

2021 - 2022

ANNUAL INSTITUTIONAL REVIEW

EXECUTIVE SUMMARY



GRADUATE MEDICAL EDUCATION

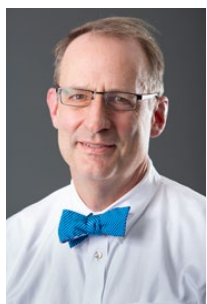
Executive Summary

2021-2022

This Executive Summary reviews the key activities and accomplishments of the Dartmouth Hitchcock Graduate Medical Education (GME) enterprise for the academic year July 2021 through June 2022 (AY22) and includes action plans for the coming year.

Graduate Medical Education 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 (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, C-TAGME, Director of GME Operations (Appendix B).

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



As I approach my second anniversary as the DIO and Associate Dean for GME at DH, I would like to share some sentiments that I hear from my DIO colleagues from around the country. When I took this position two years ago I hoped I would be able to find a copy of “How to be a DIO for Dummies” book on Amazon. Sadly, there were no such titles available, so instead, I elbowed my way into two different DIO groups that meet virtually on a bi-weekly basis (one in the Northeast, and one that is National) to get some “on the fly” education. In the beginning I asked all the questions (and I still ask a LOT), and over the two years I have also learned how high-functioning our GME team is and how “ahead of the curve” we are in many areas. I am proud to share what we are doing and how we are doing it on a national level; I feel like the tide has turned and I can now answer more questions than I ask. This is a testament both to the people who make GME run so effectively and smoothly, as well as to DHMC which has chosen to prioritize Graduate Medical Education as an extremely important part of what we do. In a way I feel our work in the Upper Valley is helping to improve not only the GME environment locally for all of our nearly 450 residents and fellows, yet nationally as we share some of our “best practices” with other teaching institutions.

GME AT A GLANCE

Training Programs	Trainees	Programs ≥ 20 Residents	Gender	Citizenship
52 ACGME-Accredited Programs	426 Trainees	Anesthesiology	198 Females	376 USA ▪ 18 Canada ▪ 5 China ▪
21 Residency Programs	336 Residents	Internal Medicine	228 Males	5 India ▪ 3 Venezuela ▪ 2 Greece ▪
31 Fellowship Programs	90 Fellows	Orthopaedic Surgery		2 Nepal ▪ 2 Pakistan ▪ 2 Taiwan ▪
		Pediatrics		1 trainee each: Australia, Iran,
		Psychiatry		Jamaica, Jordan, Korea,
		Surgery		Lebanon, Peru, Philippines,
				Thailand, Vietnam, Yugoslavia

ACGME Accreditation Status (Appendix C)	Citations	Areas for Improvement (AFI)
Sponsoring Institution (MHMH)	15 Total Citations	22 Total AFIs
Continued Accreditation*	6 Programs Cited	14 Programs Received AFIs
8 Continued Accreditation	-----	-----
3 Continued Accreditation without Outcomes	Citations require action and response to the ACGME Review Committee (RC)	AFIs are concerning trends noted by the RC which do not require a response and may require action to reverse
2 Initial Accreditation		
1 Continued with Warning		

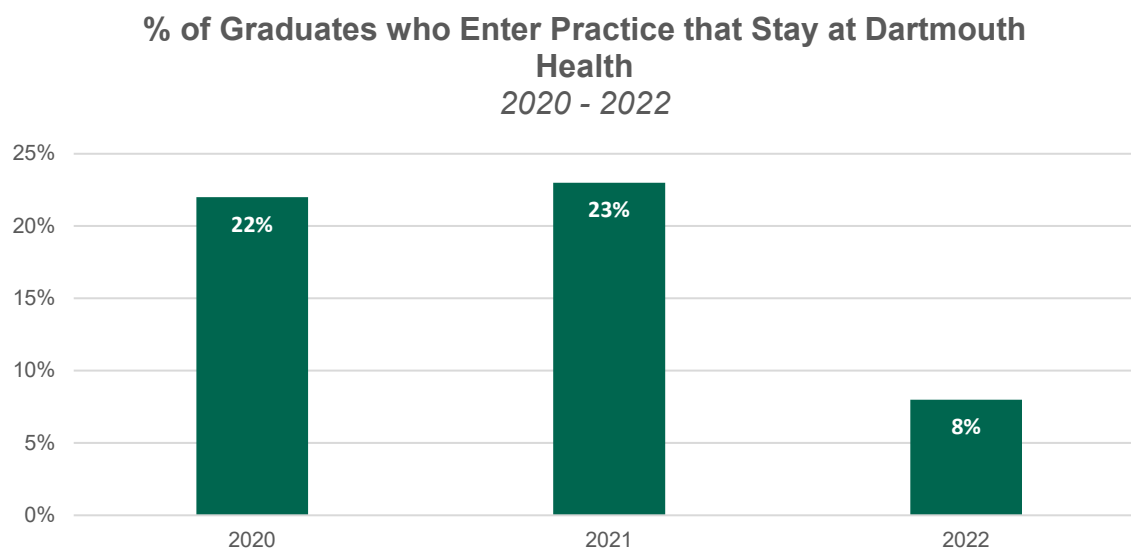
* with commendation (without citations or Areas for Improvement noted by the Review Committee)

NRMP Match Rates**		Board Pass Rates	Trainee Scholarly Activity
<u>18 Residency Programs</u>	<u>18 Fellowship Programs</u>	<u>First-Time Takers</u>	326 Abstracts/Posters Presented
Fully Matched: 15/18	Fully Matched: 16/18	Residents: 94%	325 Teaching Presentations
Subsequently Filled: 2/18	Subsequently Filled: 2/18	Fellows: 94%	299 Publications
Partially Filled: 1/18			262 Research Involvement
			36 Book Chapters

*** match rates only for those programs participating in the National Resident Matching Program (NRMP)*

2022 Graduate Data

<u>Post-Graduation Career Plans</u>	<u>Location of Practice</u>	<u>Practice Type</u>
53% Employed as a Physician	38% New England (8% Dartmouth Health)	49% Partnership or Group Practice
43% Continuing their Education	22% South	30% Academic
4% Other	13% Mid-Atlantic	11% Other
	13% Midwest	6% Hospitalist
	11% West	3% Solo Practice
	3% Other Locations outside of USA	



INITIATIVES & ACCOMPLISHMENTS

Education

- Based on our annual GME Exit Survey, 98% of 2022 graduates felt prepared for the next step in their career
- 100% of respondents to the 2021 Alumni Survey would choose to train at DHMC if given the opportunity to do it over again
- Affiliation agreements with 41 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 33.42 FTE/year

