Program Director’s Retreat

April 12, 2023

Joshua Goldstein, MD
Senior Associate Dean for Graduate Medical Education
Designated Institutional Official
<table>
<thead>
<tr>
<th>Time</th>
<th>Agenda Item</th>
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<tbody>
<tr>
<td>8am</td>
<td>McGaw Update &amp; Presentation of Award – Josh Goldstein, MD &amp; Nancy Parlapiano</td>
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<tr>
<td>8:30am</td>
<td>Vice Dean Welcome – Marianne Green, MD, FACP</td>
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<td>8:40am</td>
<td>Medical, Caretaker, and Parental Leave (MCP) Overview – Nancy Parlapiano</td>
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<td>8:55am</td>
<td>Feedback – Priya Jain, MD, MEd</td>
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<tr>
<td>9:25am</td>
<td>BREAK</td>
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<td>9:40am</td>
<td>CLER updates and best practices for Safety and Quality Education – Abra Fant, MD</td>
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<td>10am</td>
<td>The Annual Program Evaluation (APE): identifying institutional themes and trends – Clara Schroedl, MD</td>
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<td>10:30am</td>
<td>Addressing ADA Accommodations and Other Disability-Related Issues – Scott Warner</td>
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<tr>
<td>11am</td>
<td>Facilitated Group Activity – How to Improve Educational Culture – Clara Schroedl, MD and James Schroeder, MD</td>
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<td>11:57am</td>
<td>Closing Remarks – Josh Goldstein, MD</td>
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McGaw Distinguished Service Award

2023
Prior Recipients

Louanne Carabini (2022)
Sue Gerber (2021)
Sharon Unti (2020)
Jonathan Fryer (2019)
Aashish Didwania (2018)
Jim Sliwa (2017)
Joan Anzia (2016)
Walter Eppich (2016)
Michael Schafer (2015)
Dmitry Pyatetsky, MD
Associate Professor of Ophthalmology and Medical Education
Residency Program Director
McGaw Overview

- Continued accreditation by ACGME
- No institutional 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 Sponsors</th>
<th>Percent of Total</th>
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<tbody>
<tr>
<td>0 Programs</td>
<td>6.3%</td>
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<tr>
<td>1 Program</td>
<td>29.4%</td>
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<tr>
<td>2-5 Programs</td>
<td>26.2%</td>
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<tr>
<td>6-25 Programs</td>
<td>22.6%</td>
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<tr>
<td>26-50 Programs</td>
<td>5.6%</td>
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<tr>
<td>51-75 Programs</td>
<td>5.0%</td>
</tr>
<tr>
<td>76-100 Programs</td>
<td>3.3%</td>
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<td>&gt; 100 Programs</td>
<td>1.5%</td>
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Clinical Competency Committee (CCC)

https://www.acgme.org/globalassets/acgmeclinicalcompetencycommittee
guidebook.pdf
Clinical Competency Committees (CCCs): Improving the Quality of Assessment in Graduate Medical Education

Andy Ekpenyong, MD, MHPE

Medical Education Grand Rounds
Northwestern Feinberg School of Medicine
2/5/2021
• PD must appoint the CCC, which at a minimum must include three faculty members, at least one of which is a core faculty member in the program.
  - should try to balance CCCs in terms of academic rank, gender, race/ethnicity, program role, and professional focus
  - may appoint additional CCC members from the same or other programs, or other health professionals who have extensive contact and experience with the program’s residents
  - some Review Committees may place restrictions on who can chair a CCC
  - *In larger programs the Chair of the CCC may not be PD and should have expertise in this area (nice role for APD or core faculty member interested in education)*
• Assessing transferring residents/fellows
• Contributing to the Program Evaluation Committee (PEC)
• Faculty development
• Quality improvement of the assessment system
• Continuous educational quality improvement
• Review and development of program’s individual and collective assessment tools
• The documentation of the CCC meeting itself can be one of the most valuable documents to an institution when defending a resident/fellow dismissal or adverse action.

