



Boston Children's Hospital

Until every child is well™

# GME ON-CALL

Volume 9, Issue 1 Fall 2017

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## Message From the Co-Chairs

Alan Woolf, MD, MPH, Debra Boyer, MD



It's autumn in New England, a most beautiful time of year. We welcome the BCH trainees who have come to Boston for the first time from all over the country and the world, as well as those who are returning to the hospital in new roles. You have settled in well and are already immersed in the unique, world-class clinical learning environment here. We welcome your dedication to the care of children and their families, and the intelligence, excitement and enthusiasm you bring to the bedside.

In the GME Office, we are focused on a number of very promising developments in medical education at BCH. Read about changes in the GME course *Strategies for Academic Success (SAS)* elsewhere in the newsletter, including the decision by the GME Committee to make SAS mandatory for all clinical fellows here at BCH. Revisions in the content of SAS have targeted clinical fellows at different stages of their training to present topics that are most relevant to them at that particular point in training. The GME Committee has approved several exciting new fellowship opportunities, some of which include unique content only offered at BCH. Read about them in this issue of *GME On-Call*.

Also read about clarifications and revisions in the ACGME requirements for residency and fellowship training programs that are now in effect as of July 1<sup>st</sup> 2017. There are new rules regarding duty hours, time off to pursue personal health needs, and prevention of trainee burn-out. The ACGME is concerned about trainee well-being as they progress through the training experience. The health and well-being of both trainees and faculty are also the highest priorities for BCH leadership. In this issue of *GME On-Call*, we summarize the new BCH policy on treatment of trainees by supervising faculty and attending physicians in the clinical learning environment.

### Comings & Goings:

We have a number of new resident or fellow members elected to the GME Committee for the academic year 2017-18: Drs. Jessica Bayner, Martha Ignaszewski and Muhammed Zeshan from Child/Adolescent Psychiatry, and Dr. Tony Pastor from Pediatric Cardiology. We welcome your service in representing the interests and views of all trainees across the institution and your commitment to the core mission and goals of medical education at BCH.

We also welcome new training program directors and associate training program directors: Dr. Miya Berson Leung, Associate Program Director for Child Neurology and Dr. Heidi Werner, Program Director for Pediatric Emergency Medicine at BMC.

We also welcome Sarah Johnson, new fellowship coordinator for Pediatric Hematology/Oncology.

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### GME STAFF

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## GME ON-Call

### Upcoming Events:

The next GME Committee meetings will be held on Monday **November 13<sup>th</sup>** from 5:00-6:00pm in Byers A&B and on Wednesday **December 13<sup>th</sup>** 4:00-5:00pm in Byers A&B. The Pediatric Urology Training Program will host an ACGME site visit by Dr. David Larson on Thursday, **November 16<sup>th</sup>**. The next seminars in the series “*Strategies for Academic Success*”, the essential curriculum for clinical fellows, will be held as follows:

### Second Year Fellows:

Monday, **December 4<sup>th</sup>** 1-5 PM, Byers A and B

OR

Thursday **December 7<sup>th</sup>** 1-5PM Karp 8 Conference Room

*Topics include:*

- Mentoring and Networking
- Navigating the IRB
- Grants (panel discussion)
- Academic Writing (Part 1: Abstracts and PowerPoint)
- Time Management

### Third Year Fellows:

Friday, **December 8<sup>th</sup>** 1-5 PM, Byers A and B

OR

Monday, **December 11<sup>th</sup>** 1-5 PM, Byers A and B

*Topics include:*

Academic Writing (Part 2: Manuscripts, etc)

How to Prepare Your CV

Learning as an Attending (panel discussion)

Job Hunting (panel discussion)

All clinical fellows should speak with their training program director about their mandatory attendance at some of these sessions, which are being scheduled throughout the academic year. A meeting of the Department of Medical Education Advisory Committee is slated to be held on Thursday **November 3<sup>rd</sup>** in the Karp 7<sup>th</sup> Floor Conference Room from 5:00-6:00pm. Finally, mark your calendars: GME Day at Boston Children’s Hospital has already been [tentatively](#) scheduled for Wednesday, **April 25<sup>th</sup>, 2018**. We hope that all of you will be there!

