

2022 - 2023

**ANNUAL INSTITUTIONAL REVIEW
EXECUTIVE SUMMARY**



GROWING

STRONG

TOGETHER

GRADUATE MEDICAL EDUCATION

Executive Summary

2022-2023

This Executive Summary reviews the key activities and accomplishments of the Dartmouth Hitchcock Graduate Medical Education (GME) enterprise for the academic year July 1, 2022 through June 30, 2023 (AY 22-23) and includes action plans for the coming year.

GME resides within the Center for Learning and Professional Development (CLPD), under the executive leadership of Susan Reeves, EdD, RN, Executive Vice President of Dartmouth Hitchcock Medical Center during AY 22-23 (Appendix A). The leadership team within GME is comprised of Andrew Perron, MD, Associate Dean of GME & Designated Institutional Official, Dwayna Covey, MEd, Vice President of CLPD & Associate DIO, and Chelsea Nolan, MS C-TAGME, Director of GME Operations (Appendix B).

A Note from the Designated Institutional Official (DIO), Dr. Andrew Perron:



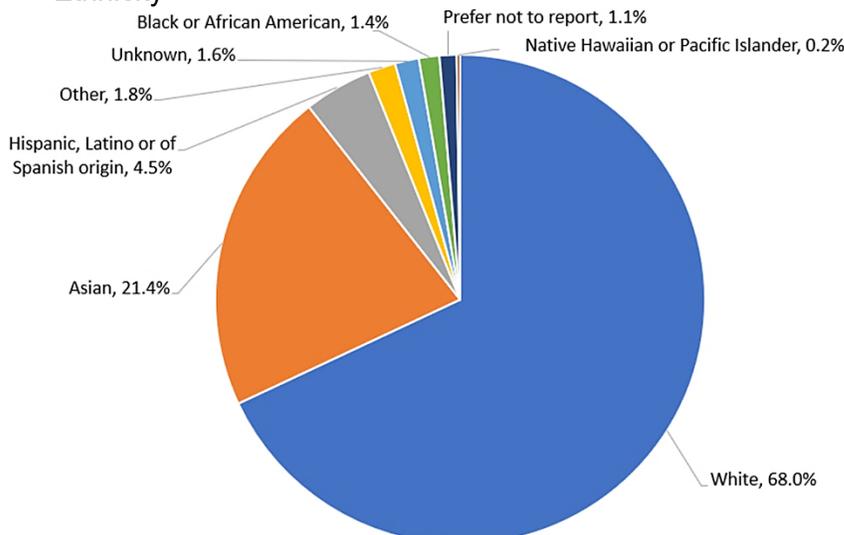
The GME office is pleased to share our Annual Institutional Report (AIR). Annually we aggregate all of the myriad data points we receive about the GME environment into this publication. Like all similarly sized institutions, we are continually inundated with information pertaining to board pass rates, resident and fellow surveys, faculty surveys, quality and accreditation data and letters, DEIB efforts, etc.

When you come to “The AIR Goals” section, you will see that annually, we look at our GME efforts over the past year, incorporating the numerous data points mentioned above that are both internally and externally generated to identify up to 3 areas for focused work over the next calendar year. The specific goals are chosen by a work group consisting of residents and fellows, GME office staff, program directors, and program coordinators. The goals can be very practical or aspirational (and sometimes both). While, in general, we are always looking to improve every aspect of the GME milieu at DH, we use this opportunity to find these “big ticket items” that we really feel we can impact by digging into them with focused energy. We review them frequently throughout the year and report out on them regularly. By utilizing this continuous quality improvement methodology, we work to make a major impact on these goals and in so doing, raise the GME bar across the institution.

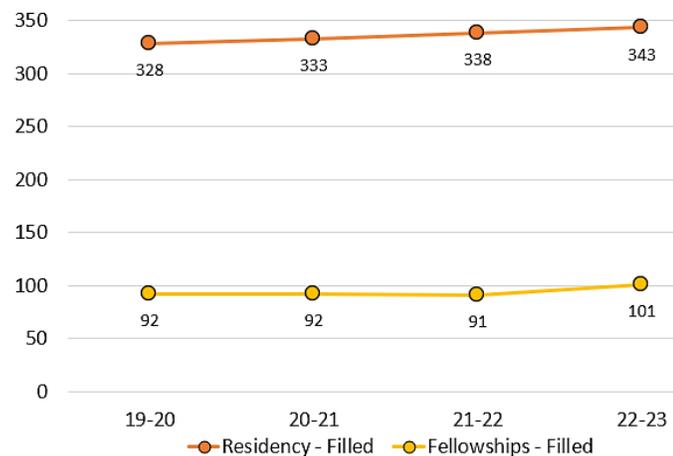
GME AT A GLANCE AY 22-23

Demographics and FTEs

- 52 ACGME accredited programs: 22 residency programs and 30 fellowship programs
- 444 trainees: 343 residents and 101 fellows
- Sex: 54% male and 46% female
- Ethnicity

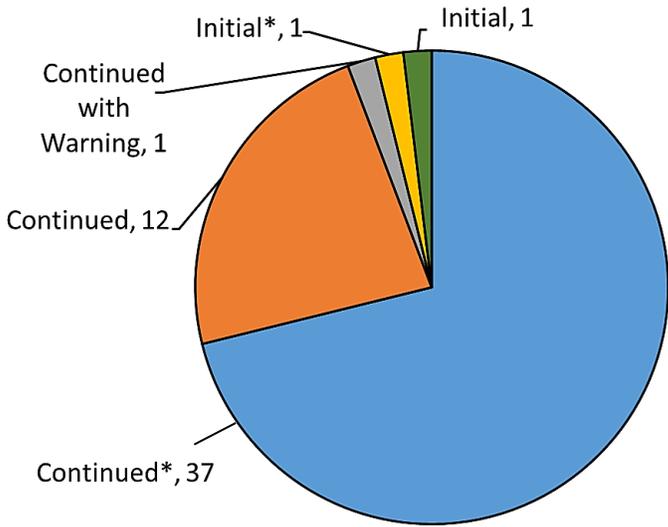


DHMC Filled Positions - Historical

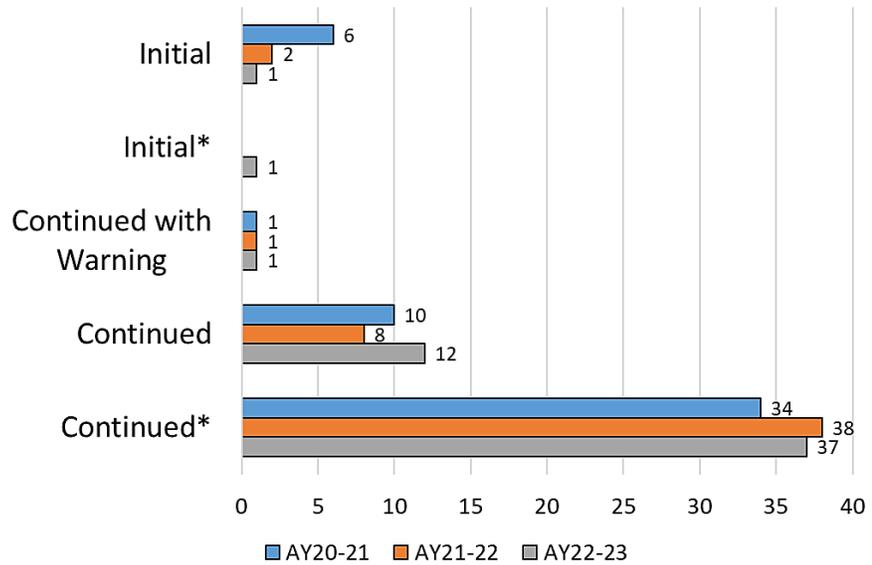


ACGME Accreditation Status (Appendix C)

Number of DHMC Programs Current (AY 22-23) Accreditation Status



Number of DHMC Programs Historical Accreditation Status



* With Commendation - No Citations or Areas for Improvement (AFI) identified by the ACGME Review Committee (RC)
 - Citations require action and response to the RC
 - AFIs are concerning trends noted by the RC that do not require a response but may require action to reverse

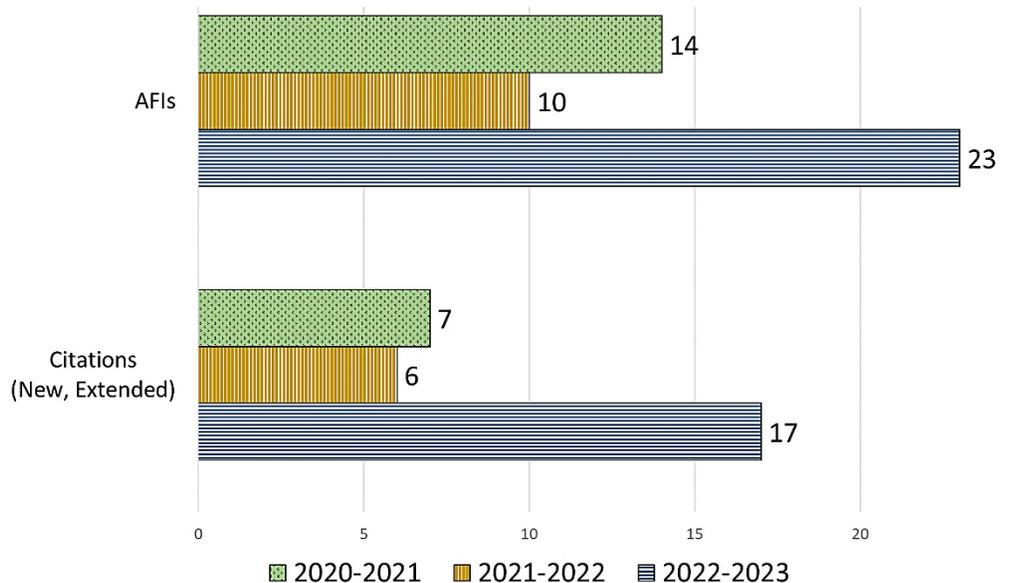
Citations AY 22-23

- 17 total citations
- 8 programs cited

AFIs AY 22-23

- 23 total AFIs
- 10 programs identified

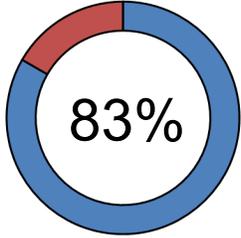
Historical Total Counts for Citations (New, Extended) and AFIs



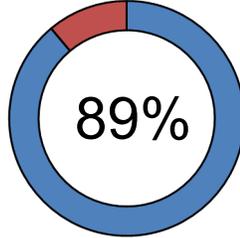
National Residency Match Program (NRMP)

Percent DHMC programs that participated in NRMP filled their position quota for AY 22-23.