• The ACGME does not have a requirement as to how the CCC meeting should be documented, however, McGaw requires program retain minutes of CCC meetings.
  - A written document reflecting the discussion of each resident’s/fellow’s performance.
  - A concise summary of each resident’s/fellow’s performance and any action or follow-up items.
  - Confidential (i.e., not shared with anyone other than the resident/fellow, CCC, and program leadership).
  - Archived in accordance with the institution’s document retention policy in consultation with legal counsel.
Program Evaluation Committee (PEC)

• planning, developing, implementing, and evaluating educational activities of the program;
• reviewing and making recommendations for revision of competency-based curriculum goals and objectives;
• addressing areas of non-compliance with ACGME requirements;
• annually reviewing the program using evaluations of faculty members, residents, and others
• Some PECs include review of resident/fellow Milestone assessments to determine weak points in curricular elements of the program in order to make necessary changes.
Best Practices for Building and Supporting Effective ACGME-Mandated Program Evaluation Committees

Jessica Greenfield, PhD; Elias I. Traboulsi, MD, MEd; Krista Lombardo-Klefos, MBA; S. Beth Bierer, PhD, MEd

*Corresponding author: greenfieldc@northwestern.edu

Abstract

Introduction: The Accreditation Council for Graduate Medical Education (ACGME) mandates that residency training programs form program evaluation committees (PECs) to monitor program delivery and outcomes, generate annual program evaluations (APEs), facilitate strategic planning, and implement continuous quality improvement projects. Though PECs provide essential documentation to position programs for successful accreditation decisions, few resources exist in the literature for PEC members. Methods: Employing Kern’s model for curriculum development, we conducted a needs assessment in 2016 that resulted in adding a 2-hour workshop on building and supporting effective PECs to a certificate program for residency program directors. The workshop used a flipped classroom model with prework readings and guiding questions to familiarize participants with ACGME requirements for PECs and APEs. Several activities helped participants identify best practices for PECs and discuss authentic examples of mission statements, APEs, and action plans. Results: From 2017 to 2019, we offered this workshop on three different occasions to a total of 42 participants (34 residency program directors/associate program directors and eight program coordinators). In 2019, 14 participants completed a web-based evaluation after the session. All agreed or strongly agreed that the workshop met the learning objectives, utilized interactive teaching methods, included useful APE examples, and provided valuable resources. Discussion: This workshop addresses a gap in the literature by helping program directors identify best practices for PECs. The APE template and workshop examples can be adjusted to fit the needs of individual institutions.

Keywords: Evaluation, Accreditation, Program Evaluation, Faculty Development, ACGME, Residency, Program Evaluation Committee, Annual Program Evaluation, Flipped Classroom
PEC – McGaw Template

https://www.mcgaw.northwestern.edu/docs/Program-Evaluation-Committee-Minutes-Tracking-Form-Action-Plan-07-2022.doc
Non-Standard Training (NST) Recognition

Non-Standard Training (NST) Recognition
The ACGME will offer Recognition of Sponsoring Institutions that have non-standard training (NST) programs. NST programs provide clinical training for foreign national physicians in advanced subspecialty programs for which there is no ACGME accreditation or American Board of Medical Specialties member board certification. Foreign national physicians receive J-1 visas sponsored by the Educational Commission for Foreign Medical Graduates (ECFMG) to enable their participation in NST programs. NST Recognition will be conferred upon Sponsoring Institutions only and will not be conferred upon individual NST programs.

Announcements
Recognition of Non-Standard Training for Exchange Visitor (J-1) Physicians to Transition to the ACGME

ACGME Requirements and Review Process
The ACGME Board of Directors approved the NST Recognition Requirements, which set forth minimum standards for Sponsoring Institutions with NST programs, at its February 2022 meeting. The Institutional Review Committee makes decisions on recognition for ACGME-accredited Sponsoring Institutions with NST programs. Sponsoring Institutions are required to maintain ACGME accreditation without an adverse accreditation status to be eligible for NST Recognition.
NST J1 Process

- McGaw is currently approved by ACGME to participate in NST J1 process
- As part of initial application McGaw was required to list participating NST programs, thus those are locked in
- Currently, no new NSTs being considered for J1 sponsorship
- NAMF (NST) programs may not consider candidates requiring a J1 visa unless they were approved and notified by GMEC in Fall, 2022
- H1B visas (work visas) require prior GMEC approval
  - Cost must be born by program ($9000)
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)
Program Directors’ Retreat 2023

Nancy Parlapiano
Executive Director
McGaw Medical Center of Northwestern University
Let’s *start* with...Thank You!

