

# Graduate Medical Education New PC Orientation Series 2 of 6

January 12, 2022



2022

HAPPY NEW YEAR

# Agenda

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- ▶ Reminder and Re-cap
- ▶ Check-in Discussion
- ▶ Program Evaluation Process
- ▶ Work Hours
- ▶ MedHub

# Reminders

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- ▶ Updates on Covid surge and other related issues tomorrow at the PC monthly meeting @1pm



## Reminder: Milestone Submission Due on Mon Feb 14<sup>th</sup>

All ACGME programs must submit their milestones by Monday Feb 14<sup>th</sup>

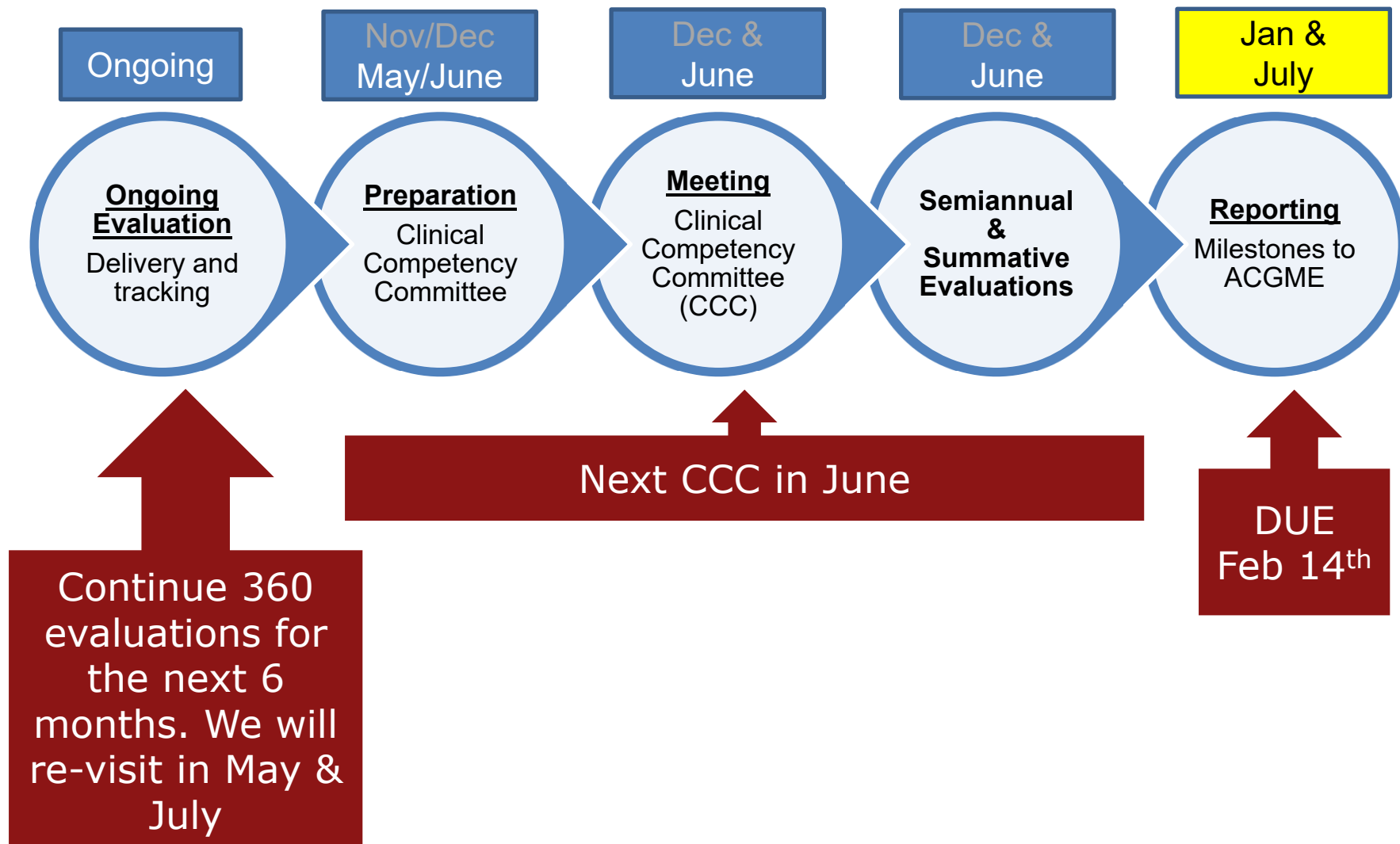
Login to ADS at <https://apps.acgme.org/connect/login>

