

# GME ON-CALL

Volume 8, Issue 2, Winter 2017

## Message From the Co-Chairs

Alan Woolf, MD, MPH, Debra Boyer, MD

Our house-staff at BCH are fully engaged in juggling their patient care responsibilities while learning new medical concepts, perfecting their clinical skills, and achieving confidence in their own abilities. We applaud their efforts and anticipate a newly expanded 'GME Week', the week of April 24-28th in 2017 to celebrate their achievements. Read about the plans for the 2017 GME Week in this issue of our newsletter and also read about the successful projects undertaken by BCH house-staff to improve the quality of patient care and patient safety under the sponsorship of the Trainee QI/PS Research Grants Program, which has been co-sponsored by the GME Office and the Program in Patient Safety & Quality for the past 5 years.



Please take note of changes that have been proposed in 2016 by the Accreditation Council for Graduate Medical Education (ACGME) to modify current policies governing house-staff training. Details can be found at the ACGME's website. The ACGME has clarified its use of data gathered for its 'Milestones' program; you can read about new rules for ACGME disclosure of a resident's or fellow's own milestones data to training program directors outside of the trainee's own institution elsewhere in this issue of GME On-Call.

In the GME Office, we are focused on a number of very promising developments in medical education at BCH since the creation of a new Department of Medical Education (DME) at the beginning of 2015. There is a new collaborative approach to educational initiatives, such as this year's Training Program Directors' Retreat, which was held on Friday, November 18th in the Enders Building from Noon-5:00pm. This year's retreat was a closer collaboration than it has been in the past with both the Office of Faculty development and the Teaching Academy.

Elsewhere in this issue of GME On-Call, look for details regarding the new Observership Program at BCH, which better accommodates the hundreds of trainees and health care practitioners from other states and other countries who want to come take advantage of the state-of-the-art facilities and world-class faculty teachers here at BCH to learn new medical procedures and new skills, and perfect their own knowledge base of the diagnosis and management of complex clinical problems in pediatric medicine. Also read about new rules and guidance regarding how staff can use Social Media safely, without violating patient interests and confidentiality.

### Comings & Goings:

Congratulations to **Kate Dorney, MD**, who has been appointed as Associate Program Director for Pediatric Emergency Medicine. We want to take this opportunity to thank former Neonatal-Perinatal Medicine coordinator **Elisabeth Roughan**, who has been promoted within the department. We'd like to welcome **Elizabeth Birle**, who is the new fellowship coordinator for the program. We'd also like to thank **Jessica Hughes** for her service as fellowship coordinator for Pediatric Cardiology and extend a welcome to **Jennifer Cookingham**, who has stepped into the role. We'd also like to welcome **Meredith Beauchesne** from Pediatric Pathology to her new role as fellowship coordinator; former coordinator **Anthony Calderone** remains in the program.

### Upcoming Events:

The next GME Committee meetings will be held on **Monday January 9th 2017** from 5:00-6:00 pm and **Wednesday February 8th** from 4:00-5:00 pm in the Enders Building, Byers A Conference

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## GME ON-CALL

room. The next seminar in the series “*Strategies for Academic Success*”, the essential curriculum for clinical fellows, will be held January 19th, 2017. This session focuses on Academic Productivity; contact Katelynn Axtman for more information. Finally, once again mark your 2017 calendars: GME Day at Boston Children’s Hospital is scheduled for **Wednesday, April 26th, 2017**. We hope that all of you will be there!

## Centralized Observership Program at Boston Children’s Hospital

International Health Services has consolidated all managerial activities related to observerships into a unified office. The centralized Observership Program provides a comprehensive, streamlined, and standardized management system for vetting and accepting international observers interested in advancing their learning of pediatric medicine.

### Program Goals

**Preserve department control** over acceptances.

**Reduce administrative burden on departments** by managing all day-to-day correspondence with applicants.

**Provide administrative support for accepted observers** including onboarding and clearance process, background checks, insurance verification, visa verification, guidance on housing, orientation, networking and professional development events, certificate of attendance, and management of an alumni network.

**Ensure compliance and safety** by following approved legal risk management practices.

### How It Works

BCH departments and programs should direct all inquiries to the Observership Program office at [Observership.Program@childrens.harvard.edu](mailto:Observership.Program@childrens.harvard.edu). Faculty are welcome to include any relevant comments about the applicant that should be taken into consideration.

