



# **Graduate Medical Education Annual Institutional Review Executive Summary 2018-2019**

This Executive Summary reviews the key activities and accomplishments of the Graduate Medical Education (GME) enterprise for the academic year July 2018 through June 2019 (AY19) and includes action plans for the coming academic year.

Graduate Medical Education sits within the Center for Learning and Professional Development (CLPD), under the executive leadership of Susan Reeves, EdD, RN, Executive VP, Research & Education. (Appendix A)

Thanks as always go out to our excellent GME Office staff, exceptional group of program directors and program coordinators, and our actively engaged group of residents, fellows and faculty. A sincere note of thanks to all those who contribute to the ongoing success of our GME programs on a daily basis contributing their energy and good humor to all of our endeavors.

#### **GME AT A GLANCE**

Training Programs	Trainees	Programs ≥ 20 Residents	Gender	Citizenship		
53 ACGME-accredited programs	423 trainees	Anesthesiology	170 Females	376 US · 14 India · 12 Canada		
21 Residency programs	334 Residents	Internal Medicine	253 Males	· 5 Pakistan · 2 Ghana		
32 Fellowship programs	89 Fellows	Orthopaedic Surgery		1 trainee each: Columbia,		
		Pediatrics		Germany, Guatemala, Iceland,		
		Psychiatry		Kazakhstan, Mexico, Nepal,		
		Surgery		Nigeria, Singapore, Slovakia,		
				Sweden, Thailand, Turkey,		
				Venezuela		

ACGME Accreditation Status (Appendix B)		Citations	Areas for Improvement (AFI)
Sponsoring Institution (MHMH)	Training Programs	13 total citations	17 total AFIs
Continued Accreditation*	41 Continued Accreditation*	6 programs cited	6 programs received AFIs
	4 Continued Accreditation		
	6 Initial Accreditation	Citations require action	AFIs are concerning trends
	1 Probationary Accreditation	and response to the	noted by the RC which do not
		ACGME Review	require a response and may
		Committee (RC)	require action to reverse

NRMP Program Match Rates		Board Pass Rates	d Pass Rates Trainee Scholarly Activity		
20 Residency Programs	19 Fellowship Programs	First Time Takers	343 Abstract/Poster Presented		
Fully matched: 17/20	Fully matched: 17/19	Residents: 95%	306 Teaching Presentations		
Subsequently filled: 3/20	Subsequently filled: 15/19	Fellows: 95%	260 Research Involvement		
Unfilled: none	Unfilled: Neuroradiology		158 Publications		
	Nephrology		37 Book Chapters		

<sup>\*</sup> with commendation (without Citations or Areas for Improvement noted by the Review Committee)

#### 2019 Graduate Data

Post-Graduation Career Plans 59% Employed as a physician 38% Continuing education 3% Other <u>Location of Practice</u> 42% New England (23% D-HH practice) 30% West