## Patient Care

[illegible]

## Re-cap of Last Session: Trainee Evaluation Overview

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# Check-in Discussion

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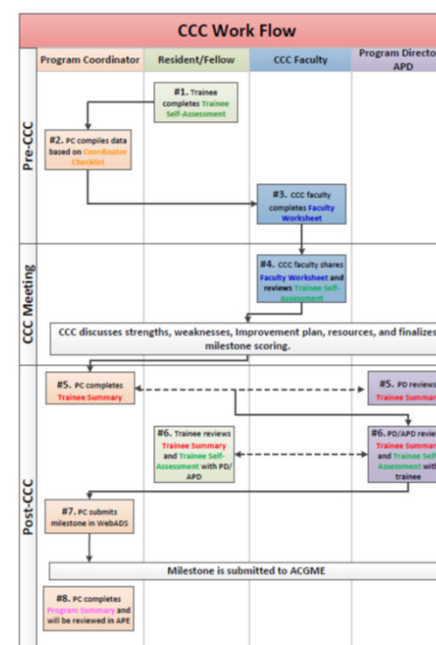
- How did your CCC meeting go?
- What was an “Aha!” or “Huh?” moment you’ve had?



# GME CCC Guidebook

- Have you had the chance to use GME's CCC Guidebook?

COORDINATOR CHECKLIST		
Metric Checklist		
Metric	Data Path	Comments
Milestone Summary	<b>**MedHub: Evaluation-&gt;Milestone Summary</b>	Average level of each sub-competency based on the evaluation completed in the past 6 months.
Evaluation by Faculty	All evaluations are stored in MedHub. Reports with averages can be generated. <b>**MedHub: Aggregate Evaluation Report, Aggregate Evaluation Report, Evaluation Completion Summary</b>	Average milestone evaluations by faculty and qualitative comments.
Evaluation by Peers		Evaluations by peers and qualitative comments.
Evaluation by Staff		Evaluations by nurses and qualitative comments.
Evaluation by Patients		Evaluations by patients and qualitative comments.
Evaluation by Self (Trainee Self-Assessment)		Compare self-evaluations to evaluations by others to look for discrepancies and consistencies.
Rotation	Stored in MedHub <b>**MedHub: Resident Rotations Report</b>	Is the trainee on track with the required rotation counts?
Case/Procedure Logs	Stored in MedHub or reported to the ACGME WebADS system	Is the log up-to-date and meeting minimum requirement?
Scholarly Work	Option1: Self-reported Option2: MedHub	Has the trainee done any scholarly work in the past 6 months?
QI Projects		Has the trainee done any quality improvement work in the past 6 months?
Work Hours Logged	Stored in MedHub	
Work Hours Violations	<b>**MedHub: Work Hours Summary</b>	
Absences Logged (LOA and sick)		
Conference Attendance	<b>**MedHub: Conference Attendance by Resident</b>	
Grant Rounds Attendance		
In-Service Exam		
Other Metric		
Other Metric 2		
Other Metric 3		



- Download Guidebook at:

— [https://med.stanford.edu/gme/program\\_portal/program/clinical-competency-committee--ccc-.html](https://med.stanford.edu/gme/program_portal/program/clinical-competency-committee--ccc-.html)

