

### Marshall Graduate Medical Education

### State of Graduate Medical Education/ Annual Institutional Review

Presented by:

Paulette S. Wehner, MD,FACC,FACCP,FAHA,FACP Professor of Internal Medicine and Cardiology Vice Dean for GME Designated Institutional Official

Presented

2021-2022

### **Goals of Presentation**

- Review GME Mission & Aims
- Review Office of GME & Services Offered
- Review ACGME Annual Institutional Report (AIR) Requirements
- Overview Well-Being Measures
- Overview Patient Safety & Quality Improvements
- Review Outcome Measurements
- Provide an Update on Status of Action Plans for 2021-2022
- Set Goals for 2022-2023



## **GME** Mission

The mission of Graduate Medical Education at Marshall University School of Medicine is to oversee high quality accredited training programs that produce professional and competent physicians to engage in autonomous practice, communicate effectively and are prepared to adapt to the future evolution in healthcare upon completion of the program. We encourage graduate retention with the educational focus on the unique patient population in the Appalachian region.

The Sponsoring Institution promotes professional development in teaching, life-long learning, and well-being throughout the entire graduate medical education community. To support our mission, we cultivate a diverse and inclusive academic and clinical learning environment.

**Revised January 2021** 



# **GME Aims**

- Train physicians who are competent to engage in autonomous practice upon completion of the program, attain board certification in their specialty while encouraging graduates to serve our unique patient population.
- Cultivate diversity and inclusion in the academic and clinical learning environment, while fostering physician recruitment and retention to promote equitable healthcare delivery.
- Promote well-being of self and others throughout the academic and clinical learning environment on the importance of developing strategies to identify, mitigate and prevent fatigue and burnout.
- Promote and enhance professional development throughout the graduate medical education community.



### Office of Graduate Medical Education Staff

#### Paulette S. Wehner, MD, DIO, Vice Dean, GME

Liaison/collaborator with participating sites, CFO's, residents, program directors and the entire GME Community

Oversees, supports, administers and ensures ACGME accreditation compliance for residency/fellowship programs

Chair, Graduate Medical Education Committee (GMEC)

Ensures financial sustainability of programs and trainee support

Oversees GMEC policy development/ ADS Updates, New Program Applications, Match and ERAS, New Program Director Mentoring

### Amanda Jones, BA, C-TAGME, Director of GME

Started as Director in December, 2021

Maintain institutional and program accreditation

Oversight and administration of the programs including institutional policies, educational and well-being support, milestone compliance reports, onboarding of new and current trainees

Provide the residents and fellows an excellent clinical learning environment including the teaching of safe, high quality patient care and life-long learning

Review of all new program applications, site visit documentation, ADS updates and other related information prior to submission to the ACGME

Provide the overall resources needed for our programs to be successful and support community health care needs





### Office of Graduate Medical Education

Staff Starting 2013- Present

2013	2015	2017 (Pt to FT 2019)	2018	2021 (PT)
Jo Ann Raines	Amanda Jones (Now GME Director)	Lisa Pinson Milstead	Beth Ann Howard	Jason Scott Information Technology
Sr. Prog. Coord./Special Projects Grant Writing/ IRB Support Accreditation/Grant Management Support for Rural Training Program	New Innovation Super User Institutional New Innovations Super User Serves as Resource for Other Coordinators	Patient Safety/Quality Improvement Manager Datix investigations and follow up, "Close The Loop" PSQI/Quality & Patient Safety Summit	Administrative Assistant Monthly Resident billing and invoicing Resident/Fellow Orientation GME Training Program Liaison (TPL) with ECFMG- Visa	Information Technology Support Web Page Development Technical Support Support for Virtual Platforms for lectures,
Development Maintain accreditation of Marshall Community Health Consortium and Holzer Family Medicine & new Rural Surgery Programs Policy Development	Resident/Fellow Orientation Oversight of Clinical and Educational Work Experiences Compliance Special Reviews	House Staff Council Facilitator/GME webpage monitoring Wellness & Strive Onboarding physicals, vaccinations and COVID infection/ exposure	Processing Credentialing verification for past Residents and Fellows Assist DIO and Director with assignments and other duties	courses, videos and training IT Troubleshooting Setting up and scheduling virtual meetings



# Required Minimal Annual Institutional Review Components

- 1. Results of Most Recent Institutional Letter of Notification
- 2. Results of ACGME Resident & Faculty Surveys
- 3. Each of its ACGME-accredited programs' accreditation information, including accreditation and recognition statuses and citations.