Residency Programs (n=17)

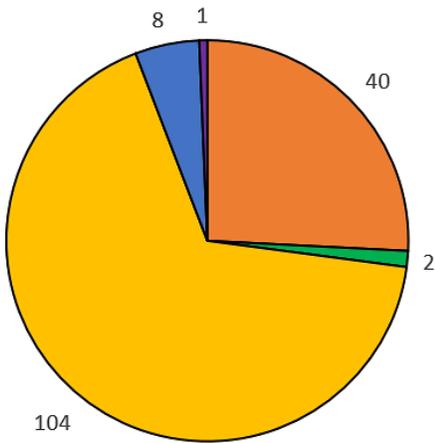


Fellowship Programs (n=18)

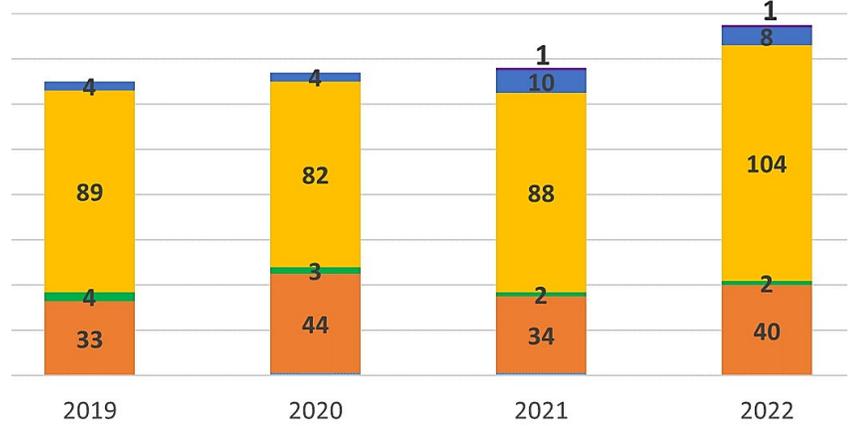


NRMP, a private, non-profit organization, provides mechanism for matching the preferences of applicants for U.S. GME positions with the preferences of GME training programs.

Demographics for Incoming Residents/Fellows – AY 22-23

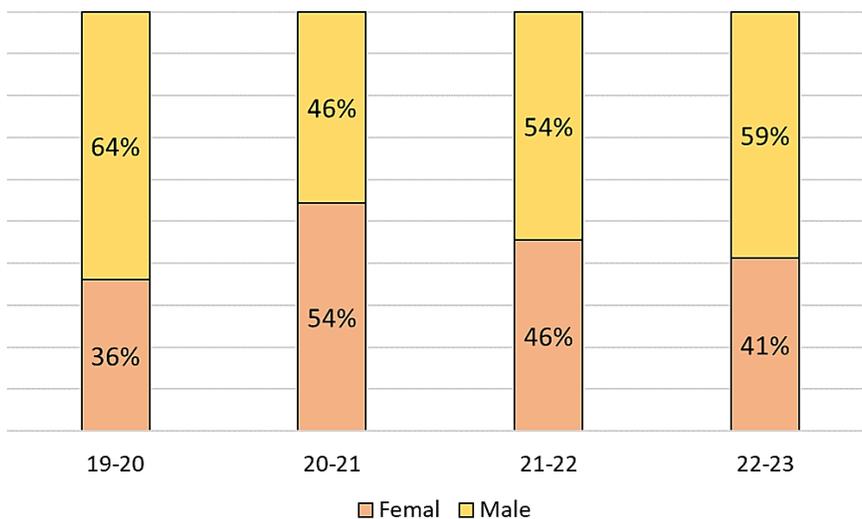


Demographics for Incoming Residents/Fellows - Historical



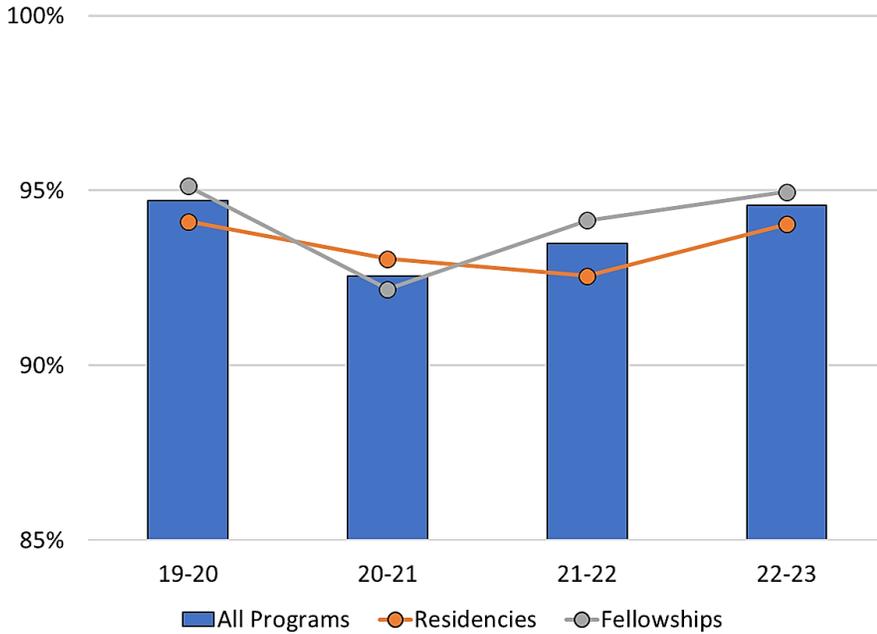
- Native Hawaiian/Other Pacific Islander
- Hispanic/Latino Hispanic
- White
- Black/African American
- Asian
- American Indian/Alaska Native

Demographics for Incoming Residents/Fellows - Historical



Board Pass Rates

DHMC GME training program historical certifying board pass rates for first time takers.



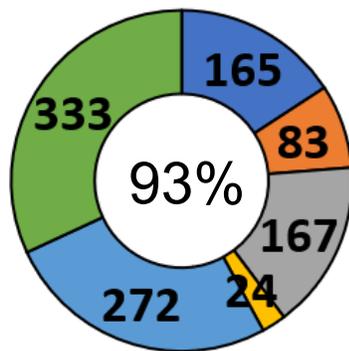
One measure of the effectiveness of the educational program is the ultimate [board] pass rate.

ACGME Common Program Requirements

Resident/Fellow Scholarly Activity

93% of the residents/fellows in AY 22-23 did some type of scholarly activity.

Total Counts of Types of Scholarly Activity Done During AY 22-23 By Residents/Fellows



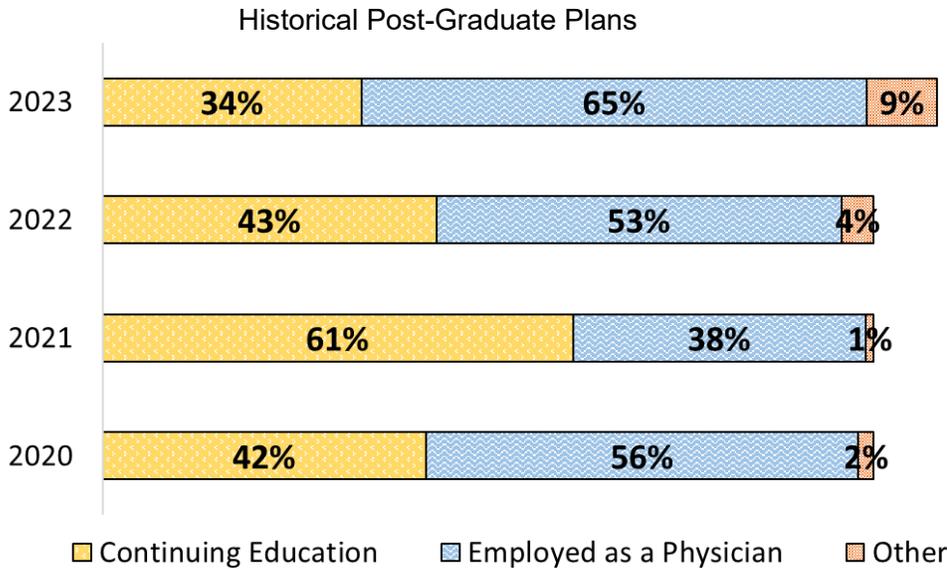
- Publications - Peer Reviewed
- Publications - Other
- Conference Presentations
- Chapters, Textbooks
- Research
- Teaching Presentations

Scholarly activity represent one of the surrogates for the program's effectiveness in the creation of an environment of inquiry that advances the residents' scholarly approach to patient care.

ACGME Common Program Requirements

2023 GRADUATE DATA

65% of the 2023 graduates are employed as practicing physicians, 34% are continuing their medical educations, and 9% are engaged in other career choices (e.g., research, administrative chief resident).



