**Elizabeth Bennet, MD, MEd**

**Executive Summary of Educator Portfolio**

It has been my absolute pleasure over my 20-year career to be involved across the continuum of medical education. Throughout my career and these opportunities, I have enjoyed collaborating in numerous domains of education, though my most notable achievements have been in educational leadership, learner assessment, and mentoring.

**Educational Leadership**

Early in my career, I was fortunate to take on the role of both the co-director of the Pediatric Clerkship and the Associate Program Director of the Pediatric Residency at the University of America School of Medicine. I stepped down from the clerkship role only two years ago, while advancing to Pediatric Residency Program Director at the same time. As clerkship co-director, I created a coaching program that offered each student a personal coach who would work with them (in a non-evaluation capacity) throughout their six-week rotation, assisting them in setting goals, observing them multiple times, and helping them create personal plans for development. We found that students in the program had higher confidence in their skills in physical exams, history-taking, and ability to work as a team. In addition, the students had higher end-of-clerkship OSCE ratings, and we saw an overall trend in higher ratings of the clerkship. This program was widely disseminated through the Council on Medical Student Education in Pediatrics (COMSEP) and at the Pediatric Academic Societies’ (PAS) meeting, with two publications to date. (Publication #15, 21)

As I served in my clerkship co-director role, I became more involved in COMSEP, serving in several positions over the past decade, including leading the Assessment and Evaluation Collaborative. With my co-leads, we spearheaded three projects: one national survey of assessment practices, one multi-institutional study on the use of a clerkship evaluation tool, and the development of a “best practices” website for assessment methods. The last of these has had over 1000 website meaningful “hits” in the past 6 months, with over 250 downloads of content by over 50 individual users.

In my GME role, I became very involved with the Association of Pediatric Program Directors (APPD). Initially I was a regular member, but I eventually became Chair of the Curriculum Task Force (now known as the Curriculum Learning Community). In that role I led the development of a curriculum consultation service, as well as started the design of a Core Pediatric Curriculum that has been utilized by over 75 programs. Each of these programs effectively addresses curricular needs at their institution, is easily used by the residency program, and has positively impacted residency education. Two years ago, I was elected to serve as the President of APPD. Despite the fact that my entire term was served during the pandemic, we accomplished a number of key objectives. During this time, I am most proud of the work that we did to create anti-racist processes and curricula within the APPD, and the development of the Advancing Inclusiveness in Medical Education Scholars program. The program is hosting its second cohort this year, and early data from the first cohort indicates the participants rate it highly and would recommend it to others. We will continue to measure outcomes over the next five years as we track the participants over time.

**Learner Assessment**

During the majority of my career, my main contribution to scholarship has been in the assessment of undergraduate medical education (UME) learners, with a significant focus on workplace-based assessment and Entrustable Professional Activities (EPAs). I joined the Association of American Medical Colleges (AAMC) Core EPA collaborative seven years ago, at which time I was the lead for our site’s participation in the program. During that time, we published five studies on the assessment of EPAs in the 3rd year student clerkship, demonstrating the predictive validity, generalizability, and reliability of workplace assessment of EPAs. (Publication #10, 18, 20, 23, 28) Three years ago, I took lead on a project within this group to develop an app-based workplace assessment tool to be used by faculty to facilitate more immediate student performance assessments. Our data from multi-site implementation demonstrated that the process and tool were effective and improved both the frequency and quality of assessment. This app has been made publicly available, and more than 20 programs have incorporated its use.

More recently, in 2020, I was asked to take on the role of Director of EPA Implementation Task Force for the AAMC. In this role, I lead the national collaborative, creating short and long-term goals for the group, overseeing and mentoring all projects, and determining broader outcomes for the collaborative. Since taking on this role, 10 programs have been added to the collaborative, five new projects have been initiated, and the process for collaborating with the APPD on a pilot for connecting EPAs to Core Competencies in pediatrics for longitudinal assessment has begun.

**Mentoring**

Eight years ago, I partnered with local community groups to create a pipeline program at my home institution focused on increasing the number of under-represented in medicine (UIM). I initially focused on widening the UIM pipeline from elementary school to college. In the last 3 years, I expanded the program to increase recruitment, development, and retention of UIM residents/fellows and faculty. In the 8 years this program has been in place, the medical school has increased the percentage of UIM in their class from 10% to 20% and the residency has increased the percentage of UIM from 2% to 10%. We anticipate outcome data on retaining our UIM residents/fellows on faculty in the next 5 years. My interest in both mentorship and DEI has led to a broader national opportunity, which is highlighted in my annotated CV.