



GME ON-CALL

Volume 10, Issue 3 Summer 2019

Message From the Co-Chairs

Alan Woolf, MD, MPH, Debra Boyer, MD

The GME Office continues to sponsor a number of exciting events in medical education here at Boston Children's Hospital this Spring. The final sessions of the Strategies for Academic Success (SAS) seminars for clinical fellows were held on April 29th, April 30th, May 21st and May 22nd. The 4 SAS sessions held so far this academic year have had a total 126 attendees. The Course Director, Dr. Sarah Pitts, continues to update the schedule for the SAS program for the next academic year to provide the essential topics for our clinical fellows in their roles as learners, teachers, researchers, clinicians, and scholars.



The Office of GME organized a celebration of GME Day on April 24th for a ninth year. Tremendous thanks go out to office staff – especially Kaytlyn Darling and Tery Noseworthy – who devoted their time and energies to organizing this annual event, to making sure that all went smoothly. This year's GME Day included a variety of events, including a scientific research abstract competition held on Tuesday, April 23rd and Wednesday grand rounds presented by 3 visiting professors: Drs. Carole Lannon, Laurel Leslie and Ms. Diane Pickles. Our visiting professors also held an informal dinner with members of the house-staff and small group meetings with hospital leadership, pediatric residents, medical educators, and training program directors and coordinators throughout the morning. Read about the details of the grand rounds presentation and the scientific research abstract competition elsewhere in this newsletter. We also held a grab and go House Staff Appreciation breakfast for all house-staff with coffee, fruit, OJ, yoghurt, bagels and pastries on Thursday, April 25th, starting at 6:30 am. Over 80 residents and fellows stopped by to say hello, help themselves to coffee and breakfast, and pick up some literature on wellness or a free pass to a fitness center.

The Academy at BCH also collaborated with the Office of GME to present an afternoon educational program. Dr. Roy Phitayakorn's presentation "Incorporating education technology into your teaching practice" was both entertaining and well-received by BCH Academy members. Three afternoon workshops attracted more than 80 participants. Topics included: 'Leveraging technology to increase large group audience interactivity and participation' (led by Dr. Miya Benson-Leung and Mr. Dan Schwartz), 'Using technologies to provide feedback to your learners: efficient and meaningful formative assessment' (led by Drs. Alan Leichtner, John Dalrymple, and Carolyn Marcus) and 'Making learning interactive using online technologies: before, during and after the teaching encounter' (led by Traci Wolbrink, MD, Michelle Gist, RN, and Tom Impresscia, BSN). All of the workshops provided useful information on effective teaching strategies to our educators.

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GME STAFF

Alan Woolf, MD, MPH

*Editor in Chief
Designated Institutional Official
Co-Chair, GME Committee*

Debra Boyer, MD

Co-Chair, GME Committee

Sarah Pitts, MD

Medical Educator

Ariel Winn, MD

Medical Educator

Jennifer Kesselheim, MD, M.Ed, MBE

Consultant to Office of GME

Tery Noseworthy, C-TAGME

Director, GME Office

Kaytlyn Darling, MHA, C-TAGME

Education Coordinator

Benjamin Yarsky

Data Analyst

Brittany Alaimo

Program Coordinator

GME ON-Call

Comings & Goings

We want to welcome Ms. Brittany Alaimo to the Office of GME as the new GME Coordinator at BCH. Ms. Alaimo was previously a Patient Experience Representative for Adolescent Medicine and Pediatric Environmental Health Center programs here at BCH. Brittany brings a 'can-do' attitude and an abundance of creativity, energy, and organizational skills to everything she does.

Welcome to Ms. Akeasha Roberts, fellowship coordinator for the Pediatric Rheumatology training program. Congratulations to Jennifer Kesslheim, MD, M.Ed, MBE, who has been appointed as the Program Director for Pediatric Hematology/Oncology. Thank you to Scott Armstrong, MD, who is stepping down from the role to focus on other projects. Congratulations to Lakshmi Ganapathi, MD, on her appointment as Associate Program Director in Pediatric Infectious Diseases. We would also like to welcome Ms. Hillary Dearborn as the new coordinator for the fellowship in Pediatric Pulmonary Medicine and wish her well in her exciting new position. Heartfelt thanks to Ms. Donna Giromini, the outgoing coordinator in Pulmonary Medicine who did such a splendid job as coordinator and is focusing on other responsibilities in Pulmonary Medicine. Congratulations also to Dr. Kristie Leeman who is the new training program director for the neonatology fellowship. Also, congratulations to Dr. Christy Cummings as the new neonatology associate fellowship training director. We extend our sincere thanks to Dr. Helen Christou for her dedicated service, inspired teaching, and invaluable mentorship to dozens of neonatology trainees in her role as the training program director for the past ten years. Congratulations to Dr. Christou in her new leadership role in research in the division.

