

Learner Assessment of Clinical Teachers (LACT) Tool Qs & As – January 23, 2023

The Learner Assessment of Clinical Teachers (LACT) tool has been implemented at the Temerty Faculty of Medicine for both clinical clerks and postgraduate trainees since July 2020. An example of the tool can be found in **Appendix 1**.

1. How is the information collected on the LACT form to be used?

Data collected from the LACT will be consolidated and provided back to individual teachers and education leaders to inform teacher performance, both in terms of any teacher supports required or recognition for exceptional performance. *It is important to note that the LACT is intended as one of multiple measures used to assess teacher performance.*

2. How will departments, divisions, programs etc. receive their consolidated LACT data based on assessments from both MD and PGME learners?

The Temerty Faculty of Medicine (TFOM), through the Data Management Advisory Group (DMAG), has developed an interactive dashboard for education leaders in clinical departments to view and monitor aggregate teacher performance, based on site and/or division (where applicable) using **POWER BI**. Specific education leaders within each clinical department, and their delegates, will receive an interactive web-based dashboard of LACT results for 2021-22 and for future academic years. Access to the dashboards will be provided via a weblink supplied by PGME. In addition, PDFs of individual teacher reports will also be made available by PGME for distribution to clinical teachers. PGME will assist departments with the distribution of reports if required.

DMAG is continuing to consult on appropriate intervals for reporting (e.g. annually, twice a year, etc.). Currently the consolidated data is reported annually.

3. What will be the threshold for generating a report in LACT and how will the confidentiality of learners be protected?

The current threshold for generating a LACT report is a minimum of 3 LACT evaluations. Every effort is being made to protect the confidentiality of learners and encourage honest and constructive feedback to clinical teachers. Teachers only receive aggregate data.

4. What is the threshold for identifying teachers in need of support, and teachers who demonstrate superior performance?

For the 2021-22 LACT reporting cycle, there is a 2-tier threshold for the identification of clinical teachers who may need monitoring and/or support. The two tiers reflect a variation in the number of data points.

- For those with 5 or more assessments – where 33% of their assessments are rated poor, unsatisfactory or minimally acceptable it is suggested that they may “Need Attention”
- For those with between 3 and 4 assessments where 33% of their assessments are rated poor, unsatisfactory or minimally acceptable it is suggested that they may “Need Monitoring”

For each teacher captured in the tiers outlined above, DMAG will:

- Review the qualitative data to better understand the areas of strength and improvement of the faculty.
- Review the performance from the previous year (including comments) to determine if this is an ongoing issue or a new concern.
- Provide a performance summary to the Department(s) outlining the insights gained from the qualitative and year over year review of the data.

Teachers who achieve 100% of their overall ratings as Superior with a minimum of 5 assessments are identified as teachers who demonstrate superior performance.

5. Are existing teacher reports in POWER and MedSIS still available?

Current processes for accessing individual teacher reports , based on aggregate information from MD clinical teacher assessments and PGME clinical teacher assessments will remain in MedSIS and POWER, respectively.

The vision for the future is that clinical teachers will be able to log in to an online portal to retrieve their own LACT report, consistent with guidelines about reporting thresholds. Online reporting would allow teachers to be able to filter and interact with reports if they teach multiple types of learners, and/or at multiple sites as long as there are enough assessments to meet the minimum threshold in each category that they are filtering on. It is also expected that teachers could download copies of their assessment summaries (aggregated with at least the minimum number of assessments) for ease of personal use. The Vice Dean, Medical Education is currently leading a Medical Education Information Technology Transformation (MEITT) initiative and has recently formed an Advisory Committee to review optimum IT solutions for medical education, including LACT reporting, in future.

6. How will PGME learners access their consolidated LACT reports based on assessments in MedSIS and Elentra?

Work is underway to generate dashboards for PGME learners for their assessments of their clinical teaching. The dashboards will be to be available to Program Directors, Competency Committees and other education leaders. Individual PDFs of clinical teaching performance summary (aggregated with at least the minimum number of assessments) will also be made available to PGME learners based on assessments completed in Elentra and MedSIS. These dashboards and reports should be available early in 2023.

7. What should education leaders do when they've been advised of concerning results about a Clinical Teacher based on LACT assessments?

Education leaders should assess results of LACT evaluations on a case by case basis within the context of multiple departmental measures used to assess teacher performance. The performance summaries will offer insights of the areas that need further support identified via the LACT data.

In addition to reports on LACT results for Departments and individual teachers, a number of resources are available to support clinical teachers both through the [Temerty Faculty of Medicine](#) and the [Centre for Faculty Development](#)

8. What if a learner wants to raise issues of concern that might need immediate attention or action through a LACT?

Learners will be strongly advised to report urgent and/or concerning issues using other mechanisms such as TFOM learner mistreatment disclosure and reporting pathway, reaching out to education leaders, mentors, and other support mechanisms.

The LACT form has a link directly to the [Learner Mistreatment](#) resources.