## COMBINED TRAINING PROGRAMS AND ALTERNATE PATHWAYS

We have seen a recent growth in combined training programs at Boston Children’s Hospital. We have several established, recognized combined pathways – Internal Medicine/Pediatrics, Pediatrics/Anesthesia and Pediatrics/Medical Genetics, Pediatrics/Child Neurology and Pediatrics/Neurodevelopmental Disabilities, and several adult specialties also offer combined training programs. There are also other ways to complete combined or alternate training pathways.

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## By the Numbers

### ACGME 2016-2017

10,672 accredited programs

752 newly accredited programs in 2016-2017

3.27 training programs per 100,000 US residents

443 training programs in Massachusetts

207 Pediatrics residencies

134 Child/Adolescent Psychiatry Fellowships

## GME ON-Call

### By the Numbers

#### ACGME 2016-2017

72 Child Neurology residencies

49 Pediatric Surgery Fellowships

46 Pediatric Radiology Fellowships

27 Medical Toxicology Fellowships

8 Neurodevelopmental Disabilities residencies

The American Board of Pediatrics also offers an Accelerated Research Pathway; this pathway provides some flexibility for individual residents who have specific career plans in academic medicine. Residents complete two years of general pediatrics and four years of training in a pediatric subspecialty that requires scholarly activity. This pathway is also available to residents interested in Allergy/Immunology. More information about this pathway is available on the ABP website [here](#).

In addition, the ABP also offers an Integrated Research Pathway for residents who have MD/PhDs and are interested in a career as a physician-scientist. Residents complete a modified three-year training program that includes 24 months of clinical training and 12 months of research. Residents must apply prior to beginning residency or during the first 9 months of their initial year of training. More information is available at <https://www.abp.org/content/accelerated-research-pathways-arp>.

Fellows who have demonstrated research experience either during or prior to residency may also apply to the ABP; program directors may petition the ABP to waive the scholarly activity requirement and reduce the length of the fellowship by one year. Fellows who are eligible will have completed a PhD or have extensive research experience. Application must be made no later than during the first year of training; this pathway cannot be combined with the accelerated research pathway. More information is available at <https://www.abp.org/content/subspecialty-fast-tracking>.

Aside from these established programs, trainees have other options to combine their training interests and complete dual-specialty fellowships. While the American Board of Pediatrics is not recognizing combined fellowship training programs, they do allow individuals to apply to complete simultaneous training in two specialties; the fellow is generally able to complete training programs in both specialties over the course of 4 years. The fellow completes the full clinical requirements of each specialty and then combines the scholarly activity portion of their training. It is also possible for fellows whose initial training was in Internal Medicine/Pediatrics to combine training in both adult and pediatric pathways of the same specialty. More information is available at <https://www.abp.org/content/dual-subspecialty-certification>.

In addition, the American Board of Pediatrics and the American Board of Internal Medicine allows residents who have completed Internal Medicine/Pediatrics training to complete one less year of fellowship training in both pediatric and adult specialties; information about specific requirements is available at <https://www.abp.org/content/combined-training-adult-and-pediatric-subspecialties>.

### New BCH Trainee Treatment Policy

Alan Woolf, MD, MPH

This September, the BCH Medical Staff Executive Committee gave its approval to the GME Committee's proposed hospital-wide trainee treatment policy, which is in accordance with ACGME guidelines for academic institutions. This policy is intended to clarify the expectations for communications and working relationships between trainees and supervisors, physician colleagues, mentors and other faculty with whom they interact on a daily basis. The goal is to help create a training environment that is conducive to providing health care of the highest quality, one characterized by respect, dignity and professionalism.

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## GME ON-Call

BCH expects the following of any faculty member who is working with a trainee(s):

- ⇒ To treat each trainee as a valued member of the care team, acknowledging the trainee's commitment to providing safe and quality patient care
- ⇒ To respond respectfully when a trainee asks a question, avoiding demeaning responses, thereby modeling the fundamental role of lifelong learning in our profession.
- ⇒ To promote graduated trainee autonomy by allowing a trainee to communicate findings and care plans and to provide productive feedback that fosters medical decision-making in cases that require correction or redirection by the supervising physician.
- ⇒ To never discriminate against a trainee on the basis of race, ethnicity, color, sex, sexual orientation, gender identity, disability, marital status, pregnancy, veteran status, religion or any other protected category.
- ⇒ To provide feedback in a manner that is constructive, not insulting or humiliating.
- ⇒ To support a trainee who has expressed feelings of excessive fatigue, burnout or depression or who is facing a personal crisis by helping the trainee identify services and allowing them time to seek urgent self-care if necessary.

