



# It depends on the supervisor

## Relevance of resident evaluations

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From the beginning of my clerkship, I questioned the relevance of evaluations. I don't mean to say that students don't deserve feedback—far from it. It's just that, in my experience, the number of evaluations has a deleterious effect on real feedback. In many cases, the person doing the evaluation simply checks boxes beside criteria that have no bearing on the rotation or the clinical context.

Some rotations require an evaluation after each day or even after each half-day. This puts more pressure on the student and on the supervisor, who has very little on which to base a rigorous evaluation.

Of course I am aware that students must be evaluated, and that the requirements of accreditation are often used to justify evaluations of all kinds. What bothers me is the impression that all of these evaluations are being performed for administrative purposes, without any real benefit to the student. In fact, they are a substantial source of stress for many students; we regularly see students attempt to collude with their supervisors for the sole purpose of winning a few checks in the “exceeds expectations” box.

My journey through academe has been atypical and I have spent longer than usual in school; as a result, I see evaluations as having mitigated importance. I do not believe they accurately portray a student's level of competence. In my opinion, determining whether a student is pleasant and agreeable to work with is what automatically determines extra points on evaluations.

During my clerkship, I even had a colleague who wrote to the other clerks in our year after his rotation to recommend topics of conversation with the supervisors. He suggested that if they wanted a better evaluation from the pediatrics supervisor, for example, they should talk about sailing. If I had to guess, I would say that he got a good evaluation.

Clearly, some students will stand out because of their knowledge, but we all know that asking questions to which we already know the answer, while looking erudite, is an art. In fact, *JAMA* published an article in 2009 on the art of what is known as *pimping*.<sup>1</sup>

Supervisors all have their own approaches to evaluation. Some throw themselves into it and take the time to write a few comments. Others see evaluations as an administrative chore to cross off their lists.

And chance plays a role too. Which supervisor completes the evaluation at the end of the last week of the rotation will no doubt affect the number of boxes ticked in each column.

Just between us, very few supervisors ever check “requires further work to meet expectations,” if only because this evaluation involves further work with the university for them. We can probably all think of one colleague with limited social skills and questionable judgment, to whom we would never send a friend or relative—a colleague who slipped through the generous open spaces in the evaluation net.

And we all know supervisors whose pencil veers generously toward the “exceeds expectations” column. In between, some supervisors have to be deliriously happy or deeply disappointed to wander away from the “meets expectations” column.

One “exceeds expectations” from a demanding supervisor is worth far more than an entire column of “exceeds expectations” from a more lax supervisor. But, at the end of the day, this won't matter on our academic record.

After all this, I conclude that the skills of a resident transcend the weekly—or even daily—written evaluations. I wish I had a miracle solution for improving evaluations, but I do not. One possible solution might be longitudinal monitoring by a small group of supervisors who know the resident well and who can act as mentors to him or her. Why have the same type of evaluation for all specializations, when their clinical and academic realities are so different?

One final question: how do you evaluate the students and residents you work with?

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### Acknowledgment

This article first appeared in a blog on [ProfessionSanté.ca](http://ProfessionSanté.ca).

### Competing interests

None declared

### Reference

1. Detsky AS. The art of pimping. *JAMA* 2009;301(13):1379-81. Erratum in: *JAMA* 2009;301(17):1770.

La version en français de cet article se trouve à [www.cfp.ca](http://www.cfp.ca) dans la table des matières du numéro de février 2017 à la page 172.

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