

Graduate Medical Education

Executive Summary

Academic Year 2017-2018



t is my pleasure to report that the Wayne State School of Medicine Office of Graduate Medical Education (GME) had another remarkable year. Wayne State School of Medicine's 150th anniversary was an exciting year and our office made great strides in expanding our education efforts.

Our GME office is a leader in residency education and is proud to report high levels of research dissemination, award-winning resident-led quality improvement projects, nationally-recognized innovations in resident wellness improvement and measurement. We look forward to another year building upon our past successes by building even stronger program evaluation systems, fostering even more fruitful professional development in our residents and faculty, and constructing new residency training programs and pathways to meet the healthcare needs of Detroit and the state of Michigan.

This past year we successfully created a new simulated patient case to train all our residents in the adherence to the new policies around the opioid prescription crisis. The simulated patient case, developed with resident leadership guided by our Research Coordinator, Brian Benson in partnership with the Kado Simulation Center was evaluated by senior residents as a commonly-encountered clinical situation requiring deft clinical empathy and communication skills.

Our novel Resident Wellness Scale, a measurement instrument we developed with the psychometrics expertise of our Director of Education, R. Brent Stansfield to monitor the well-being of our resident trainees above the more commonly-measured level of burnout and depression, is now being used by multiple other institutions. It was adopted by the Accreditation Council of Graduate Medical Education (ACGME) as part of their wellness survey, distributed to more than 70,000 residents nationwide. The openaccess scale validation manuscript is in press (Stansfield, Giang, & Markova, 2019).

In collaboration with other Michigan medical schools we advocated for state-level funding for additional residency training programs to meet Michigan's healthcare needs.

The efforts of this collaboration, Mi-Docs, were championed by myself, as the Designated Institutional Officer and Associate Dean of Medical Education, in partnership with other educational and government affairs leaders across the state. In the coming years, the project will yield additional training positions in primary care and psychiatry among others.

Our office successfully implemented a **Developing Active Resident Teachers (DART) program** in partnership with
Wayne State's Office of Learning and Teaching in which
residents can build their educational skills and contribute
to the curricula of their programs. We awarded four DART
certificates in 2018 and expect to award more next year.
We are also excited about DART's new sister program for
faculty: **Developing Effective Faculty Teachers (DEFT)**which we are introducing this academic year.

The GME office has been able to leverage it's strong relationships with clinical sites throughout the greater Detroit area and the powerful resources at the Wayne State University School of Medicine to train excellent clinicians in a variety of clinical domains. Our dedication to quality improvement, academic achievement, and personal and professional development has paid dividends; this past year we graduated skilled physicians into their fields and had a 100% match for the incoming cohort. More than 35% of our graduates remain to practice in the State of Michigan.

We thank all of our clinical partners, administrative support staff, educators, and most of all - resident and fellow trainees for their diligence and energy. We remain focused on the future even as we celebrate our accomplishments from the past year.

Tsveti Markova, MD, FAAFP

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Associate Dean for Graduate Medical Education

Designated Institutional Officer

Wayne State University School of Medicine



The Mission of the 2017-2018 GME Team

To lead and oversee innovative Graduate Medical Education programs where physicians in training develop personal, clinical and professional competence to provide exceptional patient care.

Our team from left to right:

Nora LaNoue: *GME Coordinator*. She coordinated the onboarding and orientation of our new residents, wrote and published the office newsletter, and redesigned the GME website. This was Nora's last year with the GME team and we wish her well going forward.

Dr. Tsveti Markova: Designated Institutional Officer (DIO) and Associate Dean of GME. She oversees the ACGME accreditation for programs and the institution. She was awarded the 2018 Parker J. Palmer Courage to Lead award by the ACGME. She is the chair-elect for the AAMC GRA Steering Committee.

Brian Benson: Research Coordinator. He directed an increase in resident participation in Quality Improvement (QI) projects in our programs, greatly improved our experiential learning and assessment event at the Kado Center—Objective Structured Clinical/Handoff Exercise (OSCE/OSHE)—including the generation of a new simulated case, and sustained record levels of research participation among residents and faculty.