We'd like to thank Mari Nakamura, MD, MPH for all of her hard work over the past 4 years as the chair of the joint PSQ-GME Trainee Education subcommittee of the GMEC. Mari is stepping away from this role to focus on her new position as the Medical Director for the Antimicrobial Stewardship program. Congratulations on your new position, Mari.

The final GME Committee meeting for this academic year will be held in the Byers B Conference Room on Wednesday, June 19th, at 4:00pm.

House-staff Transitions: Once again it is springtime at BCH and that always signals a time of change in GME. Residents and fellows who are finishing their training will soon be packing up and moving on to even greater challenges and opportunities in new professional positions. We want to thank them for their service during their training at BCH, as well as enlivening our Hospital with their energy, enthusiasm, spirit of inquiry, and resourcefulness. And we wish all of them well in their future pursuits, just as we are preparing the welcome for new house-staff arriving in June and July.

2019 Boston Children's Hospital Performance Improvement Activities

The Board of Trustees at Boston Children's Hospital approved a Quality Assessment and Performance Improvement Plan (QA/PI) for the Hospital. The following performance improvement activities have been designated as 2019 enterprise QA/PI:

- Reduce central-line associated blood stream infection
- Reduce catheter-associated urinary tract infections
- Reduce venous thromboembolism
- Improve hand hygiene compliance
- Improve recognition and early treatment of sepsis
- Improve the patient and family experience
- Reduce employee safety events required days away, restricted or transferred

All training program directors and coordinators are urged to inform their core teaching faculty and all trainees in their program of these 2019 BCH improvement priorities.

Source: BCH QAPI Improvement Plan April, 2019

NRMP

Match Facts

The 2019 appointment year was the largest in history of the NRMP match

66 subspecialties participated in the match

Of the 4,750 programs participating—77.2% filled all open positions

Of the 11,467 applicants—81.8% obtained positions

GME ON-Call

Wellness Initiatives
for BCH Housestaff**Joy of Pediatrics**

Alan Woolf, MD, MPH

[The following is excerpted from the Joseph W. St. Geme Jr Leadership Awardee address given by Dr. F. Bruder Stapleton, Chief of Pediatrics of the University of Washington Seattle Children's Hospital, at the Pediatric Academic Societies meeting in Baltimore on April 26, 2019]

Maslach Burnout
Inventory
Research

We are living in an age of stress. Life for everyone in all walks of life today is challenging but even more so for physicians. Some 1480 articles on medical burnout have been published in the literature in the past 18 months. Over 40% of physicians have symptoms of burnout at one time or another, and 40% screen positive for signs of depression. Tragically, 400 U.S. physicians commit suicide each year – that's over one a day. But burnout is something more than just the EMR, work hours, documentation requirements, and billing. Something is missing.

Housestaff
Socials

Candy Events

JOY is an attitude of heart and spirit that resides deep within us. It does not mean the absence of problems, stresses, or failures. JOY can come from the connections we make with patients, their families, residents, fellows, faculty, nurses, other health care providers, students, friends and family. In South Africa, the term 'Ubuntu' roughly translates to 'we achieve ourselves how much we share with others'. Ubuntu is aligned with an African proverb: "I am because you are. You are because we are." It reflects humanism in how we connect, how we grow, how we accept, and how we lead. It has been espoused by such revered South African leaders as Desmond Tutu and Nelson Mandela. What is missing is the human element (Ubuntu) and social connections. People are connected to technology and it follows you everywhere, at work, at home and on vacation. Sadly, almost half of U.S. adults admit they are lonely and do not have daily interactions. Half of physicians say they do not have a trusted advisor.