**If the department knows the applicant and has decided to accept them**, the program will process them accordingly.

**If the department does not know the applicant**, the program will conduct a full review and forward a compiled application to the department for review.

### Observership Eligibility Guidelines

Observerships are generally reserved for currently-practicing physicians. This may include faculty, residents, fellows, and other clinicians as determined by the host department. Medical students are generally not eligible to participate in the program due to our institutional relationship with the Harvard Medical School Clerkship Exchange Program. However, if a department decides to accept medical students, they must be processed through the Observership Program to ensure compliance.

### Program Overview

Observerships are generally 4 weeks but may range anywhere from 1 week to 12 weeks.

Observers are responsible for a processing fee of \$500 that covers the cost incurred for onboarding and orientation. Observers may not have direct, physical patient contact or participate in research activities. Observers will have the opportunity to observe clinical activities and procedures, attend lectures, seminars, and other interdisciplinary conferences at the hospital. Observers will also receive an introduction to some of the hospital’s most innovative programs, including OPENPediatrics, the Simulator Program, and others.

### GME Committee Meetings

Monday  
January 9th  
at 5pm  
in Byers A and B  
Conference Room

Wednesday  
February 8th  
at 4pm  
in Byers A and B  
Conference Room

Monday  
March 20th  
at 5pm  
in Byers A and B  
Conference Room

Wednesday  
April 12th  
at 4pm  
in Byers A and B  
Conference Room

Monday  
May 8th  
at 5pm  
in Byers A and B  
Conference Room

**GME Committee Meetings**

Wednesday  
June 14th  
at 4pm  
in Byers A and B  
Conference Room

**Strategies for Academic Success**

Academic Productivity  
Thursday,  
January 19th  
from 1:30-5pm  
in Karp 4

Quality Improvement  
Monday,  
March 20th  
from 1:30-5pm  
in Karp 10

Professionalism,  
Humanism and  
Ethics  
Tuesday,  
May 30th  
from 1:30-5pm  
in Karp 8

To register  
please contact  
Katelynn Axtman at  
[katelynn.axtman@childrens.harvard.edu](mailto:katelynn.axtman@childrens.harvard.edu)

## ACGME Clarifies Policy on Release of Milestones Data

The ACGME recently clarified its policies regarding the release of a trainee's individual milestones to subspecialty training programs. The ACGME requires that program directors receive verification of the level of competency of each fellow that enters their program. This requirement is in place to ensure that the fellowship director is aware of areas of strengths and weaknesses and can adjust the learning plan for each fellow accordingly.

ACGME's Milestones Team understands that there are concerns about sharing these Mile-stone reports prior to a fellow being accepted into a program. There are concerns that fellowship directors will use the information as a means of screening potential applicants. Thus, residency program directors will feel obligated to rate all graduates at Level 4 for all sub-competencies to prevent their residents from being rejected from a fellowship. The ACGME does not support the use of the Milestones for selection. To avoid this situation, Milestone reports will not be made available to fellowship program directors until a given fellow has matriculated into the program and has been entered into the ACGME's Web Accreditation Data System (ADS).

Through this hand-off, the residency program director is helping the fellowship director to identify areas in which a resident may need additional help or has dramatically excelled .

For more information about the ACGME's milestones program, please visit the website:

<http://www.acgme.org/What-We-Do/Accreditation/Milestones/Overview>

## Coordinators Corner

Kaytlyn Darling, Sandra Korpalska-Thomas, Rosetta Mojahed-Dacey, Benjamin Paret, Elizabeth Roughan, Trishna Rana

The Department of Medicine created an opportunity for division managers to nominate skilled and motivated individuals with strong leadership potential to form groups to create a single cohesive document for a common task. We were selected to represent the clinical fellowship coordinators group. Members' experience in the position ranged from six months to eight years. As a group of coordinators we identified the lack of a central reference guide as a common hurdle when starting the fellowship coordinator role. To remedy this problem, we created the Clinical Fellowship Guide for Coordinators. Our goal in this guide was to create a basic reference for new and current coordinators. Through various meetings, our group was able to identify common processes and the key information needed to complete those processes as well as key contacts and resources. Once completed, the guide was reviewed by various individuals throughout the institution to check for accuracy. We are currently piloting this guide with three fellowship coordinators. If you are interested in piloting or using the manual as a reference, it is located on the Department of Medicine

## Social Media at Boston Children's Hospital

Lily Vautour, Senior Social Media Specialist

Social media in a nutshell: selfies, cat videos, trending celebrities, babies, #hashtags — right? Wrong!

