Program Director’s Retreat

June 17, 2022

Joshua Goldstein, MD
Senior Associate Dean for Graduate Medical Education
Designated Institutional Official
Agenda

8:00am  McGaw Update & Presentation of Award
        Joshua Goldstein, MD, DIO
        Senior Associate Dean for Graduate Medical Education
        Nancy Parlapieno
        Executive Director of Graduate Medical

8:30am  Vice Dean Welcome
        Marianne Green, MD, FACP
        Vice Dean for Education

8:40am  High-Value Care and the Physical Exam
        Toshiko Uchida, MD, FACP
        Clinical Medicine Element Leader
        Medical Director, Outpatient Simulation

8:50am  Group Discussion

9:25am  Building Resilience: Mental Model Reframing
        Yara Mikhail-Demo, MD
        Leadership Coach
        Assistant Professor of Neurology

10:10am BREAK

10:25am The Essential Nature of Allyship
        Khalilah L. Gates, MD
        Assistant Dean of Medical Education

11:10am Leadership Program for Chief Residents and Chief Fellows
        Aashish Didwania, MD
        Vice Chair for Education, Department of Medicine
        Todd Murphy, PhD
        Associate Director, Center for Leadership
        Kamari Jackson, MD, Chief Resident
        Graham Peigh, MD, Chief Resident

11:55am Closing Remarks
        Joshua Goldstein, MD, DIO
        Senior Associate Dean for Graduate Medical Education

Northwestern Medicine
Feinberg School of Medicine
McGaw Distinguished Service Award

2022
Prior Recipients

Sue Gerber (2021)
Sharon Unti (2020)
Jonathan Fryer (2019)
Aashish Didwania (2018)
Jim Sliwa (2017)
Joan Anzia (2016)
Walter Eppich (2016)
Michael Schafer (2015)
Louanne Carabini, MD MA FASA,
Vice Chair for Education, Department of Anesthesiology
Residency Program Director
McGaw Overview

- Continued accreditation by ACGME
- No citations or AFIs
- 112 training programs accredited by ACGME
- All programs with continued accreditation
- Approximately 1,250 total trainees
McGaw Programs Compared to National

<table>
<thead>
<tr>
<th>Number of Programs</th>
<th>Number of Sponsors</th>
<th>Percent of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 Programs</td>
<td>53</td>
<td>6.3%</td>
</tr>
<tr>
<td>1 Program</td>
<td>249</td>
<td>29.4%</td>
</tr>
<tr>
<td>2-5 Programs</td>
<td>222</td>
<td>26.2%</td>
</tr>
<tr>
<td>6-25 Programs</td>
<td>191</td>
<td>22.6%</td>
</tr>
<tr>
<td>26-50 Programs</td>
<td>49</td>
<td>5.6%</td>
</tr>
<tr>
<td>51-75 Programs</td>
<td>42</td>
<td>5.0%</td>
</tr>
<tr>
<td>76-100 Programs</td>
<td>28</td>
<td>3.3%</td>
</tr>
<tr>
<td>&gt; 100 Programs</td>
<td>13</td>
<td>1.5%</td>
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ACGME

New Resources – Learn at ACGME https://dl.acgme.org/
Recommended for PDs, APDs, and PCs
Program Directors’ Guide to the Common Program Requirements

https://www.acgme.org/Program-Directors-and-Coordinators/Welcome/Program-Directors-Guide-to-the-Common-Program-Requirements
Program Requirements and FAQs A MUST READ