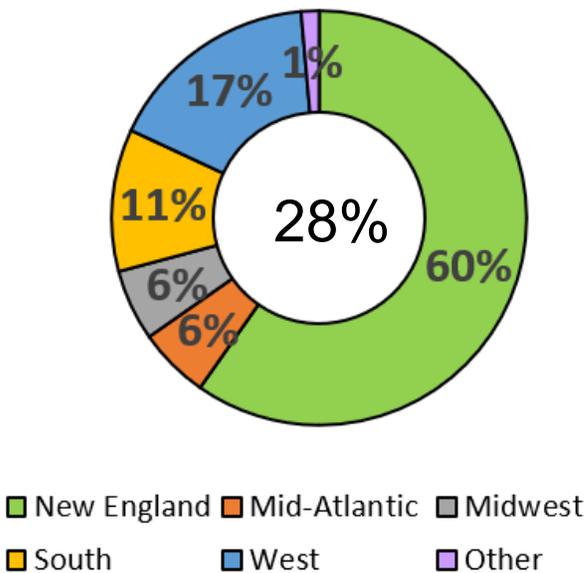
“Every faculty member genuinely cared about my training experience and my professional and personal development.”

“Great people to work with, attendings/faculty who care a lot about our development/growth.”

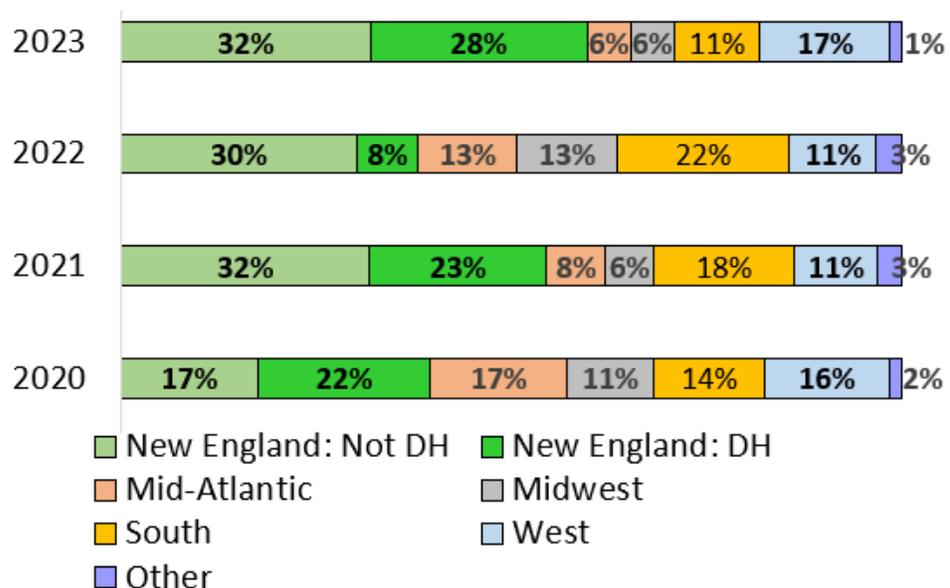
2023 Graduates

60% of the 2023 graduates remained in New England with 28% of these graduates employed by Dartmouth Health.

Employment Location Percentages
2023 Graduates

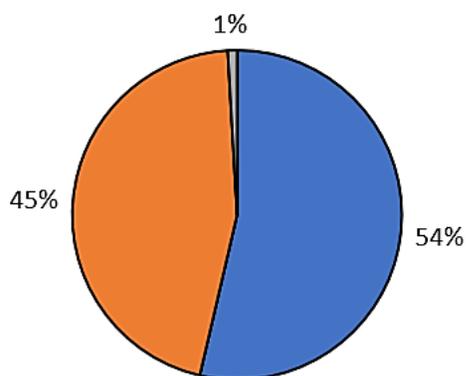


Employment Location Percentages
Historical

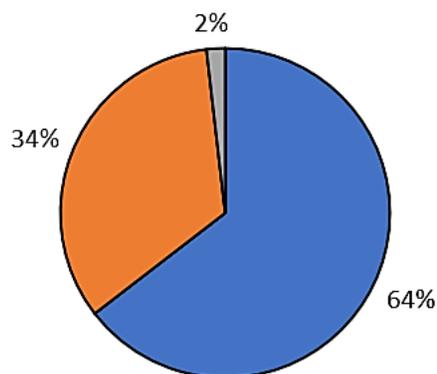


2023 GME Graduates (n = 110) Exit Survey Responses

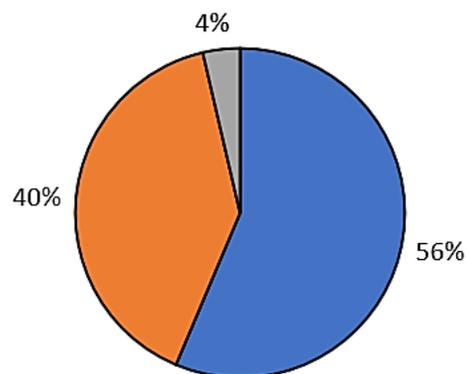
Ready for unsupervised practice



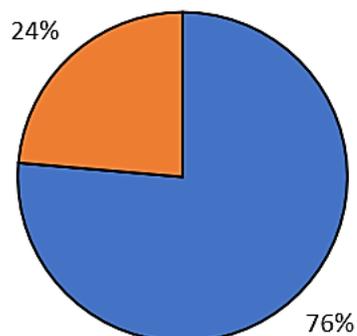
Confident in their ability to disclose/discuss events with the patient and/or their family.



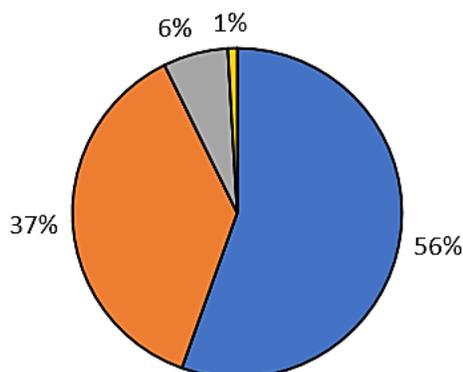
Developed cultural awareness knowledge/skills when caring for patients.



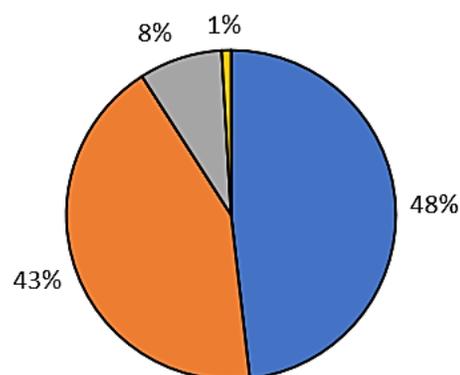
Participated on interprofessional teams for patient care planning



Developed the knowledge/skills to lead a quality improvement initiative.



Used quality metrics and benchmarks related to your patients to inform and improve the care provided.



■ Strongly Agree

■ Agree

■ Disagree

■ Strongly Disagree

INITIATIVES & ACCOMPLISHMENTS

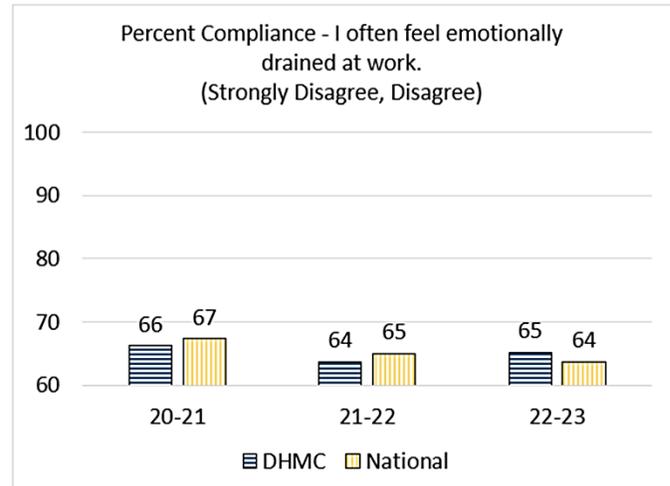
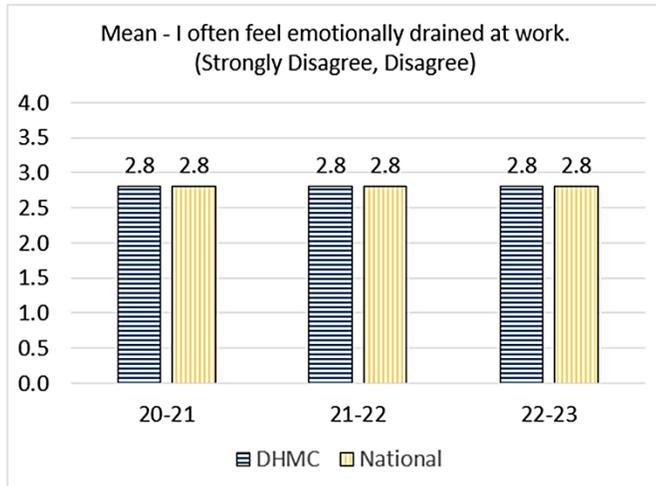
- 93% of respondents to the 2022-2023 Alumni Survey would choose to train at DHMC if given the opportunity to do it over again
- Affiliation agreements with 39 external organizations for required offsite rotations, Dartmouth Health members (Alice Peck Day Memorial Hospital, Cheshire Medical Center, Mt. Ascutney Hospital, Visiting Nurse and Hospice of VT/NH, and New London Hospital) and the Veterans Affairs Medical Center (VAMC) in White River Junction, VT
 - The VAMC continues as a major partner and our largest required offsite rotation location with a resident and fellow presence of 31.75 FTE/year
- Rising chiefs participated in a full-day *Chief Resident and Fellow Leadership Forum* in June 2023, with topics including a panel discussion with graduating chiefs, skills in providing feedback, work hours oversight, and resources