- GME Policy Development
 - New *Optional Extra Shifts Policy* created in collaboration with senior leadership, general counsel, compliance, billing/coding, payroll, and compensation, allowing residents/fellows at the PGY-2+ levels to optionally sign up for extra shifts under supervision and while remaining within work hour guidelines
 - Revision of the *Time Away from Training Policy* in partnership with Benefits to incorporate new ACGME requirements on resident/fellow leaves of absence
- New step-by-step application process and interactive tracking procedure developed by GME for departments seeking to start an ACGME-accredited program
- Rising chiefs participated in a full-day *Chief Resident Leadership Forum* in June 2022, with topics including a panel discussion with graduating chiefs, addressing reports of micro-aggressions, work hours oversight, and resources
- May 2022 full-day *GME Retreat* focused on the importance and mechanics of bi-directional feedback, with guest lecturer Dr. Robert Trowbridge, Associate Professor of Medicine at Tufts University School of Medicine
- Program coordinators furthered their own professional development through TAGME (Training Administrators of Graduate Medical Education) certification, attendance at regional/national conferences and as representative on the Graduate Medical Education Committee (GMEC) and its subcommittees.
 - Two program coordinators received initial TAGME certification, with 67% of eligible staff now certified
- Program Director (PD) Development
 - New Program Directors - Graham Atkins, MD (Internal Medicine); Clay Block, MD (Nephrology); Joi Carter, MD (Dermatology); Andrew Crawford, MD (Endocrinology); James DeVries, MD (Interventional Cardiology); Robert Percarpio, MD (Interventional Radiology - Independent); Michelle Tyler, MD, MPH (Neonatology); Kimberly Youngren, MD (Pain Medicine)
 - Program Director school launched in July 2021, with 30+ program directors, associate program directors, and department/section leaders participating in one of the two half-day sessions provided which covered topics including the ACGME Annual Accreditation Data System Update, Accreditation Process, How to Run an Effective Annual Program Evaluation and Clinical Competency Committee (CCC) Meeting, The ACGME Clinical Learning Environment Review (CLER) Process, and Work Hour Management
 - Implemented a new annual *Program Director Scholarship Fund* using generous philanthropic funds, wherein three newer program directors can attend their respective specialty-specific meetings
 - Creation of a Program Director Listserv, where DHMC PDs are able to connect for problem solving and sharing of best practices

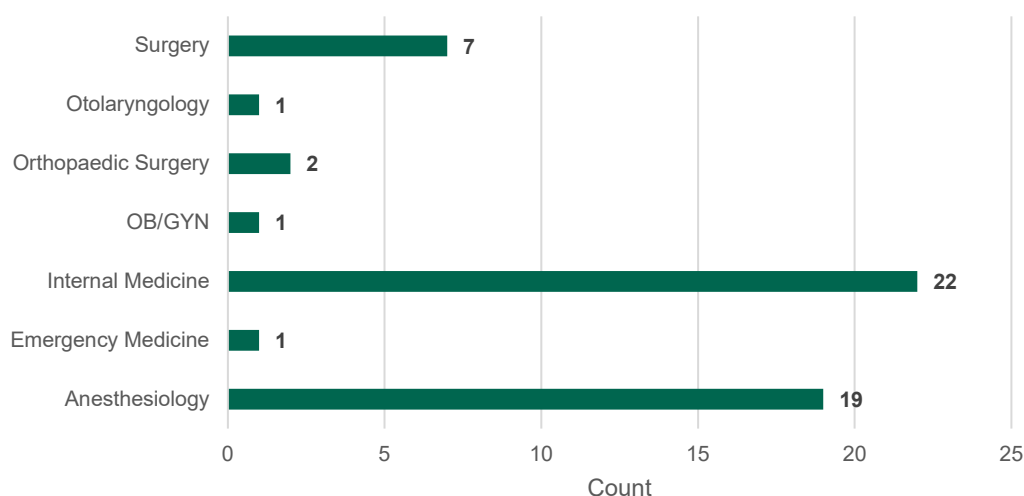
Well-Being

- Resident Pay Philosophy implemented July 2021, with an investment of \$3,193,737 to align resident and fellow stipends with the AAMC northeast mean benchmark by March 2022, with an annual update process
- Andrew Smith, PhD, joined Dartmouth Health in January 2022 in the newly developed GME Well-Being Psychologist role, which involves direct provision of therapy and assessment for GME residents and fellows, program development and education, and engagement in applied research to improve the well-being for healthcare workers
- Responded to concerns about food insecurity through surveying trainees, offering food vouchers, and provision of an enhanced resource guide to support resident/fellow overall health & well-being
- Fifth annual *Resident & Fellow Appreciation Week* held in January 2022, with food provided over the course of the week, as well as 356 notes of appreciation delivered to residents and fellows, a 300% increase from 2021
- Maintenance of the ACGME Annual Resident Well-Being Survey score of 2.8 within the domain “I often feel emotionally drained at work” despite the continued impact of the COVID-19 pandemic, meeting our goal as listed on the institutional scorecard

COVID-19 Response

- Fifty-three resident reassignments to the ICU or Hospital Medicine between December 2021 and January 2022
- GME Workforce Reassignment Team met weekly from December through January, comprised of the following stakeholders from Internal Medicine, Surgery, Emergency Medicine, Anesthesiology, ICU, Hospital Medicine, C-Suite and GME
- Premium payment provided for residents reassigned to overnight and weekend shifts, as well as holiday weeks

COVID-19 Resident Reassignments by Program
December 2021 - January 2022



AWARDS, HONORS & COMMITTEE INVOLVEMENT

Dartmouth Hitchcock Medical Center Faculty & Program Coordinator Awards

<i>Chair's Award – Pediatrics</i>	Karen Hsu Blatman, MD
<i>Christina Mathos Mentoring Award for the Society of Women in Urology</i>	E. Ann Gormley, MD
<i>Department of Surgery Teaching Award, Geisel</i>	Lawrence Dagrosa, MD
<i>DHMC Courage to Teach Award</i>	Perry Ball, MD
<i>DHMC Program Coordinator of the Year Award</i>	Kathleen Hale, C-TAGME
<i>DHMC Rookie Coordinator of the Year Award</i>	Brianna Eastman
<i>Distinguished Clinician Educator Award, AOA 2022 – Orthopaedics</i>	Vincent Pellegrini, MD
<i>Faculty of the Year Award – Dermatology</i>	Joi Carter, MD
<i>Joseph O'Donnell Faculty Award – Surgery</i>	Kari Rosenkranz, MD
<i>Teacher of the Year Award – Ophthalmology</i>	Donald Miller, MD
<i>Teacher of the Year Award – Orthopaedics</i>	William J. McKinnon, MD
<i>The Arthur Naitove Distinguished Teaching Award – Surgery</i>	B. Fernando Santos, MD