Breakfast Events

Yoga and Fitness
Passes

Factors that create Ubuntu and JOY in what we do as pediatricians include Purpose, Health, and Human Connections. The values of human connectedness are important:

Red Sox Tickets

- Creates purpose
- Personal growth
- Team accomplishments
- Being mentored
- Mentoring others
- Develop friendships
- Achieve better health

Boston
Symphony
Orchestra Tickets

Pet Therapy

Appreciation
Gifts

Taxi Vouchers

Trainee
Spotlights

The opportunities to reframe perspective in a "burned out" world:

- ◇ As individuals, remember humility, kindness, compassion, generosity, and forgiveness
- ◇ Expand our social connections
- ◇ Reach out when we see others in distress
- ◇ As organizational leaders, we align transactional decisions with humane concepts
- ◇ Support, recognize, and celebrate colleagues when we see them commit acts of service, kindness, and compassion
- ◇ Take care of yourself, physically and mentally
- ◇ Reach out to your connections for support when you feel overwhelmed and alone

To join our
wellness
committee
contact:

GME@childrens.harvard.
edu

[A reminder to all that the Office for Clinician Support (OCS) at BCH welcomes all trainees and faculty to get in touch. The free counseling and referral services are available 24/7 and confidential. You can reach the OCS at 617 355 6705]

GME ON-Call

GME Week Research Abstract Poster Competition

The annual call for abstracts of research in medical education to be displayed during GME Week at BCH resulted in 26 submissions this year. This is a competition: abstracts are judged for quality, scientific content and methodology, poster presentation, and significance. The 16 posters were displayed on April 23th and the three winners were announced during Grand Rounds on April 24th. The winning research posters for 2019 are:

Presenting Author: Kathleen Huth, MD, MMSc

Title: Top Curricular Priorities for Pediatric Residents in the Care of Children with Medical Complexity: A National Delphi Study
Co-authors: Lori Newman; Laurie Glader

Presenting Author: Danielle Levitt, MD

Title: The Impact of Cognitive Aids on Procedural Performance and Diagnostic Accuracy During Simulated Stressful Clinical Scenarios
Co-authors: Joshua Nagler; Peter Weinstock; Michael Monuteaux; Kelsey Graber; Jessica Dinan; Blair Dykeman

Presenting Author: Elizabeth Pingree, MD

Title: Encouraging Entrustment: A Qualitative Study of Resident Behaviors that Promote Entrustment by Supervisors
Co-authors: Elizabeth Pingree; Kathleen Huth; Beth Harper; Mari Nakamura; Carolyn Marcus; Christine Cheston; Daniel Schumacher; Ariel Winn

GME Day Speakers Describe 'ROADMAP' to Better Care for Families

Boston Children's Hospital welcomed three visiting professors this year to participate in its annual GME Day events celebrating our house-staff and the faculty who teach them. Dr. Carole Lannon a pediatrician and professor of pediatrics at the University of Cincinnati, serves as Senior Quality Advisor for the American Board of Pediatrics (ABP) and PI for the ABP's Roadmap Project "to support resilience and emotional health of children with chronic conditions and their families." Dr. Laurel Leslie, a professor of medicine and pediatrics at Tufts University School of Medicine and the director of the Tufts Program on Innovations in Pediatric Policy & Practice and Co-Principal Investigator of the Tufts Clinical and Translational Science Institute, is the Vice President of Research for the ABP and the ABP Foundation. Ms Diane Pickles, a program director for the American Heart Association, serves on the ABP's Board of Directors as a public member and is Chair of its Family Leadership Committee. Her second son, Jake, was born in 1994 with hypoplastic left heart syndrome and aortic atresia, has received all of his care here at BCH, and is currently a thriving young adult.

Their Grand Round presentation was titled: The Power of "How Are You Doing?": Engaging Patients with Chronic Conditions and Their Families. Ms. Pickles described the extraordinary stress of caring for a child with a life-threatening, complex heart defect and how she and her family coped with the continuing challenges that accompanied the subsequent medical interventions and supports needed to help her son through the years from infancy to young adulthood. She described well the feelings of despair, frustration, anxiety and fear that accompanied those daily

Awards presented by
Dr. Alan Leitchner
during Grand Rounds
on April 24th, 2019

Dr. Huth-Top
Dr. Levitt- Middle
Dr. Pingree- Bottom



GME ON-Call

GME Day Speakers Describe 'ROADMAP' to Better Care for Families (continued)

challenges that she and her family all experienced. She pointed out how their psychosocial health unfortunately went largely unaddressed by health care providers. She has sought to change what she witnessed as gaps in the offering of services to address the psychosocial needs of families. It is her sincere hope that attention to the mental health issues faced by all families of children suffering from chronic medical conditions can be better integrated into the curriculum of all physician trainees.