- Program coordinators furthered their own professional development through TAGME (Training Administrators of Graduate Medical Education) certification with 68% of eligible staff now certified, attendance at regional/national conferences and as representative on the Graduate Medical Education Committee (GMEC) and its subcommittees.
- New Program Directors: Frederick Lansigan, MD (Hematology and Medical Oncology); Linton Evans, MD (Neurological Surgery); George Culler IV, MD (Epilepsy)
- Developed and implemented a standardized and robust process for program director appointments. The new process focuses on 1) expectations of the department Chairs, 2) criteria for evaluating candidates, and 3) the role of the GMEC in the approval process.
- Prior to February 2023, our trainees directly reported to the GME Director of Operations for payroll and human resources purposes. This reporting structure often left program directors with limited access to institutional reports about their trainees and lack of direct leadership communications. In order to provide our program directors this information, their trainees were reassigned by our Human Resources to report directly to their program director. This new process removes the middle person in the GME Office and provides directors essential patient safety event reports involving their trainees, important notices from Human Resources, notification of any compliance issues, and direct communications for leaders from institutional leadership, Human Resources and internal communications. The GME Office continues its support of program directors and trainees with oversight and resourcing in these and other areas.
- The GME Office became responsible for administering the DEA policy at DH/MHMH. As the Dartmouth Health system expands and our trainees rotate to the various hospitals, the need for institutional specific DEA numbers was identified for tracking the prescribing of controlled substances. In collaboration with our pharmacy, legal, risk, and compliance departments, a new DEA policy and process was developed and implemented.
- In February 2023, Joel Bradley, MD joined Dartmouth Health's Quality and Safety team and became a voting member of the GMEC. In his role as the Medical Director for Quality, he will provide dedicated time to advance quality and patient safety initiatives for GME.
- The GME retreat titled "When Awareness Conversations Are No Longer Enough: Moving on to Remediation and Disciplinary Action," was held in May 2023. This retreat focused on the struggling learner and the remediation process. Many program directors have questions about remediation including "are we at that point?" or "how do we write an effective remediation plan?" or "have we moved beyond remediation?". Content expert colleagues from legal, employee relations, and our GME staff/leadership worked through the remediation process using both didactics and case studies.
- We held our 3rd Program Director School in January 2023 for a one-day session on need-to-know topics around ACGME, ADS, accreditation, evaluations, CLER, work hours and more.
- This year we amended our GME leadership award structure to recognize a Rookie Program Director of the Year in addition to the Program Director of the Year (Courage to Teach award), Program Coordinator of the Year, and Rookie Program Coordinator of the Year. With a program director group of more than 50 we are pleased to have awards to recognize those new in their career as well as those with a longer tenure.

Well-Being

- The Behavioral Health Clinic dedicated to GME trainees' mental health and well-being continues to provide valuable and timely care for trainees. Since the establishment of this clinic in March 2022, 77 trainees have utilized services provided by the clinic with a total of 427 clinic visits (median of 4 visits per trainee). 94% of these visits were with our GME psychologist and 6% with psychiatrists participating in the clinic. Services provided to the trainees include, but are not limited to, adjustment disorder, depression, anxiety, and work-related stress.
- Trainee Appreciation Week was held to support the well-being of our trainees and to recognize the contributions they make in providing high quality patient care. There were 2,000 instances of trainee participation in activities throughout the week as well as 357 appreciation notes submitted about our trainees.

- We celebrated GME administrative staff throughout the year with special annual emphasis at GME Professionals Day in August. Following the footsteps of AHME, this day is dedicated to expressing appreciation to the staff for their hard work, determination, and the value they bring to the learning and working environment.
- Maintained a mean score of 2.8 for the domain “I often feel emotionally drained at work” from the ACGME Annual Resident/Fellow Well-Being Survey (trending charts below). This was an institutional score card goal.



AWARDS, HONORS & COMMITTEE INVOLVEMENT

Dartmouth Hitchcock Medical Center Faculty & Program Coordinator Awards

| | |
|---|---|
| DHMC GME Courage to Teach | Kris Strohbehn, MD |
| DHMC GME Rookie Program Director of the Year | Graham Atkins, MD |
| DHMC Program Coordinator of the Year | Elizabeth “Biz” Gobin, C-TAGME |
| DHMC Rookie Program Coordinator of the Year | Jeannette Champagne, AS |
| Association of Residency Administrators in Neurological Surgery Service Award (5 Years) | Tobi Cooney, BA C-TAGME |
| Teacher of the Year Anesthesiology Anesthesiology (Runner-Up) Plastic Surgery - Integrated Regional Anesthesiology and Critical Care Medicine | Myles D. Boone, MD, MPH Kathleen H. Chaimberg, MD, MA John F. Nigriny, MD Patrick Hartmann, MD |
| Dr. Jinny K Hartman Memorial Award - Anesthesiology | Matthew D. Koff, MD, MS |
| Baughman Teaching Award - Dermatology | Alicia T. Dagrosa, MD, MBA |
| Peter D. Williamson Faculty Teaching Award - Neurology | Andrew D. Smith, III, MD |
| Saul Blatman Award - Pediatrics | Matthew Hand, MD |
| Martin Luther King Jr. Award, Dartmouth Hitchcock and Geisel School of Medicine – Plastic Surgery - Integrated | John F. Nigriny, MD |

| | |
|---|------------------------|
| The Arthur Naitove Distinguished Teaching Award - Surgery | Timothy Millington, MD |
| Department of Surgery Teaching Award | Alexandra Briggs, MD |
| Induction into Mosenthal Surgical Society | Alexandra Briggs, MD |
| NH Top Doctors – Vascular Surgery - Integrated | David H. Stone, MD |
| Election to AOA - Surgery | Rian Hasson, MD |
| American Surgical Association Award | David H. Stone, MD |

Local & National Resident Awards & Honors

| | |
|--|--|
| Robert D. Dripps, MD Memorial Award - Anesthesiology | Taylor Conroy, MD (PGY4) |
| Good Physician Award - Anesthesiology | Taylor Conroy, MD (PGY4) |
| T.P. Almy House Staff Teaching Award for 2023 - Anesthesiology | Taylor Conroy, MD (PGY4) |
| Murray Bornstein Resident Research Award - Neurology | Nishika Karbhari, MD (PGY3) |
| Roy Forster Resident Teaching Award - Neurology | Mark Roberts, MD (PGY4) |
| James Bernat Quality Improvement Award - Neurology | Brigitte Reina, MD (PGY4) |
| Jeffrey Cohen Clinical Excellence Award - Neurology | Cheng Chin Wang, DO (PGY4) |
| Pediatric Resident Excellent in Teaching Award - Pediatrics | Julia Litzky, MD, PhD (PGY3) |
| Richard Waters Art of the Physician Award - Pediatrics | Claire Gallibois, MBBCh, BAO (PGY3) |
| Gold Foundation Humanism and Excellence in Teaching Award - Surgery | Laura Newton, MD (PGY3) Robert Shaw, MD (PGY4) Thomas Schneider, MD (PGY3) |
| Consultant of the Year for the ED – Surgery | Lauren Kratky, MD (PGY3) |
| 2023 American Medical Women’s Association Leadership Council Inspire Award | Ivy Riano Montsalve, MD (PGY5) |

GME-Focused National Committee Membership

- Association of Residency Administrators in Neurological Surgery) Executive Council member and New Member Liaison (2023-2025): Tobi Cooney, BA C-TAGME
- Association of Pediatric Program Directors, Vice Chair for Education Executive Committee: Cathy Shubkin, MD
- Board Member of Associate Program Directors in Surgery: Kari Rosenkranz, MD
- Organization of Neonatal-Perinatal Training Program Coordinators Leadership Committee, Kelly Rose, BA C-TAGME

Resident/Fellow Committee Involvement at DHMC

GME trainees are active participants on GME and DHMC committees and subcommittees whose actions affect their education and/or patient care, as well as activities which foster professionalism and volunteerism. In AY 22-23 residents and fellows from the following specialties/subspecialties were selected by the Associated Resident Council to participate on GME-related committees and subcommittees:

Graduate Medical Education Committee: Cardiovascular Disease, Psychiatry, Radiology-Diagnostic

- Curriculum Subcommittee: Internal Medicine, Radiation Oncology
- Diversity, Equity, Inclusion & Belonging Subcommittee: Hematology and Medical Oncology, Internal Medicine, Pathology, Psychiatry, Pulmonary and Critical Care Medicine
- Learning Environment Subcommittee: Addiction Psychiatry, Orthopaedic Surgery, Otolaryngology, Preventative Medicine
- Quality & Accreditation Subcommittee: Hematology and Medical Oncology, Neurological Surgery

We continue to encourage resident participation in committee work at the institutional level. Trainees from the following specialties participated in institutional committees in AY 22-23:

- Antimicrobial Stewardship Committee: Infectious Disease, Preventive Medicine
- Clinical Ethics Committee: Plastic Surgery – Integrated
- DHMC Pharmacy and Therapeutics Committee: Cardiovascular Disease, Hematology and Medical Oncology
- Human Research Protection Program: Hematology and Medical Oncology
- Medication Safety Committee: Internal Medicine
- Regional Primary Care Committee: Internal Medicine, Preventive Medicine
- SEARCHES Committee: Neurological Surgery, Surgery, Critical Care Medicine – Internal Medicine
- System Quality & Safety Committee: Neonatology, Preventive Medicine, Radiation Oncology, Gastroenterology
- Transfusion Committee: Transfusion Medicine
- Blood Borne Pathogen Exposure Committee: Surgery
- Formulary Specialty Panel: Preventive Medicine, Hematology and Medical Oncology
- Suicide Prevention Committee: Preventive Medicine
- Pharmacy & Therapeutics Committee (MHMH): Orthopaedic Surgery, Internal Medicine
- Pharmacy & Therapeutics Committee (System): Hematology and Medical Oncology