At Boston Children's Hospital, we use our social media channels to inspire, support and educate our patient families and staff. We share blogs, videos, media stories and photos that highlight care teams, incredible innovations, new research, resilient patients, brave parents and more.

Social media has quickly become an expected way to communicate between brands and individuals. As our patient families increasingly use these channels to make meaningful connections and engage with the hospital online, it is important for our staff to understand the ways in which to participate. The Social Media team is training groups across the hospital and is available to you and your department if interested.

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There are a few simple – but important – things to keep in mind while engaging on social media:

- Stay professional
- Follow the hospital's general [code of conduct](#) policies
- Comply with [HIPAA regulations](#)

Employees are encouraged to follow the hospital's channels and share posts, tweets, videos, etc. In an effort to aid individuals who wish to engage, the Social Media Team has developed new materials to supplement the official hospital social media usage policy.

At [web2/socialmedia](#), you will find a list of the 36 Boston Children's social media channels to follow as well as these helpful documents:

- **Privacy Settings How-to**

- ◇ Want to lock your profile down? This document will help you with those settings.

- **Social Media Best Practices**

- ◇ This document quickly and easily boils down the key considerations for using social media.

- **Frequently Asked Questions**

- ◇ Refer to this if you need direct answers to the most pressing questions such as, "Can I accept my patient's mom's Facebook friend request?"

- **New Page Application**

- ◇ Is your department interested in having its own social media account? Fill out this form to start the process.

- **Social Media Post Application**

- ◇ Does your department want to post content to an official hospital social media channel? Fill out this form to give us the basic information.

If your department is interested in learning more, please contact Lily Vautour at [Lillian.Vautour@childrens.harvard.edu](mailto:Lillian.Vautour@childrens.harvard.edu) or 617-919-3128.

## Armis- New Mobile Evaluation Application offered by New Innovations

New Innovations is offering a new mobile application called Armis. Residents and faculty are now able to complete evaluations on their mobile device, though at this time Armis is only available for iPhones. Users can enable the touch ID feature to quickly and securely log into Armis. This mobile application can be used by residents, fellows and faculty allowing users to complete evaluations, request evaluations, see the total amount of overdue, in progress and new evaluations. It offers talk to text so important comments can be easily recorded. Armis automatically syncs to the web when evaluations are submitted and includes the option to save evaluations to complete them at a later date without losing any data. If you haven't already downloaded Armis, it is recommended that you give it a try so you can take advantage of this new and easy to use mobile feature!

### Upcoming National Meetings

#### ACGME Annual Educational Conference

March 9- 12th, 2017

Orlando, FL

[www.acgme.org](http://www.acgme.org)

#### Association of Pediatric Program Directors Spring Meeting

April 5 – 8th, 2017

Anaheim, CA

[www.appd.org](http://www.appd.org)

#### American Pediatric Surgical Association

May 4 – 7th, 2017

Hollywood, FL

[www.eapsa.org](http://www.eapsa.org)

#### Pediatric Academic Society

May 6 -9, 2017

San Francisco, CA

<http://www.pas-meeting.org/>

By the Numbers

NRMP – Main  
Residency Match

30,750  
positions listed

29,572  
positions filled

Child Neurology

119  
Programs

1,127  
Positions Offered

1,748  
Applicants

1,072  
Positions Matched

## Trainee QI/PS Grants: 5 Years Later

Alan Woolf, MD, MPH

In mid-2012, funds were allocated to the Office of GME (OGME) earmarked to support quality improvement and patient safety (QIPS) research grants in which surgical and medicine trainees would be principal investigators, with oversight by faculty mentors and with administrative and technical support provided by the Program of Patient Safety & Quality (PPSQ) and the OGME. The joint PPSQ/OGME Education Committee (EC) was given responsibility for the new trainee research grant program. The program has subsequently funded successfully a number of BCH-based research projects over the past 5 years.

