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DOI

[10.1007/s11606-010-1545-0](https://doi.org/10.1007/s11606-010-1545-0)

Publication date

2011

Document Version

Final published version

Published in

Journal of general internal medicine

[Link to publication](#)

Citation for published version (APA):

Lombarts, M. J. M. H., Heineman, M. J., & Arah, O. A. (2011). Assessing the quality of clinical teachers. *Journal of general internal medicine*, 26(1), 14;-author reply 15.
<https://doi.org/10.1007/s11606-010-1545-0>

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Assessing the Quality of Clinical Teachers

M. J. M. H. Lombarts, MHA, PhD¹, M. J. Heineman, MD, PhD², and O. A. Arah, MBBS, MD, PhD^{1,3}

¹Department of Quality and Process Innovation, Academic Medical Center, University of Amsterdam, Amsterdam, The Netherlands;

²Department of Obstetrics and Gynaecology, Academic Medical Center, University of Amsterdam, Amsterdam, The Netherlands;

³Department of Epidemiology, UCLA School of Public Health, University of California, Los Angeles (UCLA), Los Angeles, CA, USA.

J Gen Intern Med 26(1):14

DOI: 10.1007/s11606-010-1545-0

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To the Editor:—Recently, the JGIM published an interesting article by Fluit et al. on the systematic review of clinical teaching assessment instruments. They searched various databases from 1976 through March 2010 and ultimately selected 32 instruments. Unfortunately, their search strategy (available online) failed to detect the Systematic Evaluation of Teaching Qualities (SETQ) instrument. We want to correct this omission in the review since the SETQ is the most widely used clinical teaching assessment instrument in the Netherlands, and the development, validation and feasibility details of the SETQ instruments have been published in both English and Dutch literature.^{1,2} Indeed, an English article published in a top specialty journal has been online since September/October 2009.

Briefly, the SETQ initiative comprises four components: (i) a Web-based residents' evaluation of faculty, (ii) a Web-based self-evaluation by faculty, (iii) individualized faculty feedback, and (iv) individualized faculty follow-up support. The development of the two SETQ instruments—one resident-completed and one faculty-completed—was partly based on the Stanford Faculty Development Program (SFDP) instrument, which was included in Fluit et al.'s review. Following current scientific views on health measurement scales development³ initial SETQ instrument development involved both qualitative and quantitative methods. The instruments cover the domains of physician role modeling and teaching strategies, such as creating positive learning climates and feedback. They consist of 23 core items and two global ratings. Psychometric testing of the SETQ instruments covered the five sources of validity evidence listed by Fluit et al.^{1,2} The SETQ instruments were subsequently deemed reliable and valid for use within residency training programs in the Netherlands when used for

formative assessment of faculty. Since its launch in 2008, SETQ has been used by approximately 1050 faculty and 900 residents involved in the continuous, longitudinal (self-) evaluation and enhancement of teaching qualities of clinical teachers in almost 70 residency training programs in 20 Dutch teaching hospitals. This widespread use of SETQ opens up opportunities for multi-institutional, challenging study designs to refine our understanding of clinical teaching, as Beckman in his recent editorial⁴ and other experts⁵ point out.

Although the completeness of a systematic review can never be assured nor expected, researchers must remain vigilant when reading the results. We took a closer look at the search strategy used by Fluit et al. Seemingly self-evident and relevant terms particularly favoured by North American journals in this field of research such as 'assessment', 'faculty', 'learning', and 'teaching standards' were not part of the search strategy. We must then be cautious in accepting the completeness of the review even within the limits of the authors' disclaimer in their "limitations of this study".

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M. J. M. H. Lombarts, MHA, PhD, Department of Quality and Process Innovation, Academic Medical Center, University of Amsterdam, Meibergdreef 9, PO Box 22700, 1100 DE, Amsterdam, The Netherlands (e-mail: m.j.lombarts@amc.uva.nl).

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Published online October 22, 2010