Associated Resident Council

The Associated Resident Council (ARC) works to improve the overall resident/fellow experience at DHMC. The ARC is composed of a group of peer-selected representatives from our core residency programs and representatives from our fellowship programs. They come together to discuss issues affecting resident/fellow life. The ARC seeks to promote harmonious and collaborative relationships amongst trainees, faculty and staff, and to enhance the resident/fellow community through advocacy, educational, volunteer and social initiatives. Top initiatives of the ARC in AY 22 - 23 were as follows:

- Resident Life: Increasing access to medical care for trainees, exploring infertility treatment benefits for trainees, ongoing conversations regarding food options in the hospital and meal money allocation, increasing accessibility of mental health resources (Andrew Smith) and troubleshooting scheduling/availability concerns, exploring options for additional week of vacation for trainees
- Social: Whaleback Ski Night, Sawtooth Social Night
- Diversity & Inclusion: Collaboration with GMEC DEIB, ARC DEIB subcommittee support for JEDI Program, Ombudsman initiative and Reporting Practices Review
- Education: Encouraging trainee collaboration with DHMC Quality & Safety Lead (Joel Bradley, MD)

GME OUTCOMES

Graduate Medical Education Committee (GMEC) and Subcommittee Activities

The GMEC held nine monthly meetings during AY 22-23. Consistent with ACGME Institutional Requirements, the GMEC provides oversight of all ACGME-accredited programs at DHMC, in addition to the learning and working environment of the Sponsoring Institution. The committee is responsible for reviewing and approving major program amendments and for all policies that relate to GME.

The GMEC has a subcommittee structure and much of the work of the GMEC is accomplished by the four subcommittees: the Curriculum Subcommittee; Diversity, Equity, Inclusion and Belonging; Learning Environment Subcommittee; and the Quality and Accreditation Subcommittee. Highlights of the work done within each subcommittee during AY 22-23 are listed below.

Curriculum Subcommittee

- Conducted very successful Chief Resident and Fellow Leadership Forum in June 2023.
- Used the ACGME faculty survey to identify high-performing programs in the area of faculty satisfaction with feedback. Gathered and analyzed data from these high performing programs to identify common themes in faculty feedback.
- Currently in the process of developing best practice toolkit for providing faculty feedback and should be completed by Dec 2023.

Diversity, Equity, Inclusion & Belonging Subcommittee

- Held a successful virtual open house, “You Belong at Dartmouth Health” with over 180 attendees.
- In partnership with Dartmouth Health DEIB Office, hosted a recruitment breakfast for the Student National Medical Association at the Annual Medical Education Conference.
- In partnership with Dartmouth’s Geisel School of Medicine, the Dartmouth Visiting Student Program was established to bring medical students of diverse backgrounds and interest to DH/MHMH for a 4-week funded internship. The students are included in resident didactics, activities, and conferences. They are mentored by residents, faculty, and the GME program leadership as well as receive career guidance by faculty and Dartmouth Health leadership.
- Representatives of the GMEC DEIB subcommittee attended the Latino Medical School Association meeting in September 2023 to promote the opportunities for training at DH/MHMH.
- Continued success of the JEDI (Justice, Equity, Diversity, and Inclusion) Leadership Program. This program annually accepts five GME trainees who meet monthly to learn how to bring about social change and social justice in health care and to develop their leadership skills in these areas.

Learning Environment Subcommittee

- Continued efforts in work compression/decompression by surveying trainees to discover practices their training programs implemented to decompress their work. The outcome of this survey was combined with previous data gathered to begin the process of identifying best practices for work decompression.
- Educated rising chief residents on work hour compliance management during the June 2023 Chief Resident and Fellow Leadership Forum
- Reviewed work hour violations across all programs quarterly seeing a 6% decrease for the 80 hour rule violations and 27% decrease in 1 day off in 7 violations for AY 22-23.

Quality & Accreditation Subcommittee (QAS)

- During AY 22-23, the GME Scorecard, generated with data from AY 21-22, was used to identify underperforming programs as mandated by the ACGME Institutional Requirements. Three Focused Reviews and five Full Team Reviews were completed.

- Implemented a new methodology to assess a program’s overall performance as well as the domains used to assess performance. Developed an interactive GME dashboard to visualize a programs performance and to identify trending patterns.

ACGME Annual Surveys

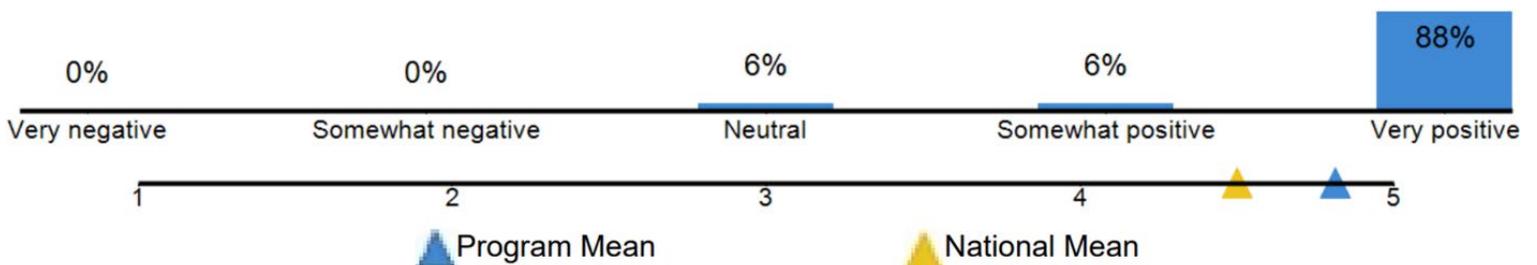
Training programs, as well as the GMEC and its subcommittees, use the data derived from the annual ACGME Resident/Fellow Survey and Faculty Survey (Appendix E) to monitor program compliance. These confidential surveys, which all specialty and subspecialty programs (regardless of size) are required to participate in annually, provide program statistics for compliance in areas across the learning environment from evaluations to educational content, resources and work hours.

The following table provides an overview of the top successes and opportunities within each AY 22-23 ACGME Survey.

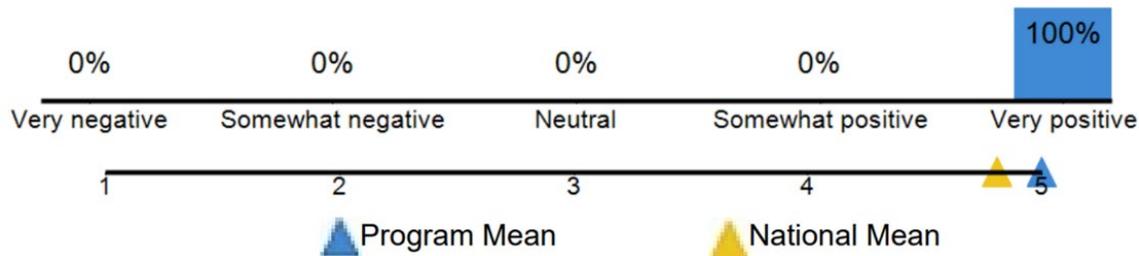
| AY 22-23 ACGME Resident/Fellow Survey | | AY 22-23 ACGME Faculty Survey | |
|--|--|--|--|
| Successes | Opportunities | Successes | Opportunity |
| <ul style="list-style-type: none"> Preparation for interaction with diverse individuals (up 5% to 93% compliance) Taught about health care disparities (up 5% to 84% compliance) Able to attend personal appointments (up 9% to 97%) Appropriate balance between education and patient care (up 7% to 85%) Education not compromised by non-physician obligations (up 6% to 91%) Protected time to participate in structured learning activities (up 5% to 88%) Adequately manage patient care within 80 hours (up 5% to 94%) | <ul style="list-style-type: none"> Impact of other learners on education (down 6% to 82%) Participate in adverse event investigation and analysis up 3% but still below expected compliance (76% to 79%) | <ul style="list-style-type: none"> Information not lost during shift changes, patient hand offs (up 8% to 95%) Workload does not exceed trainees' available time for work (up 6% to 91%) | Faculty members satisfied with process for evaluation steadily increased in compliance since 2020 but still below expected compliance (75% in 20, 77% in 21, 78% in 22, 79% in 23) |

In addition to the categories related to the learning environment, residents/fellows and faculty are asked to provide an overall evaluation of their training program. The institution-level data derived from these surveys (response rate: 98% for resident/fellow and 94% for faculty) continues to demonstrate a high degree of overall satisfaction with the training experience at DHMC. Images below summarize the resident/fellow and faculty overall evaluation of their training program for AY 22-23.