### Grants Program Description

The Principle Investigator is required to be a trainee at BCH and he or she must have a BCH faculty member as a primary mentor for the proposed project. The faculty member's hospital division sponsors the proposed project; individual or group projects are acceptable for funding. Trainees can propose any research consistent with the mission of GME and the quality of patient care. The maximum award available for a single project is \$20,000, although most projects have been funded for less than \$10,000. In addition to funding, awardees also receive technical assistance from PPSQ expert staff and administrative support and oversight from staff within OGME. Grant applications are reviewed by three independent faculty reviewers, who judge each application for the following criteria: Objectives, Rationale, Significance & Relevance, Study Methods & Timeline, Innovation, Feasible During Residency, and Evaluation.

All residents and clinical fellows are invited to apply for these grants. The next cycle of applications has a deadline of April, 2017.

### Program Goals

The goals of the QIPS trainee research grants program are:

- To allow resident/fellow investigators to conduct research that addresses patient safety or quality of care issues
- To encourage residents and fellows to conduct research addressing improvements in patient safety and the quality of clinical care, establish a best practice and then inform the broader hospital community.
- To provide preliminary data to support a broader grant application or to create a hospital-based program in patient safety or quality improvement with the potential to be self-sustaining application or to create a hospital-based program in patient safety or quality improvement with the potential to be self-sustaining

### QIPS Projects

Twenty projects were funded during 2012-2016 (does not include new projects to be funded beginning in November 2016). Twelve different training programs were represented by house-staff, including 4 proposals from housestaff in child neurology and 3 from hematology/oncology clinical fellows. Two PIs were in their 3rd post-graduate year (PGY); the rest were in their 4th PGY or higher.

PI	Division	Project Title
J Brubacher	Surgery	Improve the safety of cast application using a simulation-based educational intervention
A Levin	Neurology	Develop a standardized tool for monitoring function in children with autism spectrum disorders and assess its feasibility, usability, validity
M Farias	Cardiology	Improving screening and expanding interventions for post-partum depression among mothers at BCH
J Yi	Hematology/Oncology	Decreasing the time to antibiotic administration in oncology patients with fever and neutropenia
S Bardain	Surgery	Application of a standardized nutritional toolkit in morbidly obese adolescents



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L Ganapathi	Nephrology	Using standardized assessment and management Infectious protocols for cytomegalovirus disease prevention in solid organ transplant recipients
C Yuskaitis	Neurology	Standardized handoffs to improve care in a pediatric subspecialty
S Morton	Neonatology	Implementation of enteral feeding guidelines in the NICU
C Wong	Hematology/Oncology	Standardizing central line discharge teaching in pediatric hematology/oncology patients to reduce central-line associated blood stream infections
N Paydar-Darian & M P Goldman	Emergency Medicine	Reduction of ED LOS associated with ketamine -- sedation for long-bone fracture reduction
E Portillo & B Quinones-Perez	General Pediatrics	Using evidence-based clinical tools to improve the quality of care for newly-arrived foreign-born patients at Martha Eliot Health Center
E Sprecher	General Pediatrics	Improving the quality of care for infants in Boston Children's Primary Care at Longwood with bronchiolitis
B Aravamuthan	Neurology	Development of an education bundle to improve patient preparedness for the inpatient epilepsy monitoring unit
A Kritzer	Genetics	The Priority One Project
A Nath	Neurology	Reducing sedation needs for children undergoing diagnostic work-up
C Taylor	Hematology/Oncology	Quality improvement project on fever management in patients with sickle cell disease in sub-saharan Africa
K Bell	Neonatology	Using an evidence-based guideline to reduce non-indicated antacid use in the Neonatal Intensive Care Unit
A Nair	Cardiology	Standardization of anticoagulation practices in the cardiac intensive care unit
C Guess	Adolescent Medicine	A quality improvement endeavor to optimize adolescent and young adult long-acting reversible contraceptive use
B Albert	Critical Care	A real-time bedside quality improvement tool to guide appropriate stress ulcer prophylaxis in critically ill children using computerized clinical decision support

## Fall Education Retreat 2016

By Ariel Winn, Angela Lam and Lori Newman

On November 18, 2016 the Office of Graduate Medical Education, the BCH Academy for Teaching and Educational Innovation and Scholarship, the Boston Combined Residency Program Medical Education Academy, and the Office of Faculty Development collaborated to host a **Fall Education Retreat**. This special retreat was the first time these groups collaborated to host a fall retreat. Furthermore, this was the first Boston Children's Hospital interprofessional education retreat with clinicians from nursing, social work and other clinical departments attending, in addition to physicians.

