

# GME ON-CALL

Volume 11, Issue 1 Fall 2019

## Message From the Co-Chairs

Alan Woolf, MD, MPH, Debra Boyer, MD

The annual summer transition of house-staff at BCH has gone very smoothly. We welcome the new trainees coming from all over the country and the world, as well as those who are returning to BCH in new roles. In the GME Office, we are focused on a number of very promising developments in medical education at BCH and continue to make progress in our 'pathways to excellence' in medical education.



The GME Office continues to sponsor the **Fellow-As-Teacher** luncheon workshops each autumn, led by Ariel Winn and Debra Boyer. This innovative program addresses how clinical fellows can transform the many patient-related consultations in their specialty into invaluable teaching opportunities for students and house-staff. Please see details of this program elsewhere in this issue of the newsletter.

The GME Office again is sponsoring the mandatory core curriculum for clinical fellows which has been renamed to: "**Curriculum for Academic & Professional Success (CAPS)**" during the 2019-20 academic year. Sarah Pitts is the physician lead on this project. This outstanding and innovative hospital-wide trainee development program includes sessions targeted to the needs of trainees in each of two years of fellowship training and covers curricular content in the areas of leadership and teaching skills, grant-writing techniques, the pursuit of a 'professional development plan', and quality improvement research. You can read about the upcoming dates and times and course content in CAPS elsewhere in this newsletter. Please contact Kaytlyn Darling (Kaytlyn.Darling@childrens.harvard.edu) to enroll in these sessions.

## Comings & Goings

We want to take this opportunity to offer our congratulations to **Dr. Craig Platt**, who is taking on the role of Associate Training Program Director for the Pediatric Allergy & Immunology Fellowship, which enjoys a national reputation for excellence. Dr. Platt joins **Dr. Lynda Schneider**, who has been the director of this outstanding training program for 29 years. They will work together to move this fellowship forward in exciting new educational directions.

We'd also like to congratulate **Dr. Zheala Quayyum** on her appointment as Associate Program Director for the Child and Adolescent Psychiatry training Program. We also want to welcome **Dr. Benjamin Shore** as the new training director for the pediatric orthopedics fellowship. Dr. Shore is a respected and accomplished surgeon, academician, researcher, and educator. He was previously the associate training director for this program, and we wish him much success in his new responsibilities. We also want to thank **Dr. Young Jo Kim** who has served in this role as one facet of his distinguished career and who must now step down to take on other administrative responsibilities for the Hospital.

## Inside this issue:

2019 Boston Children's  
Hospital Performance  
Improvement Activities

Upcoming GME Events

Fellow-As-Teacher  
Workshops

Renaming SAS to CAPS

Providing House-Staff with  
Their Personal Performance  
Metrics Using Big Data:  
BCH 360

Trainee Spotlight

Harvard Medical School  
Teaching

## 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 and Goings Continued

We also want to announce the appointment of **Dr. Mininder Kocher** as the new training program director for the Pediatric Orthopedic Sports Medicine Fellowship. Our grateful thanks to **Dr. Lyle Micheli**, the former fellowship director and world-renowned orthopedist and sports medical physician who is stepping down to attend to his many other professional commitments.

We also want to extend our welcome to **Dr. Kshitij Mistry**, who is the new Physician Lead for House-staff Education in Quality & Safety. This is a leadership position in developing educational outreach for patient safety and quality improvement (PS/QI) to the ACGME-accredited resident/fellow training programs at BCH. It includes oversight of the implementation of house-staff training opportunities in PS/QI and is sponsored by both the Office of GME and the Program in Patient Safety & Quality. We want to thank Dr. Mari Nakamura who previously served in this position for more than 3 years and provided her excellent leadership and direction to this joint activity. Dr. Nakamura has taken on new responsibilities in the Division of Infectious Diseases at BCH within the antibiotic stewardship program. **Dr. Mistry** in his new role will act as a liaison to the House-staff Quality and Safety Committee and will chair the Joint Committee on PS/QI Education.