Residents' overall evaluation of the program



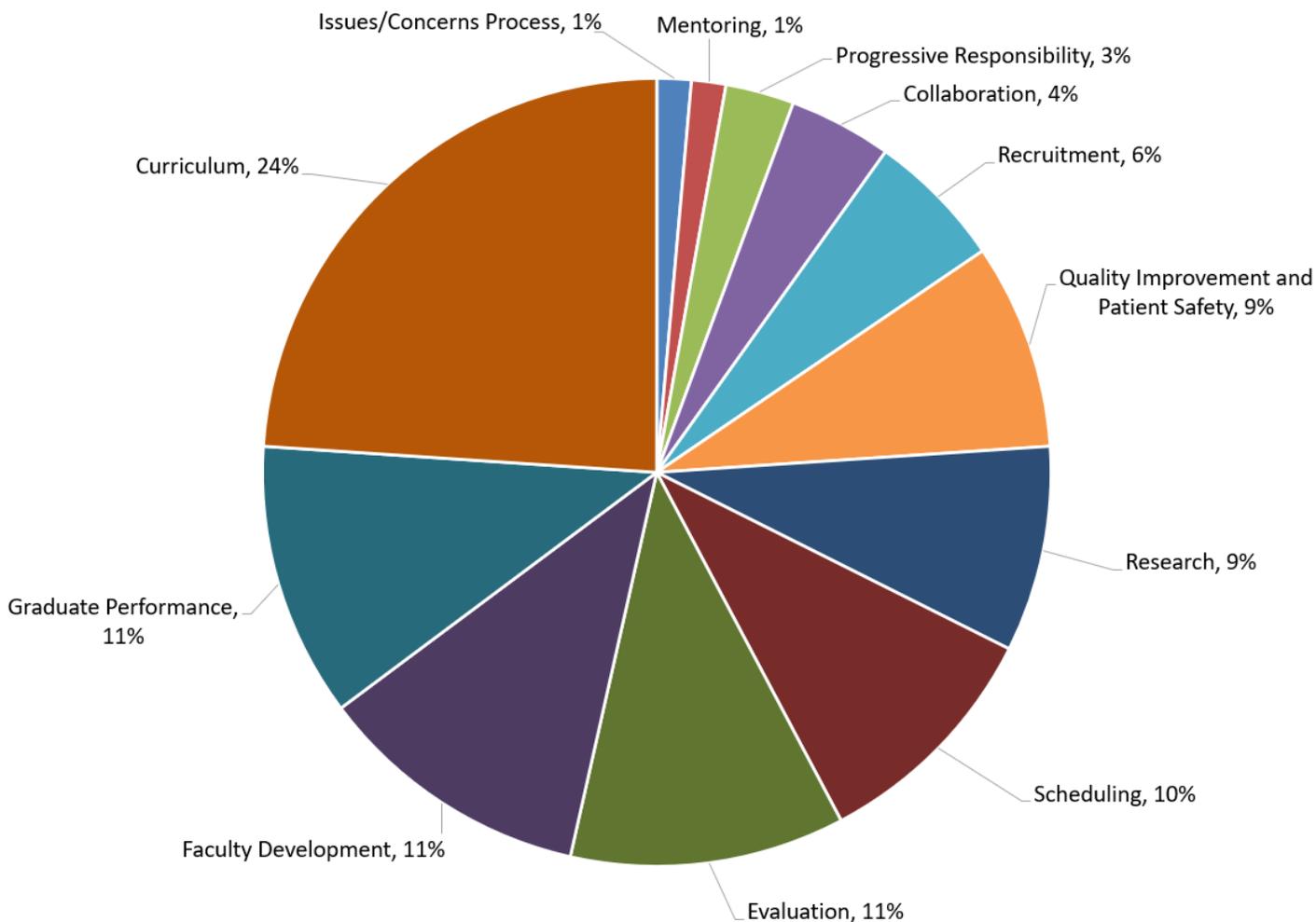
Faculty's overall evaluation of the program



Program-Specific Improvement Goals

Each summer, the DHMC GME community focuses on reviewing the prior academic year and planning for the coming year. Included in this Annual Program Evaluation (APE) is a requirement to identify new goals or carryover previous goals to improve the quality of the program. Action items may be as simple as developing a graduate survey or as complex as starting a new rotation with associated curriculum at an off-site location. The top action item areas are summarized in the following graph.

Top AY 22-23 Annual Program Evaluation Action Item Categories



ANNUAL INSTITUTIONAL REVIEW (AIR) IMPROVEMENT PLAN

The ACGME requires the GMEC to conduct an Annual Institutional Review (AIR) and develop an improvement plan for the upcoming calendar year. The AIR Improvement Plan must be included as a part of the AIR Executive Summary report presented to the governing body. To ensure broad representation from our subcommittees of the GMEC, the AIR team includes subcommittee chairs, at least one resident/fellow representative, the DIO, Associate DIO, and GME Office staff.

The group is charged with reviewing the most recent ACGME institutional letter of notification, each of the accredited programs' ACGME accreditation statuses and citations, and results of the ACGME surveys for residents/fellows and faculty members. In addition, action plans and performance monitoring procedures for the previous year's AIR are reviewed.

Monitoring of CY 2023 AIR Goals

CY 23 AIR Goal 1: Faculty Feedback

Background

For the past 4 ACGME faculty surveys, DHMC's percent compliance for 'Faculty members satisfied with process for evaluation as educators' was 75% (19-20), 77% (20-21), 78% (21-22), and most recently 79% (22-23). Although the percent compliance is gradually increasing, it is still below 80% and below the national percent compliance (84% in 22-23).

Goal

Identify institutional best practices for effective faculty feedback.

Outcome Metrics

Distribution of faculty feedback best practices toolkit and present best practices to program directors and coordinators.

Action Plan

- Use the ACGME faculty survey to identify high-performing programs in the area of faculty satisfaction with feedback. Gather and analyze data from these high performing programs to identify common themes in faculty feedback.
 - The core faculty in programs identified as high performing (100% compliance) were sent a survey focused on the adequacy of feedback provided, who provides the feedback and when, and the extent the feedback is meaningful. 53% of those survey responded. Several themes identified from the results are engaging educators in the mission of the program and how their teaching contributes to that mission, giving feedback that uses trainee outcomes as the motivator for change, providing opportunities for department leadership and/or program director to meet individually with faculty members to review their strengths and areas for improvement, and creating a culture for trainees and faculty to discuss what an individualized learning environment would look like.
- Create and distribute a best practices toolkit for providing faculty feedback.
 - Currently in the process of developing this toolkit and should be completed by Dec 2023.

CY 23 AIR Goal 2: Resident/Fellow Work Hour Compliance and Well-Being

Background

Residents/Fellows log their work hours in MedHub, our residency management system. Quarterly work hour reports reviewed by the GMEC Learning Environment Subcommittee showed more violations with the 80-hour and 1 day off in 7 rules than what was deemed acceptable; we are striving for 100% compliance. For the past 4 ACGME resident surveys, DHMC's percent compliance for "80-hour week (averaged over a four-week period)"

was 95% (19-20), 92% (20-21), 92% (21-22), and most recently 93% (22-23). The aspirational expectation is 100% compliance for this metric. For the past 4 ACGME resident surveys, DHMC's percent compliance for "Four or more days free in 28-day period" was 85% (19-20), 88% (20-21), 88% (21-22), and most recently 87% (22-23). These results somewhat align with our institution's internal work hours tracking.

Goal

Increase resident/fellow well-being by decreasing the frequency of 80-hour and 1 in 7 work hour violations among GME residents/fellows across the institution.

Outcome Metrics

- Maintain decrease in 80-hour violations seen in CY 22, as reported in MedHub, across all programs in CY 23.
- Decrease 1 in 7 violations, as reported in MedHub, by 75% across all programs in CY 23.
- Increase the ACGME Resident/Fellow Well-Being Survey question "I often feel emotionally drained at work" to 2.9.

Action Plan

- Disseminate work hour violations report to each program every 6 months.
 - Completed for first half of the 2022-2023 academic year (July 1 to Dec 31). The reports for the second half (Jan 1 to Jul 31) will be sent at the end of July 2023.
 - Pending quarter 4 work hour results, we are maintaining the decrease in violations of the 80-hour rule from the previous year. As yet, we are not achieving the 75% reduction in 1 day off in 7 violations but maintain the number of violations as the previous year. In depth analysis is revealing themes to the cause of these violations with next steps of sharing best practices to reduce the violations.
- Educate rising chief residents on work hour compliance management at the annual Chief Resident and Fellow Leadership Forum.
 - Completed in June 2023.
- Provided periodic updates to the GMEC on work hour violations is on track with the final 2022-2023 report presented at the upcoming September 2023 GMEC meeting.
- Promote a culture of honesty in reporting work hours in MedHub substantiated with 97% of 2022 graduates responding yes to feeling they could honestly report work hours during their training.
- DHMC resident well-being results for the past four academic year has remained consistent at 2.8 mean for the question "I often feel emotional drained at work" falling short of the desired result of 2.9. Most likely many factors play a role in how residents respond to this question more than just work hours related like work compression and other life stresses. Therefore, a direct correlation between work hours violations and this question should be viewed with caution. Nevertheless, we will continue to adjudicate work hour violations to continue to support a learning and work environment that promotes trainee well-being and high quality patient care.

CY 23 AIR Goal 3: Resident/Fellow Participation in Adverse Event Analysis

Background

For the past 4 ACGME resident surveys, DHMC's percent compliance for 'Participate in safety event investigation and analysis' was 80% (19-20), 79% (20-21), 76% (21-22), and most recently 79% (22-23). Although there was a slight increase in the percent compliance in 22-23, it is still below 80% yet is equivalent to the national percent compliance. During the institutions 2021 CLER visit, an identified finding was the need for increased focus on interprofessional safety event investigations.

Goal

Identify best practices for resident/fellow participation in real and/or simulated interprofessional clinical patient safety activities.

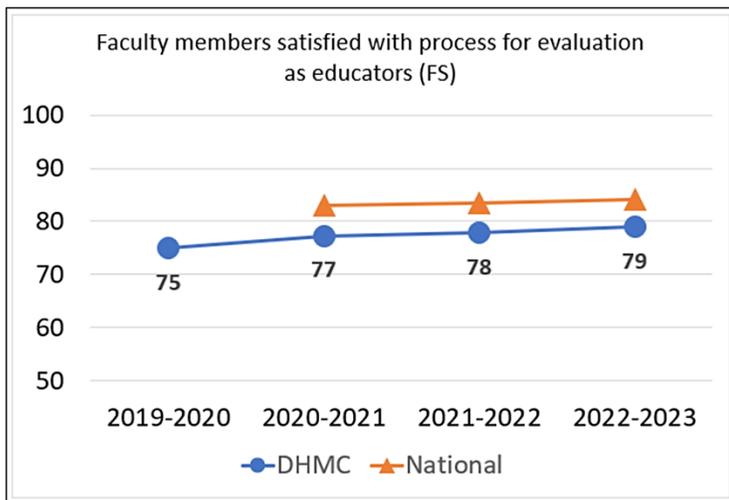
Outcome Metrics

Develop framework for resident/fellow participation in real and/or simulated interprofessional adverse event analysis at DHMC.

