SES106

Using the self-study to further GME institutional integration: From notification to implementation!

Ann Dohn, MA, DIO & GME Director
Pedro Tanaka, M.D., Ph.D., Associate DIO, Associate Dean of Faculty Affairs
Thang (Trey) Huynh-Ngo, MBA, Program Manager/Education Specialist
Disclosure

SPEAKERS:

- Ann Dohn, MA, DIO & GME Director (virtual)
- Pedro Tanaka, MD, PhD, Associate DIO & Associate Dean of Faculty Affairs
- Trey Huynh-Ngo, MBA, GME Program Manager & Education Specialist

Disclosure

None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.
Session Agenda

- Overview of institutional self-study
- Our work plan (with a focus on integration)
  - Team members
  - Mission statement
  - SWOT
  - Aims
  - Action plans
- Monitoring, lessons learned, and current stage
- Discussion and Q&A
Session Objectives

Define an institutional aim

Identify areas for improvement aligned with the sponsoring institution mission

Create an action plan for the sponsoring institution.
What brought you to this session?
OVERVIEW OF INSTITUTIONAL SELF STUDY
The Self-Study is an **objective and comprehensive evaluation** of the GME within a sponsoring institution with the aim of improving it. The self study committee is charged with:

- **Analyzing GME performance** by:
  - Reviewing the Annual Institutional Reports from the last 5 years
  - Completing a SWOT analysis

- Developing and implementing **a strategic plan**, involving:
  - A GME institutional mission
  - Three to five discrete aims
  - Action plans to achieve each aim over the next three to five years
• Completed by Institutional Self-Study Committee
• Submitted to ACGME

Question 1: Institutional Self-Study Team
Who was included in the Institutional Self-Study team and why? List by name, role, and title. (Maximum 300 words.)

Question 2: Sponsoring Institution Mission
State the Sponsoring Institution’s graduate medical education (GME) mission. (Maximum 250 words.)

Question 3: Opportunities for the Sponsoring Institution
Describe important opportunities for the Sponsoring Institution. (Include information gathered for the Institutional Self-Study, and the Institutional Self-Study team’s analysis of institutional performance, to discuss the Sponsoring Institution’s environmental context. Maximum 250 words.)

Question 4: Threats Facing the Sponsoring Institution
Describe real or potential challenges that may affect the Sponsoring Institution’s ability to achieve its aims. (Maximum 250 words.)

Question 5: Sponsoring Institution Aims
Describe three to five aims related to the Sponsoring Institution’s GME mission, and informed by the Institutional Self-Study team’s analysis. (Maximum 150 words.)

Question 6: Aims Linked to National Learning Community for Sponsoring Institutions
If applicable, identify any institutional aims that are aligned with the work of the ACGME’s national learning community for Sponsoring Institutions. (Maximum 200 words.)

Question 7: Advancing the Aims
Describe current resources, processes, activities, and/or policies that contribute to advancing these aims. (Maximum 250 words.)

Question 8: Sponsoring Institution Actions
Describe actions that the Sponsoring Institution will take over the next three to five years to achieve each aim. (Maximum 350 words.)
Jun 2022
• ACGME notified SHC GME to start the institutional self study process

Aug – Dec 2022
• Formed a Self Study Committee
  • Meetings on 8/30, 9/20, 10/19, 11/16, and 12/14

Dec, 31, 2022
• Submitted Institutional Self Study Summary to ACGME

Jan 2023 – now
• Work on self-study action plans

Dec 2024
• 10-Year Institutional Accreditation Site Visit
WORK PLAN
Increasing Voice & Representation: Integrative Self-Study Team

**GME Department**
- DIO
- Associate DIO
- 3 GME Program Managers
- GME Associate Dean
- Assistant Dean for GME Well-Being
- Assistant Dean for GME Diversity

**GME Community**
- SHC CEO & CMO
- 3 Core Program Director
- 1 Fellowship Program Director
- 1 Chief Resident representative
- 1 Program Coordinator representative

**Key Stakeholders**
(From Institution & Affiliates)
- 1 Affiliate Department Chair
- 1 Affiliate Program Director (LPCH)
- Major affiliate representative – CMO
- Vice President of patient experience at SHC

**Key Focus - Integration**
Increasing Voice & Representation: Comprehensive Focus Groups

- Program Directors
- Program Coordinators
- Chief Residents
- Faculty
- Former Program Directors
- Vice Chairs for Education
- Department Finance Administrators
- Information Technology
- Advanced Practice Providers
- Patient Experience