Local & National Resident Awards & Honors

Alpha Omega Alpha Medical Honor Society

Gold Foundation Humanism and Excellence in Teaching Award

Golden Scalpel – Surgery

Hitchcock Foundation Grant

New England Orthopaedic Society Kilfoyle Award – 1st Place Research Presentation

New England Otolaryngological Society Spring Meeting – 2nd Place Resident Speaker Award

Resident Scholar Award – Pediatrics

Resident Teacher of the Year – Orthopaedics

Resident Teacher of the Year – Pediatrics

Ming Cai, MD, Surgery, PGY-2

Justin Cirone, MD, Surgery, PGY-5

Robin Cotter, MD, Surgery, PGY-3

Matthew Anton, MD, Surgery, PGY-3

Charles Burney, MD, Surgery, PGY-5

Justin Cirone, MD, Surgery, PGY-5

Prashanthi Divakar, MD, Otolaryngology, PGY-5

John Kanter, MD, Neurosurgery, PGY-7

Matthew Anton, Surgery, PGY-3

Justin Cirone, MD, Surgery, PGY-5

Jenaya Goldwag, MD, Surgery, PGY-4

Mahmoud Shehada, MD, Surgery, PGY-3

Gabrielle Ray, MD, Orthopaedic Surgery, PGY-2

Ilda Molloy, MD, Orthopaedic Surgery, PGY-5

Maggie Mouzourakis, MD, Otolaryngology, PGY-2

Andrea Tou, MD, Pediatrics, PGY-3

Tracy Borsinger, MD, Orthopaedic Surgery, PGY-5

Katherine O’Keefe, MD, Pediatrics, PGY-3

GME-Focused National Committee Membership

- *Association of Pediatric Program Directors, Member:* Carol Lynn O’Dea, MD (Program Director, Pediatric Residency); Meaghan Williams (Program Coordinator, Pediatrics Residency)
- *Association of Program Directors in Surgery, Chair of Membership Division:* Kari Rosenkranz, MD (Program Director, Surgery Residency)
- *Organization of Neonatal-Perinatal Training Program Coordinators Leadership Committee:* Kelly Rose, C-TAGME (Program Coordinator, Dermatology Residency, Neonatology and Sleep Medicine Fellowships)
- *Pediatric Otolaryngology Education Committee:* Eunice Chen, MD, PhD (Program Director, Otolaryngology)
- *Sleep Medicine Fellowship Director’s Council:* Glen Greenough, MD (Program Director, Sleep Medicine Fellowship)

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 AY22 residents and fellows from the following specialties were selected by the Associated Resident Council to participate on GME-related committees and subcommittees:

- **Graduate Medical Education Committee:** Anesthesiology, Cardiovascular Disease, Diagnostic Radiology, Pediatrics, Psychiatry, Pulmonary Disease & Critical Care Medicine
 - **Curriculum Subcommittee:** Critical Care Medicine – Internal Medicine, Hospice & Palliative Medicine, Neurosurgery, Pathology, Psychiatry

- **Diversity, Equity, Inclusion & Belonging Subcommittee:** Hematology & Medical Oncology, Internal Medicine, Neurology, Pathology, Preventive Medicine/Infectious Disease, Psychiatry
- **Learning Environment Subcommittee:** Hematology/Oncology, Orthopaedic Surgery, Psychiatry, Vascular Surgery - Integrated
- **Quality & Accreditation Subcommittee:** Female Pelvic Medicine & Reconstructive Surgery, Pathology, Psychiatry

We continue to encourage resident participation in committee work at the institutional level. Trainees from the following specialties participated in institutional committees in AY22:

- **Antimicrobial Stewardship Committee:** Infectious Disease, Preventive Medicine/Infectious Disease
- **Clinical Ethics Committee:** Plastic Surgery – Integrated
- **DHMC Pharmacy and Therapeutics Committee:** Child and Adolescent Psychiatry, Orthopaedic Surgery
- **Human Research Protection Program:** Hematology/Oncology
- **Medication Safety Committee:** Hospice & Palliative Medicine
- **Regional Primary Care Committee:** Internal Medicine, Preventive Medicine/Infectious Disease
- **SEARCHES Committee:** Neurological Surgery, Orthopaedic Surgery, Preventive Medicine/General Surgery
- **System Quality & Safety Committee:** Female Pelvic Medicine and Reconstructive Surgery, Preventive Medicine/Endocrinology, Preventive Medicine/Neonatology
- **Transfusion Committee:** Transfusion Medicine

GME OUTCOMES

Graduate Medical Education Committee (GMEC) and Subcommittee Activities

The GMEC held seven monthly meetings during AY22. 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 Graduate Medical Education.

The GMEC has a subcommittee structure and much of the work of the GMEC is accomplished by the four subcommittees: the Curriculum Subcommittee (CS); Diversity, Equity, Inclusion and Belonging (DEIB); Learning Environment Subcommittee (LES); and the Quality and Accreditation Subcommittee (QAS). Highlights of the work done within each subcommittee during AY22 are listed below.

- **Curriculum Subcommittee (CS)**
 - Reviewed structures for providing feedback, identifying the models that best meet our needs, and sharing those models with faculty and residents
 - Identification of resources and curriculum that help programs meet the common core requirements
 - Designed a curriculum for chief residents
- **Diversity, Equity, Inclusion & Belonging Subcommittee (DEIB)**
 - Reviewed all program websites, adding a statement on GME's commitment to Diversity, Equity, Inclusion and Belonging
 - Updated all DEIB-related content and resources within the Residency Management System, MedHub
 - Partnered with Geisel Medical School to host a booth at the National Latino Medical Student Association (LMSA) conference March 2022
- **Learning Environment Subcommittee (LES)**
 - Review and analysis of internal and external data related to resident and fellow work compression, including data from program-specific conversations around work compression that identified the following

top causes – staffing shortages, communication burden, lack of administrative time and/or educational/research/QI time.