11% South 11% Midwest 5% Mid-Atlantic

2% Other/No Response

Practice Type 41% Partnership 32% Academic 9% Inpatient 11% Other

7% Combination of above

#### INITIATIVES AND ACCOMPLISHMENTS

#### **Education:**

- 97% of 2019 graduates feel prepared for the next step in their career.
- Affiliation agreements with thirty external organizations for required offsite rotations, D-H members (Cheshire Medical Center 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 31.83 FTE/year.
- The GMEC began a partnership with the Geisel School of Medicine at Dartmouth's Associate Dean of Diversity & Inclusion, Dr. Stephanie White. The GMEC hosted a brainstorming and sharing session to discuss diversity and inclusion practices at the Sponsoring Institution. The GME population remains one of the most diverse groups within Dartmouth-Hitchcock with trainees hailing from 19 countries around the world.
- We hosted the ACGME Clinical Learning Environment Review (CLER) Field Representatives in November 2018 for our third CLER visit. The resulting CLER report helped to generate a targeted list of opportunities which the institution (Sr. Leadership, Value Institute, GMEC) are actively using to address issues in the area of patient safety, health care quality, health care disparities, care transitions, supervision, well-being and professionalism.
- The Center for Learning & Professional Development's (CLPD) leadership team began the Strategic Planning process in the spring of 2019. The group has created a mission (below) and is actively working to develop goals and objectives for the next three years:
  - CLPD Mission: We improve patient well-being through the exemplary education of health care professionals across New England. With a commitment to quality, safety, innovation and accreditation, we integrate evidence-based and learner-centric strategies into continuing, interprofessional, and competency-based education.
- The Curriculum Subcommittee, in partnership with the Center for Learning and Professional Development, launched the second module of the "Residents as Teachers" curriculum titled *Introduction to Entrustment in the Clinical Learning Environment* for all D-H residents and fellows.
- The Program Coordinator group forged a partnership with the University of Vermont Medical Center GME office to participate in a joint Journal Club.
- A full day Resident Leadership Forum was offered for chief residents to provide knowledge and skills to help
  them function more effectively in their new role. This event included a panel discussion with current/former
  chiefs, a session on social and emotional intelligence, resilience coaching, and the ways to recognize and address
  burnout.
- Program Coordinators furthered their own professional development through TAGME (The Training Administrators of Graduate Medical Education) certification, presentations at regional/national conferences and as representatives on the GMEC and its subcommittees.
- A new Chief Resident Alliance was formed to create a community whose mission is to develop leadership skills in chief residents, to foster the collaboration of chief residents with each other and with the academic leaders at Dartmouth-Hitchcock.

- GME applications submitted:
  - Residencies: Ophthalmology
  - Fellowships: Regional Anesthesiology & Acute Pain Medicine, Female Pelvic Medicine & Reconstructive Surgery
- Newly accredited programs:
  - Female Pelvic Medicine Reconstructive Surgery: Accepted its first fellow in AY 2019-2020
  - o Regional Anesthesiology & Acute Pain Medicine: Accepted its first fellow in AY 2019-2020
  - o Ophthalmology: Will accept its first resident in the 2021-2022 academic year
- Leadership Changes:
  - New Program Directors: Robert LeBlanc, MD (Dermatopathology), Michael Herrick, MD (Regional Anesthesiology & Acute Pain Medicine), Donald Miller, MD (Ophthalmology), Kris Strohbehn, MD (Female Pelvic Medicine & Reconstructive Surgery)

#### **Wellness Programs/Events:**

- In the fall of 2018, all GME administrative team members (leaders and staff) and the greater CLPD team (Graduate Medical Education, Continuing Medical Education, Continuing Nurse Education, Learning Technology and Simulation Based Research & Education) team participated in an offsite 3-day Solution-Focused Work Communities: Living and Working on the Concepts of Success Counseling course. This work has given us a common framework around how we "show up" at work and in our lives, how we communicate with and treat each other, and is based on the four tenets "Be Loving, Be Powerful, Be Playful, Be Free".
- The call rooms were updated with new mattresses, blinds and updated gym equipment.
- The GME Pulse, a quarterly newsletter highlighting GME activities, resident/program/coordinator achievements and events, was revamped and revitalized in 2019.
- A Wellness Resources toolkit was developed for the GME population and posted online and in MedHub for easy reference (see online version here: https://www.d-hlearning.com/GME/Wellbeing/Guide/)
- GME began partnership with the D-H Physician and Staff Wellness Committee to pilot the Well-Being Index, a 100% anonymous, online, self-assessment tool to evaluate distress, to Residents/Fellows, Physicians and Associate Provider staff in the fall of 2019.

#### Events:

- Socks4Docs (An international campaign to raise awareness of mental health issues in the medical profession): GME provided colorful, fun socks for interested trainees to wear to highlight the need for healthcare professionals to care for each other's health.
- o "Resident & Fellow Appreciation Week" focused on bringing residents and fellows together to explore and promote resilience and well-being. Each day focused on a theme, from healthy eating to coping with stress, to art/balance. Healthy cooking demos, pet therapy, planting bulbs, art therapy, biometric screening, massage and mindfulness activities were paired with lunch or snack opportunities to ensure trainees were eating well and having an opportunity to learn/relax. Throughout the week, hospital staff were encouraged to complete an online appreciation form which the GME office then generated into notes sent directly to the resident/fellow.
- The Program Coordinator group continues to hold events hosted by the Coordinator Wellness Committee. They focus on activities learning, resilience and crafting activities as well as social events to connect and re-energize.
- The Associated Resident Council (ARC) worked on projects and sponsored events for the residents and fellows
  including a Graduation Food Truck Event, "Burrito Saturdays" in the call room, five annual resident/fellow
  community meals, volunteer events and more.