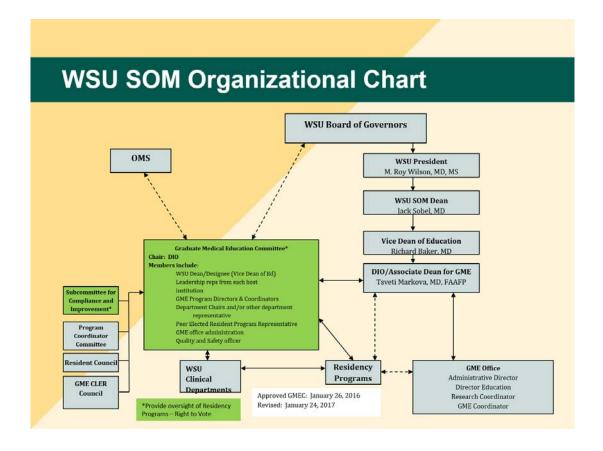
Martha Jordan: Administrative Director. She ensured accurate and complete compliance of our programs with ACGME requirements for accreditation and operation, expanded our wellness initiative to include program coordinators, and developed and successfully implemented a system to comply with the ACGME's new Self Study program evaluation requirement. She is a member of the Association for Hospital Medical Education (AHME) Council of Program Administrators and Coordinators (COPAC) Nominating Committee. She is also the Secretary of the Michigan Association for Medical Education (MAME) from May, 2016 to the present.

Dr. R. Brent Stansfield: *Director of Education.* He implemented and supported the Developing Active Resident Teachers (DART) program, generated an innovative Dashboard-based program evaluation system, and spearheaded a Resident Wellness program leading to national recognition at the Accreditation Council of Graduate Medical Education (ACGME) and at residency program institutions nation-wide.

A Powerful Network

Hospital Partners for the WSU Sponsored Programs







Strategic Objectives

- Create national visibility on innovative med education initiatives
- Leverage the ACGME Next Accreditation System (NAS) and Clinical Learning Environment Review (CLER) to improve patient care.
- Educate faculty, PDs, residents and staff development on competencies and milestones.
- Advocate for increased GME slots and funding to meet the state & national need for providers: MiDOCS and AHEC

National Recognition: Publications and Presentations

- Benson, BL, Ha, M, Stansfield, RB, Markova, T. Health Disparities Educational Initiative for Residents. *Ochsner Journal*. June 2018, 18 (2) 151-158.
- Stansfield, RB, Giang, D, Markova, T. Development of the Resident Wellness Scale for Measuring Resident Wellness. *Journal of Patient Centered Research and Reviews*, in press.
- Markova T., Stansfield RB. Sharing the Resident Wellness Scale for Multi-Institutional Study and Promotion of Resident Wellness. Poster presentation, 2018 Continuum Connections: A Joint Meeting of the GSA, GRA, OSR, and ORR, Orlando FL. May 2018
- Stansfield, RB, Markova, T. Sharing the Resident Wellness Scale for Multi-Institutional Study and Promotion of Resident Wellness. *Poster presentation at the Alliance of Independent Academic Medical Centers*. April, 2018.



- Stansfield, RB, Markova, T. Utilizing the Resident Wellness Scale to Assess Impact of Interventions on Resident, Program, and Institutional Levels. *Presentation at the Alliance of Independent Academic Medical Centers*. April, 2018.
- Stansfield, RB, Markova, T, Wissman, S, Sobilo, A, Salman, J, Ido, F, Pochtarev, V. Institutional and Resident-Led Wellness Interventions. Poster NI VI storyboard, 2018 Annual AIAMC Meeting, Carlsbad, CA. April, 2018
- Brigham, T, Markova, T, Hashimoto, D, Angus, S. Wellbeing in the GME Learning Environment. *Presentation at the 2017 AAMC Learn Serve Lead Annual Meeting, Boston, MA*. Nov, 2017

Institutional & Program Accreditation

Institutional Accreditation Status:

Maximal Accreditation

12 years, no citations

Our Residency Programs

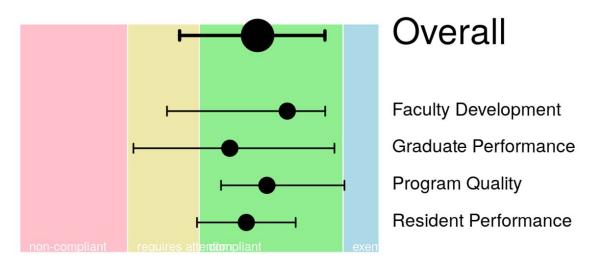
As a Sponsoring Institution, the School of Medicine received the maximum accreditation from the Accreditation Council for Graduate Medical Education (ACGME), with no citations and a commendation for significant compliance and quality of oversight. The self-study visit

for the school will take place in April 2024. The School of Medicine sponsors 8 GME residency and fellowship programs. This is a listing of those programs, including information on their individual programmatic accreditation statuses.

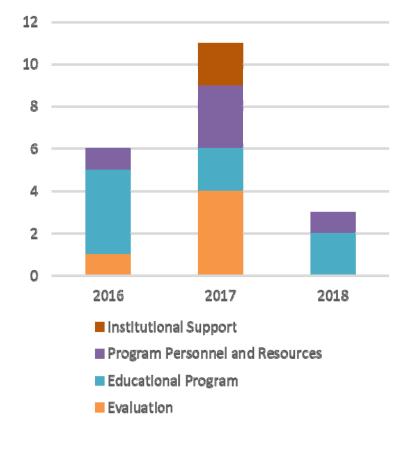
Program	Accreditation	Self-Study Date	
Family Medicine	Continued Accreditation with warning	5/1/2020	
Urology	Continued Accreditation	6/1/2018	
Dermatology	Continued Accreditation	7/1/2020	
Transitional Year	Continued Accreditation	11/1/2020	
Otolaryngology	Continued Accreditation	8/1/2021	
Internal Medicine	Continued Accreditation	9/1/2023	
Ophthalmic Plastic Fellowship	Continued Accreditation	12/1/2023	
Anesthesiology	Continued Accreditation	10/1/2026	
Physical Medicine & Rehabilitation	Continued Accreditation	Sponsoring Institution transferred to Beaumont	
Brain Injury Medicine	Continued Accreditation	Health as of 7/1/2018	

Operational Excellence

Institutional Dashboard



The GME office monitors resident, program, and institutional performance using a custom-built dashboard system. Our institutional performance (summarized above) is strong, but we will be working to improve our faculty development and the performance of our graduates.



The GMEC is committed to providing continuous tracking and monitoring of past programmatic citations to ensure our residencies are meeting ACGME's standards.

In the 2017-18 academic year, our increased oversight and investments in program personnel and resources resulted in all but 3 citations being lifted for all of the 8 programs.

By hiring new faculty and improving our research and quality improvement curricula we are addressing the remaining citations directly and aggressively.

A Cycle of Annual Program Evaluation

The GME Office has developed Dashboards, surveys, and process-planning exercises to foster an environment of continuous quality improvement institutionally and across all programs. The Office uses a data-driven approach to set goals, measure outcomes, evaluate results, and reflect on next steps. Every year, after a mid-year Annual Institutional Review (the Mid-AIR in January), we begin a process of review within each program (the Annual Program Evaluations: APE) where programs review their performance relative to their program aims. The review is based on Dashboards and ACGME Survey results and involves the Program Director, Coordinator, Faculty, Residents, and the GME Office. Each program generates SMART goals for improvement based on the evaluation, each of which is followed up on using the Plan-Do-Study-Act (PDSA) model of continuous quality improvement.



The GME Office also sets SMART goals for itself and follows each of these up with PDSA cycles as well. This process occurring simultaneously at the institutional and program levels creates a culture of continuous quality improvement where all stakeholders, from interns to the DIO, are actively participating in the betterment of the Wayne State residency education. Outcomes are evident in our glowing results from our most recent ACGME CLER Site Visit, 100% Match rate, near-perfect Board Pass Rate, and high ACGME Survey results. Inclusive processes such as our active Resident Council, the DART and DEFT programs, 100% resident participation in QI projects, and high participation of faculty and residents in published scientific scholarship result from our careful attention to and maintenance of this culture of continuous quality improvement.