- Nursing
- School of Medicine Educational Leadership
- Wellness
- Department Chairs
- Patient Safety
- Affiliate Hospital Leadership
- Office of Diversity
- Quality Improvement Leadership
- Chief Administrative Officer for Clinical Operations
- Outreach/Strategic Planning
Who would you include in your self-study committee?
TASK #1: GME MISSION STATEMENT
<table>
<thead>
<tr>
<th>GME</th>
<th>SHC</th>
<th>SOM</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Stanford Health Care is dedicated to pursuing the highest quality of patient care and graduate medical education.</td>
<td>• Healing humanity through science and compassion, one patient at a time.</td>
<td>• To educate and inspire a diverse group of leaders in medicine and science who will improve human health through discovery, innovation, scholarship, education, and the delivery of outstanding patient-centered care.</td>
</tr>
</tbody>
</table>
Mission Statement – Ideas

1. “Cultivating the next generation of leaders through a commitment to clinical excellence, an inclusive learning environment, and promotion of scholarship.” +8

2. “Empower the next generation of leaders in education, clinical care, science, innovation, and advocacy through excellence in delivering compassionate clinical care, teaching and learning in a person-centered and inclusive premier education, and advancing knowledge with scholarly discovery.” +11

3. “Stanford GME’s mission is to empower the next generation of leaders to advance the field of medicine through providing a premier education in delivering exceptional clinical care and scholarly pursuits.” +5

Other suggested mission statements provided by program directors:

4. “Educating future medical leaders who will advance the field of medicine through clinical excellence, scholarship, and education.”

5. “Train the next generation of educators, clinicians, scientists through Innovation and inclusivity”

6. “Cultivating the next generation of PHYSICIAN leaders through a commitment to clinical excellence, an inclusive learning environment, and promotion of scholarship.”

7. “Stanford’s GME mission is to educate and empower the next generation of leaders in medicine by providing premier training in clinical care, scholarship, teaching, and advocacy.”
Stanford's GME mission is to educate and empower the next generation of leaders in medicine by providing premier training in clinical care, scholarship, teaching, and advocacy in a diverse and inclusive learning environment.
TASK #2: SWOT
Data, Data,…

ACGME Resident Wellness Survey

5-Year Trend on Selected Metrics

Average of Domains by Year

Evaluation
- AY 2017: 88.2
- AY 2018: 87.9
- AY 2019: 88.9
- AY 2020: 89.9
- AY 2021: 89.9

Educational Content
- AY 2017: 84.1
- AY 2018: 84.3
- AY 2019: 87.8
- AY 2020: 88.3
- AY 2021: 89.3

Resources
- AY 2017: 87.9
- AY 2018: 88.8
- AY 2019: 88.2
- AY 2020: 86.8
- AY 2021: 84.4

Patient Safety/Teamwork
- AY 2017: 96.3
- AY 2018: 95.3
- AY 2019: 93.0
- AY 2020: 92.9
- AY 2021: 82.4

Overall, how satisfied are you with the training you have received in your program?

Faculty
- AY 2017: 88.8
- AY 2018: 89.8
- AY 2019: 85.6
- AY 2020: 85.6
- AY 2021: 85.6

Clinical Experience and Education
- AY 2017: 95.5
- AY 2018: 96.5
- AY 2019: 93.2
- AY 2020: 93.2
- AY 2021: 93.2

Professionalism
- AY 2017: 88.4
- AY 2018: 92.3
- AY 2019: 87.3
- AY 2020: 87.3
- AY 2021: 87.3

Diversity and Inclusion
- AY 2017: 92.6
- AY 2018: 92.2
- AY 2019: 93.4
- AY 2020: 93.4
- AY 2021: 93.4
And More Data …