Drs. Lannon and Leslie described the new ABP initiative into improving mental health training among pediatricians – the Roadmap Project. In June 2016, the ABP's strategic planning committee, which included parents and young adults, identified emotional, behavioral, and mental health as the most important gaps in pediatric training. They pointed out the tremendous need: one recent AAP survey found that 65% of practicing pediatricians, including sub-specialists, felt they did not have adequate training to diagnose and treat the mental health needs of their patients.

The intent of the Roadmap Project is to normalize inquiry into the mental health needs of families – especially those with children suffering chronic medical conditions. Well child care is re-imagined to routinely ask parents and children with genuine interest and authentic concern about their emotional well-being. The initiative incorporates the ideas of parents and young adult patients as partners in the design of the interventions. Trainees are given the tools to help them feel more competent in addressing the needs uncovered in parents' answers to their inquiries. Training is re-imagined as integrating mental health into every trainee's experiences incorporating inter-professional co-training opportunities and modelling by a dedicated faculty comfortable with such issues. Inquiry into a family's emotional well-being is re-imagined as an essential and 'normal' part of each office visit, just like obtaining a height and weight and a blood pressure.

The goals of the Roadmap Project are to increase the resilience and emotional health of children with chronic conditions and their families by:

- Raising awareness among patients and families to validate stress and promote self-care
- Raising awareness among clinical teams to address these issues and provide support
- Provide resources and connections for clinicians and families
- The framework for the Roadmap Project includes:
 - Be Aware – of emotional and mental health challenges and the role of resilience
 - Educate – clinicians and families to the available tools and resources
 - Mitigate – promote strategies to support resilience
 - Surveillance & Screening – check in with families, use screening at regular intervals
 - Intervene – provide empathy, intervention and resources to those identified at risk or struggling
 - Follow-Up – provide follow-up after referral

Project leaders have developed scripts to demonstrate to clinicians how to get the conversations started, simulation videos with 'trigger' questions, instruction on how best to frame 'difficult conversations' with families, a 'Change Package' filled with tools and resources, and MOC Part II and IV continuing education modules for pediatricians already in practice. Those who want to learn more about The Roadmap Project can find details at: www.abp.org/foundation/roadmap



The
Roadmap
Project

Audience members were inspired by these excellent presentations and are very grateful to our three visiting professors for their time and energies. It is hoped that going forward BCH can become an active member of the institutional network being created to partner with the ABP in the pursuit of the goals and objectives of The Roadmap Project.

GME ON-Call

Spotlight Feature: Takuyo Chiba, MD

From the beginning: I was born and grew up in Fukuoka, Japan. The city is very famous for its delicious pork based ramen (tonkotsu ramen), which I missed a lot when we moved to the United States. Fukuoka has a population of 1.3 million and is a very energetic and attractive city located in the southwest part of Japan. When I was 12 years old, I left my home town for boarding school in Kagoshima, a four-hour drive from my home. The six years I spend there with my friends away from my parents were truly invaluable for me and I feel that the place is my second hometown.

On becoming a doctor: My mother is a pharmacist and worked for a small pharmacy, where I sometimes visited. That was probably my first contact with medicine besides regular pediatric clinic visits. Even though I did not think too much about it until later, to see my mother working interacting kindly and friendly with her patients gave me a strong positive impression of medicine. When I was young I was interested in engineering rather than medicine, I didn't think of becoming a doctor until high school. When I saw multiple doctors for my abdominal issues and eye problems, which ended up not being serious, I realized that being a doctor can be very challenging, truly satisfying and could change other people's lives.

My inspiration: I am very fortunate to have moments when I feel I really impacted my patients' lives through the encounters I had in emergency departments and intensive care units. These experiences are very rewarding and have strongly motivated me. These moments have been my primary driver and brought me to emergency medicine. Emergency medicine covers a very broad area and there is always something new to learn. The dynamic and challenging aspects of emergency medicine have been my motivation in my career as well.