- Quarterly review of work hour violations across all programs, with programs not in compliance required to provide a mitigation plan
- Development of work hours educational resources for the GME community including learners and leadership

- **Quality & Accreditation Subcommittee (QAS)**

- Performed seven Focused Special Program Reviews and three Full (Team) Special Program Reviews within programs meeting DHMC-identified criteria for underperformance
- Redesigned the Annual Program Evaluation

In addition to the subcommittees above, the Associated Resident Council (ARC) also works to improve the overall resident/fellow experience at DHMC. The ARC is composed of a group of peer-selected representatives from each of the core residency programs, who 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 AY22 were as follows:

- **Resident Life:** Housing and daycare availability, after-hours OB/GYN and Ophthalmology clinics for resident and fellows
- **Social:** Fall mixer at Harpoon Brewery, ski event at Whaleback mountain, development of Facebook group for event postings
- **Diversity & Inclusion:** Virtual forum on DEIB-specific issues March 2022 in collaboration with Geisel, Alumni Relations liaison
- **Education:** After-hours learning series, financial seminars, collaboration efforts with Quality & Safety

ACGME Annual Surveys

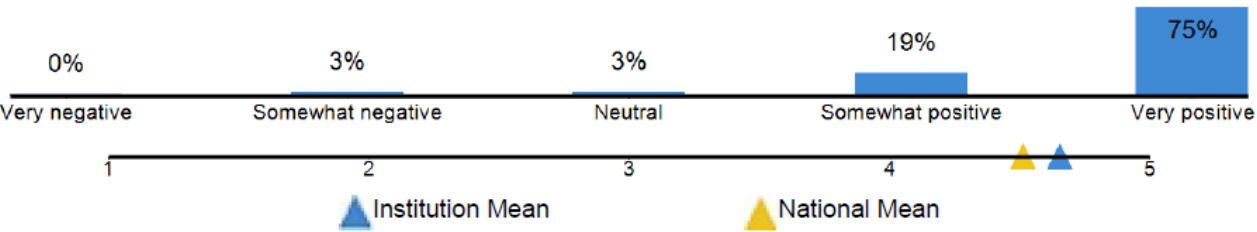
Training programs, as well as the GMEC and its subcommittees, use the data derived from the annual ACGME Resident/Fellow Survey and Faculty Survey to monitor program compliance. These confidential surveys, which all specialty and subspecialty programs (regardless of size) are required to participate 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 2022 ACGME Survey.

<i>2022 ACGME Resident/Fellow Survey</i>		<i>2022 ACGME Faculty Survey</i>	
Successes	Opportunities	Successes	Opportunity
Instruction on minimizing effects of sleep deprivation up 8% since 2020 (from 83% to 91% overall compliance)	Appropriate balance between education and patient care down 5% since 2020 (from 84% to 79% overall compliance)	Process to transition patient care and clinical duties when residents/fellows fatigued up 6% since 2021 (from 82% to 88% overall compliance)	Faculty members satisfied with process for evaluation as educators 6% below national compliance (78% overall compliance at DHMC)
Taught about health care disparities up 10% since 2020 (from 70% to 80% overall compliance)	Participate in adverse event investigation and analysis down 4% since 2020 (from 80% to 76% overall compliance)	Participated in efforts to recruit diverse residents/fellows up 15% since 2020 (from 76% to 91% overall compliance)	
Compliance within 18% of domains on the DHMC survey ≥ 5% above the national compliance			

In addition to the categories related to the learning environment, residents/fellows are asked to provide an overall evaluation of their training program. The institution-level data derived from this survey (97% response rate) continues to demonstrate a high degree of overall resident and fellow satisfaction with their training experience at DHMC. Resident and fellow responses to the 2022 ACGME Survey question addressing overall evaluation of their program is summarized below:

Residents' overall evaluation of the program

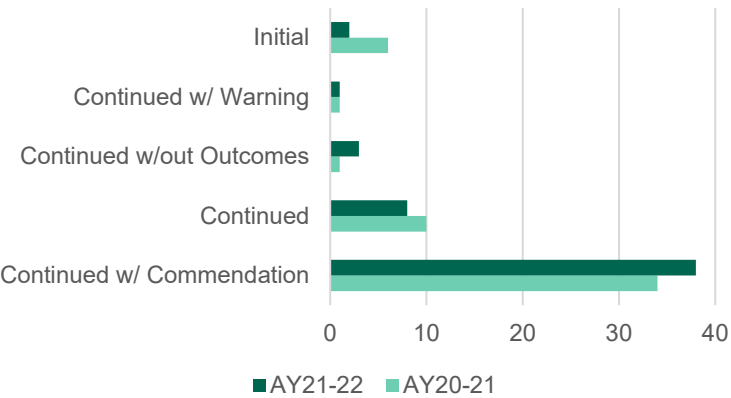


ACGME Accreditation

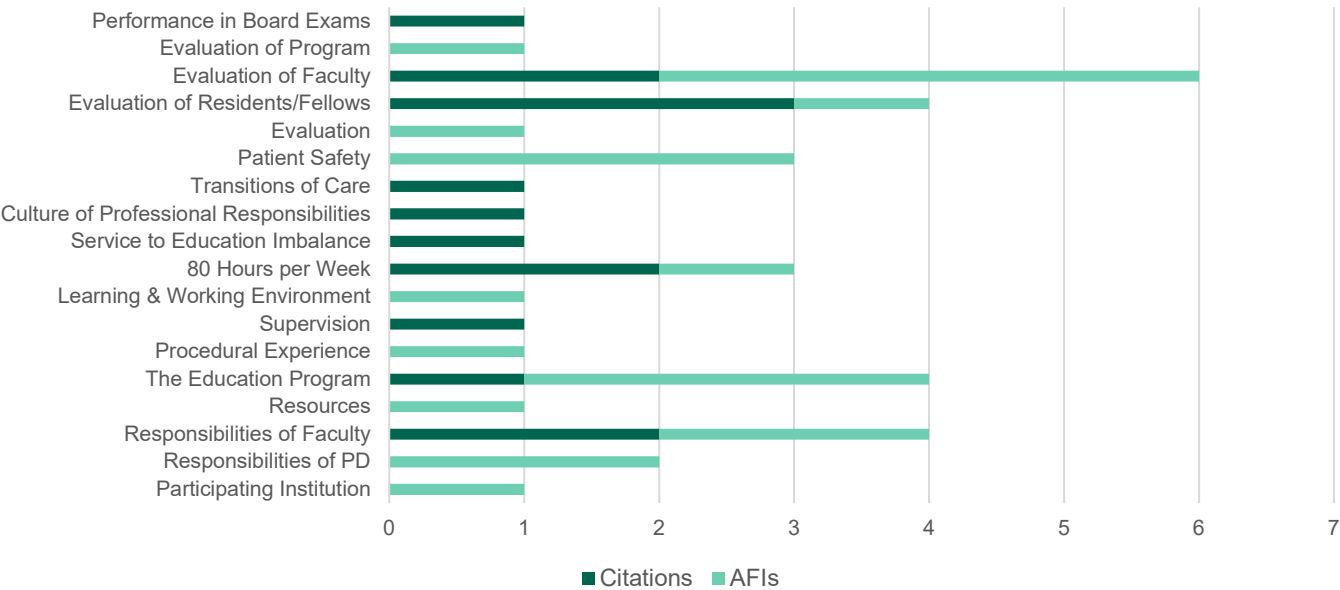
Program accreditation remains very strong, with 46 of our 52 ACGME-accredited programs receiving Continued Accreditation, 38 of which received Continued Accreditation with Commendation, meaning that no citations or areas for improvement were identified by the ACGME Review Committee. The status of the remaining six programs is shown within the *Program Accreditation Statuses* graph.