### Institutional Status-Continued Accreditation

#### **Both Sponsoring Institutions Awarded Continued Accreditation & No Citations!**

1 Accreditation Council for Staduate Medical 1/25/2022 ACGME Paulette S Wehner, MD 1639 13th Avenue Huntington, WV 25701 Dear Dr. Wehner, The Institutional Review Committee (IRC), functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following institution: Marshall Community Health Consortium Huntington, WV Institution: 8005500932 Based on the information available at its recent meeting, the Review Committee accredited the institution as follows: Status: Continued Accreditation Effective Date: 01/18/2022 The Review Committee commended the institution for its demonstrated substantial compliance with the ACGME's Institutional Requirements without any new citations The ACGME must be notified of any major changes in the organization of the institution. When corresponding with the ACGME, please identify the institution by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS). Sincerely liner Olivia Orndorff, MSLIS Associate Executive Director

Associate Executive Director Institutional Review Committee oorndorff@acgme.org

CC:

Joseph I. Shapiro, MD





Suite 2000 Chicago, IL 60611

Phone 312,755,5000 Fax 312,755,7498 www.acgme.org ACGME

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Yeara Paulette Wehner, MD Vice Dean for Graduate Medical Education Marshall Univ. Joan C. Edwards School of Medicine 1639 13th Ave. Office of GME Huntington, WV 25701

Dear Dr. Wehner,

The Institutional Review Committee (IRC), functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following institution:

Marshall University School of Medicine Huntington, WV

Institution: 8005500475

Based on the information available at its recent meeting, the Review Committee accredited the institution as follows:

Status: Continued Accreditation Effective Date: 01/18/2022

The Review Committee commended the institution for its demonstrated substantial compliance with the ACGME's Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the institution. When corresponding with the ACGME, please identify the institution by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).

Sincerely,

Olivia Orndorff, MSLIS Associate Executive Director Institutional Review Committee

oorndorff@acgme.org

ACGME Resident Well-Being Survey 2022

2021-202	22 ACGME Resident/Fellow Survey	Survey taken: February 2022 - April 2022
559501	Marshall University School of Medicine - Aggregated Pro	ogram Data
Well-Bei	ng Survey Questions	

An important component of the Common Program Requirements is that physician well-being is crucial to delivering the safest, best possible care to patients. The results of the Well-Being Survey are intended to help your program and institution build and improve local well-being efforts, and make it easier to comply with the ACGME well-being requirements.

Programs Surveyed 18 Residents Responded 239/241

Response Rate 99%

Aggregate reports will be provided to the program and sponsoring institution when a minimum number of responses is reached. This ensures anonymity and maintains confidentiality for survey respondents. These results are NOT used by the ACGME in the accreditation process.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Institution Mean	National Mean
find my work to be meaningful.	77.0%	20.9%	0.4%	1.7%	3.7	3.6
work in a supportive environment.	71.5%	23.4%	3.3%	1.7%	3.6	3.6
The amount of work I am expected to complete in a day is reasonable.	60.3%	33.1%	5.4%	1.3%	3.5	3.4
participate in decisions that affect my work.	68.2%	28.9%	1.7%	1.3%	3.6	3.5
have enough time to think and reflect.	54.4%	33.9%	11.3%	0.4%	3.4	3.3
am treated with respect at work.	69.9%	28.5%	1.3%	0.4%	3.7	3.6
feel more and more engaged in my work.	54.0%	38.9%	6.3%	0.8%	3.5	3.3
find my work to be a positive challenge.	64.4%	30.5%	4.2%	0.8%	3.6	3.5
find new and interesting aspects in my work.	59.0%	38.9%	1.7%	0.4%	3.6	3.5

	Strongly Disagree	Disagree	Agree	Strongly Agree	Institution Mean	National Mean
I often feel emotionally drained at work.	31.0%	40.2%	21.8%	7.1%	2.9	2.8
After work, I need more time than in the past in order to relax.	25.9%	31.8%	28.0%	14.2%	2.7	2.6
I feel worn out and weary after work.	27.6%	34.7%	26.4%	11.3%	2.8	2.6

This report is confidential and not for further distribution. Please do not publish or share these results outside of your Sponsoring Institution.