<table>
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<tr>
<th>Oversight</th>
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<tbody>
<tr>
<td>Why should residents not be required to rotate among multiple participating sites?</td>
</tr>
<tr>
<td>(Program Requirement: 1.B.5.a. (2))</td>
</tr>
<tr>
<td>The intent of this requirement is to ensure residents are not required to travel unnecessarily to hospitals or other clinical sites for education or training that could reasonably be provided locally by the Sponsoring Institution's affiliated sites. The Review Committee understands that some programs, such as those sponsored in rural areas based on a consortium model, will by necessity have residents rotate across three to four sites to achieve the required rotations. The focus of the requirement is to protect the residents from being used to meet the service needs of multiple hospital/clinical operations.</td>
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<table>
<thead>
<tr>
<th>Personnel</th>
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<tr>
<td>Is a program permitted to have non-ACGME-approved fellowship positions, and if so, would they be treated differently as far as compensation, benefits, etc.?</td>
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<tr>
<td>(Program Requirement: 1.E.)</td>
</tr>
<tr>
<td>Programs may have fellows in positions not currently approved by the Review Committee, such as neuroanesthesiology. Compensation for these fellows is a matter between the program and its Sponsoring Institution. The Review Committee stipulates that the presence of such fellows must enrich the appointed residents' education and the program must report circumstances when their presence has interfered with the residents' education to the DIO and Graduate Medical Education Committee (GMEC).</td>
</tr>
</tbody>
</table>

| When and how should program changes be communicated to the Review Committee? |
| (Program Requirement: If A 4.a. (16))                                    |
| The type of change will determine when and how it should be communicated to the Review Committee. All requests for increases in resident complement and program director changes must be approved by the Review Committee. Significant loss of faculty members, loss of educational opportunities (including elimination of an essential service or primary teaching site), and changes in sponsorship should be communicated to the Review Committee as soon as possible in relationship to the event. Note that requests for an increase in resident complement must be made through the Accreditation Data System (ADS) and must be approved by the Sponsoring Institution's designated institutional official (DIO) prior to submission. Program director changes are reviewed monthly and communication as to approval, denial, or recommended mentoring plans will be forwarded through ADS. Programs should consult the Review Committee Executive Director with any questions. |

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ACGME RC: ADS Major Changes

- Programs **must** update the *Accreditation Data System (ADS) Major Changes* section on a rolling basis.
- Not just during ADS annual update window.
- Address citations and AFIs as soon as received.
- Address key responses in survey < specialty average.
- Review Committees (RCs) review these throughout the year.
- Major faculty changes.
- Rotation changes.
ACGME: New Initiatives

• New leave policy
  - 6 weeks away with full pay for qualifying medical condition
  - Once during course of training program
  - Additional week with full pay available independent of the leave itself
  - McGaw policy to be release shortly

• J1 oversight for Non-Standard Training (NST) fellowship programs
  - Duty hours
  - Milestones using closest related program
  - Direct supervision until milestones completed
  - Impact on closest related program educational environment

• Modified leadership FTE support
ACGME: Five Key McGaw Survey Indicators

• Able to raise concerns without fear of intimidation or retaliation

• Participate in safety event investigation and analysis

• Satisfied with faculty members' feedback

• Taught about health care disparities

• 80-hour week (averaged over a four-week period)
Survey: Able to raise concerns without fear of intimidation or retaliation

• Ombudsperson Lisa Rone, MD
• McGaw Non-retaliation policy
• HSA and NMRFF leadership
• McGaw DEI leadership
• McGaw anonymous feedback portal
Survey: Participate in safety event investigation and analysis

- McGaw Director of PSQI – Abra Fant
- Hospital risk leaders
- AHA modules
- Hospital safety rounds
- Morbidity and Mortality conference
Survey: Satisfied with faculty members' feedback

- FAME consultation
- Suggested feedback retreat including both faculty and trainees
Survey: Satisfied with faculty members' feedback

https://www.feinberg.northwestern.edu/sites/fame/educator-training/index.html
Survey: Taught about health care disparities

• McGaw Directors of DEI
  - Drs. Linda Suliman and Teni Brown

• McGaw health disparities and health equity modules

• Annual Health Equity Week
Survey: 80-hour week

- NEVER EVENT
- Programs must review New Innovations logs (NI) at least monthly
- Identify systems risks
  - Rotations
  - Transitions from service
- Close communication with trainees
- Home “beeper” call
  https://www.acgme.org/globalassets/PDFs/FAQ/CommonProgramRequirementsFAQs.pdf