Two accreditation site visits were successfully completed in the 21-22 academic year. The Female Pelvic Medicine & Reconstructive Surgery fellowship underwent a virtual site visit in July 2021, and the Ophthalmology residency followed in January 2022. Both programs received Continued Accreditation without Outcomes. This accreditation status is given to programs that do not have any graduate performance data at the time of review.

Program Accreditation Statuses
AY21 vs. AY22



Citations & Areas for Improvement
2021-2022



2022 Employee Engagement Survey

In June 2022, the institution participated in a system-wide engagement survey, with 67% of residents and fellows providing feedback. The group's overall engagement indicator came in at 3.90, down from 4.09 in 2021. The following tables outlines the strengths and concerns stemming from the 2022 survey.

STRENGTHS			CONCERNS		
Item	2022 Score	2021 Score	Item	2022 Score	2021 Score
The person I report to treats me with respect	4.67	4.65	My work unit is adequately staffed	2.72	3.44
I respect the abilities of the person to whom I report	4.58	4.60	My pay is fair compared to other healthcare employers in this area	2.91	3.25
The person I report to encourages teamwork	4.48	4.51	I rarely experience burnout from my work	2.98	3.12
I get the training I need to do a good job	4.33	4.37	I am able to disconnect from work communications during my free time	3.23	3.28
The person I report to gives me useful feedback	4.29	4.33	This organization demonstrates a commitment to workforce diversity	3.75	3.75

Clinical Learning Environment Review (CLER) Site Visit Opportunities

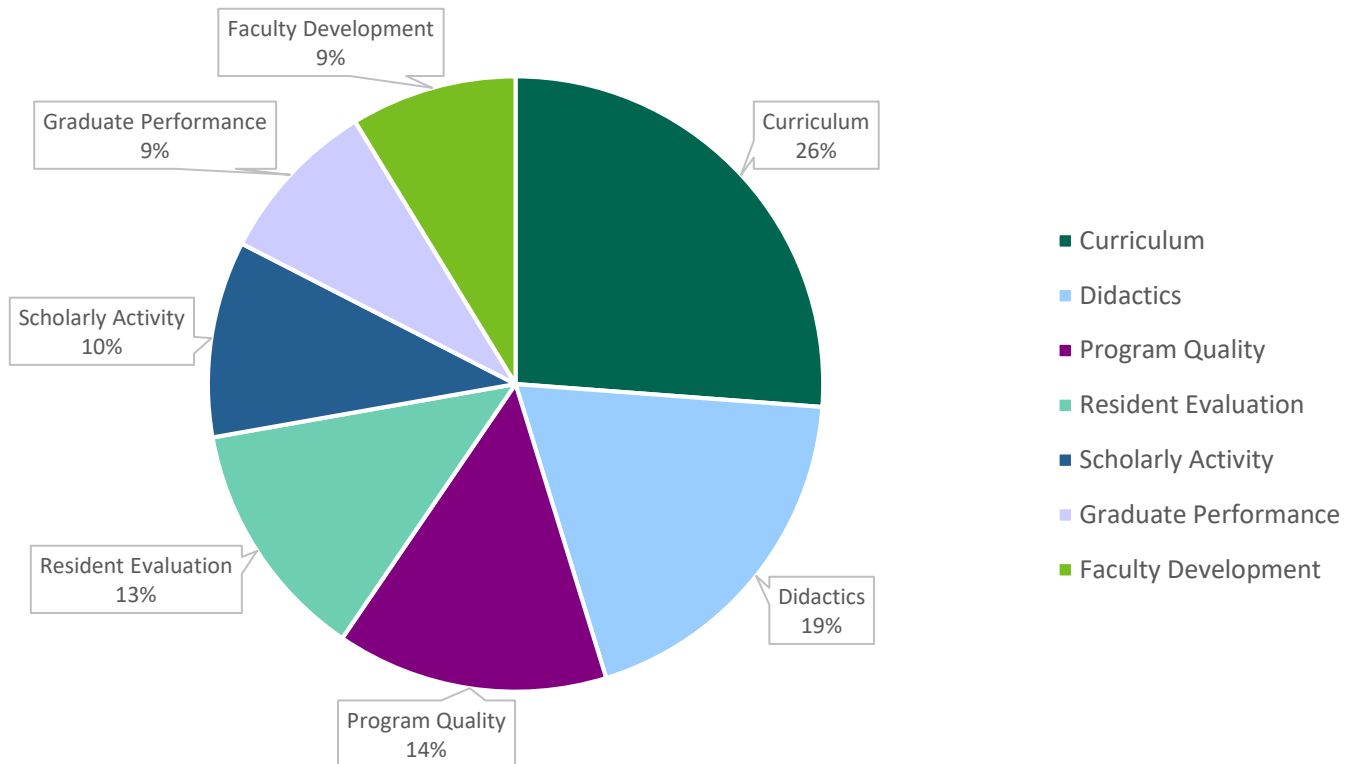
The institution completed a (virtual) ACGME Clinical Learning Environment Review (CLER) site visit in November 2021, which focused on the impact of COVID-19 on the learning environment. Areas reviewed included patient safety, healthcare quality, teaming, supervision, well-being, and professionalism. Institutional and GME leaders participated in the visit, as well as 20 program directors and 52 residents/fellows. The following areas of opportunity within the learning environment at DHMC were identified by the site visitors:

- Telehealth Visits
 - Dissemination of home scales, VS monitor for more objective data
 - Improved access to outpatient labs and testing
 - Increased resident & fellow training in telehealth visits
 - Improved faculty oversight
- Patient Safety Events
 - Increased focus on interprofessional safety event investigations
 - Learners want more outcome data from safety events they report
 - Better coordination of learners into patient safety culture at DHMC
- Healthcare Disparities
 - "At present, DHMC does not appear to have a systematic approach to identify variability in the care provided to or the clinical outcomes of their known vulnerable patient populations, including the steps of periodic performance measures to identify disparities in patient care or outcomes, targeted QI efforts to address these disparities and ongoing analyses to assess these efforts."