### ACGME Resident 2022 Survey

Institution Percentage at-a	-			Faculty's overall		of the second		
	gance 8 48 48 47	4.0	4.5	Facility's overall		or the program		-
Compliant 4 - 3 - 2 -				0% Very regative Sc	195 smewhat nega	1% ative Neutral	7% Somewhat pr	siltre Very poe
Vary Ri Norcomplant	esteros Professionalism Patient Safety and Faculty Tee Teamook and Supan Institution Percentage Nation	ching Educational veco Contenz al Meiarts	Oliversity and inclusion	(	2 A Ind	3 Ið tuð on Mean	4 ANational	Mean ***
Resources	Satisfied with professional development and educ Workload exceeded residents/fellows/ available to			% Program Compliant 98% 92%	Program Mean 4.7 4.5	% Nation al Compliant 97% 89%	National Mean 4.5 4.3	
	Participated in facelly development, and/or acholarly and/office to enhance, probational able in. Education Quality improvement and patient safety Footpring your own well-being	93% 93% 90%	Fostering resident/bilo Practice-based learning Contributing to an inclu learning environment	and Improvement	¢	91% 93% 95%		
Professionalism	Faculty members actunprofessionally			% Program Compliant 05%	Program Mean	% National Compliant 94%	National Mean	
	Residents/fellows comfortable calling supervisors Process for confidential reporting of unprofessions Satisfied with process to deal confidentially with pr Personally experienced abuse, harassment mistr	al behavior roblems and concerns eatment, discrimination		97% 99% 93% 98%	4.8 4.9 4.6 4.9	96% 98% 93% 95%	4.7 4.9 4.6 4.7	
	Witnessed abuse, harassmant, mistreatment, disc	rimination, or coardor	1	98% % Program	4.8 Program	95% % National	4.6 National	
Patient Safety and Teamwork	Information notiost during shift changes, patient to Effective teamwork in patient care Interprofessional teamwork skills modeled or taug Effectively emphasizes cubare of patient safety Reakisenthreflows participate in citical against and Ricow how to report patients aflety events Process to transition patient care and citical dudi	it sty investigation and a	nalysis of safety events	Compliant 93% 98% 96% 96% 94% 96%	Mean 4.4 4.8 4.7 4.8 4.8 4.8 4.8 4.8 4.8	Compliant 90% 96% 90% 95% 92% 98% 89%	Mean 4.3 4.6 4.5 4.7 4.7 4.9 4.4	
Faculty Teaching and Supervision	Bufficient time to supervise residents/bilows Faculty members committed to adsusting resident Program director effectiveness Faculty members satisfied with process for evalua			% Program Compliant 97% 97% 95% 95%	Program Mean 4.7 4.8 4.7 4.6	% Nation al Compliant 94% 97% 94% 83%	National Mean 4.6 4.8 4.7 4.2	
Educational Content	Residents/feilows instructed in cost-effect/vensis Residents/feilows prepared for unsupervised prac Learning environment conducive to education	too		% Program Compliant 98% 97% 96%	Program Mean 4.9 4.9 4.8	% Nation al Compliant 94% 97% 96%	National Mean 4.7 4.8 4.8	
Diversity and Inclusion	Program fosters indusive work environment (with ability, or religion) Engaged by program in efforts to recruit diverse re		Ry, gender, sexual orientat	% Program Compliant ion, 99% 93%	Program Mean 4.8	% Nation al Compiliant 99%	National Mean 4.7	
	Engaged by program in efforts to retain diverse re <u>Participated in efforts to recruit diverse:</u> % I Pre-residency learners, inducting	siderts.#dkws Frequency** 80%	Faculty members*	94%	4.4 % Fre	93% quency** 91%	4.3	
T-1-1 D	modical students Residents/Fellows*	93%	Other GME staff*			67%		
Total Percentage of Compl 100 80 95.7 60 40 20	an ce by Category 04.6 95.0 06.3 06.9 96.5	94.8 94.1	95.3 85.9 94.9	04.8 99	4 98.1	97.1 6	6.2 95 1	95.3