#### **Quality & Safety:**

- All incoming residents and fellows complete Value Institute (VI) Yellowbelt training while at D-H. Over the past year 100 residents and fellows completed either the in-person or on-line Yellowbelt course.
- The Leadership Preventive Medicine Residency (LPMR) continues to engage residents and fellows across a broad range of specialties in major quality improvement projects that are closely tied to institutional initiatives. LPMR practica projects completed in 2018-2019 included:
  - Enhancing Quality, Safety and Patient Experience: In-Office Colposcopy and LEEP
  - Improving the Care of Patients Admitted to D-H Lebanon with Reported Penicillin Allergy
  - Addressing Food Insecurity at Epsom Family Medicine
  - Childhood Obesity: A Quality Improvement Initiative
  - Heart Sounds: Improving the Efficacy of Discharge Communication for Cardiology Inpatients
  - o Toward a Patient-Centered Hepatitis C Care Pathway: Quality Improvement through Co-location
  - A Quality Improvement Project to Reduce Nicotine Exposure among Newborns in the Nursery at D-H Lebanon
  - Rethinking Code Status: An Initiative to Improve End-of-Life Communication at D-H Lebanon

#### **AWARD & HONORS**

#### **Dartmouth-Hitchcock Awards**

Teacher of the Year – Anesthesiology Kathleen Chaimberg, MD Murray Korc Award – Internal Medicine Marshall Ward, MD Peter Williamson Faculty Teaching Award – Neurology Diana Rojas-Soto, MD Teacher of the Year Award – Orthopaedics Lance Warhold, MD Excellence in Pathology Resident Training Award – Pathology Kristen Muller, DO

Saul Blatman Award – Pediatrics Zachary Goode, DO

Teacher of the Year Award – Psychiatry Robert Scott, MD & James Rustad, MD

Teacher of the Year Award – Radiology Alan Siegel, MD, MS The Arthur Naitove Distinguished Teaching Award – Surgery Brent White, MD

#### **Local & National Honors**

ACPM Donald Gemson Resident Award Stacey Schott, MD, PGY7 Preventive Medicine Alpha Omega Alpha Medical Honor Society

Lauren Baumann, MD, PGY2 General Surgery David Linshaw, MD, PGY4 General Surgery John Howe, MD, PGY3 Internal Medicine

D-H Linda von Ryan TDI Certificate Scholarship Program Award Anh Khoa Pham, MD, PGY4 Dermatology

> Ashley Baronner, MD, PGY2 Internal Medicine Kevin Diasti, MD, PGY1 Internal Medicine Aditya Kulkami, MD, PGY1 Internal Medicine Amogh Kamik, MD, PGY2 Internal Medicine

Ryan Wilson, MD, PGY4 Neurology Cristina Mamolea, MD, PGY2 Pediatrics Oakland Walters, MD, PGY2 Psychiatry

D-H TDI Scholarship for Masters in Public Health Sarah Probst, Program Coordinator, OBGYN

#### **GME Focused National Committee Membership**

- ACGME Orthopaedic Surgery Review Committee: Charles Carr, MD, Program Director, Orthopaedic Surgery
- ACGME Urology Review Committee: E. Ann Gormley, MD, Program Director, Urology

- ACGME Preventive Medicine Review Committee: Tina Foster, MD, Associate Program Director, Leadership Preventive Medicine
- ACGME Coordinator Advisory Group: Shannon Darrah, Program Coordinator, Neurology
- Association for Hospital Medical Education Council of Administrators and Coordinators Council Leaders
   Executive Committee: Willo Sullivan, Manger GME Programs
- Pathology Program Directors in the US Secretary: Candice Black, DO, Program Director, Pathology
- Training Administrators of Graduate Medical Education Board of Directors: Elaine Danyew, Program Coordinator, Dermatology, Sleep Medicine & Neonatology

