



**Association of Professors of Dermatology  
Professionalism and Communication Journal Entry Competency Assessment (ProCom JECA)**

**Background:** Residency Clinical Competency Committees are charged with assessing resident competency and milestone performance in professionalism and communication milestones. It can be challenging to predict, structure, or evaluate in the moment patient encounters that challenge a resident's professionalism or communication skills. Nonetheless, exhibiting competency in challenging encounters is important for professionalism and communication milestone progression. Residents can capture such experiences that may not have been directly evaluated by a faculty member through reflective writing. Development of competency can be assessed through faculty assessment of these brief reflective journal entries.

**Goal:** Evaluation of resident-composed reflective journal entries for assessing specific professionalism and communication competencies in dermatology.

**Assignment:** Entries are completed by each resident and submitted to his/her program director at designated points throughout the three years of dermatology training. The number of entries and frequency of deadlines for submission are to be determined by each program. Recommended use includes at least 1-2 reflective entries per topic area each year, with each entry less than 1 typed page in length. Residents may either independently select the scenario to reflect, or may alternatively be assigned the scenario upon which to reflect by a faculty member or program director. Each entry should begin by setting the scene or recapping the event, followed by identification of the professionalism or communication challenge, reflection about success or missed opportunities, reflection on what was learned from the encounter, and how to do things differently/better in the future, when pertinent.

**Assessment:** At the time of submission to the program, the program director or his/her designee will be responsible for reviewing the resident submissions. New submissions will be assessed using the **"Professionalism and Communication Journal Entry Competency Assessment (ProCom JECA)" form**. Residents should expect feedback from each collective review.

**Structure:** This tool is designed for the residents to independently write journal entries spanning the following dermatology milestone-based topics:

**1. Difficult patient/Unhappy patient encounter**

-Describe a difficult/unhappy patient encounter, emphasizing the reason the encounter was difficult, successes in defusing the situation or missed opportunities, and reflect on your own opportunities to improve or lessons learned.

(Example: Patient visibly and verbally very upset towards you because you are 45 minutes late with his/her appointment time)

**2. Encounter involving health care disparities**

-Describe a patient encounter in which health care disparities played a role in patient management and any successes in adjusting to the disparities or missed opportunities. Reflect on your own opportunities to improve or lessons learned.

(Example: Patient is uninsured and cannot afford the best option for treatment, but still needs treatment)

**3. Encounter that challenged your personal values.**

-Describe a patient encounter that challenged your personal values (for example, a patient chose a treatment that you think wasn't the correct or best choice). Explain why it challenged you, reflect on the lessons learned and describe how this will affect future patient encounters.

(Example: Patient's medical decision maker chooses treatment approach that you believe is more aggressive than the patient should have based on limited life expectancy)

**4. Encounter of a challenging case due to race/sex/creed/sexuality/mental status/etc.**

-Describe a patient encounter that was complicated by a patient's race, sex, creed, sexuality or mental status and how these challenges were overcome or missed opportunities to overcome the challenge. Explain how this will affect future similar challenging cases. Reflect on your own opportunities to improve or lessons learned.

(Example: Severely developmentally delayed patient is uncooperative with your exam)

**5. Encounter of a patient who required your advocacy**

-Describe a situation in which the patient benefited or could have benefited from your action to advocate on their behalf regarding their care. Describe your own opportunities to improve, lessons learned, and how this experience will aid in your advocacy for future patients.

(Example: You successfully appeal to a patient's insurance who initially denied your recommended therapy)

**6. Encounter of a challenging staff interaction.**

-Describe a situation in which you experienced a difficult interaction with a staff member, how this situation concluded and if a patient was affected. Describe missed opportunities or successes in addressing the situation. Describe your own opportunities to improve, lessons learned, and how this experience will positively impact staff interactions in the future.

(Example: A medical assistant complains that you always seem to be more critical of her mistakes compared to those made by the other medical assistants)

**7. Encounter where you had to communicate emotionally difficult information**

-Describe a situation in which you had to communicate emotionally difficult information to a patient or patient's family. Describe your opportunities to improve or your successes in communicating your information. Describe your own opportunities to improve, lessons learned, and how this experience will positively impact communication of emotionally difficult information in the future.