SMART Goals

Specific Aim	Implement th	ne institutional initiative on r	esident wellness
Measure of outcome	Accountable Parties	Realistic Process	Time for completion
Identify Faculty and Resident Wellness Champions in every program.	R. Brent Stansfield	Wellness integrated into Dash- boards, Wellness Champion listed in APE form	April/May 2019 APEs
Hold institution-wide wellness event	R. Brent Stansfield Martha Jordan	Resident Council Wellness Event Planning Committee is formed and actively meeting	February, 2019
Institutional plan in case of adverse wellness event	R. Brent Stansfield	Resources available through ACGME, Ulliance, and National Acadamy of Medicine	SCI Presentation by Spring, 2019
Evaluating effectiveness of wellness interventions	R. Brent Stansfield Tsveti Markova	Use Resident Wellness Scale and the Semi-Structured Well- ness Interviews	Presentation in March, 2019 at AIAMC National Meeting

SMART goals are a proven method of concretizing and documenting plans. The process of writing out Specific aims (S), identifying Measurable outcomes (M) and Accountable parties (A), describing Realistic processes (R) and setting Times for completion (T) allow for precise project planning that positions institutions to act decisively and effectively.

The GME Office works with programs during the APE process to ensure that their program improvement plans are documented as SMART goals and that their completion is documented as a series of PDSA cycles. The GME Office itself sets SMART goals and PDSA improvement cycles as part of its Annual Institutional Review.

Targeted A	Area of Imp	orovement:	Resident	Performance: Practic	e-Based Learning and	I Improv	rement
	S		1	A	R	Т	
Specif	ic goal	Measi outo		Accountable persons	Reasonable result		ime for mpletion
Improve our scholarly activity output by improving the cooperation between faculty, residents and medical students. Maintain and distribute the list of medical students interested in research to faculty and residents so our distributon of research teams is more systematically determined.		of Emma: maintain		6 publications this year	completion Faculty meet with resident research mentees monthly December 2018: check progress and number of articles submitted June 2019: 6 publications total		
PDSA Cycle Cycle 1:	e Descripti	ons:					
Plan				e list distributed to ev igh the faculty or rese		hould	6/27/201
	What outcomes do you predict?			p medical students to projects			
Do	Date started July 2						
Study	Date ended Septemb			per 2018			-

A page from a program's APE report with a SMART goal and PDSA completion cycle

Continuous Quality Improvement

The WSU GME Office is dedicated to continuous improvement through rigorous evaluation and testing of methods. By using a formalized Plan-Do-Study-Act annual cycle of improvement, we model a tested method of Quality Improvement to our programs and residents.

Through our Annual Institutional Review (AIR) we make this process transparent to our programs and residents.

We have instituted a mid-year review meeting (mid-AIR) to more fully communicate our office's goals, activities, self -assessment, and improvement plans.

Plan

Integrate surveys and evalua-

tions into one databaseLeverage New Innovations

information into APEs

Provide Dashboards for APE goal development

2018 accomplishments

Do

- Creation of SQL database from multiple sources
- New Innovations data extraction completed
- Dashboards built and integrated into APE templates

Study

- SQL database format difficult to update with new data
 - New Innovations and APE are disconnected
 - APE template formatting is cumbersome

2018-19 action items

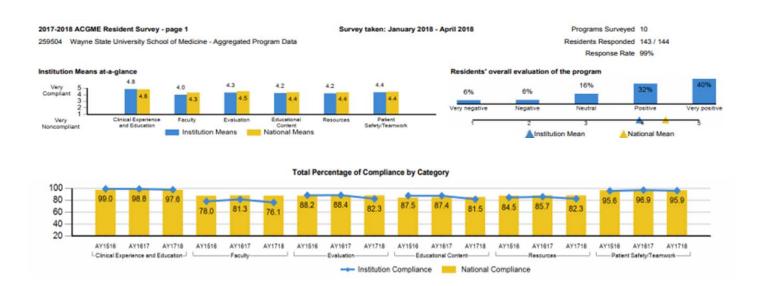
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- Unify database into "single stream" to better organize and standardize data
- Build New Innovations evaluation system that mirrors database
- Create APEs as interactive documents to automate formatting and facilitate continuous updates