The retreat was extremely successful. There were 87 participants at the retreat which included 65 physicians, 6 nurses, 1 social worker, 4 psychologists and 11 other attendees from interdisciplinary departments. There were two academy awards given for accomplishments in Medical Education Scholarship. They were awarded to Josh Nagler, MD, from the Department of Emergency Medicine and Christiana Russ, MD from the Intermediate Care Program and Global Health Program.

### By the Numbers

#### Pediatrics

# 199

Programs

# 2,689

Positions Offered

# 3,869

Applicants

# 2,675

Positions Filled

**NRMP – Main**  
**Residency Match**  
**Continued**

#### Pediatrics- Anesthesiology

# 6

Programs

# 8

Positions Offered

## By the Numbers

19

Applicants

7

Positions  
MatchedPediatrics –  
Medical Genetics

13

Programs

14

Positions

38

Applicants

14

Positions  
Matched

The keynote speaker was Charles Hatem, MD, who is the Harold Amos Distinguished Academy Professor at Harvard Medical School and a treasured educator and primary care physician. His topic was Cultivating Clinician Educator Wellness and Preventing Burnout. Dr. Hatem's talk was well received with over 95% agreeing that he stimulated interest in the topic, encouraged questions and crowd participation, as well as offered specific techniques attendees could utilize in their own life.

There were then two workshops led by Debra Boyer, Lisa Delsignore, Jennifer Kesselheim, Alan Leichtner, Lori Newman, Diane Stafford, Ariel Winn and Alan Woolf. The topics were Applying Adult Learning Principles to Clinical Teaching and Learning How to Use Cognitive Science Theories to Make Learning Stick. Feedback from the retreat was extremely positive with the high range of attendees strongly agreeing the workshops were interesting topics and the leaders communicated effectively in their teaching skills. One person commented, "I found the retreat extremely helpful...over the years I have learned a lot about adult learning styles, but learning it with in small group activities really helped me understand it better." Another said, "Thought this was a great retreat. Loved the small group fun activities used during the cognitive learning strategies session" Finally, a participant wrote "One of the best educational retreats I have been to. I found the plenary very informative and insightful and the breakout sessions valuable. I have already put adult learning theories and some of the cognitive learning strategies to use!"

The Spring Education Retreat will be on April 26, 2017 and will focus on diversity, clinician wellness, and teaching skill development related to procedures, the operating room, and the ambulatory care setting. Additionally, the BCH Academy will be hosting



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monthly noon-time professional development in teaching seminars, including a recent session on Active Learning given by Daniel Kamin, MD of the Gastroenterology Department at Boston Children's Hospital and David Cohen, MD from the Department of Endocrinology at Beth Israel Deaconess Medical Center.



Dates and topics are listed below.  
Please reach out to Angela Lam  
via [BCHAcademy@childrens.harvard.edu](mailto:BCHAcademy@childrens.harvard.edu)  
to receive these notifications.

Date	Topic	Presenter
January 6th, 2017	Leading Interactive Clinical Sessions (Rounds or Other Patient Care Experiences)	Dr. Vincent Chiang, Dr. Amanda Growdon and Dr. Katie O'Donnell
February 15th, 2017	Assessing Learning & Clinical Competencies	Dr. Tanvi Sharma and Dr. Diane Stafford
March 27th, 2017	Providing Effective Learner Feedback	Christopher Roussin and Dr. Ariel Winn
April 26th, 2017 *afternoon session	Spring Education Retreat GME Day/BCH Academy Best Practices in Teaching	Dr. Alan Woolf, Dr. Alan Leichtner, and Dr. Joan Reede
May 23rd, 2017	Developing and Assessing a Single Teaching Session or a Curriculum	Dr. Dara Brodsky and Lori Newman
June 5th, 2017	Teaching Critical Thinking Skills	Dr. Beth Harper and Dr. Joshua Nagler
September 2017	Effectively Supervising Trainees and Students	Dr. Katie Greenzang, Dr. Catherine Michelson and Dr. Kelsey Miller
October 2017	Applying Principles of Interprofessional Education	Dr. Beth Rider

## By the Numbers

**Top five specialties/specialty tracks to which U.S. allopathic medical school seniors matched**

Internal Medicine

Pediatrics

Emergency Medicine

Family Medicine

Medicine-Preliminary (PGY-1 Only)

**NRMP – Fellowship Match**

**9,320**  
positions listed

**8,041**  
positions filled

**9,893**  
applicants

**Questions? Contact the GME Office**

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