# 2022 Faculty Survey

									esponse Rate	90%	
Institution Percentage at-a	glance	4.6	47	4.9	4.6	Faculty's overall	i evaluation	of the program			
Compliant 4- 3- 2-	44 44	4.4	4.0		4.5	0%	1% Somewhat nega	1%		7%	
Vary Re Noncompliant		Patienti Satiety and Tearneoite	and Supervision	Educational	Oliversity and inclusion		2			4	-
Her comptain.	Institution Pe	ecentage	National Mee	ens.			Ains	ditition Mean	AN	ational Mean	
	A 1992 12 10 1 10 1	1422 - 144	1.6.2.5			% Program Compliant	Program Mean	% Nation al Compiliant	National Mean		
Resources	Satisfied with professional Workload exceeded resid					98%	4.7	97%	4.5		
	PROTECTION OF OPPOPULATION	NULL PURCHA	avalance unie in	work		34.75	4.0	0.0 %	4.5		
	Participated in faculty der and/or scholarly activities	to enhance.			Fostering resident/bi	in and here		91%			
	professional skills in: Education			93%	Practice-based learning	ing and improvement	nt	93%			
	Quality improvement and	patient safety	, ·	93%	Contributing to an inc learning environment	lusive clinical		95%			
	Fostering your own well-t	ooing		90%	Running Grandman						
Professionalism						% Program Compliant	Mean	% National Compliant	National Mean		
Protessionalism	Residentalfeillows comfor		uners in our with o			96% 97%	4.6	94%	4.5		
	Process for confidential n					99%	4.9	98%	4.9		
	Satisfied with process to	deal confiden	tally with problem	is and concern		93%	4.6	93%	4.6		
	Personally experienced a Witnessed abuse, harass					98% 98%	4.9	95% 95%	4.7		
	Withessed abuse, harase	ment, messed	pment, discrimina	bon, or coard	an	(73,87)	1.1	0.000	12950		
Patient Safety and						% Pro gram Compliant	Mean	% National Compliant	Mean		
Team work	Information not lost during		is, patient transfe	rs, or the hand	-over process	93% 98%	4.4	90%	4.3		
	Effective teamwork in pat Interprofessional teamwork		lat or taught			98%	4.8	96%	4.6		
	Effectively emphasizes of					98%	4.8	96%	4.7		
	Residents/fellows particip			restigation and	analysis of safety events	94%	4.8	92%	4.7		
	Know how to report patie Process to transition patie			n residentaffe	lows fatigued	96%	4.8	98% 89%	4.9		
						% Program	Program	% National	National		
Faculty Teaching	Sufficient time to supervise	se regidents/k	licws			Compliant 97%	Mean 4.7	Compliant 94%	Mean 4.6		
and Supervision	Faculty members commit		ing rasidents/fello	ws.		97%	4.8	97%	4.8		
	Program director effective Faculty members satisfie					95%	4.7	94% 83%	4.7		
	Packy members sature	o was process	s for evaluation a	s educators		391.95	4.0	83%	4.2		
						% Program	Program	% National	National		
Educational Content	Residents/fellows instruct	ted in cost-off	loc thremes s			Compliant 98%	Mean 4.9	Compliant 94%	Mean 4.7		
	Residents*fellows prepare					97%	4.9	97%	4.8		
	Learning environment co	nducive to edi	ucation			96%	4.8	96%	4.8		
						% Program	Program	% National	National		
Diversity and	Program fosters inclusive	work environ	ment with race	of to race, effe	icity, gender, sexual crient	Compliant		Compliant 99%	Mean 4.7		
Inclusion	ability, or religion) Engaged by program in e				and a second second second	93%	4.0	04%	4.4		
	Engaged by program in e					94%	4.4	93%	4.3		
	Participated in efforts to r Pre-residency learners, in		_ % Frequ	80%	Faculty members*		% Fre	guency** 91%			
	medical students* Residents/Fellows*			03.55	Other GME staff*			67%			
Total Percentage of Compl				a274							_
100			-		-			_	-		
80 05.7	94.6 95.0 96.3	98.9	98.5 94.8	94.1	95.3 95.9 94.0	94.8 99	98.1	97.1	98.2 95	1 95.3	
60 -											
20											<u> </u>
			AV2122 AV18	20 AY2021	AY2122 AV1920 AY202	1 AV2122 AV1	920 AY202	1 AV2122 4	AV1920 AV2	021 AY2122	



### 2022 Faculty Well-Being Survey

2021-20	22 ACGME Faculty Survey	Survey taken: February 2022 - April 2022	Programs Surveyed 18
559501	Marshall University School of Medicine -	Aggregated Program Data	Faculty Responded 149/165
Well-Be	ing Survey Questions		Response Rate 90%

An important component of the Common Program Requirements is that physician well-being is crucial to delivering the safest, best possible care to patients. The results of the Well-Being Survey are intended to help your program and institution build and improve local well-being efforts, and make it easier to comply with the ACGME well-being requirements.