We also want to welcome two new fellowship coordinators: **Megan Jacoby**, Pediatric Dermatology and **Sabrina Cannistraro**, Pediatric and Adolescent Gynecology.

Congratulations to all on the important next step in their academic careers!

### Upcoming GME Events

Don't forget to put some important GME dates on your smartphone. Upcoming **meetings of the GMEC** will be held on **Monday, September 9th** from **5-6 pm** and on **Wednesday, October 2nd** from **4-5 pm**, both in the Byers conference room in the Enders Building. All training program directors, associate directors, coordinators, and resident/fellow representatives are invited to attend. If you have not done so already please contact the GME Office to enroll as a member of the committee.

The GME Office, in conjunction with the BCH Teaching Academy, will be holding its semi-annual **Medical Education Retreat** for training program directors, associate program directors, coordinators, and interested faculty on **Friday, October 25th** from **12:30-4:30 pm**. We will have presentations and hands-on workshops concerning the science of learning.

This year, we are also holding a **GME Retreat** especially designed to meet the needs of training program directors, associate program directors, and program coordinators on **Monday, November 18<sup>th</sup>** from **Noon-4pm**. This session will be focused on training issues such as effective trainee evaluation, steps in the process of trainee remediation, and preparing for the ACGME's 'self-study' and site visit.

There are a lot of exciting events coming up this Fall to keep you moving forward towards your goals in GME!

#### 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

### Upcoming GME Events

GME  
Committee

Medical  
Education  
Retreat  
October 25,  
2019

GME Retreat  
November 18,  
2019

Boston  
Symphony  
Orchestra  
Tickets

Curriculum for  
Academic and  
Professional  
Success

## GME ON-Call

### Learning Opportunities

Learning & Development opportunities include:

Leadership & Management Development

Professional & Personal Development

Technical Training

Soft Skills

Career Development

Sign up via NetLearning or contact Learning & Development

Learninganddevelopment  
@childrens.harvard.edu

### Upcoming Fellow-As-Teacher Workshops

Ariel Winn, MD

Once again, the Office of GME will be offering “Fellow as Teacher” workshops on two dates this fall in order to aid our clinical fellows in their interactions with BCRP residents and HMS medical students, specifically tailored to the consult interaction. Two of our staff, Drs. Debra Boyer and Ariel Winn, are the lead faculty in this excellent program that has been so well-received by trainees in the past. Teaching during inpatient consultation has a broad-reaching impact on patient care, team communication and resident learning. However, teaching in the setting of consultation can be challenging due to barriers that exist in the hospital environment. However, teaching in the setting of consultation can be challenging due to barriers that exist in the hospital environment. This workshop will examine factors affecting the resident-fellow relationship, propose tools that can help fellows communicate effectively during consultation and introduce participants to effective methods for teaching in the time-constrained setting of inpatient consults. Lunch will be provided. Work-shop dates are as follows:

- **Monday September 9th 12-1:00PM**
- **Thursday October 17th 12-1:00PM**

Please RSVP to Kaytlyn Darling ([kaytlyn.darling@childrens.harvard.edu](mailto:kaytlyn.darling@childrens.harvard.edu)). We hope that all clinical fellows will take advantage of this opportunity to learn new teaching skills as they take on the challenges of inpatient clinical care.

### 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.

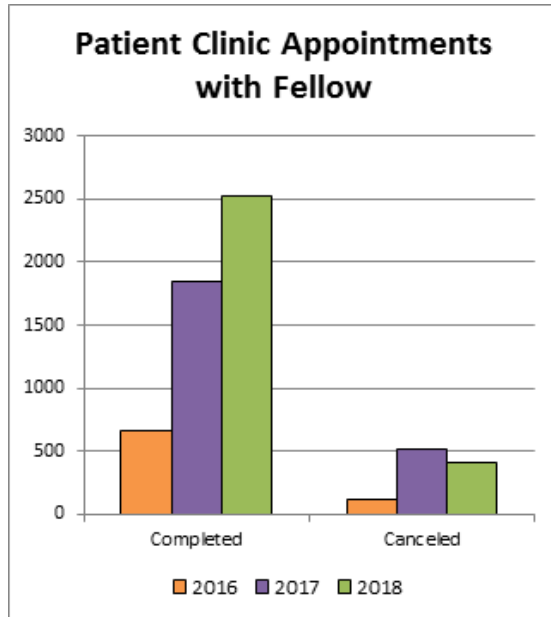
Source: BCH QAPI Improvement Plan April, 2019