### House Staff Benefits

#### Annual Stipend by PGY

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>60,000</td>
<td>70,000</td>
<td>80,000</td>
<td>90,000</td>
<td>100,000</td>
</tr>
<tr>
<td>2</td>
<td>50,000</td>
<td>60,000</td>
<td>70,000</td>
<td>80,000</td>
<td>90,000</td>
</tr>
<tr>
<td>3</td>
<td>40,000</td>
<td>50,000</td>
<td>60,000</td>
<td>70,000</td>
<td>80,000</td>
</tr>
<tr>
<td>4</td>
<td>30,000</td>
<td>40,000</td>
<td>50,000</td>
<td>60,000</td>
<td>70,000</td>
</tr>
<tr>
<td>5</td>
<td>20,000</td>
<td>30,000</td>
<td>40,000</td>
<td>50,000</td>
<td>60,000</td>
</tr>
<tr>
<td>6</td>
<td>10,000</td>
<td>20,000</td>
<td>30,000</td>
<td>40,000</td>
<td>50,000</td>
</tr>
<tr>
<td>7</td>
<td>0</td>
<td>10,000</td>
<td>20,000</td>
<td>30,000</td>
<td>40,000</td>
</tr>
</tbody>
</table>

#### Cost of living

<table>
<thead>
<tr>
<th>Component</th>
<th>Cost</th>
<th>Cost</th>
<th>Cost</th>
<th>Cost</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Single on-campus</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full Year (12 Months)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Autumn, Winter, Spring, Summer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Living Costs</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Campus housing/rent</td>
<td>$21,710</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td>$8,900</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal</td>
<td>$9,120</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation</td>
<td>$2,180</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Books/supplies</td>
<td>$1,380</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Campus Health Service Fee</td>
<td>$964</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardinal Care Health Insurance</td>
<td>$6,768</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Living Allowance</strong></td>
<td>$51,022</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*GRAND - TOTAL (Annual)*
## SWOT Analysis

### Qualitative Data Sources

<table>
<thead>
<tr>
<th>Source Name</th>
<th>Timeframe</th>
<th>Participants</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pulse Surveys</td>
<td>2021</td>
<td>Program Directors, Program Coordinators</td>
<td>52, 44</td>
</tr>
<tr>
<td>House Staff Survey</td>
<td>2017-2021</td>
<td>Residents/Fellows</td>
<td>Avg 657/year</td>
</tr>
<tr>
<td>Program Evaluations</td>
<td>2020-2022</td>
<td>Residents/Fellows, Faculty</td>
<td>140-180 reports/year</td>
</tr>
<tr>
<td>Focus Groups</td>
<td>2022</td>
<td>Residents/Fellows, Faculty, Chief Residents, Program Directors, Program Coordinators</td>
<td>1, 4, 14, 40~</td>
</tr>
</tbody>
</table>
Ongoing Data Collection and Analysis
SWOT – Weaknesses and Threats

- Imbalance of service over education
- Limited protected time for education for faculty and trainees
- Balancing business of medicine with needs of training within medicine
- Not enough support staff (APPs, nurses, administrative positions, social workers, case managers), causes delay in cases and non-physician tasks eating into education
- Poor quality of feedback for house staff
- Challenges around confidentiality and completion of evaluations
- Lack of formal training on working with other health providers

- Sustained surge volumes in hospital
- Lack of capacity and appropriate staffing
- Burnout in residents and fellows
- High turnover for faculty, support staff, and program leadership
- Under-resourced FTE for program leadership workload
- Parking, meal benefits
- Call rooms and workspace
- Faculty burnout may be passed down to trainees
- Inability to hire non-housestaff providers due to poor applicant pool

- Health disparities, challenges serving patients with limited resources
- Recruitment and retention of diverse/UIM candidates
- Impacts of listed threats on vulnerable members of GME community (UIM, PCs, women)

- No resident space at 500P
- Lack of transparency/communication
- Lack of trainee voice/involvement in decisions
- Disconnects between different bodies (SHC, LPCH, SOM, etc.)
- Conflicting interests, policies, deadlines, bureaucracies of ACGME and Stanford
- Need for streamlined communication and partnership between GME office, program administration and academic departments
- Lack of PD/faculty voice/involvement in decisions
- Decisions on resources are not made with transparency
What challenges do you face integrating GME in your institution?
TASK #3
Institutional Aims
Institutional Aims

- Institutional aims are key expectations for the institution that are relevant to the institutional mission.
  - How does my institution differentiate itself from others?
  - Take a longer-term strategic view

- Examples
  - Strengthening our quality improvement culture by launching interprofessional initiatives
  - Advancing diversity, inclusion, and health equity

- Institutional self study requires the committee to generate 3-5 discrete institutional aims for next 3-5 years
Institutional Priorities

- Pulse Survey: administered to Program Directors and Program Coordinators

Q: Which of the following issues should be the highest priority to Stanford GME?