Aggregate reports will be provided to the program and sponsoring institution when a minimum number of responses is reached. This ensures anonymity and maintains confidentiality for survey respondents. These results are NOT used by the ACGME in the accreditation process.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Institution Mean	National Mean
I find my work to be meaningful.	81.2%	18.1%	0.0%	0.7%	3.8	3.8
I work in a supportive environment.	78.5%	tar <b>18.1%</b>	inip 2.7%	0.7%	3.7	3.6
The amount of work I am expected to complete in a day is reasonable.	67.1%	30.9%	2.0%	0.0%	3.7	3.4
I participate in decisions that affect my work.	71.1%	21.5%	6.7%	0.7%	3.6	3.5
I have enough time to think and reflect.	61.7%	34.2%	3.4%	0.7%	3.6	3.4
I am treated with respect at work.	78.5%	18.8%	2.0%	0.7%	3.8	3.7
I feel more and more engaged in my work.	54.4%	36.9%	6.7%	2.0%	3.4	3.3
I find my work to be a positive challenge.	65.8%	32.9%	0.7%	0.7%	3.6	3.6
I find new and interesting aspects in my work.	67.1%	30.2%	2.0%	0.7%	3.6	3.6

	Strongly Disagree	Disagree	Agree	Strongly Agree	Institution Mean	National Mean
I often feel emotionally drained at work.	32.2%	47.0%	12.8%	8.1%	3.0	2.9
After work, I need more time than in the past in order to relax.	30.2%	43.0%	19.5%	7.4%	3.0	2.7
I feel worn out and weary after work.	32.2%	45.0%	19.5%	3.4%	3.1	2.8

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# **Residency Programs**

#### MARSHALL UNIVERSITY SCHOOL OF MEDICINE- 10 Programs

Family Medicine Internal Medicine Internal Medicine/Pediatrics Neurology Obstetrics/Gynecology Orthopaedic Surgery Pediatrics Psychiatry Surgery General Practice - Dentistry

**MARSHALL COMMUNITY HEALTH CONSORTIUM – 2 Programs** *Holzer Family Medicine* 

Rural Surgery – Logan

12 Total Residencies including Dental



# Fellowship Programs

#### Marshall University School of Medicine

Addiction Medicine Cardiovascular Disease Child & Adolescent Psychiatry Endocrinology Diabetes & Metabolism Gastroenterology Geriatric Psychiatry Medicine Geriatric Medicine Hematology-Oncology Interventional Cardiology Neonatal-Perinatal Medicine Nephrology Pediatric Hospital Medicine Pulmonary Disease & Critical Care

Sports Medicine

14 Total Fellowships



### **Institutional Well-Being Activities**

- Lunches- All Major Training Sites SMMC, VAMC, Wellness Center
- Resident Advisory Committee Movie Night
- Massages
- Marshall Recreation Center Membership
- Administration of Flu Shots
- COVID Monitoring
- Personal Care Items In Wellness Center
- Increased Food & Healthy Food Options in Wellness Center & Canteen
- Increased Food Preparation Options in Wellness Center (Air Fryer)



### **Patient Safety & Quality Improvement**

Number of Residents Participating in Patient Safety Events (RCA 's) increasing

Continuing Requirement for Completion of AMA and IHI Learning Modules

2022 Summit Included

- In-person Keynote Speaker (Jacob Kilgore, MD) & Awards Ceremony
- Planning 10<sup>th</sup> Year of Summit!

House Staff Council

• Appointment of Standing Subcommittee to Plan Summit





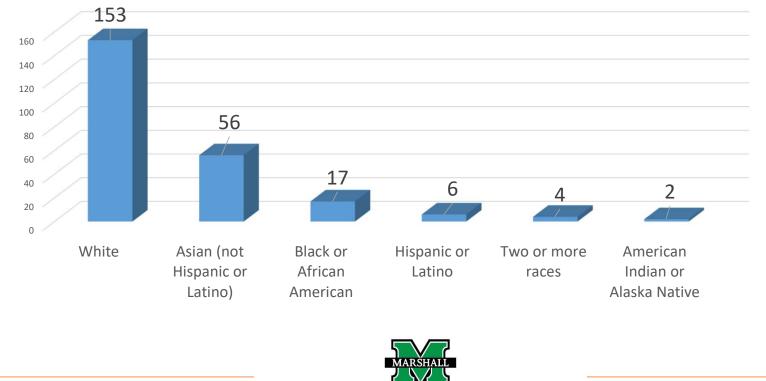
# Outcome Measurements

### Are We:

- Diverse?
- Growing as an Institution?
- Achieving Board Certification?
- Successfully Landing Practice Opportunities or Fellowships?
- Meeting Our Annual Goals?