## GME ON-Call

### Providing House-Staff with Their Personal Performance Metrics Using Big Data: BCH360

**Ben Yarsky**

As part of their continued focus on using data-driven metrics to validate the quality of their accredited programs, the ACGME implemented a common requirement call for the monitoring of trainee personal performance metrics (PPM). In their words, “access to data is essential to prioritizing activities for care improvements and evaluating success of improvement efforts.” Thus, requirement



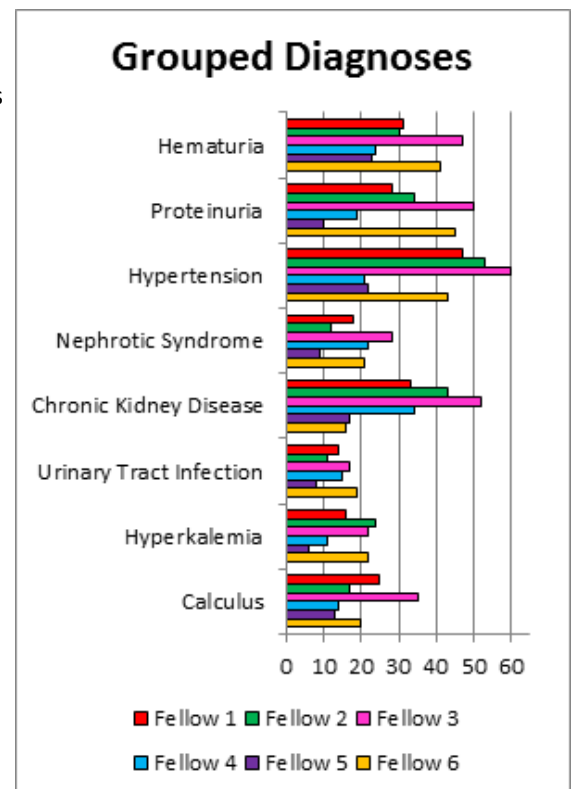
*Hypothetical data. For illustrative purposes only.*

GME Office data managers: David Jung, our data manager who left BCH two years ago and now Ben Yarsky, have been able to create and maintain dashboards of useful information for many of our programs at BCH using BCH360. ACGME guidance has emphasized flexibility as to what data must be provided to the house-staff, how often it needs to be provided, and how it needs to be delivered. We took this opportunity to determine, with input from individual training programs, what would be most helpful to the house-staff. For instance, Pediatric Nephrology chose to look at their fellows’ diagnoses via the notes they write to make sure they are receiving a good mix of cases. They can be organized to group similar diagnoses together and split up by year. Nephrology also chose to look at their fellows’ appointments to make sure that there are no fellows who are significantly behind or ahead of their peers. See figures on this page for examples of what your dashboard could look like.

These are common PPM for our programs to look at when starting out. On the other hand, there’s a good chance that BCH360 will capture more robust QI metrics if your program already has them. If you think your program could improve in the way they share PPM with your house-staff, reach out to Ben Yarsky ([benjamin.yarsky@childrens.harvard.edu](mailto:benjamin.yarsky@childrens.harvard.edu)) to set up a meeting with your training program director about how BCH360 can best serve your interests in providing the most useful PPM to your trainees.

VI.A.1.b).(2).(a) went into effect under the Quality Metrics section that states: “Residents and faculty members must receive data on quality metrics and benchmarks related to their patient populations.” What does that mean for our programs? It means that our house-staff need to be provided data on their patients, giving them the opportunity to improve. This may result in asking for a more diversified workload, comparing with their peers and seeing they are ahead or behind, or simply using the data as a form of concrete feedback.