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, intended 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 2022 Annual Program Evaluation Action Item Categories



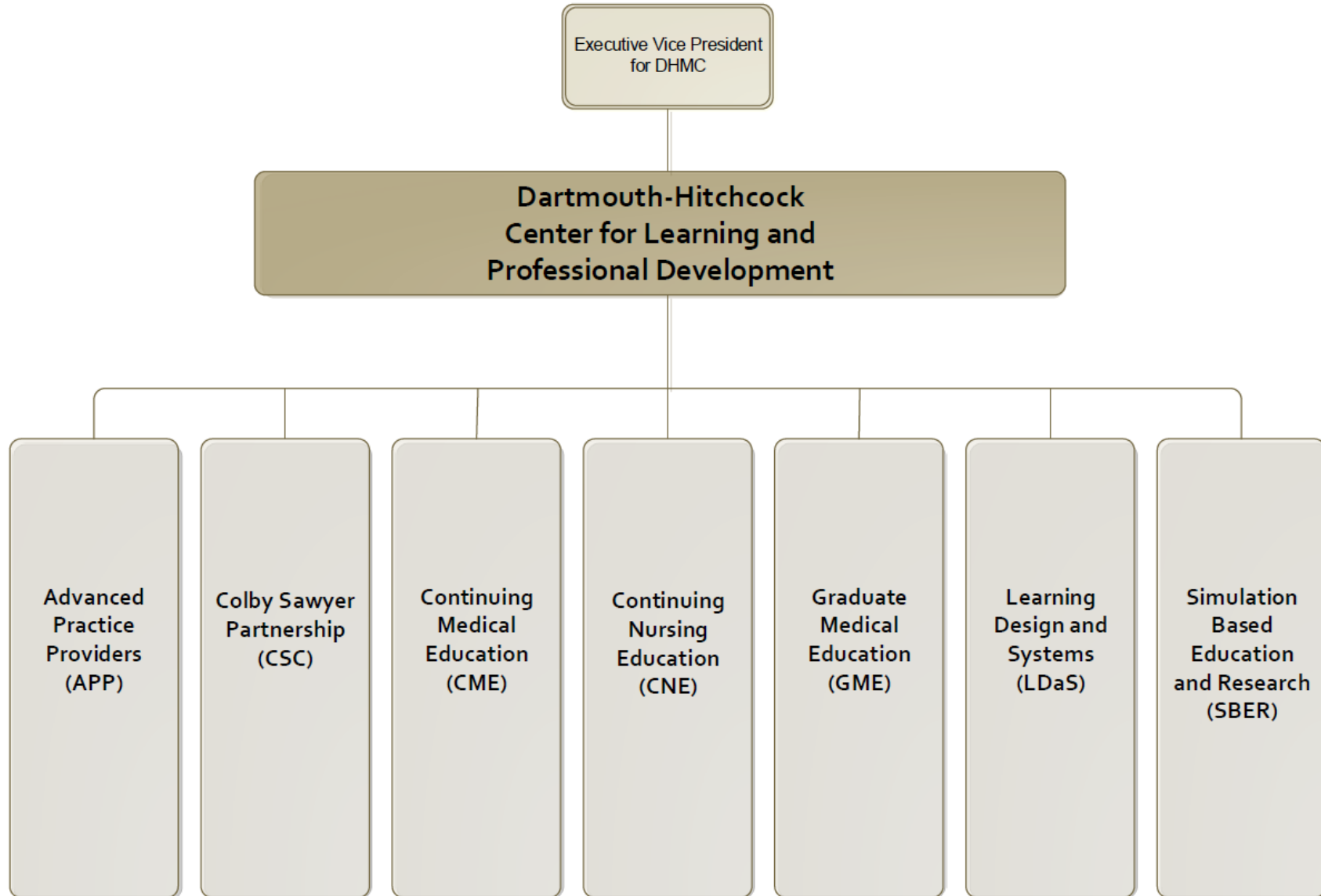
Annual Institutional Review (AIR) Improvement Plan

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, two resident/fellow representatives, 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 of residents/fellows and faculty members. In addition, action plans and performance monitoring procedures resulting from the previous year's AIR are reviewed and discussed among the team.

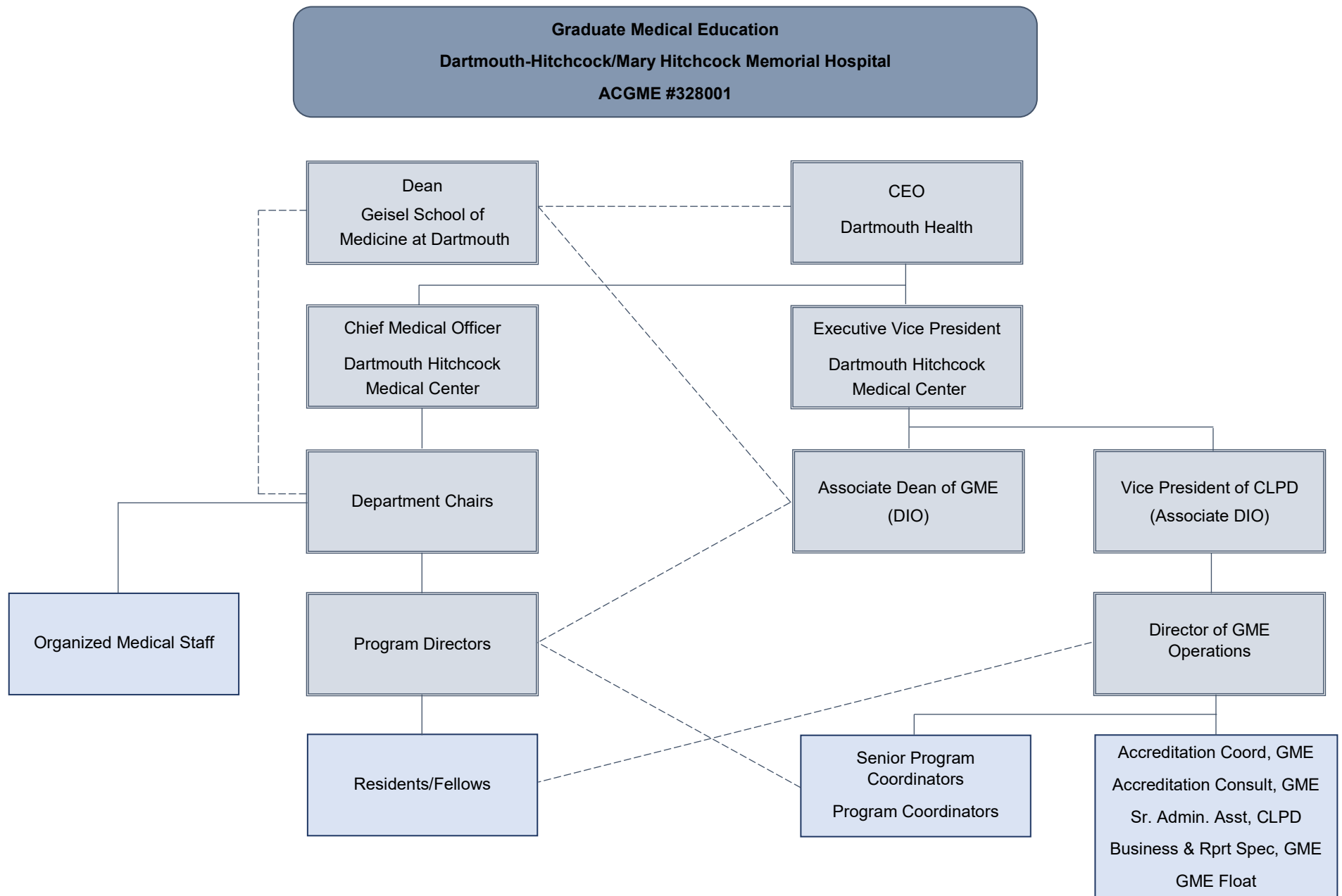
In reviewing the last academic year's data, the AIR committee concluded its proceedings with the following:

- 2022 AIR Improvement Plan Follow-up:** The committee identified three strategic goals for the GME enterprise to be carried out in 2022, including one goal carried over from 2021. We have successfully completed one of the goals. Progress has been made on the remaining two goals, however we are unlikely to complete them by the December 2022 due date and therefore they will be carried over to the 2022 AIR improvement plan. (See Appendix D for details on action plans/outcomes).
- 2023 AIR Improvement Plan:** The goals on faculty feedback and resident/fellow work hour compliance have been carried over from the 2022 improvement plan, with minor adjustments made to each goal. The AIR team identified one new goal for 2023 in the area of resident and fellow participation in interprofessional adverse event analysis. (See Appendix E for details on action plans).

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



Appendix B
**Dartmouth Hitchcock Medical Center
Graduate Medical Education Organizational Chart**



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

ACGME Accredited Programs	ACGME Accreditation Status <small>*with commendation</small>	Initial Accreditation Site Visit	Self Study Date	10 year Site Visit Date
Mary Hitchcock Memorial Hospital (<i>Sponsoring Institution</i>)	Continued Accreditation*		1-Jun-2027	1-Jun-2029
Anesthesiology	Continued Accreditation*		1-Apr-2022	1-Apr-2024
<i>Critical Care Medicine - Anesthesiology</i>	Continued Accreditation*		1-Apr-2022	1-Apr-2024
<i>Pain Medicine (multidisciplinary)</i>	Continued Accreditation*		1-Apr-2022	1-Apr-2024
<i>Regional Anesthesiology & Acute Pain Medicine</i>	Continued Accreditation*		TBD	TBD
Dermatology	Continued Accreditation*		1-Sep-2027	1-Sep-2029
Emergency Medicine	Continued Accreditation*		3-Oct-2022	3-Oct-2024
Internal Medicine	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Cardiovascular Disease</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Clinical Cardiac Electrophysiology</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Critical Care Medicine - Internal Medicine</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Endocrinology, Diabetes, and Metabolism</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Gastroenterology</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Hematology and Oncology</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Hospice and Palliative Medicine (multidisciplinary)</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Infectious Disease</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Interventional Cardiology</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Nephrology</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Pulmonary Disease and Critical Care Medicine</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Rheumatology</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
<i>Sleep Medicine (multidisciplinary)</i>	Continued Accreditation*		1-Jan-2021	1-Jan-2023
Interventional Radiology - Integrated	Initial Accreditation	11-Aug-2022	TBD	TBD
<i>Interventional Radiology - Independent</i>	Initial Accreditation	1-Jul-2022	TBD	TBD
Neurological Surgery	Continued Accreditation		31-Jan-2018	1-Jan-2020
Neurology	Continued Accreditation*		30-Nov-2018	1-Nov-2020
<i>Clinical Neurophysiology</i>	Continued Accreditation		30-Nov-2018	1-Nov-2020
<i>Epilepsy</i>	Continued Accreditation		30-Nov-2018	1-Nov-2020
Obstetrics and Gynecology	Continued Accreditation		31-Dec-2018	1-Dec-2020
<i>Female Pelvic Medicine & Reconstructive Surgery</i>	Continued Accreditation without Outcomes		TBD	TBD
Ophthalmology	Continued Accreditation without Outcomes		TBD	TBD
Orthopaedic Surgery	Continued Accreditation		1-Jun-2022	1-Jun-2024
Otolaryngology	Continued Accreditation		1-Jan-2022	1-Jan-2024
Pathology-Anatomic and Clinical	Continued Accreditation*		1-Apr-2021	1-Apr-2023
<i>Blood Bank/Transfusion Medicine</i>	Continued Accreditation*		1-Apr-2021	1-Apr-2023
<i>Cytopathology</i>	Continued Accreditation*		1-Apr-2021	1-Apr-2023
<i>Dermatopathology (multidisciplinary)</i>	Continued Accreditation*		1-Apr-2021	1-Apr-2023
<i>Hematopathology</i>	Continued Accreditation*		1-Apr-2021	1-Apr-2023
Pediatrics	Continued Accreditation*		1-Jun-2027	1-Jun-2029
<i>Neonatal-Perinatal Medicine</i>	Continued Accreditation*		1-Jun-2027	1-Jun-2029
Plastic Surgery - Integrated	Continued Accreditation without Outcomes		1-Jun-2027	1-Jun-2029
<i>Plastic Surgery - Independent</i>	Continued Accreditation with Warning		1-May-2023	1-May-2025

ACGME Accredited Programs	ACGME Accreditation Status <small>*with commendation</small>	Initial Accreditation Site Visit	Self Study Date	10 year Site Visit Date
Preventive Medicine	Continued Accreditation*		1-Sep-2027	1-Sep-2029
Psychiatry	Continued Accreditation*		1-Oct-2023	1-Oct-2025
<i>Addiction Psychiatry</i>	Continued Accreditation*		1-Oct-2023	1-Oct-2025
<i>Child and Adolescent Psychiatry</i>	Continued Accreditation*		1-Oct-2023	1-Oct-2025
<i>Geriatric Psychiatry</i>	Continued Accreditation*		1-Oct-2023	1-Oct-2025
Radiation Oncology	Continued Accreditation		TBD	TBD
Radiology-Diagnostic	Continued Accreditation*		1-Apr-2022	1-Apr-2024
<i>Neuroradiology</i>	Continued Accreditation*		1-Apr-2022	1-Apr-2024
Surgery	Continued Accreditation		28-Feb-2018	1-Feb-2020
Urology	Continued Accreditation*		1-Sep-2027	1-Sep-2029
Vascular Surgery - Integrated	Continued Accreditation*		28-Feb-2018	1-Feb-2020
<i>Vascular Surgery - Fellowship</i>	Continued Accreditation*		28-Feb-2018	1-Feb-2020