#### Resident/Fellow D-H Committee Involvement

GME trainees are active participants on GME and D-H committees and subcommittees whose actions affect their education and/or patient care, as well as activities which foster professionalism and volunteerism. In AY19 residents and fellows from the following specialties were selected by the Associated Residents Council (ARC) to participate on GME-related committees and subcommittees:

- **Graduate Medical Education Committee:** Critical Care Medicine Internal Medicine, Pediatrics, Orthopaedic Surgery, Urology, Neurological Surgery, Vascular Interventional Radiology, Surgery
  - Curriculum Subcommittee: Cardiovascular Disease, Internal Medicine, Diagnostic Radiology, Obstetrics
     & Gynecology
  - Learning Environment Subcommittee: Psychiatry, Cardiovascular Disease, Neurological Surgery
  - Quality & Accreditation Subcommittee: Surgery, Pathology, 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 AY19:

- D-H Quality & Safety Committee: Leadership Preventive Medicine/Hospice & Palliative Medicine, Leadership Preventive Medicine/Obstetrics & Gynecology, Leadership Preventive Medicine/Cardiovascular Disease, Leadership Preventive Medicine/Pediatrics
- **D-H Pharmacy and Therapeutics Committee:** Cardiovascular Disease
- **D-H SEARCHES Committee:** Obstetrics & Gynecology, Neurological Surgery, Leadership Preventive Medicine/Pediatrics
- D-H Antimicrobial Panel: Infectious Disease
- Committee for the Protection of Human Subjects: Hematology/Oncology
- D-H Population Health Committee: Leadership Preventive Medicine/Hospice & Palliative Medicine
- **D-H Transfusion Committee:** Transfusion Medicine

#### **GME OUTCOMES**

#### **Graduate Medical Education Committee (GMEC) Activities**

The GMEC held ten monthly meetings during AY19. Consistent with ACGME Institutional Requirements, the GMEC provides institutional oversight of accredited programs and 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 Graduate Medical Education.

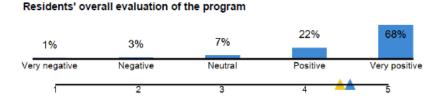
The GMEC has a subcommittee structure and much of the work of the GMEC is accomplished by the three subcommittees: Quality and Accreditation Subcommittee (QAS), Learning Environment Subcommittee (LES) and the Curriculum Subcommittee (CS). The GMEC made impressive progress over the past academic year on a series of projects

focused on improving processes related to GME oversight of the quality of the learning environment within our ACGME-accredited programs. Highlights of this work are included in the *Initiatives & Accomplishments* section of this Summary.

In addition to the subcommittees above, the Associated Resident Council (ARC) also works to improve the overall resident/fellow experience at D-H. The ARC is composed of a group of peer-elected representatives from each of the core residency programs which 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, volunteer and social activities.

#### **Trainee Evaluation of Programs**

Training programs, the QAS and the GMEC use the data derived from the annual ACGME Resident/Fellow Survey and Faculty Survey to monitor program compliance. These confidential surveys, which all specialty and subspecialty programs (regardless of size) are required to participate in annually, provide program and national statistics for compliance in areas across the learning environment from evaluations to educational content, resources and work hours. In addition, it includes a general assessment of resident satisfaction with their training program. The institution-level data derived from this survey (98% response rate) continues to demonstrate a high degree of overall resident and fellow satisfaction with their training experience at D-H. Resident and fellow responses to the 2019 ACGME Survey question addressing overall satisfaction with their program is summarized below:



National Mean

Institution Mean

#### **Program-Specific Goals**

Each summer the D-H GME community focuses on reviewing the previous 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, which will 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.

#### **Programmatic Challenges**

**Accreditation:** While program accreditation remains very strong, the Plastic Surgery – Independent received Probationary Accreditation from their RC in 2019. The program is partnering with the Section, Senior Leadership, Human Resources and the GME Office to actively respond to challenges and citations.