- “For call from home, time devoted to clinical work done from home and time spent in the hospital after being called in to provide patient care count toward the 80-hour weekly limit. Types of work from home that must be counted include using an electronic health record and taking calls. Reading done in preparation for the following day’s cases, studying, and research done from home do not count toward the 80 hours.”
Program Director’s Retreat 2022

Nancy Parlapiano
Executive Director
McGaw Medical Center of Northwestern University
### Key Administrative Points

#### Complements & Quotas

**1101612015 - MCGAW MEDICAL CENTER OF NORTHWESTERN UNIVERSITY PROGRAM**

**Emergency Medicine - Chicago, IL**

<table>
<thead>
<tr>
<th>Original Accreditation Date:</th>
<th>July 01, 1982</th>
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<tbody>
<tr>
<td>Accreditation Status:</td>
<td>Continued Accreditation</td>
</tr>
<tr>
<td>Effective Date:</td>
<td>January 07, 2019</td>
</tr>
<tr>
<td>Accredited Length of Training:</td>
<td>4 Year(s)</td>
</tr>
<tr>
<td>Program Format:</td>
<td>Standard</td>
</tr>
<tr>
<td>Case Logs:</td>
<td>Use Not Required by ACGME</td>
</tr>
</tbody>
</table>

| Last Site Visit Date:       | November 29, 2007 |
| Date of Next Site Visit (Approximate): | No Information Currently Present |
| Self Study Due Date (Scheduled): | February 28, 2018 |
| 10 Year Site Visit (Approximate): | August 01, 2019 |

| Total Approved Resident Positions: | 60 |
| Total Filled Resident Positions*:  | 61 |
| Temporary Increase** 4 Effective from 07/01/2015 thru 06/30/2019: | |

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*Total filled will reflect the previous academic year until the annual update is completed for the current academic year. Totals may vary from year to year due to off cycle residents. **Temporary Increase(s) not reflected in the approved positions.
## Key Administrative Points

### Complements & Quotas

**Institution:** Northwestern McGaw/NMH/VA-IL - Chicago, IL

- **Role:** Institution Official
- **Username:** McGaw1
- **Institution Status:** ACTIVE
- **Program Name:** Emergency Medicine
- **Program Type:** Categorical
- **Program Status:** ACTIVE

**Match Year:** 2019

- **NRMP Institution Code:** 2247
- **ACGME Inst Code:** 169502
- **NRMP Program Code:** 22471109C0
- **ACGME Program Code:** 1101612015
- **SOAP Participation:** Yes

### Quota

You may change current quota here, or go to the Reversions tab to donate potential unfilled positions to other programs.

- **Initial Quota:** 15
- **Current Quota:** 15
Elective External Rotations

• Request for an external elective rotation must be submitted no less than 120 days prior to the start state.

• An elective external rotation, regardless of accreditation/non-accreditation status of the training program, requires a legal affiliation agreement.

• Initiation of the agreement commences after DIO (Dr. Goldstein) approves the request. DIO approval of the requested experience does not translate into finalization of the rotation...
DIO approval of the requested experience does not translate into finalization of the rotation.
Trainee Wellness

For acute or urgent issues, trainees should utilize Perspectives for counseling available 24 hours per day. They can call or text (800) 456-6327.

To establish ongoing care with a mental health professional, trainees can utilize McGaw’s Wellness Program established with Meridian Psychiatric Partners. mcgawwellness@meridianproviders.com | (312) 477-2109.

- Response time for McGaw trainees is prioritized; within 48 hours.
- Care is covered by the McGaw-provided BCBS-IL plan at $25 copay per visit ($0 copay or deductible for the first 2 psychiatry visits per calendar year).

McGaw trainees are allowed to attend medical appointments during weekday clinical and educational hours. They must inform their PD in a timely fashion if they will be away to attend a medical appointment.
Questions?
McGaw Thanks All Program Leaders