- Cost of living (n=58) 11%
- Not enough support staff (n=49) 9%
- Burden of administrative/bureaucratic work (n=48) 9%
- Burnout (n=45) 8%
- Lack of accessible and affordable childcare (n=37) 7%
- Limited protected time for education for faculty and trainees (n=35) 6%
- High turnover for faculty, support staff, and program leadership (n=35) 6%
- Limited resident/fellow call rooms and workspace (n=28) 5%
- High patient volume (n=27) 5%
- Commutes and parking (n=26) 5%
Proposed Institutional Aims

Educational Experience
Enhance educational quality in clinical care, scholarship, teaching, and advocacy

Well-Being
Create a sustained focus on wellness and wellness-related issues

Diversity/Equity/Inclusion/Belonging
Foster a diverse and inclusive learning environment that provides equitable training & patient care

GME Community/Collaboration
Strengthen GME integration within the institution using transparency, voice, representation, and partnership.
Finalized Institutional Aims

**Educational Experience**
Enhance educational quality in clinical care, scholarship, teaching, and advocacy through institutional support.

**Well-Being**
Promote a culture of well-being and belonging for residents and fellows, program educators, and program administrators.

**Diversity/Equity/Inclusion/Belonging**
Foster a diverse and inclusive environment that provides equitable learning & working experiences.

**GME Community/Collaboration**
Strengthen GME integration within the institution using transparency, voice, representation, & partnership.
TASK #4: Action Items
What are your action plans to address the challenges you’ve identified on integrating GME in your institution?
Action Item Process

- Identify Current Resources, Initiatives, and Policies for each aim
- Gather Input on Actions from GME Community
- Create Proposed Actions

<table>
<thead>
<tr>
<th>Planning (2022)</th>
<th><strong>Implementation (2023 &amp; 2024)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>AIM</td>
<td>Issue</td>
</tr>
<tr>
<td>-----</td>
<td>-------</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Selection Process for the Action Items

- Institutional based vs program based
- Institutional data from past 5 years
- Information from the focus groups
- Connections between the 4 aims
- Existing resources and initiatives
# Action Plan – Educational Experience

<table>
<thead>
<tr>
<th>Aim</th>
<th>Issue</th>
<th>Proposed Actions</th>
<th>KPI Metric</th>
<th>Progress</th>
</tr>
</thead>
</table>
| Educational Experience     | Low scores on feedback & evaluation                                    | Explore existing data (milestones, MedHub evals, ITEs, USMLE)                                                                                                                                                  | ~Identify at least 2 strategies to recognize and mitigate bias & disseminate broadly in the GME website  
~Collect data on ranges, comments, and feedback from faculty from 2 residencies and 2 fellowship with the lowest score on feedback  
~List current barriers (3-5) to implement a well-functioning evaluation system for resident rotations in one department                                                                                                         | Complete |
|                            |                                                                        | Develop new tools & leverage existing resources (Assessment course, ACGME modules)                                                                                                                             | ~Implement one new tool for inclusive pedagogy in one department                                                                                                                                                                                                 | Complete |
|                            |                                                                        | Faculty/resident development/program outreach                                                                                                                                                                   | ~Provide one presentation for 2 departments with the lowest score on feedback                                                                                                                                                           | Complete |
|                            |                                                                        | Measurement of progress/success                                                                                                                                                                                  | ~Measure current rate of evaluation completions by faculties for resident rotations in 2 residencies and 2 fellowship programs  
~Define criteria capturing best practice process for feedback and assessment  
~Implement new evaluation process of the 3 resident rotations with the lowest rate of completion based on best practice process and track response rates in one residency/fellowship program | Complete |
## Action Plan – Well-Being