#### **Evaluations:**

- Many programs continue to struggle with faculty completion of resident/fellow evaluations. Year-to-date an
  average of 37% of faculty complete evaluations of residents/fellows within two weeks of delivery. Programs are
  working to identify ways to increase completion statistics locally and with the help of our new Learning
  Consultant who has expertise in evaluation and assessment, GME will continue to support programs and
  departments in this area during the coming year.
- The rollout of Milestones 2.0 has presented a significant challenge for programs whose RCs have released the
  expectation of completion for AY19. As a result a GME team was formed to assist programs by rationalizing,
  streamlining and operationalizing Milestone evaluations and delivery. Work will continue in this area for several
  years to come as each specialty finalize their Milestone amendments.

**Well-being:** Burnout, lack of wellness and depression in US health care professionals has become a significant issue and a focus of the ACGME and GME community as a whole. Locally, we have taken the following actions this academic year:

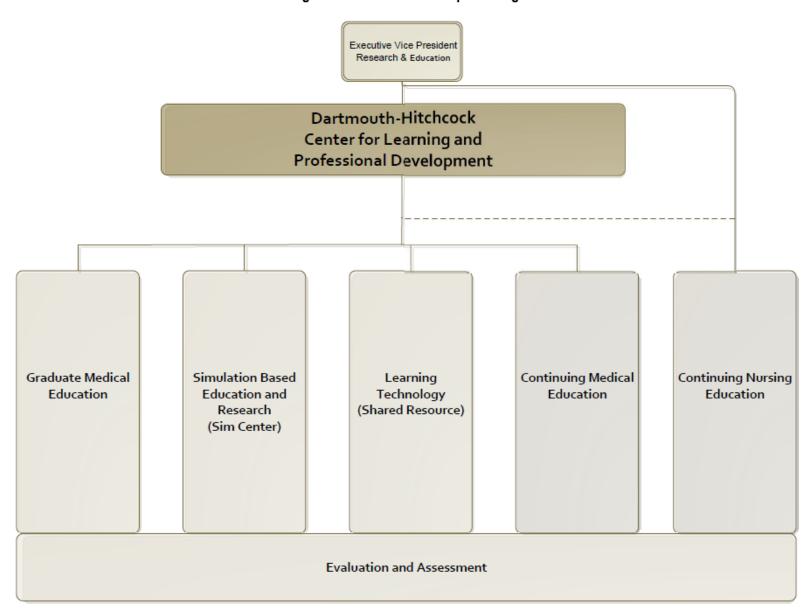
- Every GME program has identified one or more well-being initiatives for their trainee population.
- Every GME program has defined a process for residents/fellows to be provided to request time during the work day to attend to personal needs (including medical, dental, and mental health resources).
- A Wellness Resources toolkit was developed for the GME population and posted online and in MedHub for easy reference (see online version here: <a href="https://www.d-hlearning.com/GME/Wellbeing/Guide/">https://www.d-hlearning.com/GME/Wellbeing/Guide/</a>)
- GME began partnership with the D-H Physician and Staff Wellness Committee to pilot the Well-Being Index, a 100% anonymous, online, self-assessment tool to evaluate distress, to Residents/Fellows, Physicians and Associate Provider staff in the fall of 2019.

#### Annual Institutional Review (AIR) Improvement Plan

The ACMGE requires the GMEC to conduct an AIR and develop an improvement plan. 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 the AIR team includes GMEC subcommittee chairs, a resident/fellow representative, the DIO and GME Office staff. The group is charged with reviewing the ACGME Letters of Notification, including accreditation status, citations and areas for improvement, data from the ACGME Resident/Fellow and Faculty Surveys, action plans and performance monitoring procedures resulting from the previous year's AIR and other relevant materials.

- **2019 AIR Improvement Plan Follow-up:** We identified three strategic goals for the GME enterprise to be carried out in AY19. We are on track to successfully complete two of the goals and third, regarding evaluations, we are unlikely to meet by the December 2019 due date. (See Appendix C for details on action plans/outcomes).
- **2020 AIR Improvement Plan:** The AIR team identified three new goals for AY20. (See Appendix D for details on action plans).