BCH is committed to having multiple safe channels of communication in place to ensure that any trainee can quickly and easily report policy violations without fear of retaliation.

- ⇒ Trainees are encouraged to report any violations of this policy to their Training Program Director and/or the Associate Training Program Director.
- ⇒ Trainees should ordinarily try to resolve issues within their own clinical program or division. Should the dispute specifically involve the trainee's program director, then the trainee is encouraged to address the concern(s) with divisional or department leadership.
- ⇒ Trainees may alternatively initiate contact with either the **Office of Clinician Support** at 617-372-2678 or **BCH GME Office** at 617-355-3396

If it is determined that this policy has been violated or that inappropriate behavior has otherwise occurred, BCH will take all appropriate action. Any individual who is found to have violated this policy will be subject to a range of corrective action. The full policy can be accessed at the internal webpage of the Office of GME.

## Fall Fun in Boston

Fall has arrived and as everyone starts to adjust to the new season there are plenty of fun things to check out locally. Did you know that there are many FREE activities that you can participate while living in the Boston area? Every Sunday until November 12<sup>th</sup> from 11:00am-7:00pm, Memorial Drive is closed to traffic for **Recreation Sundays!** Memorial Drive is closed off from Western Avenue to Mount Auburn Street so the public can bike, run, skate or walk while enjoying the crisp fall air. Every Wednesday evening at the [Museum of Fine Arts](#), admission is FREE to explore this local arts center. Donations are a suggested way to give back for this opportunity to explore the museum. The [Institute of Contemporary Art](#) (ICA) in Boston offers FREE Thursday nights from 5:00-9:00pm. [SoWa First Fridays](#) is another way to start your weekend. Come explore local artists, galleries, shops and restaurants of the SoWa Art and Design District at this FREE event.



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## By The Numbers

### ACGME 2016-2017

5 pediatric-based  
Clinical  
Informatics  
fellowships

134 Child/  
Adolescent  
Psychiatry  
Fellowships

129,720 residents/  
fellows

52.9% male, 44%  
female, 3.1% un-  
reported

## GME ON-Call

### Strategies for Academic Success

First Year :

This year we held two different Strategies for Academic Success workshops for our First Year Fellows. We had a total of 73 participants for both workshops!

We had these workshops on Tuesday September 5th and Tuesday October 10th. We currently are working on planning a make up date for those first year fellows who were unable to attend this workshop. More details to be announced soon!

SoWa is indoors and held every Friday from 5:00pm-9:00pm at 450-460 Harrison Avenue in Boston, MA. On Wednesday, November 28<sup>th</sup>, head over to Quincy Market for a full day of entertainment then to see the **Annual Tree Lighting Spectacular** from 7:00-8:00pm. This is located at 4 S Market Street in Boston but be sure to bundle up since the Annual Tree Lighting is outdoors!

### Clinical and Educational Work Hours Update

The ACGME has provided some clarifications regarding the new Clinical and Educational Work Hours (formerly known as duty hours) requirements that went into effect on July 1<sup>st</sup>, 2017. Here are some of the key points; you can read the full FAQ here <http://bit.ly/2xQesn1>.

**WORK HOURS:** The ACGME has clarified what counts as work hours. Work hours include all clinical and academic activities related to the program; this includes all patient care and call activities, administrative activities related to patient care and required research. Time spent in meetings, on committees or in the program's interview activities must also be included. In addition, time spent on these activities while on-call from home must also be counted as work hours. Reading done in preparation for the following day, studying and research done at home do not need to be included.

**HOME WORK HOURS:** Counting work done from home is a new requirement of the ACGME; residents/fellows should log these hours as "work from home" and can log the total time on the end of their shift the day before or on the start of their log for the next day. If a resident/fellow is called back into the hospital to care for a patient that time must be counted towards the total hours for the week. It does not, however, start a new duty period and they do not need to have 8 hours before their next shift. Program Directors need to monitor residents/fellows for signs of excessive fatigue and have a plan in place to relieve them of clinical duties if necessary.

**TIME BETWEEN SHIFTS:** The ACGME has amended the eight hours between shifts rule to say "should" instead of "must". This change was made in recognition of the fact that residents/fellows may choose to stay beyond their scheduled hours to care for a patient. Programs are still expected to schedule at least eight hours between shifts and must monitor their residents/fellows for signs of excessive fatigue. Residents/fellows must still have at least fourteen hours off after a twenty-four in-house call shift; that fourteen hour period starts when the resident/fellow leaves the hospital, regardless of when they were scheduled to end their shift.