At BCH, one way in which we achieve this goal of providing PPM is by using big data. In the past few years, the GME Office has started taking advantage of BostonChildrens360 (BCH360). BCH360 is a data warehouse that aggregates data every day from multiple systems around the hospital. Anyone with access (within strict security measures limiting users to BCH authorized staff) is free to view any of the shared reports and pull out data they specifically want to see. The database pulls data from laboratory results, EPIC, PowerChart, Billing, and many more. We can then use this information to create a clean dashboard of the clinical activity of an intern, resident or clinical fellow that automatically updates every night at midnight with data from the previous day; and it can be accessed at any time.



*Hypothetical data. For illustrative purposes only.*

## GME ON-Call

Fall Curriculum for  
Academic and  
Professional Success

SAVE THE DATE!

1st Year Sessions  
10/7/19  
10/29/2019

2nd Year Sessions  
10/8/2019  
10/2/2019

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

## Fall BCH Mandatory Fellows' Course Topics Announced

**Sarah Pitts, MD**

Each year since 2012, the Office of GME at Boston Children's Hospital has offered Strategies for Academic Success (SAS), a course specifically designed to address the training needs of our clinical fellows across all fellowship programs. In 2019 SAS was renamed CAPS: Curriculum for Academic and Professional Success. Like SAS, CAPS intends to address the ACGME educational requirements that each fellowship program may find otherwise challenging to cover. We have updated the curriculum to remain in line with the newly revised ACGME training requirements. CAPS also allows fellows across the hospital to interact with and to learn from one another.

The upcoming sessions of CAPS, and the planned topics for each session, are as follows:

**1<sup>st</sup> year Fall: 1<sup>st</sup> year clinical fellows in 2 or 3 year programs are required to attend one of the sessions below:**

10/7 or 10/29- 12:30-5:00 (first half hour optional lunch)

Byers B Conference Room

- Optional Lunch Topic: Advocacy
- Evidence Based Medicine
- Components of a QI Project
- Wellness and Burnout
- Fellow as Supervisor
- Developmental Networks
- Mentoring

**2<sup>nd</sup> Year Fall: 2<sup>nd</sup> year clinical fellows in 2 or 3 year programs are required to attend one of the sessions below**

10/8 or 10/28 12:30-5:00 (first half hour optional lunch)

Byers B Conference Room

- Optional Lunch Topic: Personal and Professional Branding
- Academic Writing Part 2: Manuscripts
- Social Determinants of Health
- QI-Reducing Healthcare Costs
- Addressing Patient Pain and Identifying Addiction
- Hot Topic : The Roadmap Project

If you have not already registered your fellow(s) for the 2019 Fall sessions, please email Kaytlyn Darling at: [Katylyn.Darling@childrens.harvard.edu](mailto:Katylyn.Darling@childrens.harvard.edu)

*"Those people who develop the ability to continuously acquire new and better forms of knowledge that they can apply to their work and to their lives will be the movers and shakers in our society for the indefinite future."*

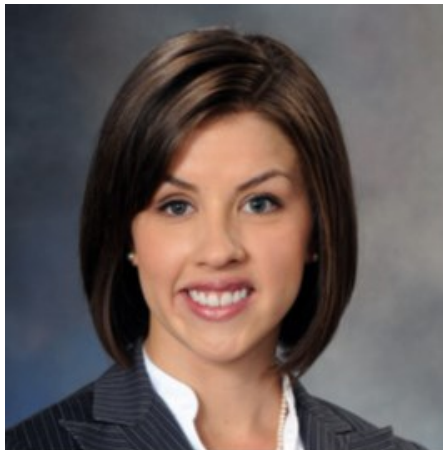
— **Brian Tracy**

## GME ON-Call

**Spotlight Feature: Elyse Portillo, MD**

**From the beginning:** I joke that I am from “The Greater Southwest” - we moved around a bit while I was growing up. I was born in Albuquerque, NM, spent all of my elementary school in and junior high years in Los Angeles, CA, then moved to Houston, TX just as I was starting high school. I feel a strong tie to all three places, so it’s hard for me to answer when folks ask where I’m from. I went to undergrad at the University of Texas at Austin and medical school at Baylor College of Medicine. I didn’t move to Boston until residency, but my husband and I have now been New Englanders for six years!