### Appendix A Dartmouth-Hitchcock Graduate Medical Education Center for Learning and Professional Development Organizational Chart



### Appendix B Dartmouth-Hitchcock Graduate Medical Education ACGME Accreditation Status

ACGME Accredited Programs	ACGME Accreditation Status *with commendation	Self Study Date	10 year Site Visit Date
Mary Hitchcock Memorial Hospital (Sponsoring Institution)	Continued Accreditation*	1-Apr-2026	1-Oct-2027
Anesthesiology	Continued Accreditation*	1-Apr-2022	1-Oct-2023
Critical Care Medicine - Anesthesiology	Continued Accreditation*	1-Apr-2022	1-Oct-2023
Pain Medicine (multidisciplinary)	Continued Accreditation*	1-Apr-2022	1-Oct-2023
Regional Anesthesiology & Acute Pain Medicine	Initial Accreditation	TBD	TBD
Dermatology	Continued Accreditation*	30-Sep-2017	TBA
Emergency Medicine	Continued Accreditation*	3-Oct-2022	3-Apr-2024
Internal Medicine	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Cardiovascular Disease	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Clinical Cardiac Electrophysiology	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Critical Care Medicine - Internal Medicine	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Endocrinology, Diabetes, and Metabolism	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Gastroenterology	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Hematology and Oncology	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Hospice and Palliative Medicine (multidisciplinary)	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Infectious Disease	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Interventional Cardiology	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Nephrology	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Pulmonary Disease and Critical Care Medicine	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Rheumatology	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Sleep Medicine (multidisciplinary)	Continued Accreditation*	1-Jan-2020	1-Jul-2021
Neurological Surgery	Continued Accreditation	31-Jan-2018	1-Jul-2019
Neurology	Continued Accreditation	30-Nov-2018	1-May-2020
Clinical Neurophysiology	Continued Accreditation*	30-Nov-2018	1-May-2020
Epilepsy	Continued Accreditation*	30-Nov-2018	1-May-2020
Obstetrics and Gynecology	Continued Accreditation*	31-Dec-2018	1-Jun-2020
Female Pelvic Medicine & Reconstructive Surgery	Initial Accreditation	TBD	TBD
Ophthalmology	Initial Accreditation	TBD	TBD
Orthopaedic Surgery	Continued Accreditation	1-Jun-2022	1-Dec-2023
Otolaryngology	Continued Accreditation*	1-Feb-2020	1-Aug-2021
Pathology-Anatomic and Clinical	Continued Accreditation*	1-Apr-2021	1-Oct-2022
Blood Bank/Transfusion Medicine	Continued Accreditation*	1-Apr-2021	1-Oct-2022
Cytopathology	Continued Accreditation*	1-Apr-2021	1-Oct-2022
Dermatopathology (multidisciplinary)	Continued Accreditation*	1-Apr-2021	1-Oct-2022
Hematology	Continued Accreditation*	1-Apr-2021	1-Oct-2022
Pediatrics	Continued Accreditation*	31-Mar-2016	3-Jun-2019
Neonatal-Perinatal Medicine	Continued Accreditation*	31-Mar-2016	5-Jun-2019
Plastic Surgery - Integrated	Initial Accreditation	1-May-2023	1-Nov-2024
Plastic Surgery - Independent	Probationary Accreditation	TBD	TBD
Preventive Medicine	Continued Accreditation*	31-Oct-2016	17-Sep-2019
Psychiatry	Continued Accreditation*	1-Oct-2020	1-Apr-2022
Addiction psychiatry	Continued Accreditation*	1-Oct-2020	1-Apr-2022
Child and Adolescent Psychiatry	Continued Accreditation*	1-Oct-2020	1-Apr-2022
Geriatric Psychiatry	Continued Accreditation*	1-Oct-2020	1-Apr-2022
Radiology-Diagnostic		1	1 17P1 2022
3.	Continued Accreditation*	1-Apr-2020	1-Oct-2021
Interventional Radiology - Integrated	Continued Accreditation*	1-Apr-2020 TBD	1-Oct-2021 TBD
Interventional Radiology - Integrated Interventional Radiology - Independent	Continued Accreditation*  Initial Accreditation  Initial Accreditation		
	Initial Accreditation	TBD	TBD TBD
Interventional Radiology - Independent	Initial Accreditation Initial Accreditation	TBD TBD	TBD

Surgery	Continued Accreditation*	28-Feb-2018	1-Aug-2019
Vascular Surgery - Fellowship	Continued Accreditation*	28-Feb-2018	1-Aug-2019
Urology	Continued Accreditation	31-Dec-2016	18-Sep-2019
Vascular Surgery - Integrated	Continued Accreditation*	28-Feb-2018	1-Aug-2019