Why Toxicology? During my residency, I met many brilliant toxicologists and saw many cases saved by their expertise and insight. I was overwhelmed by their knowledge in pharmacology and medications, and simply I wanted to be like them. I did not know that there are medical fields where basic physiology, biochemistry, pharmacology knowledge actually tremendously helps us in clinical decision making. That is a very exciting and interesting part of medical toxicology. On the top of my interests, the fact that medical toxicology is a not well-established field and there is no fellowship available in Japan, made me decide to stay in the US for two more years to learn medical toxicology before going back.

Before BCH: After I started practicing in emergency medicine in Japan, I realized that Japan has a big issue associated with ambulance diversion. I saw a patient who was declined by 31 hospitals before being accepted by our hospital, 2 hours away from the patient's house. This is partially because we did not have enough emergency medicine doctors due to lack of organized education and systems to support emergency departments that can take anyone, anytime, and anywhere. I came to the US to study emergency medicine and US healthcare systems. I am also very lucky to have found a very exciting subspecialty, medical toxicology, since my arrival.

My work: I'm working mainly at the "Regional Center for Poison Control & Prevention Serving Massachusetts and Rhode Island", where we are receiving phone calls from home, school, and health care facilities 24/7. Fellows are working as primary back-up for specialists in poison information. In addition to poison control center work, Medical Toxicology has an inpatient team at BCH and take bedside consults at BCH, Beth Israel Deaconess Medical Center, and Brigham and Women's Hospital.

**Fall Strategies for Academic Success****SAVE THE DATE!**

1st year sessions:
10/7/2019
10/29/2019

2nd year sessions:
10/8/2019
10/28/2019

Who:
All clinical fellows in 2 or 3 year ACGME accredited fellowships are required to attend

Topics Include:
Advocacy
Evidence Based Medicine
QI Projects
Wellness
Fellow as Supervisor
Developmental Networks
Mentoring

GME ON-Call

Contact the GME Office

GME@
childrens.harvard.edu

Tery Noseworthy
Director
617-355-3396

Kaytlyn Darling
Education Coordinator
857-218-5195

Benjamin Yarsky
Data Analyst
617-919-6038

Brittany Alaimo
Program Coordinator
617-355-4372

Find us at the
Landmark Center

Trainee Spotlight Continued

On work-life balance: It is very fortunate that I don't need to think too much about work-life balance. My wife, Akane, is super supportive, and I cannot thank her enough. My two daughters, Honoka and Sakura, make me smile and happy every day. Just spending some time with them helps me relax at home. I have not done anything special to adjust my work-life balance but whenever something bad happens, I always think about how lucky I am to have Akane, Honoka, and Sakura with me.

HMS FORMS NEW CLINICAL LEARNING ENVIRONMENT COMMITTEE

In 2018, Harvard Medical School's Dean George Daley formed a new standing committee at HMS to coordinate better the learning goals and experiences designed for its students as they take courses and clerkships in its affiliated hospitals: Partners Healthcare, Beth Israel Deaconess Medical Center, Boston Children's Hospital, Mt. Auburn Hospital, and Cambridge Health Alliance. The Charter of the Learning Environment Committee (LEC) includes the following statement of purpose.

Statement of Purpose

The Learning Environment in medical education comprises the physical and technological surroundings in which learning occurs, the underlying culture of the institutions and departments providing education, and the interpersonal relationships between learners, teachers, and associated staff who populate all settings in which teaching and learning occur. It may be affected by personal and organizational factors, many of which have been historically considered external to learning but which have become increasingly relevant in our complex healthcare system.

The Learning Environment Committee (LEC) at HMS is charged with monitoring the quality of the learning environment for students in the classroom, laboratories, and clinical setting, reviewing and coordinating initiatives to enhance the learning environment, and making recommendations to the Education Policy and Curriculum Committee, Department Chairs and Executive Committees, Hospital Administration and Clinical Chairs, and the Dean of the Faculty of Medicine for efforts to improve teaching and learning.