**On becoming a doctor:** I have had an interest in medicine from a young age because my earliest memories are in the hospital and clinics. I was diagnosed with retinoblastoma and underwent surgery to remove my right eye shortly before my third birthday. Growing up with one “real” eye and one prosthetic eye sparked an early fascination with the human body and its capabilities. My family also revered the doctors who cared for me which gave me a deep respect for the power of medicine to make a positive impact in the lives of others.



**My inspiration:** When I began my medical training, I realized that not all patients and families are able to access high quality care like the care I received in toddlerhood, either because of finances, geography, language, or other social or system barriers. It became my greatest frustration and greatest motivator that while there are well-trained health care providers, modern facilities, and life-changing therapies across this country, so many patients either can’t access these resources or receive substandard care when they do. This realization has driven me to focus my education and work on health equity and eliminating disparities in care.

**Why Emergency Medicine?** I found the emergency department (ED) clinically exhilarating from my first shifts as a medical student with its fast pace and variety of patients and diagnoses, but as I progressed in training, my desire to practice there was solidified by the role the ED has in the healthcare system. The ED is a safety net and crisis center for patients and families, and whether that “crisis” is a runny nose or a severe injury, an inability to obtain medications or a life-threatening new diagnosis, or simply a lack of a safe place to sleep at night, the providers in the ED have a unique opportunity to see and address these needs of the community. The ED is where those who are being failed by the system present, and where public health problems manifest. For these reasons, the ED felt like the perfect home for me. (Not to mention, as an almost-aggressive-extrovert, I love all the new people I get to meet with every new shift!)

**Before BCH:** I went to medical school at Baylor College of Medicine in Houston, Texas, completed residency training in the Urban Health and Advocacy Track (UHAT) of the Boston Combined Residency Program in Pediatrics at BCH and BMC, and then served for a year as UHAT chief resident at BMC before starting my pediatrics emergency medicine fellowship at Boston Children’s Hospital.

**My work:** I am a third-year fellow/new attending in the BCH Emergency Department. I am privileged to work clinical shifts with an amazing group of nurses, PAs, and doctors, and get to interact with residents and students from programs all over Boston who rotate through our ED. In addition to clinical work and teaching, I am active in our division’s quality improvement efforts and leading our fellow QI project, serve as our division’s representative for the Office of Health

## ACGME Initiatives

Awards

Back to Bedside

Clinical Learning Environment Review (CLER)

Opioid Use Disorder

Physician Well-Being

Pursuing Excellence Program

Sponsoring Institution 2025

## GME ON-Call

### Trainee Spotlight Continued

Equity and Inclusion and conduct my own research improvement efforts and leading our fellow QI project, serve as our division's representative for the Office of Health Equity and Inclusion, and conduct my own research.

**On Research:** My research examines the quality of care we provide to patients with limited English proficiency (LEP). Language is a critical factor in communication while families are in the Emergency Department, and strongly impacts how patients access information and care when they leave the ED. I'm studying the impact of LEP on repeat visits to the ED, specifically looking for factors that can be modified to make sure patient families with LEP don't end up back in the ED unnecessarily.

**On work-life balance:** Google calendar is my best friend! I literally block off time for sleep in my Google calendar. In all seriousness, I rely on my husband, my family, my friends, and my faith to help me balance my time and energy. I love my work, and am energized by it, but in order to do it well, I intentionally schedule time for each of the above (husband, family, friends, faith) to ensure that I'm rested and rejuvenated each time I start a shift. There's usually some good food and fitness mixed in with my away-from-work time as well to keep my physically ready for the job.