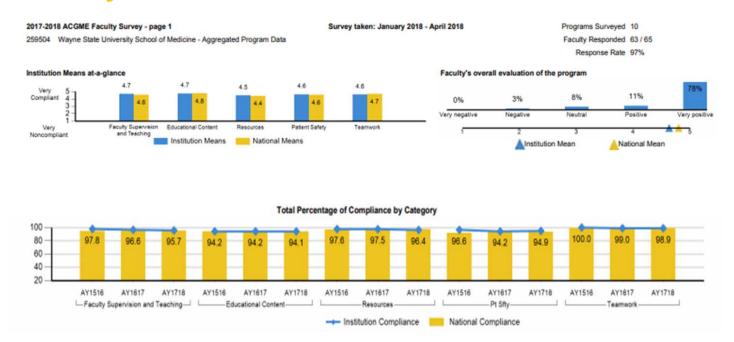
Excellence in Learning and Teaching ACGME survey results from the 2017-18 year show

ACGME survey results from the 2017-18 year show performance at or near national averages. We are dedicated to seeing improvements in these ratings in the 2018-19 academic year.

Residents



Faculty



Our Entering Trainees are Strong

100%

Match rate

In 2018, all of our programs were filled completely with residents who chose our programs and who we chose as promising trainees.

19% from the WSU School of Medicine





Excellence in Scholarship: 2017-18

25%

Residents published in a PMID journal 100%

Residents involved in a Quality Improvement project

\$6,420

Seed Grant money awarded for residents' research

48%

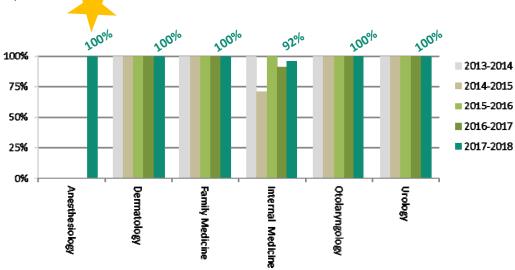
Faculty published in a PMID journal

82

Peer-reviewed publications authored by faculty and residents

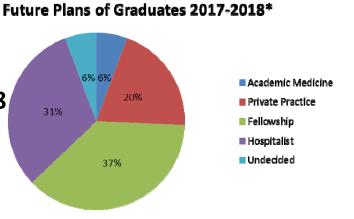
Our Graduates Succeed and Contribute

Anesthesiology, our newest program, graduated their first cohort with a **perfect** board pass rate.



43%

Of our class of 2018 will enter fellowship or academic medicine



Wayne State's programs continue to develop residents' clinical and professional competencies to provide safe, high-quality, equitable and patient-centered care. From an intense orientation process to robust patient care experiences under the supervision of Wayne State faculty physicians and researchers, residents graduate prepared to enter the physician workforce in a variety of settings, including clinical practice, academic medicine, fellowship training and more. Based on our GME Exit Survey, 98 percent of our graduating residents feel prepared for clinical care in their chosen specialty or for additional GME training.

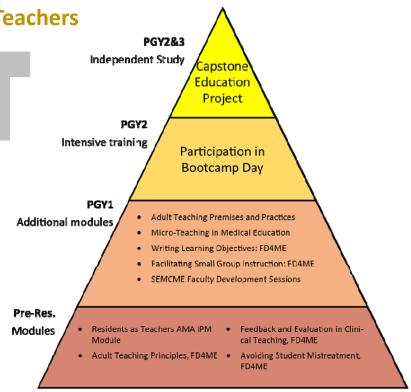
35% of our graduates stay to practice in Michigan

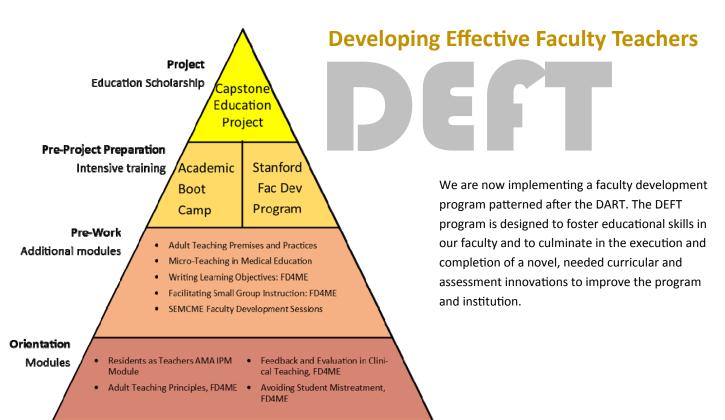
2 Programs to Enhance the Quality of Teaching and Learning

Developing Active Resident Teachers

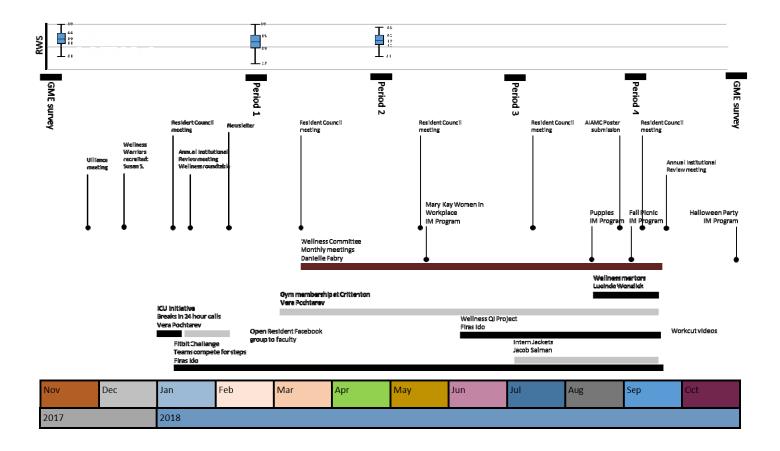
PART

Our dedication to educational excellence involves training our residents not only to be excellent clinicians, but also to develop their communication and educational skills of their own. The DART project is a focused curriculum to guide residents toward improving their own knowledge and skills in medical education and to contribute educational content to their programs.





Resident Wellness: An Institution-Wide Initiative



We are aggressively moving to improve our residents' wellness. Because of the astonishingly high rates of burnout and depression in clinicians and residents, the issue has gained national prominence. Our forthcoming paper "Development of the Resident Wellness Scale for Measuring Resident Wellness" details the creation of our empirically-derived Resident Wellness Scale (RWS) which we have deployed to track changes in residents' well-being over time.

Above is our timeline of wellness interventions, some led by residents, some by program leadership, some by administration. This ongoing effort is focused on increasing residents' connectedness to their work, social support systems, and personal self-care habits. These efforts have been accelerating into the current academic year and we are excited about the impact they will have on our residents' professional development and the care they provide to their patients.

An Effective Learning Environment

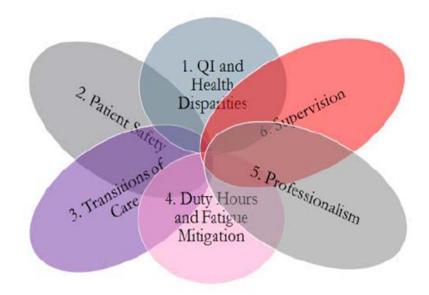
CLER Site Visit

n February 13-14,2018, the ACGME visited the Ascension Providence Rochester Hospital to conduct our third Clinical Learning Environment Review vis-

cal Learning Environment Review visit. The report was overwhelmingly positive.

In response, the GME Office and the Internal Medicine, Family Medicine, and Transitional Year programs at that site will strive to further improve the already strong learning environment. Some steps we will be taking:

- 100% of the residents participate in QI projects aligned with hospital objectives.
- A new error reporting system had been recently introduced. Residents and faculty are reporting errors and near misses electronically and receive feedback from the hospital on the reports they submit.
- Faculty are categorizing and analyzing error types and identifying trends and discussing with residents.
- Residents and faculty participate in Safety Huddles and Morbidity and Mortality (M&M) conferences with hospital leadership, medical and nursing staff where root causes of errors are discussed.
- Quarterly Quality Improvement and Patient Safety (QIPS) conferences restarted in September.
- Program Directors are working with the Quality
 Dept. to provide LOS and Readmissions data to residents
- Quality Dept. representative now attends regular CLER Council meetings chaired by the DIO.
- Efforts are underway to improve nursing education



on QI and broaden involvement of nurses on interprofessional teams.

- Programs have developed and delivered education on disparities and will continue to do so. The CLER Council will engage the Quality manager to access data related to disparities. QI projects with disparities components will be encouraged.
- TOC policy and ToCEX implemented. Policy includes transfers between services, floors, ED, ICU.
- Partnership with hospital leadership needed for uniform hospital-wide TOC system.
- Verbal TOC includes SAIF-IR mnemonic uniformly used by all residency programs.
- Objective Structured Handoff Evaluation (OSHE) implemented that includes written and verbal handoff.
- Perfect serve provides 24/7 contact info for all caregivers on call.
- As the hospital develops its strategy for well-being, we will ensure it includes resident access. WSU GME Office leads intensive Resident Wellness project.
- Majority of residents reporting working in a respectful environment.

Seed Grant

5 Seed Grants awarded in 2017-18: \$6,420 total

Otolaryngology

\$425

Cost effectiveness of dural sealants in endoscopic CSF leak repair

Internal Medicine

\$1,500

Avoiding CHF Readmission-Overusing BNP Application Trial (ACROBAT)

Internal Medicine

\$750

General Critical Care Ultrasonography and Critical Care Echocardiography: Barriers and Facilitators among Critical Care Physicians

Dermatology

\$1,750

Topical 5% Tranexamic Acid as a Treatment for Postinflammatory Hyperpigmentation due to Acne Vulgaris

Internal Medicine

\$1,995

Procalcitonin in Uncomplicated Diverticulitis (ProUD)

Trial



Goals Accomplished: 2017-18

The academic year was fruitful for the GME office and we met and even surpassed some of our goals. Here is summary of some of our achievements:

Goal: Provide oversight and support for program accreditation

- Our successful CLER Site Visit at Ascension
- Special reviews conducted for programs

Goal: Support and enhance resident and faculty scholarly activity

- 25% of our residents and 48% of our core faculty published academic work in 2017-18.
- 71% of residents participated in QI projects.
- We increased Seed Grant usage by 74% from the previous year.
- Presented 23 resident posters including an award winner at the QI summit.
- Delivered 2 slide presentations and 2 poster presentations - including one award winner at the SEMCME Research Forum.
- Multiple other state and national QI presentations.

Goal: Fine-tune program and institutional dashboards, linked to APEs

- We constructed a standardized Annual Program Evaluation process, integrated with calibrated multi-source Dashboards.
- Adopted a Quality Improvement PDSA framework for program improvement.

Goal: Enhance resident communication skills

- We built and deployed a new OSCE case around opioid prescriptions
- Published "Health Disparities Educational Initiative for Residents" in the Ochsner Journal.
- Continued the Transitions of Care communications skills task (OSHE).

Goal: Implement Developing Active Resident Teachers program

- We successfully designed and deployed the DART program
- Four residents completed the DART program and were awarded DART certificates.

Goal: Implement an institutional initiative on resident wellness

- We built new partnerships using the Resident Wellness Scale and published a peer-reviewed paper on the development of the scale.
- We vigorously participated in the AIAMC's NI-VI including 1 presentation and 2 posters, one award-winning.
- Expanded our promotion of wellness resources through our website and outreach to residents.

Our Aims for 2018-2019

Action Plans

Continue to provide oversight and support for program accreditation and state-funded GME growth.

Support resident scholarly activity to promote an environment of inquiry in each program.

Strengthen program and institutional dashboards to align with School of Medicine goals.

Broaden and implement the institutional initiative on Resident Wellness for all programs.

Expand DART and launch DEFT (Developing Effective Faculty Teachers) and involve more residents and faculty.

Utilize Kado Clinical Skills Center for evaluation and teaching of communication skills (OSCE/OSHE).

Enhance professional development for program directors, faculty, and program coordinators.

Evaluation Project – Using information to improve programs, increase transparency of evaluation to assuage fear of retaliation and promote timely feedback to residents.

Assist the Resident Council in defining their role and empower them to accomplish their goals.