## Appendix C Dartmouth-Hitchcock Graduate Medical Education 2019 Annual Institutional Review Improvement Plan

	Area for Improvement	Goal	Actions	Outcome Metric(s)	Due Date	Monitoring Group	YTD Status
1	Faculty Evaluations of Residents/Fellows	Create a process for faculty evaluations of residents/fellows that produces quality, timely and flexible feedback.	<ul> <li>QAS members to talk with peers from like academic medical centers regarding their faculty evaluation of resident process.</li> <li>QAS to survey residents/fellows regarding their satisfaction with the evaluation process and quality of feedback received.</li> <li>GMEC to sponsor brainstorming and sharing sessions regarding evaluation process.         <ul> <li>GMEC to generate a list of evaluation best practices to disseminate to training programs.</li> </ul> </li> <li>GME to provide education to programs regarding the MedHub mobile app and self-initiated evaluations.</li> </ul>	Improve resident/fellow satisfaction with faculty evaluation of residents/fellows.  All programs have implemented at least one type of evaluation which may be self- initiated in MedHub.	Dec 2019	Quality & Accreditation Subcommittee	Unlikely to Met  The QAS determined that improving resident satisfaction with faculty evaluations of trainees is not salient measure as satisfaction is 76% on the 2019 ACGME Resident Survey (73% nationally, 77% 2018 ACGME Resident Survey).  The committee is continuing to push forward on having each program implement at least one type of self-initiated evaluation in MedHub.
2	Resident/Fellow	Provide residents/fellows with time to devote to their self-care (including medical, mental health and dental care appointments) through flexible scheduling during work hours.	<ul> <li>Benchmark current practices for flexible scheduling during work hours.</li> <li>GMEC to sponsor brainstorming and action planning session.</li> </ul>	100% of training programs have implemented a pathway to enable residents to request, or be provided, time for self-care.	Dec 2019	Learning Environment Subcommittee	Met 100% of training programs have documented the pathway residents/fellows will follow to request or be provided with time for self-care during work hours, for acute or long- term appointments.
3	Well-being	Provide residents/fellows with access to the Well-being Index© (an online self- screening tool to assess burnout, depression and substance abuse)	<ul> <li>Rollout Well-being Index© to GME residents/fellows.</li> <li>Collect and analyze baseline data.</li> </ul>	Well-being Index© provided to residents/fellows as a tool for selfassessment and resources.	Dec 2019	Learning Environment Subcommittee	Likely to Meet The Well-being Index© is scheduled to be rolled out to residents/fellows and D-H groups during the fall of 2019.

# Appendix D Dartmouth-Hitchcock Graduate Medical Education 2020 Annual Institutional Review Improvement Plan

	Area for Improvement	Goal	Actions	Outcome Metric(s)	Due Date	Monitoring Group
1	Resident/Fellow Well-being	Educate D-H community regarding the role of GME resident/fellow as part of the healthcare team	<ul> <li>Engage with D-H Marketing team to design marketing campaign</li> <li>Work with D-H Patient Experience to analyze Press Ganey patient satisfaction data</li> <li>Benchmark successful educational activities at other academic medical centers</li> </ul>	Launch multi-faceted marketing campaign	Dec 2020	Learning Environment Subcommittee
2	Faculty Development	Enhance faculty development resources	<ul> <li>Partner with D-H Learning Technology Team (LTT) regarding updated D-H/Geisel faculty development resources and distribution</li> <li>Offer diversity and inclusion workshop for GME Program Director, Program Coordinators and GME Office Staff</li> <li>Investigate Title IX training learning opportunities for faculty and staff</li> </ul>	Diversity and inclusion workshop completed Updated Faculty/Instructor Resource Directory posted and distributed	Dec 2020	Curriculum Subcommittee
3	Resident/Fellow Education	Provide module to residents/fellows on how to disclose adverse events to patients/families	<ul> <li>Research readily available content from internal and external resources</li> <li>Partner with D-H LTT to develop and design module</li> </ul>	100% of incoming 2020 residents complete module	Dec 2020	Curriculum Subcommittee