KEY:
Postponed
Submitted
Not yet scheduled (approximate)
Completed, awaiting accreditation decision

Appendix D
**Dartmouth Hitchcock Medical Center Graduate Medical Education
2022 Annual Institutional Review Improvement Plan**

	Area for Improvement	Goal	Actions	Outcome Metric(s)	Due Date	Monitoring Group	YTD Status
1	Culture of Safety Resident/Fellow Well-being	Partner with D-H Clinical Chairs to address work compression as a systemic cultural issue for residents/fellows and faculty	<ul style="list-style-type: none"> Comprehensive analysis of internal and external data over the past 3-years utilizing: <ul style="list-style-type: none"> MedHub (Work Hours) D-H Engagement and Pulse Surveys Well-Being Index D-H GME Exit Surveys GME Conaty Project Data ACGME Letters of Notification ACGME Surveys Partner with ARC to develop, distribute and analyze internal resident/fellow survey on work hours Review and inventory evidence based compression combatting interventions 	<p>Program Directors have had at least one conversation with their resident/fellow group on decompression strategies</p> <p>Aggregated comments from program meetings, in addition to analysis of internal and external data, brought to Clinical Chairs</p>	Dec 2022	Learning Environment Subcommittee	<p>Likely to Meet</p> <p>A comprehensive data analysis has been performed, and program directors have had at least one conversation with their resident/fellow group on causes of work compression.</p> <p>The aggregated comments and data analysis will be brought to the Clinical Chairs group at the end of 2022.</p>
2	Faculty Feedback	Investigation to understand the barriers to effective faculty feedback	<ul style="list-style-type: none"> Utilize a combination of methodologies – surveys, focus groups, discussions – to investigate: <ul style="list-style-type: none"> Feedback requisites among faculty Resident/fellow barriers to the provision of faculty feedback, in partnership with ARC Use ACGME faculty survey data to: <ul style="list-style-type: none"> Identify no more than 5 high-performing programs in the area of faculty satisfaction with feedback Have 1:1 discussions with identified programs to begin developing standards for faculty feedback Prepare thematic analysis of feedback requisites and barriers for presentation 	<p>Present the analysis of faculty feedback requisites, and resident/fellow barriers to the provision of faculty feedback, to:</p> <ul style="list-style-type: none"> Vice Chairs of Education <ul style="list-style-type: none"> Program Directors Program Coordinators Residents & Fellows 	Dec 2022	Curriculum Subcommittee	<p>Unlikely to Meet</p> <p>The GME Retreat in May 2022 focused on bidirectional feedback.</p> <p>In collaboration with Curriculum Subcommittee chair, Dr. Max Vergo, the Annual Institutional Review team reconfigured the goal established in 2021 to best meet the needs of our GME community. Adjustments to this goal can be found within Appendix E. New due date: December 2023.</p>
3	Resident/Fellow Work Hour Compliance	Decrease the frequency of 80 hour and 1 in 7 work hour violations among GME residents/fellows across the institution	<ul style="list-style-type: none"> Analyze AY20 & AY21 MedHub work hour data <ul style="list-style-type: none"> Identify high violating programs (HVP) based on violations/year/service Investigate violation causes among HVP through program discussion facilitated by LES members <ul style="list-style-type: none"> Create a report identifying common themes/causes for violations, including a mitigation plan Bi-monthly review of work hour violations among HVP by LES Quarterly updates to the GMEC on work hour violations across institution and progress on AIR goal by LES chair Promote a culture of honesty around work hour reporting <ul style="list-style-type: none"> Reminders at GMEC, and in DIO Notes, for PDs Programs provide monthly reminders to residents/fellows 	<p>Decrease 80-hour violations, as reported in MedHub, by 50% across all programs in CY22</p> <p>Decrease 1 in 7 violations, as reported in MedHub, by 90% across all programs in CY22</p>	Dec 2022	Learning Environment Subcommittee	<p>Unlikely to Meet</p> <p>Review of all work hour violations from AY20 and AY21 has been completed, with the identification of four high-violating programs. Communications have been sent to each of the four programs, requesting at least one meeting with residents to identify systemic causes and solutions.</p> <p>While we have seen a 56% decrease in 80-hour work hour violations in CY22, we have not seen the desired progress in 1 in 7 violations. This goal has been reconfigured with a new due date of December 2023. Adjustments to this goal can be found within Appendix E.</p>

Appendix E
Dartmouth Hitchcock Medical Center Graduate Medical Education
2023 Annual Institutional Review Improvement Plan

	Area for Improvement	Goal	Actions	Outcome Metric(s)	Due Date	Monitoring Group
1	Faculty Feedback	Identify institutional best practices for effective faculty feedback	<ul style="list-style-type: none"> Use ACGME faculty survey data to: <ul style="list-style-type: none"> Identify and interview no more than 5 high-performing programs in the area of faculty satisfaction with feedback Analyze data from high performing programs to identify common themes in faculty feedback Create toolkit incorporating faculty feedback framework 	<p>Distribution of faculty feedback best practices toolkit</p> <p>Present best practices to:</p> <ul style="list-style-type: none"> Program Directors Program Coordinators 	Dec 2023	Curriculum Subcommittee
2	Resident/Fellow Work Hour Compliance & Well-Being	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	<ul style="list-style-type: none"> Disseminate work hour violations report card to each program every 6 months <ul style="list-style-type: none"> Programs with greatest improvements share progress and best practices at GMEC Educate rising chief residents on work hour compliance management at annual Chief Resident Leadership Forum Promote a culture of honesty around work hour reporting <ul style="list-style-type: none"> Reminders at GMEC, and in DIO Notes, for PDs Incorporate into Chief Resident Leadership Forum Programs provide monthly reminders to residents/fellows Quarterly updates to the GMEC on work hour violations across institution and progress on AIR goal by LES chair 	<p>Maintain decrease in 80-hour violations seen in CY22, as reported in MedHub, across all programs in CY23</p> <p>Decrease 1 in 7 violations, as reported in MedHub, by 75% across all programs in CY23</p> <p>Increase the ACGME Resident/Fellow Well-Being Survey question "I often feel emotionally drained at work" to 2.9</p>	Dec 2023	Learning Environment Subcommittee
3	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 framework for resident/fellow participation in real and/or simulated interprofessional adverse event analysis at Dartmouth Hitchcock Medical Center	Dec 2023	Quality & Accreditation Subcommittee