9. What is the unit of comparison for an individual teacher's results within a department.

In general, the validity of comparisons increases with the size of the peer group, as a larger comparable group will likely include a more diverse, representative sample. For this reason, individual teachers within a department are compared to the performance of all clinical teachers in that department, rather than to a subset of teachers based in a particular division or at a particular site.

Appendix 1
University of Toronto, Department of XX
Learner Assessment of Clinical Teacher (LACT)

Rotation Service Period

Trainee Teacher/Supervisor

Location/Site

PREAMBLE

About your assessment of teachers:

- Based on the described encounter(s) only.
Feedback to teachers is an important professional obligation of learners.
- Your assessments are confidential – with only anonymized aggregated summaries provided.

How we will use the information:

- Ratings of 2 or less trigger an automatic email alert to program leaders.
- Teachers, sites and clinical departments use teacher assessment to monitor, support and improve teacher practices and the learning environment.
- Aggregated data is used to evaluate the teacher/faculty, rotation, and sites on a regular basis.

Rating Scale:

- 1-5 (low to high)
Not Applicable (n/a) is permissible for all ratings EXCEPT Overall Overall rating of 3 is
"Minimum acceptable level of performance"

Serious Incidents (i.e. Discussing, Disclosing or Reporting Mistreatment)

This LACT form is **not** designed as a rapid response mechanism for serious incidents.

If you have **experienced or witnessed** learner mistreatment or a serious incident of unprofessionalism in the MD Program/PGME learning environment or the MD Program/PGME community, please use the following link to learn more about our supports and resources (**including an anonymous or confidential online tool designed to allow medical learners at the Temerty Faculty of Medicine at University of Toronto to disclose or report mistreatment**). [Learner Mistreatment](#)

Learner Assessment of Clinical Teacher

Teaching context (please select one):

- Ambulatory/clinic
- Emergency/urgent care
- Inpatient/ward
- Diagnostics (Lab/Imaging)
- Office
- Operating room
- Seminar/workshop
- Simulation
- Virtual care (i.e. phone, video)
- Other: (please specify below)

If Other Teaching context, please specify here:

Please estimate the amount of contact you had with this teacher based on the description below:

- Brief** (e.g. single clinic, single lab/microscope session, a couple of hours on-call, short OR shift)
- Moderate** (e.g. 2-4 clinics, 1-2 weeks in lab/microscope sessions, 1-2 on-call shift, 1-2 OR shifts, 1-2 weeks rotation)
- Extensive** (e.g. 5+ clinics, 3+ weeks in lab/microscope sessions, 3+ OR or on-call shifts, 3+ weeks rotation)

ASSESSMENT OF TEACHING

	Poor	Unsatisfactory	Minimally Acceptable	Good	Superior
	1	2	3	4	5
The teacher/faculty provides effective clinical teaching that stimulates learners to build knowledge and skills safely while offering graded responsibility for patient care.	Ineffective, Insufficient or negative communication, support or feedback		Good learning support matched to ability levels		Superior educational experience; responsive to learner's level

	Poor 1	Unsatisfactory 2	Minimally Acceptable 3	Good 4	Superior 5
The teacher/faculty created responsive relationships with effective feedback to support learner and teacher collegiality, collaboration and co-learning.	Ineffective, insufficient or negative communication support or feedback		Respectful, responsive, available, and constructive		Excellent communication, collaboration, and detailed coaching

Comments:

	Poor 1	Unsatisfactory 2	Minimally Acceptable 3	Good 4	Superior 5
The teacher/faculty was a positive role model for the learner as a clinician, teacher and professional.	Poor role model causing ineffective or negative educational experience		Suitable role model in all areas		Exemplary role model in all areas demonstrating the highest standard

Comments:

	Poor 1	Unsatisfactory 2	Minimally Acceptable 3	Good 4	Superior 5
The teacher/faculty created an effective learning climate providing clear expectations and balancing learning/teaching /assessments effectively.	Reluctant to teach, set appropriate expectations, and address learning climate issues		Willing to teach and include learners respectfully with appropriate expectations in a positive learning climate		Enthusiastic, respectful, and proactive in ensuring positive climate and effective learning to learner needs regarding case mix

Comments:

Overall Rating of this Teacher

Unsatisfactory 1	Weak 2	Acceptable 3	Good 4	Superior 5
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OVERALL rating for this teacher/faculty at this site/location/time (i.e., considering clinical teaching; respectful and responsive relationships and effective feedback; personal and professional model; learning climate).	Significant limitations to suitability of this teacher	Limitations in this teacher's performance	Effective teacher enabling effective learning	Very effective, proactive teacher supporting positive learning	An exceptional role model as a teacher
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Comments:

Comments

Teachers find comments to be the most valuable form of feedback because it allows them to reflect on and improve their skills. Comments are **mandatory** if you have given a rating of 1 or 2.

Describe STRENGTHS of this teacher/faculty:

Actions or Areas FOR IMPROVEMENT:

Other Comments