**CONFERENCE HOURS:** If a resident or fellow is attending a conference, the time spent in educational activities at the conference must be counted as work hours; travel time and non-conference hours do not need to be counted.

**4 WEEK AVERAGING:** All clinical and educational work hours must be averaged over the rotation or over a 4 week period, whichever is shorter. All averaging must be done without including vacation or leave time; the ACGME requires that vacation/leave time be excluded to ensure that programs do not pair heavy clinical rotations with vacation/leave to achieve compliance.

If you have any questions about duty hours requirements please do not hesitate to reach out Tery Noseworthy.

### GME Office Offers New Amenities for House Staff

The Office of GME has sponsored several new offerings for members of the house-staff to enrich their 'down-time' experience:

**Red Sox Tickets** – More than 100 residents and fellows took advantage of 'BCH House-staff Night' at Fenway Park on September 27th to take in a game between the Red Sox and Toronto Blue Jays.

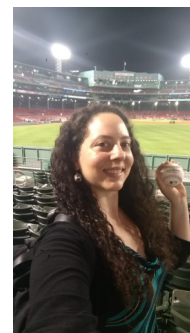
## GME ON-Call



Dr. Jef Doyle

Several house-staff members were a step away from fame by having their pictures on the Scoreboard and were invited onto the field. Dr. Jef Doyle, fellow in Pediatric Ophthalmology, was selected as our representative to go down on the field, as the leader of the pack!

“What an amazing birthday gift. We were met before the game, and taken down to the pregame area below the stands. Just before the game, we were led out onto the field behind home plate where various major sponsors had gathered for presentations. We were asked to come up and were introduced individually to the crowd and to meet Wally in front of the cameras. Time for a quick photo shoot and then off, as the players were already on the field and ready to start. Thank you to BCH so much for the opportunity - a birthday not to forget.” –Jef Doyle, MD.



Dr. Jessica Bayner enjoying a night at the game!

*Boston Symphony Orchestra Discounts* – For the second year, the Office of GME offered discounted tickets to all performances of the BSO this season to members of the house-staff. For \$8, trainees could purchase passes that allowed them to attend any BSO performance during the autumn-winter 2017-18 season.

## MedEdPORTAL ANNOUNCES NEW WEBSITE

MedEdPORTAL has a new website and has been renamed *MedEdPORTAL: The AAMC Journal of Teaching and Learning Resources*. This marks the transition of MedEdPORTAL to a fully open-access online journal that provides free and unrestricted access for readers and focuses exclusively on peer-reviewed materials. Material previously posted on the AAMC iCollaborative can now be found at [iCollaborative.aamc.org](http://iCollaborative.aamc.org) (all former URLs will be redirected).

## Coordinator's Corner

Kaytlyn Darling, MHA and Jennifer Cookingham, MHA

The Do's and Do Not's of the Residency/Fellowship Interviews

Interview season is upon us and is an exciting, busy time for our residency and fellowship programs. As coordinators, we are especially busy scheduling interview days, coordinating applicant and faculty schedules, and working to make the applicants visit to Boston Children's as smooth and positive as possible. In the pandemonium of the interview day, faculty, fellows, and coordinators may be so busy assessing the applicant and selling our program, we may unintentionally ask the candidate prohibited questions. In order to comply with HR & ERAS standards and provide a non-discriminatory environment for these applicants, following these simple rules will help to ensure all programs at Boston Children's Hospital remain in compliance with AGCME regulations. Here are a few guidelines to keep in mind during interview season, please remind anyone meeting with the applicants of the best practices below:

- Do not ask applicants how highly they are going to rank the program
- Do not ask interviewees which other programs they applied or are interviewing at
- Only the Program Director may indicate to an interviewee that we will rank the them highly
- We cannot guarantee that an applicant will match with the program
- Do not directly ask candidates about marital status or if they have kids. If the candidate freely offers this information it may be discussed
- Do not ask the candidate about country of origin, race, religion, disability, sexual orientation or gender.
- Be cautious that interview notes, applicant packets, and other interview documents are confidential and should not be shared, or left unattended

**Questions? Contact the GME Office**

Tery Noseworthy— *Manager*

617-355-3396

Katelynn Axtman— *Senior AA*