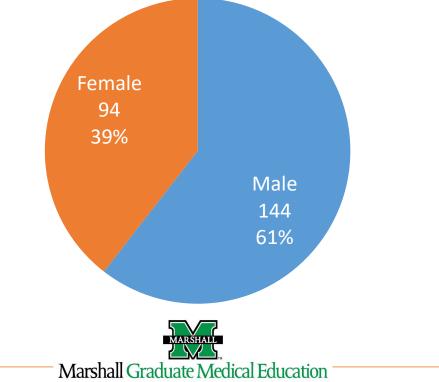


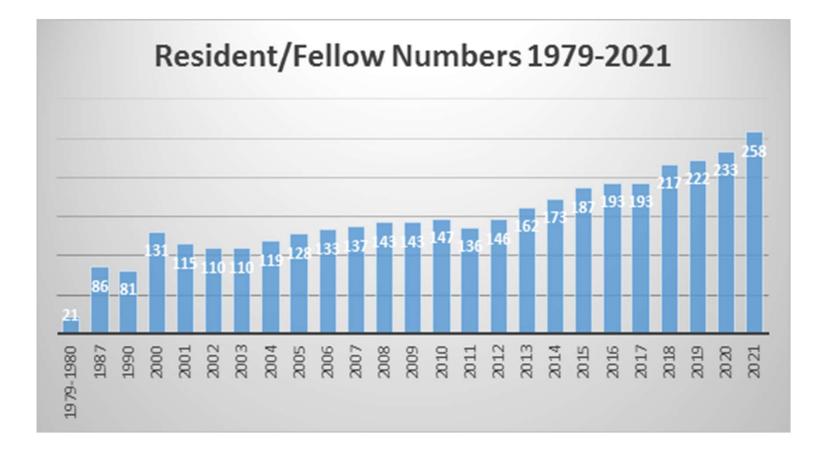
### 2020-2021 Demographics



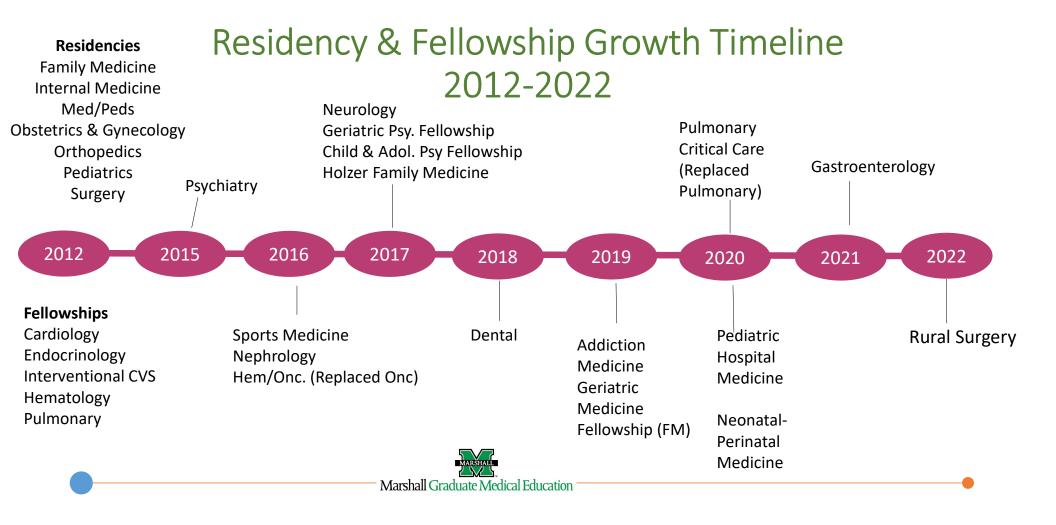
Marshall Graduate Medical Education











#### Core Program Board Certification Pass Rates 2013-2021

PROGRAMS	2021	2020	2019	2018	2017	2016	2015	2014	2013
Residency Programs									
Family Practice	100%	100%	87.50%	87.50%	100%	100%	85.7	(4/2015)	100%
Internal Medicine	93%	87.50%	92%	94%	86%	92%	67%	73%	90%
Medicine/Pediatrics Peds	50%	100%	0%	100%	100%	No Takers	100%	100%	n/a
IM	100%	100%	100%	100%	100%	100%	100%	100%	100%
Orthopaedic Surgery	100%	100%	100%	100%	100%	100%	100%	67%	100%
Surgery QE	100%	Delayed	75% (3 or 4)	100%	100%	67%	50%	67%	100%
CE	100% (1 Pending)	Delayed	100% (2 takers)		67%	75%	50%		not rec'd
Neurology	67%	n/a	n/a	n/a	n/a	n/a	n/a		n/a
OB/GYN	67%	100%	100%	100%	100%	67%	100%	100%	100%
Pediatrics	100%	50%	71%	80%	100%	100%	100%	80%	100%
Psychiatry (*only 1 has taken it)	100%	100%*	33%	100%	n/a	n/a	n/a	n/a	n/a
Dental	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a

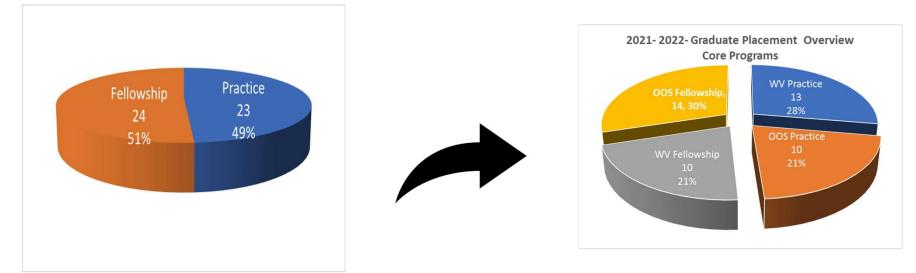