(Example: You are informing an established melanoma patient that you now detect a new enlarged lymph node on exam)



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**Professionalism and Communication Journal Entry Competency Assessment (ProCom JECA)**

Resident: \_\_\_\_\_ Derm Yr: \_\_\_\_\_ # Entries Reviewed

Evaluator: \_\_\_\_\_ Date: \_\_\_\_\_

Entry Focus:  Difficult/Unhappy Patient  Disparities  Personal Values  Patient Advocacy  Staff Interaction  
 Race/Sex/Creed/Sexuality/Mental Status  Bad News  Additional Competency Journal Entry Topics

V.1B

1A. Assignment Completed by Due Date  No  Yes | 1B. Competent describing the conflict(s)  No  Yes | 1C. Competent reflection on all conflict(s)  No  Yes

V.3

**2. Evidence of Growth in Addressing Professionalism and Communication Challenges**

**2A. Empathy and Compassion (  No New Entries on this Subject this Review )**

Discussed patient encounter, but not specific to reported focus for any entry. No entry despite due.	Only some entries were specific to reported entry focus. 2A demonstrated some conclusions incorrect.	Identify missed opportunities. Some entry concepts not clearly explored.	Demonstrated empathy or compassion in at least one difficult situation. Entries clearly explored.	Demonstrated empathy or compassion in multiple difficult situations. Entries clearly explored.	
1	2	3	4	5	6
Below Expected 1 <sup>st</sup> Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

V.3

**2B. Patient Dignity and Autonomy (  No New Entries on this Subject this Review )**

Discussed patient encounter, but not specific to reported focus for any entry. No entry despite due.	Only some entries were specific to reported entry focus. 2B demonstrated for basic/easy scenarios.	Identify missed opportunities. Some entry concepts not clearly explored. Identifies where patient values differ from own.	Demonstrated sensitivity to patient dignity/autonomy in at least one difficult situation. Entries clearly explored.	Demonstrated sensitivity to patient dignity/autonomy in multiple difficult situations. Entries clearly explored.	
1	2	3	4	5	6
Below Expected 1 <sup>st</sup> Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

V.3

**2C. Advocating for Patients (  No New Entries on this Subject this Review )**

Discussed patient encounter but not specific to reported focus for any entry. No entry despite due.	Identify miss opportunities specific to reported entry focus. 2C demonstrated for basic/easy scenarios.	Identifies appropriate resources for patient advocacy. Basic advocacy attempted with some successes.	Demonstrates some attempts at advocacy with limited success. Includes at least one advanced scenario. Entries clearly explored.	Examples of successful advocacy for individual patients including basic and advanced examples. Reactive to patient concerns.	Advocates for patients proactively.
1	2	3	4	5	6
Below Expected 1 <sup>st</sup> Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

V.3

**2D. Identifying Health Care Disparities (  No New Entries on this Subject this Review )**

Discussed patient encounter, but not specific to reported focus for any entry. No entry despite due.	Only some entries were specific to reported entry focus.	Identify 2D in local population. Some entry concepts now clearly explored.	Reflected on strategies to overcome health care disparities for at least one patient. Entries clearly explored.	Reflected on strategies to overcome health care disparities for multiple patients. Entries clearly explored.	
1	2	3	4	5	6
Below Expected 1 <sup>st</sup> Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

V.3

**2E. Managing Patient Conflict (  No New Entries on this Subject this Review )**

Discussed patient encounter, but not specific to reported focus for any entry. No entry despite due.	Only some entries were specific to reported entry focus. 2E demonstrated for basic/easy scenarios.	Identify missed opportunities. Some entry concepts not clearly explored.	Demonstrated effective strategies to manage patient conflict in at least one difficult situation. Entries clearly explored.	Demonstrated effective strategies to manage patient conflict in multiple difficult situations. Entries clearly explored.	
1	2	3	4	5	6
Below Expected 1 <sup>st</sup> Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

IV.3

**2F. Managing Staff Conflict (  No New Entries on this Subject this Review )**

Discussed patient encounter, but not specific to reported focus for any entry. No entry despite due.	Only some entries were specific to reported entry focus. 2F demonstrated for basic/easy scenarios.	Identify missed opportunities. Some entry concepts not clearly explored.	Demonstrated effective strategies to manage staff conflict in at least one difficult situation. Entries clearly explored.	Demonstrated effective strategies to manage staff conflict in multiple difficult situations. Entries clearly explored.	
1	2	3	4	5	6
Below Expected 1 <sup>st</sup> Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

IV.2

**2G. Communicating Emotionally Difficult Information (  No New Entries on this Subject )**

Discussed patient encounter, but not specific to reported focus for any entry. No entry despite due.	Identify missed opportunities witnessed specific to reported entry focus. Some insight missing. Wasn't delivered.	Attempts to deliver news with some successes. Opportunities to improve are identified and explored.	Effectively communicates with patients in more than one basic and advanced difficult conversations. Entries clearly explored.	Reflects on customization to specific patient when communicating difficult information to patients.	
1	2	3	4	5	6
Below Expected 1 <sup>st</sup> Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

**3. OVERALL JOURNAL ENTRY COMPETENCY ASSESSMENT (  Not observed )**

1	2	3	4	5	6	7	8	9	10
Below Expected 1 <sup>st</sup> Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level				

FEEDBACK AND COMMENTS TO HELP THE RESIDENT IMPROVE PERFORMANCE: