowledge of basicimprovenquality improvement(e.g., conmethodologies andvaccinat | | mprovement required to es develop, i and analy | o identify, assesses q | nt initiatives at onal or |
| | | | | |

| Systems-Based Practice 2: System Navigation for Patient-Centered Care | | | | | |
|---|---|--|---|---|--|
| 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 the interprofessional teams | Role models effective coordination of 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 | Role models and advocates for safe and effective transitions of care/hand-offs within and across health care delivery systems, including outpatient settings | Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes | |
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| Comments: | | | Not Yet C | ompleted Level 1 | |

| Systems-Based Practice 3: Physician Role in Health Care Systems | | | | | | |
|--|--|--|---|---|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | | |
| Identifies key components of the complex health care system (e.g., hospital, skilled nursing facility, finance, personnel, technology) | 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 (e.g., length of stay, readmission rates, clinical efficiency) | Manages various components of the complex health care system to provide efficient and effective patient care and transition of care | Advocates for or leads systems change that enhances high value, efficient, and effective patient care and transition of care | | |
| Describes the principles of cost-effective care | Delivers care with consideration of each patient's payment model | Engages with patients in shared decision making, informed by cost-effective care principles | Advocates for patient care needs (e.g., community resources, patient assistance resources) regardless of ability to pay | Participates in health policy advocacy activities | | |
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| Comments: | | | Not Yet C | ompleted Level 1 | | |

| Practice-Based Learning | and Improvement 1: Evide | ence-Based and Informed P | Practice | |
|--|---|--|---|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Demonstrates how to access and use available evidence, and 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 C | ompleted Level 1 |

| 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 which contribute to gap(s) between expectations and actual performance | Analyzes and reflects on the factors which 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 | |
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| Professionalism 1: Professional Behavior and Ethical Principles | | | | | |
|---|---|--|--|---|--|
| 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 | Recognizes need to seek help in managing and resolving complex ethical situations | Recognizes and utilizes appropriate resources for managing and resolving ethical dilemmas as needed (e.g., ethics consultations, literature | Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their | |
| 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 | Analyzes complex situations using ethical principles | review, risk management/legal consultation) | resolution | |
| | | | | | |
| Comments: | | | Not Yet C | ompleted Level 1 | |

| Professionalism 2: Acco | untability/Conscientiousne | ess | | | | |
|---|---|---|---|---------------------------------------|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 | | |
| Takes responsibility for failure to complete tasks and responsibilities, identifies potential contributing factors, 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 situations that may impact others' ability to complete tasks and responsibilities in a timely manner | Takes ownership of system outcomes | | |
| Responds promptly to requests or reminders to complete tasks and responsibilities | 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 | | | | |
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| Comments: | | | Not Yet C | ompleted Level 1 | | |

| Professionalism 3: Self-A | Awareness and Help-Seekir | ng | | | | |
|---|--|---|--|---|--|--|
| 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 and demonstrates appropriate help-seeking behaviors | 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 | | | |
| | | | | | | |
| Comments: | | | Not Yet C | ompleted Level 1 | | |

| Interpersonal and Communication Skills 1: Patient and Family-Centered Communication | | | | |
|--|--|---|--|--|
| Level 1 | Level 2 | Level 3 | Level 4 | Level 5 |
| Uses language and nonverbal 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 while identifying 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 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, including those with a high degree of uncertainty/conflict |
| | | | | |
| Comments: | | | Not Yet C | ompleted Level 1 |

| Interpersonal and Communication Skills 2: Interprofessional and Team Communication | | | | | |
|--|---|---|---|---|--|
| 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 | | | |
| 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 | Communicates feedback and constructive criticism to superiors | Facilitates regular health care team-based feedback in complex situations | |
| | | | | | |
| Comments: | | | Not Yet C | ompleted Level 1 | |

| 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, concisely, timely, and in an organized written form, including anticipatory guidance | Models feedback to improve others' written communication |
| Safeguards patient personal health information | Demonstrates accurate, timely, and appropriate use of documentation shortcuts Documents required data in formats specified by institutional policy | Appropriately selects direct (e.g., telephone, in- person) and indirect (e.g., progress notes, text messages) forms of communication based on context | Achieves written or verbal communication (e.g., patient notes, email) 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) | 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 (institution, health care system, field) |
| | | | | |