#### Fellowship Board Certification Pass Rates 2013- 2021

FELLOWSHIP	2021	2020	2019	2018	2017	2016	2015	2014	2013
Cardiology	75%	100%	100%	100%	50%	100%	100%	100%	100%
Endocrinology	50%	50%	50%	100%	100%	100%	100%	50%	n/a
Nephrology	n/a	n/a	100%	n/a	n/a	n/a	n/a	n/a	n/a
Pulmonary/CC	n/a	n/a	67%	100%	100%	100%	100%	0%	100%
Hematology/Oncology	100%	100%	100% Onc <i>,</i> 100% Hem	100%	100%	N/A to Hem/Onc	100% Onc	50%	n/a
Inteventional Cardiology	100%	100%	100%	100%	no takers	100%	100%	100%	100%
Sports Medicine	100%	100%	100%	100%	n/a	n/a	n/a	n/a	n/a
Child & Adolescent Psych	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Geriatric Psychiatry	n/a	na/	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Addiction Medicine	n/a	n/a							
Geriatric Medicine	n/a	n/a							
Peds Hospital Medicine	n/a	na/							
Gastroenterology	n/a	n/a							
Perinatal/Neonatology	n/a	n/a							



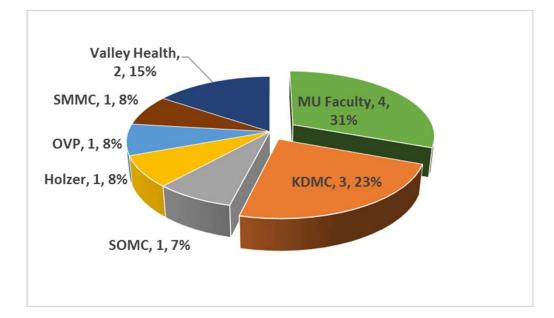
#### 2021-2022 Graduate Placements Core Programs\* Total Graduates = 47



\*Core Programs is defined as including Family Medicine, Internal Medicine, Med/Peds, Neurology, Obstetrics & Gynecology, Pediatrics, Orthopaedics, Psychiatry & Surgery