Membership & Activities

Members of the LEC include the Dean of Students and Dean for Medical Education, chairs of the curricular subcommittees of the Educational Policy and Curriculum Committee, Primary Clinical Experience directors, Designated Institutional Officials (DIOs) from the HMS affiliated hospitals, selected HMS students, selected residents and/or chief residents from HMS affiliated Hospitals on rotating basis, selected nurses from selected HMS affiliated hospitals on rotating basis, VP for Education/Chair Department of Medical Education (or comparable role) at HMS affiliated hospitals that host core clerkships, Director of Faculty Development, and Director MD/MBA program.

The LEC monitors multiple data sources provided by the Office of Education Quality Improvement at HMS and by DIOs at its affiliated hospitals. Data include relevant items from AAMC Year 2 and graduation questionnaires, course and clerkship evaluations, ACGME surveys of residents and core faculty, student mistreatment reports, student surveys of laboratory experience, hospital-based resident and faculty surveys. The LEC meets bimonthly has already met several times starting in 2018. Representatives to the LEC from BCH include Drs. Alan Leichtner and Alan Woolf.

Coordinators Corner

BCH GME OFFICE PRESENTS AT THE ACGME EDUCATIONAL CONFERENCE

GME office staff Kaytlyn Darling, MHA, C-TAGME and Tery Noseworthy, C-TAGME were selected to present at the ACGME's Annual Educational Conference in March in Orlando, FL. Their presentation, "Shifting the Focus: Coordinator-Centered Networks for Personal and Professional Growth" focused on developing a network of mentors made up of people who can help them get their job done, people who can help them advance in their career, and people who provide personal support to them. Participants in the session mapped their current developmental network, analyzed their network, identified gaps and areas for improvement, and learned strategies to expand and improve upon their network. The presentation was well-received and the presenters look forward to additional presentations at future ACGME conferences.



Massachusetts Society of Academic Medical Administrators (MSAMA)

MSAMA is a local organization whose goal is the professional development of and support administrators in the field of medical education. MSAMA holds an annual educational conference as well as educational sessions and networking events throughout the year. Boston Children's Hospital is well-represented within MSAMA; 3 BCH administrators are on the educational events planning committee (Kaytlyn Darling, Alaina McLaughlin and Tery Noseworthy) and about a dozen more are MSAMA members.

The last educational conference was held in March 2019. It was attended by approximately 100 medical education administrators. This year's theme was "Building Foundations and Building Connections" and included a plenary session about building your brand and a keynote with strategies for publishing in medical education, as well as opportunities to network with people in similar roles. There were also several breakout sessions, two of which were presented by Boston Children's Hospital. Kaytlyn Darling partnered with Karen Bruynell from Brigham and Women's Hospital to present "What Would You Do? Case-Based Presentations for GME and UME Coordinators" and Tery Noseworthy presented "Managing Up for the Mission: Developing Successful Relationships With Your Program Team". More information is available at www.msama.org.

Kaytlyn Darling, MHA, C-TAGME, and Tery Noseworthy, C-TAGME (above) Presenting at the 2019 ACGME Educational Conference

Kaytlyn Darling, MHA, C-TAGME, (below) was recently awarded the Dubois Excellence in Leadership and Service Award at the annual MSAMA Conference!



WHY PROFESSIONAL DEVELOPMENT IS IMPORTANT FOR COORDINATORS

Tery Noseworthy, C-TAGME

The role of the residency/fellowship coordinator has grown immensely over the past decade. Where coordinators were once considered to be clerks or secretaries, the changes in program requirements and ACGME structure have transformed the role into a professional position that plays a key role, in conjunction with physician leadership, in the success of their program. Professional development opportunities allow coordinators to improve upon the foundation of the knowledge and skills they already have and network with other people in the same role, leading to both improved job performance and job satisfaction. There are many ways programs can support professional development for coordinators. Coordinators can attend monthly residency/fellowship coordinator meetings, where they can improve upon their knowledge and skills as well as share their knowledge and experience with other coordinators. Programs can support coordinators to attend specialty-specific coordinator meetings as well as annual MSAMA and ACGME Educational Conferences.

Coordinators who have been in their roles for at least two years are eligible to sit for the certification exam for the Training Administrators in Graduate Medical Education (C-TAGME). The application process requires demonstration of professional development as well as the support of the program director; once accepted candidates complete a three hour exam at a local assessment center; upon successful completion of the exam the coordinator receives TAGME certification for a 5 year period; recertification requires continuing professional development and another exam. More information is available at www.tagme.org