**B.4. Program Director Responsibilities**

The program director must have responsibility, authority, and accountability for administration and operation, training and schedules, activities, resident recruitment and selection, evaluation, and promotion of residents, and the clinical acts, supervision of residents, and resident education in the context of patient care. (Core)

**B.4.1. Program Director must:**

- **B.4.1.1.** Be a role model of professionalism. (Core)
- **B.4.1.2.** Design and conduct the program in a fashion consistent with the needs of the community, the resources of the sponsoring institution, and the missions of the program. (Core)
- **B.4.1.3.** Administer and maintain a learning environment conducive to educating residents in each of the ACGME Competency domains. (Core)
- **B.4.1.4.** Develop and execute a process to evaluate candidates prior to approval of program faculty members for participation in the residency program education and at least annually thereafter, as outlined in V.30. (Core)
- **B.4.1.5.** Have the authority to approve program faculty members for participation in the residency program education at all sites. (Core)
- **B.4.1.6.** Have the authority to remove program faculty members from participation in the residency program education at all sites. (Core)
- **B.4.1.7.** Have the authority to remove residents from supervised instruction and/or learning environments that do not meet the standards of the program. (Core)
- **B.4.1.8.** Authorize accurate and complete information needed and requested by the ACGME, Graduate Medical Education (GME) Training Program, and ACGME. (Core)
- **B.4.1.9.** Provide applicants who are offered an interview with information related to the applicant’s eligibility for the educational specialty board examination(s). (Core)
- **B.4.1.10.** Provide a learning and working environment in which residents have the opportunity to raise concerns and provide feedback in a confidential manner as appropriate, without fear of intimidation or retaliation. (Core)
- **B.4.1.11.** Enter the program’s compliance with the sponsoring institution’s policies and procedures related to governance and peer review. (Core)
- **B.4.1.12.** Ensure the program’s compliance with the sponsoring institution’s policies and procedures for the process when a resident is taken to unserved or service, or to promote, or to remove the appointment of a resident. (Core)
- **B.4.1.13.** Ensure the program’s compliance with the sponsoring institution’s policies and procedures on employment and non-discrimination. (Core)
- **B.4.1.14.** Residents must not be required to sign a noncompete agreement or restrictive covenant. (Core)
- **B.4.1.15.** Document verification of program completion for all graduating residents within 30 days. (Core)
- **B.4.1.16.** Provide verification of an individual resident’s completion upon the resident’s request, within 30 days and. (Core)
- **B.4.1.17.** Obtain review and approval of the sponsoring institution’s ED to submit information or requests to the ACGME, as required in the Institutional Requirements and outlined in the ACGME Program Director’s Guide to the Common Program Requirements. (Core)
McGaw Website Refresh

The McGaw Medical Center offers exceptional training experiences at nationally ranked hospitals and fosters a culture of diversity, equity, inclusivity, innovation and excellence. We invite you to learn more about our thriving academic environment.
Trainee Wellness

https://www.mcgaw.northwestern.edu/wellness/emotional-wellness.html

• **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.
  • Therapy is covered by the McGaw-provided BCBS-IL plan at $25 copay per visit ($0 copay or deductible for the first 2 therapy 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.**
McGaw Medical Center of Northwestern University is committed to providing a supportive educational environment. An important part of that commitment is maintaining an educational and professional culture that fosters learning for all trainees. Those who have any concerns regarding their educational and/or professional environment may raise them anonymously via this portal:

If commenting on a particular specialty/service, please share that detail so that we may pursue.

No identifying information is collected by this form. We will respond, to the best of our ability, to all concerns. If you would like to receive personal feedback, please submit your contact information.

McGaw trainees and Northwestern University Feinberg School of Medicine students and faculty are governed by the Safe and Healthy Learning Environment Policy, which includes a policy for non-retaliation. All trainee concerns not covered by the Safe and Healthy Learning Environment Policy will utilize the same reporting and resolution mechanisms as outlined in that policy.
Complements & Quotas

Accredited Length of Training: 4 Years

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

Quota
- Initial Quote: 15
- Current Quote: 16
Elective External Rotations

- Request for an external elective rotation must be submitted no less than 120 days prior to the start date. Full details about how to request.

- 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...
Elective External Rotations

DIO approval of the requested experience does not translate into finalization of the rotation.
Medical, Caretaker, and Parental (MCP) Leave

Six weeks
at least once and at any time during their program, starting the day the trainee is required to report

Equivalent of 100% of their salary
for the first six weeks of the first approved MCP leave of absence

Two weeks of PTO/Vacation reserved for use beyond the first six weeks
of the first approved MCP leave(s) of absence taken

Stay Tuned