<table>
<thead>
<tr>
<th>Aim</th>
<th>Issue</th>
<th>Proposed Actions</th>
<th>KPI Metric</th>
<th>Progress</th>
</tr>
</thead>
</table>
| Well-Being           | Mistreatment & Toxic culture causing to fragmented community         | Cultivate a sense of community among trainees, program leadership, faculty, and staff | ~In-person GME orientation  
~Grab-n-go breakfast and trainee social events  
~At least one program director retreat will be held in AY 2023 and/or AY2024.  
~At least one program coordinator retreat will be held in AY 2023 and/or AY2024. | Complete |
|                      |                                                                      | Engage Mistreatment Committee to review episodes of resident and fellow mistreatment and provide guidance regarding strategies for addressing these situations | - Develop and publicize a process for trainees to submit concerns about mistreatment  
- Develop an institutional protocol to review mistreatment concerns from trainees | In Progress |
|                      |                                                                      | Promote processes for helping trainees access mental health services            | ~Develop best practices for scheduling mental health appointments and ways of decreasing stigma | Complete |
|                      |                                                                      | Enhance processes for leaves of absence                                          | ~Hire dedicated HR person to handle trainee leaves of absence  
~Highlight leaves of absence resources on GME website | Complete |
<table>
<thead>
<tr>
<th>Aim</th>
<th>Issue</th>
<th>Proposed Actions</th>
<th>KPI Metric</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diversity Equity Inclusion &amp; Belonging</td>
<td>Trainees do not feel connected and have a sense of belonging</td>
<td>Enhance specificity of UIM GME data collection</td>
<td>“Define standard rubric for collecting demographic data (GME &amp; UIM recruitment, SCORE application, Medhub, retention from GME trainee to faculty) through working with GME, SHIC, and SOM for more specificity and consistency”</td>
<td>In Progress</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Measure Inclusion &amp; belonging in training programs and across GME</td>
<td>“Develop DEIB questions for internal surveys and evaluations of faculty and trainees”</td>
<td>Complete</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Provide education to the GME community on fostering inclusive learning environments</td>
<td>“Create online resource page on ODME website (cross link with GME)” “Launch GME-ODME-OFDD partnership to host quarterly educational sessions for GME community and broader faculty”</td>
<td>Complete</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Evaluate our GME data for training completion rates (timing, attrition) and milestones (known national disparities for women and UIM trainees)</td>
<td>Analyze data (in partnership with Educational Experience AIM) and identify programs with disparities and at least two structural strategies that can be adopted by programs to reduce bias in assessment.</td>
<td>In Progress</td>
</tr>
</tbody>
</table>
## Action Plan – GME Community/Collaboration

<table>
<thead>
<tr>
<th>Aim</th>
<th>Issue</th>
<th>Proposed Actions</th>
<th>KPI Metric</th>
<th>Progress</th>
</tr>
</thead>
</table>
| GME Community/Collaboration | GMEC does not feel empowered and GME communication within institution is disconnected | Review GMEC structures & practices                                                | ~Re-define the GMEC’s charge and structure  
~Evaluate membership  
~Publicize the meeting minutes | Complete |
|                          |                                                                       | Create/define regular opportunities for partnership with stakeholders           | ~Participate in routine stakeholder meetings:                                
~OCMO huddle (quarterly)  
~DFA meeting (semi-annually)  
~Chairs’ Advisory Committee (monthly)  
~Council of Clinical Chairs (semi-annually) | Complete & Ongoing |
|                          |                                                                       | Enhance communication strategies for GME                                          | ~Pilot various communication methods and channels (e.g., GME monthly newsletter) | Complete  |
Monitoring Frequency & Reporting Plan

Monitoring Frequency: Quarterly

- **Educational Experience**
  - AIR
  - Dashboard
  - Self-study focus group
  - Self-study committee
  - PD, PC, and GMEC

- **Well-Being**
  - GMEC
  - Self-study focus group
  - Self-study committee

- **Diversity/Equity/Inclusion/Belonging**
  - Self-study committee
  - PD, PC, and GMEC

- **GME Community/Collaboration**
  - GMEC
  - Self-study focus group
  - Self-study committee
Lessons learned

- Impact of hospital expansion with no communication with GME
- Relationship & working environment with nurses and advanced practice providers
- Perception of power dynamic among entities (affiliates)
- Role of GMEC within the institution
Implementation & Monitoring Stage

- Ongoing dialogue with C-suite leadership
- Example: Restructured GMEC to be more inclusive & integrative
- Dissemination of Self-Study in process
Pedro Tanaka, MD, PhD, Associate DIO

Stanford GME Contact Page
Claim your CME today!

Complete the Evaluation for CME or Certificate of Completion!

The evaluation can be found in the mobile app and a link will be sent post-conference by email to attendees.

Evaluations are tied to your registered sessions.

Register/un-register sessions in the mobile app.

Deadline – April 9, 2024

Questions? cme@acgme.org
Thank You!