### GME Staff To Present At 2020 ACGME National Meeting

The Office of GME is very excited to announce that two of our staff members, **Ms. Tery Noseworthy** C-TAGME and **Ms. Kaytlyn Darling** MHA, C-TAGME, have been selected as speakers for the plenary session at the Coordinator Forum at the ACGME Annual Conference to be held in San Diego from February 27 to March 1, 2020.

The title of their talk is "Shifting the Focus: Coordinator-Centered Networks for Personal and Professional Growth", they presented this topic as a workshop at the 2019 ACGME Conference. The 2019 workshop earned the highest ratings at the Coordinators' meeting; as a result they have been asked to reprise it in the ACGME Coordinator Plenary session in 2020. Shifting the focus will combine traditional didactic learning with hands-on and interactive exercises to help participants identify their goals, recognize and improve their individualized developmental networks and learn practical techniques to improve and expand their network. The concept is based on the Developmental Networks exercise created by Jean Emans, Maxine Milstein, Ellen Seely, and Audrey Haas, adapted from the work of Kathy Kram.

Both Kaytlyn and Tery have also had breakout sessions accepted as well – Kaytlyn's presentation topic is Empathy and Emotional Intelligence- Why you need it, how to develop it and how teach it. Tery's topic for presentation will be Managing Up for the Mission: Developing Successful Relationships Within Your Program. Both of these are important administrative topics widely applicable to GME programs around the country. Congratulations to both Tery and Kaytlyn on this educational outreach to help others improve their skills!

### Interested in coming to the ACGME annual conference in 2020?

#### WHEN

Thursday, February 27,  
2020 through Sunday,  
March 1, 2020



#### WHERE

Hilton San Diego Bayfront,  
San Diego, CA

For information on registration, go to

<https://www.acgme.org/Meetings-and-Educational-Activities/Annual-Educational-Conference> or e-mail

Brittany.Alaimo@childrens.harvard.edu

## GME On-Call

### Harvard Medical School Student Teaching

Boston Children's Hospital house-staff and faculty continue to play important roles in the teaching of Harvard medical students (HMS) at all levels: from first-year students learning how to take a pediatric history and perform a comprehensive pediatric physical examination, to the pediatric clerkships required for second-year HMS students, to electives and research opportunities for advanced students during their third and fourth years.

| Important Aspects of a Positive Learning Environment                             | Practical Ways to Make this Happen   |
|--|--|
| Preceptor aware of resources available at course/clerkship and institution level | Have a list of contact names/numbers for HMS student affairs, mental health, clerkship director  |
| Students feel welcome  | Orient students upon arrival. Give them a place to put their coat, backpack, lunch, etc. Introduce them to nurses, receptionists, and other people in the learning environment |
| Students have space to learn   | Ideally, desk or some sort of space for students   |
| Students have autonomy   | Ideally, have students start patients on their own   |
| Students are part of learning process  | Make sure students are aware of, and contribute to, objectives and learning schedule   |
| Communication is open  | Model open communication with students and all members of the health care team   |
| Feedback occurs regularly  | Observe students in a focused, direct way  |
| Students have opportunities to show their progress                               | Provide opportunities to practice after feedback, then observe the targeted skill again, so that students can demonstrate progress   |
| Questions are asked in a respectful way  | Pay attention to how questions are asked. Construct questions based on students ability  |
| The environment is respectful  | Model Respectful communication with students, patients, families, and all members of the team  |
| The students feel supported  | Inquire as to how students are doing. Direct students to student affairs office, faculty advisor, and other resources at HMS if needed   |
| Students receive assistance in realizing the meaning of learning                 | Articulate how learning will positively influence students' roles as future physicians   |
| Students are excited to learn  | Create an environment in which students are eager and excited to participate and learn   |
| Students' roles are clear  | Make expectations clear. Make sure students understand their roles and the roles of all members of the health care team  |

Modified from *Pediatrics* 2015; 136 #1 July

*"Education is for improving the lives of others and for leaving your community and world better than you found it."*

**-Marian Wright Edelman**