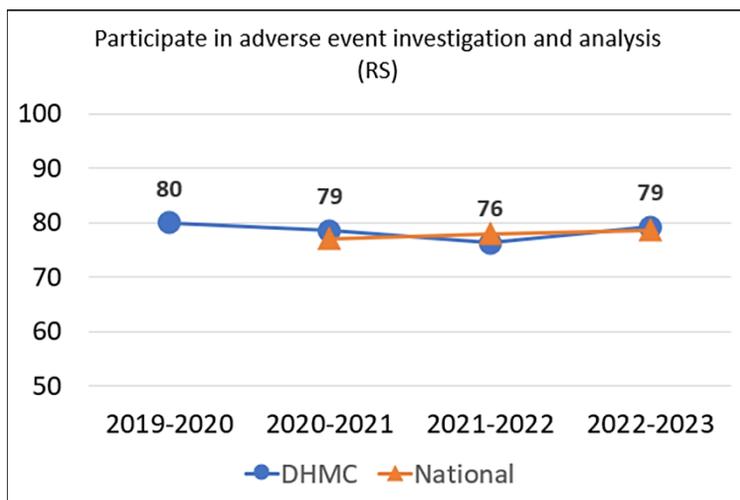
Action Plan

In February 2023, Joel Bradley, MD was identified as the Medical Director for Quality with dedicated time to move quality and patient safety initiatives forward for GME programs and trainees. Since his appointment, Dr. Bradley implemented simulation-based training for incoming residents that included a module on safety reporting using DHMC reporting system. He also is working with Dartmouth Health to form a resident quality committee that should have its inaugural meeting in August 2023 and is piloting an interprofessional safety rounds in our Pediatric residency. Initial work in assessing the current state of trainee involvement in patient safety event reporting has begun with an anticipated survey deployment by December 2023.

DHMC ACGME Faculty Survey Outcomes for CY 23 AIR Goal 1



DHMC ACGME Resident/Fellow Survey Outcomes for CY 23 AIR Goal 3



DHMC Work Hours Outcomes for CY 23 AIR Goal 2

| 80 Hours | 21-22 | 22-23 | Percent Change |
|----------|-------|-------|------------------------|
| Q1 | 3 | 7 | 133% - Increase |
| Q2 | 6 | 3 | 50% - Decrease |
| Q3 | 2 | 1 | 50% - Decrease |
| Q4 | 5 | 4 | 20% - Decrease |
| Total | 16 | 15 | 6% - Decrease |

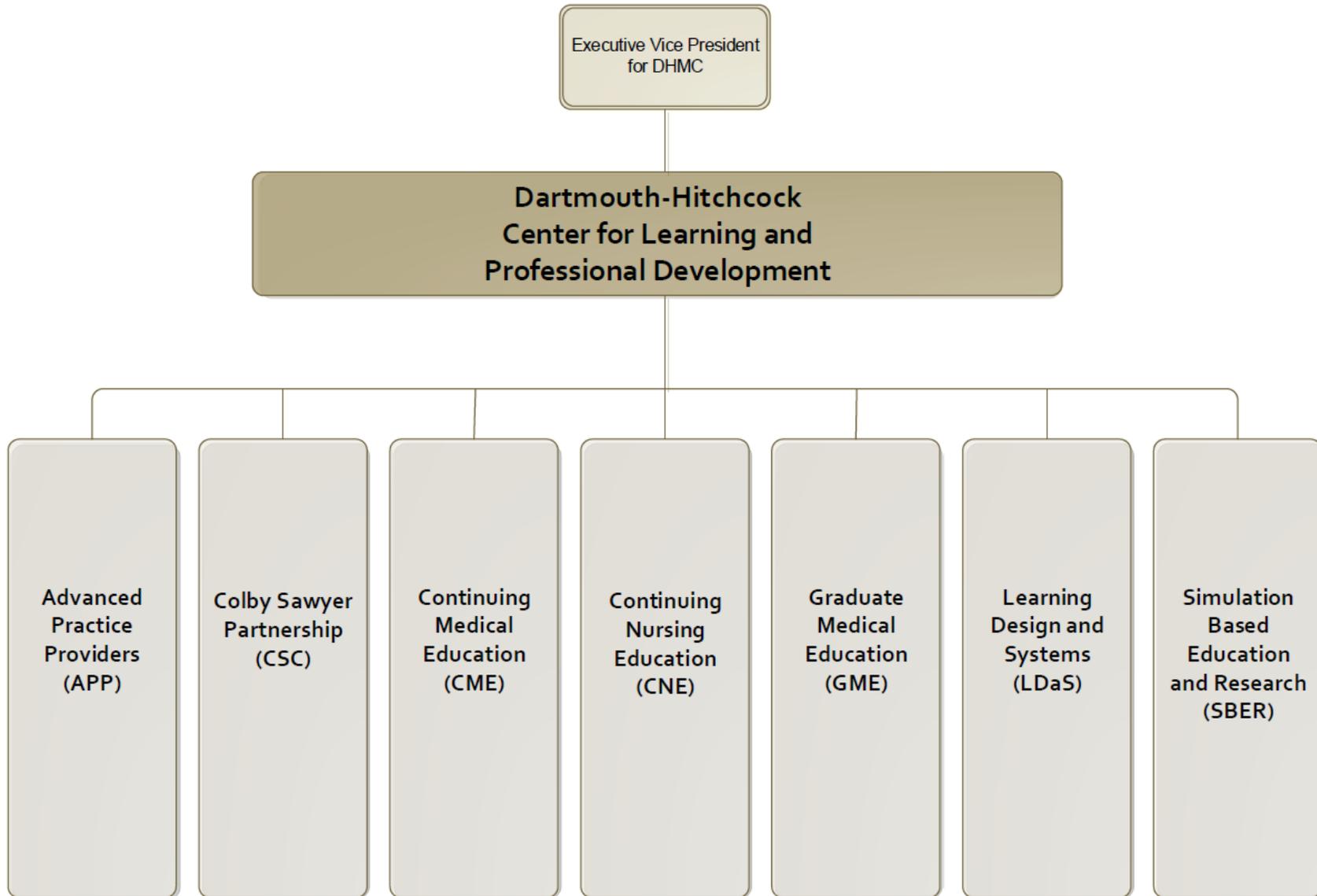
| 1 Day Off in 7 | 21-22 | 22-23 | Percent Change |
|----------------|-------|-------|---------------------------|
| Q1 | 14 | 14 | 0% - No Difference |
| Q2 | 9 | 7 | 22% - Decrease |
| Q3 | 9 | 11 | 22% - Increase |
| Q4 | 31 | 14 | 55% - Decrease |
| Total | 63 | 46 | 27% - Decrease |

CY 2024 AIR Goals – Approved by the GMEC on Oct 16, 2023

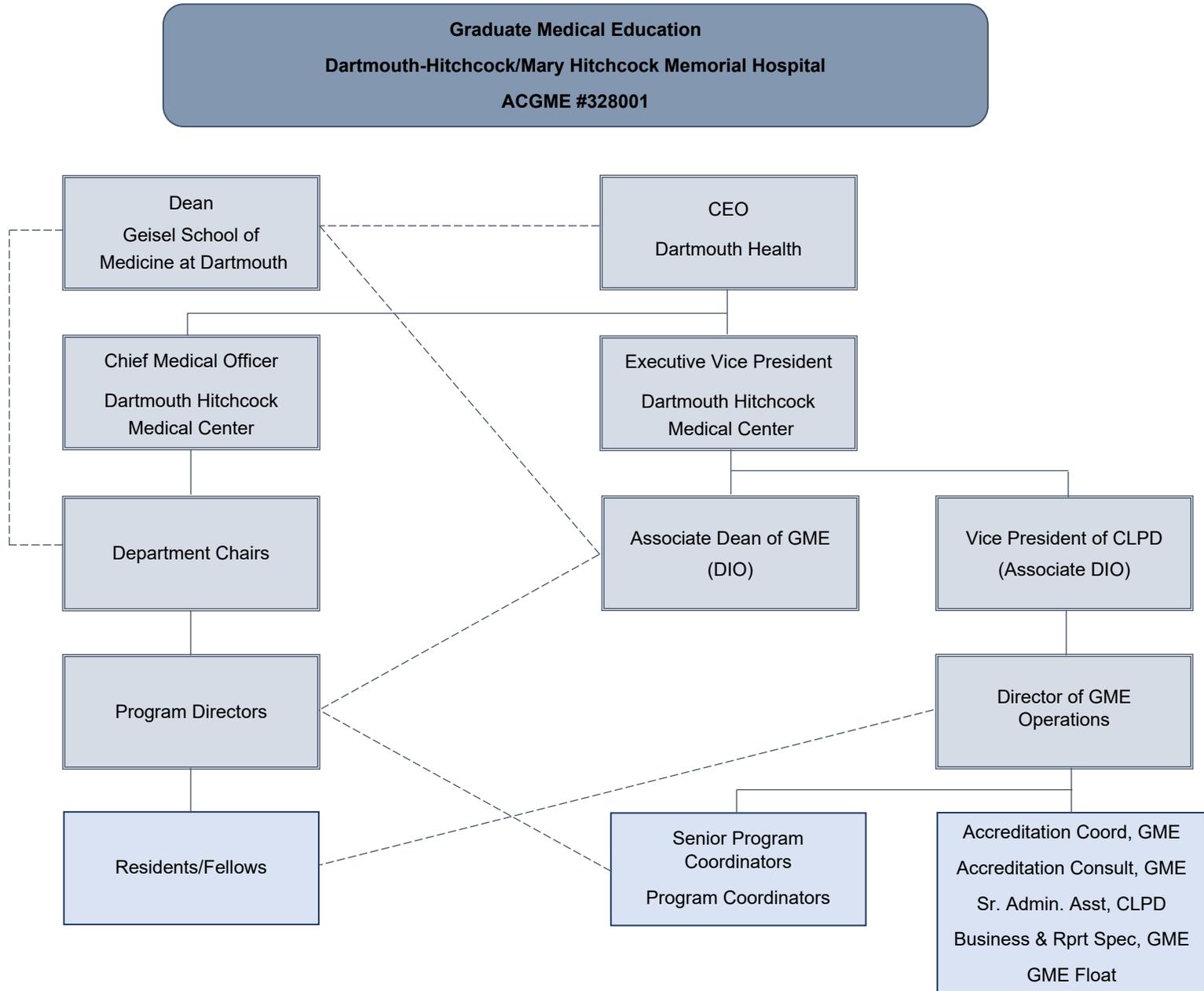
Two AIR goals from CY 23 are continued for CY 24: faculty feedback and participation in adverse event analysis. Although the work hours compliance and well-being goal is being retired, actions identified for this goal will continue for the foreseeable future. A new goal for CY 24 is determining the root cause for the decrease in the institutional compliance for the impact of other learners on education. The following chart lists the CY 24 AIR goals.