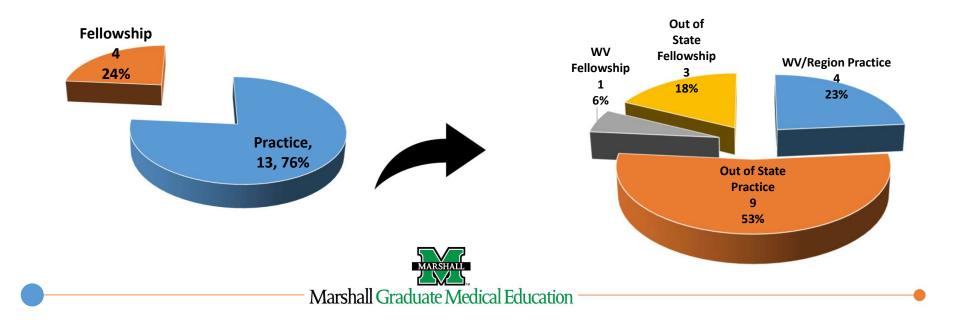


### 2021-2022 Core Program WV Graduate Placement Breakdown N= 13





### 2021-2022 Graduate Placements Fellowship Programs Total Fellow Graduates = 17



### Status of Meeting 2020-2021 AIR Action Plan Goals

- Select an experienced replacement for the Director of GME position with a smooth transition- Amanda Jones was hired and started January 10, 2022:
- Prepare for possible program site visits: Site Visits were scheduled for Addiction Medicine, Geriatric Medicine, Pulmonary/ Critical Care, Peds Hos. Med Sept. 2022, GI, and Neonatal April 2023).
- ✓ Continue "STRIVE" wellness platform/ Expand Wellness opportunities throughout COVID:
- Quality & Safety Summit held virtually but complemented with Keynote speaker and award assembly.
   Upgrades to Wellness Center: New flooring was installed in lounge area, exercise equipment was replaced, lactation room was updated. Personal hygiene care items were added to all bathrooms and a new cleaning service was hired.
- ✓ Develop/revise policies: The Academic Improvement and Disciplinary Action Policies were adopted and effective July 1, 2022. However, the policies are being reviewed once again for clarity and development of more user-friendly forms.
- ✓ Implement a New billing Template: A new billing template was launched on October 1, 2021.
- Start Rural Surgery Residency Program in Logan Regional Medicine Center Initial Accreditation Obtain, Residents Start July 2023.



### Progress Made On The Following 2020-2021 Goals To Be Continued During 2022- 2023

- Continue to seek grant funding (HRSA and ARC) for planning and development of rural training programs, such as Internal Medicine in Holzer, rural psychiatry.
- Continue to develop new programs in Orthopaedics Sports Medicine, Dermatology, Emergency Medicine.
- Continue to prepare for potential CLER visit.
- Continue to develop an ADS/APE update template for our programs to simplify data submission process for our Program Directors & Coordinators.



# 2022-2023 New Goals (In Addition To Continued 2021-2022 Goals)

- Appoint GMEC Subcommittee on Policy Revision and continue work on policy updates and revisions
- Prepare for Institutional Site & CLER Visits
- Update GME Wellness Center Exterior
- Obtain Osteopathic Recognition for Holzer Family Medicine
- Develop better scholarly activity tracking mechanism for trainees and faculty
- Continue to encourage TAGME certifications and provide Professional Development opportunities for Program Coordinators
- Increase GME Staff Presence/Wellness Activities at St. Mary's Medical Center
- Assist trainees with transition from DATIX to MIDAS
- Develop PT Information Technology position into FT position
- Refine Administrative Assistant position and hire replacement
- Continue working on new programs Orthopaedics Sports Medicine, Dermatology Emergency Medicine, Anesthesiology
- Continue to promote Trainee, Program Director, Program Coordinator Well-Being
- Develop Trainee Datasheet that encompasses all trainee information
- Continue to Increase communication within GME community and presence by quarterly newsletters, social media, and frequent press releases



# **Concluding Comments**

- Exciting Time for GME with
  - Growth of Residency Programs
  - Grant Opportunities to Advance Rural Residency Programs
  - Fine Tuning of Wellness Programs
  - National Recognition for Nation's First Separately Accredited Rural Surgery Residency
- Transition to Midas from Datix will be a Challenge for Patient Safety Reporting
- Growth of GME Staff Responsibilities To Ensure Continuing Accreditation/Initial Accreditation
- Preparation for Institutional Site & CLER Visits in 2023
- Preparation for Program Site Visits in 2023



# Thank You For Your Continuing Support!