| Area for Improvement | Goal | Actions | Outcome Metric(s) | Due Date | Monitoring Group |
|---|--|---|---|---------------------------------|--------------------------------------|
| Faculty Feedback | Increase the percent compliance for faculty satisfaction with feedback by at least 10% for programs identified as underperforming for this metric by implementing the Curriculum Subcommittee's 2023 faculty feedback toolkit. | <ul style="list-style-type: none"> • Use ACGME faculty survey data from 2022-2023 to identify programs underperforming for faculty satisfaction with feedback. • Meet with program directors of underperforming programs to map out a process for implementing the faculty feedback toolkit. • Analyze 2024-2025 ACGME faculty survey to determine an impact of implementing the faculty feedback toolkit. | <p>Implementation of the faculty feedback toolkit in at least 2 underperforming programs.</p> <p>A 10% increase in faculty satisfaction with feedback for the underperforming programs that implemented the faculty feedback toolkit.</p> | <p>Dec 2024</p> <p>Dec 2025</p> | Curriculum Subcommittee |
| Impact of Other Learners | Analyze available data to determine the root cause(s) for the 6% decrease in institutional compliance for the impact of other learners on education (ACGME resident survey). | <ul style="list-style-type: none"> • Analyze the ACGME resident survey data to determine program trends for the metric, impact of learners. • Survey lower performing programs to identify trainees' and program directors' experiences with how other learners are impacting education. • Conduct focus groups with residents to expand knowledge of how other learners are impacting education. | Provide a report to the GMEC that delineates the root cause(s) for the decrease in compliance for the impact of other learners on education. | Dec 2024 | Learning Environment Subcommittee |
| Resident/Fellow Participation in Adverse Event Analysis | Identify best practices for resident/fellow participation in real and/or simulated interprofessional clinical patient safety activities | <ul style="list-style-type: none"> • Survey programs to gather current practices on resident/fellow participation in multidisciplinary root cause analyses (RCAs) • Benchmark successful interprofessional RCA activities at other academic medical centers • Partner with Risk Management to identify RCA opportunities for residents and fellows | Develop at least one initiative that increases resident/fellow participation in real and/or simulated interprofessional adverse event analysis at Dartmouth Hitchcock Medical Center | Dec 2025 | Quality & Accreditation Subcommittee |

Appendix A
Dartmouth Hitchcock Medical Center
Center for Learning and Professional Development Organizational Chart
AY 2022-2023



Appendix B
Dartmouth Hitchcock Medical Center
Graduate Medical Education Organizational Chart
AY 2022-2023



Appendix C
Dartmouth Hitchcock Medical Center Graduate Medical Education
ACGME Accreditation Statuses

| Program | Accreditation Status | Accreditation Effective Date | Last Site Visit Date | Next Site Visit Date |
|--|--|------------------------------|----------------------|----------------------|
| Addiction psychiatry (P) | Continued Accreditation | 02/10/2023 | 06/12/2012 | Pending |
| Allergy and immunology (Accredited 07/01/2023) | Initial Accreditation | 07/01/2023 | 02/09/2023 | 05/01/2025 |
| Anesthesiology | Continued Accreditation | 01/17/2023 | 10/05/2011 | Pending |
| Blood banking/transfusion medicine (PTH) | Continued Accreditation | 01/19/2023 | 04/29/2010 | Pending |
| Cardiovascular disease (IM) | Continued Accreditation | 01/20/2023 | 04/28/2009 | Pending |
| Child and adolescent psychiatry (P) | Continued Accreditation | 02/10/2023 | 06/13/2012 | Pending |
| Clinical cardiac electrophysiology (IM) | Continued Accreditation | 01/20/2023 | 04/30/2009 | Pending |
| Clinical neurophysiology (N) | Continued Accreditation | 01/26/2023 | 01/29/2013 | Pending |
| Critical care medicine - Anesthesiology | Continued Accreditation | 01/17/2023 | 09/27/2012 | Pending |
| Critical care medicine - Internal Medicine | Continued Accreditation | 01/20/2023 | 04/15/2009 | Pending |
| Cytopathology (PTH) | Continued Accreditation | 01/19/2023 | 05/12/2011 | Pending |
| Dermatology | Continued Accreditation | 01/06/2023 | 05/10/2011 | Pending |
| Dermatopathology (D and PTH) | Continued Accreditation | 01/19/2023 | 04/28/2010 | Pending |
| Emergency medicine | Continued Accreditation | 01/12/2023 | 10/01/2013 | Pending |
| Endocrinology, diabetes, and metabolism (IM) | Continued Accreditation | 01/20/2023 | 05/14/2009 | Pending |
| Epilepsy (N) | Continued Accreditation | 01/26/2023 | 08/10/2016 | Pending |
| Female pelvic medicine and reconstructive surgery (OB) | Continued Accreditation without Outcomes | 02/13/2023 | 07/14/2021 | Pending |
| Gastroenterology (IM) | Continued Accreditation | 01/20/2023 | 05/26/2010 | Pending |
| Geriatric psychiatry (P) | Continued Accreditation | 02/10/2023 | 05/19/2010 | Pending |
| Hematology and medical oncology (IM) | Continued Accreditation | 01/20/2023 | 01/30/2013 | Pending |
| Hematopathology (PTH) | Continued Accreditation | 01/19/2023 | 09/26/2012 | Pending |
| Hospice and palliative medicine | Continued Accreditation | 01/20/2023 | 03/10/2010 | Pending |
| Infectious disease (IM) | Continued Accreditation | 01/20/2023 | 01/31/2013 | Pending |
| Internal medicine | Continued Accreditation | 01/20/2023 | 05/25/2010 | Pending |
| Interventional cardiology (IM) | Continued Accreditation | 01/20/2023 | 04/29/2009 | Pending |
| Interventional radiology - independent | Initial Accreditation | 07/01/2020 | NA | 07/01/2022 |
| Interventional radiology - integrated | Continued Accreditation | 04/03/2023 | 08/11/2022 | Pending |
| Neonatal-perinatal medicine (PD) | Continued Accreditation | 01/23/2023 | 05/11/2011 | Pending |
| Nephrology (IM) | Continued Accreditation | 01/20/2023 | 05/20/2010 | Pending |
| Neurological surgery | Continued Accreditation | 02/10/2023 | 11/30/2016 | Pending |
| Neurology | Continued Accreditation | 01/26/2023 | 12/03/2019 | Pending |
| Neuroradiology (DR) | Continued Accreditation | 01/26/2023 | 10/07/2009 | Pending |
| Obstetrics and gynecology | Continued Accreditation | 02/13/2023 | 05/18/2010 | Pending |
| Ophthalmology | Continued Accreditation without Outcomes | 01/12/2023 | 01/19/2022 | Pending |
| Orthopaedic surgery | Continued Accreditation | 01/20/2023 | 06/05/2012 | Pending |
| Otolaryngology - Head and Neck Surgery | Continued Accreditation | 01/06/2023 | 09/30/2010 | Pending |
| Pain medicine | Continued Accreditation | 01/17/2023 | 05/17/2012 | Pending |
| Pathology-anatomic and clinical | Continued Accreditation | 01/19/2023 | 09/29/2010 | Pending |
| Pediatrics | Continued Accreditation | 01/23/2023 | 09/13/2006 | Pending |
| Plastic Surgery - Integrated | Continued Accreditation without Outcomes | 01/26/2023 | 06/04/2019 | Pending |
| Psychiatry | Continued Accreditation | 02/10/2023 | 06/12/2012 | Pending |
| Public health and general preventive medicine | Continued Accreditation | 11/11/2022 | 03/09/2010 | Pending |
| Pulmonary disease and critical care medicine (IM) | Continued Accreditation | 01/20/2023 | 04/16/2009 | Pending |
| Radiation oncology | Continued Accreditation with Warning | 01/11/2023 | 04/08/2021 | Pending |
| Radiology-diagnostic | Continued Accreditation | 01/26/2023 | 10/06/2009 | Pending |
| Regional anesthesiology and acute pain medicine | Continued Accreditation | 01/17/2023 | 04/22/2021 | Pending |
| Rheumatology (IM) | Continued Accreditation | 01/20/2023 | 05/13/2009 | Pending |
| Sleep medicine | Continued Accreditation | 01/20/2023 | 05/16/2012 | Pending |
| Surgery | Continued Accreditation | 04/27/2023 | 11/24/2015 | Pending |
| Urology | Continued Accreditation | 01/19/2023 | 10/16/2007 | Pending |
| Vascular surgery - independent | Continued Accreditation | 01/04/2023 | 06/05/2012 | Pending |
| Vascular surgery - integrated | Continued Accreditation | 01/04/2023 | 04/14/2009 | Pending |