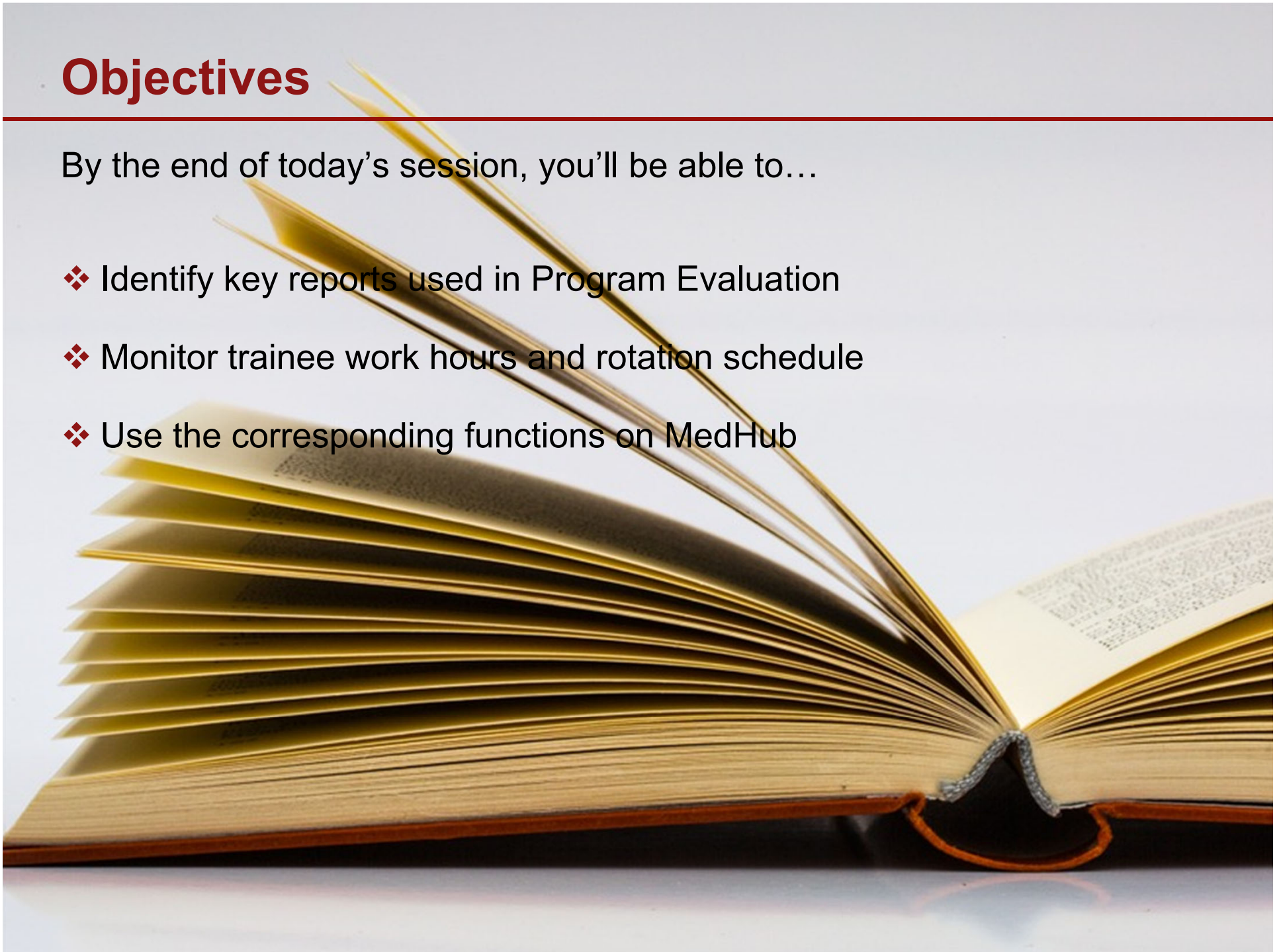


# Objectives

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By the end of today's session, you'll be able to...

- ❖ Identify key reports used in Program Evaluation
- ❖ Monitor trainee work hours and rotation schedule
- ❖ Use the corresponding functions on MedHub

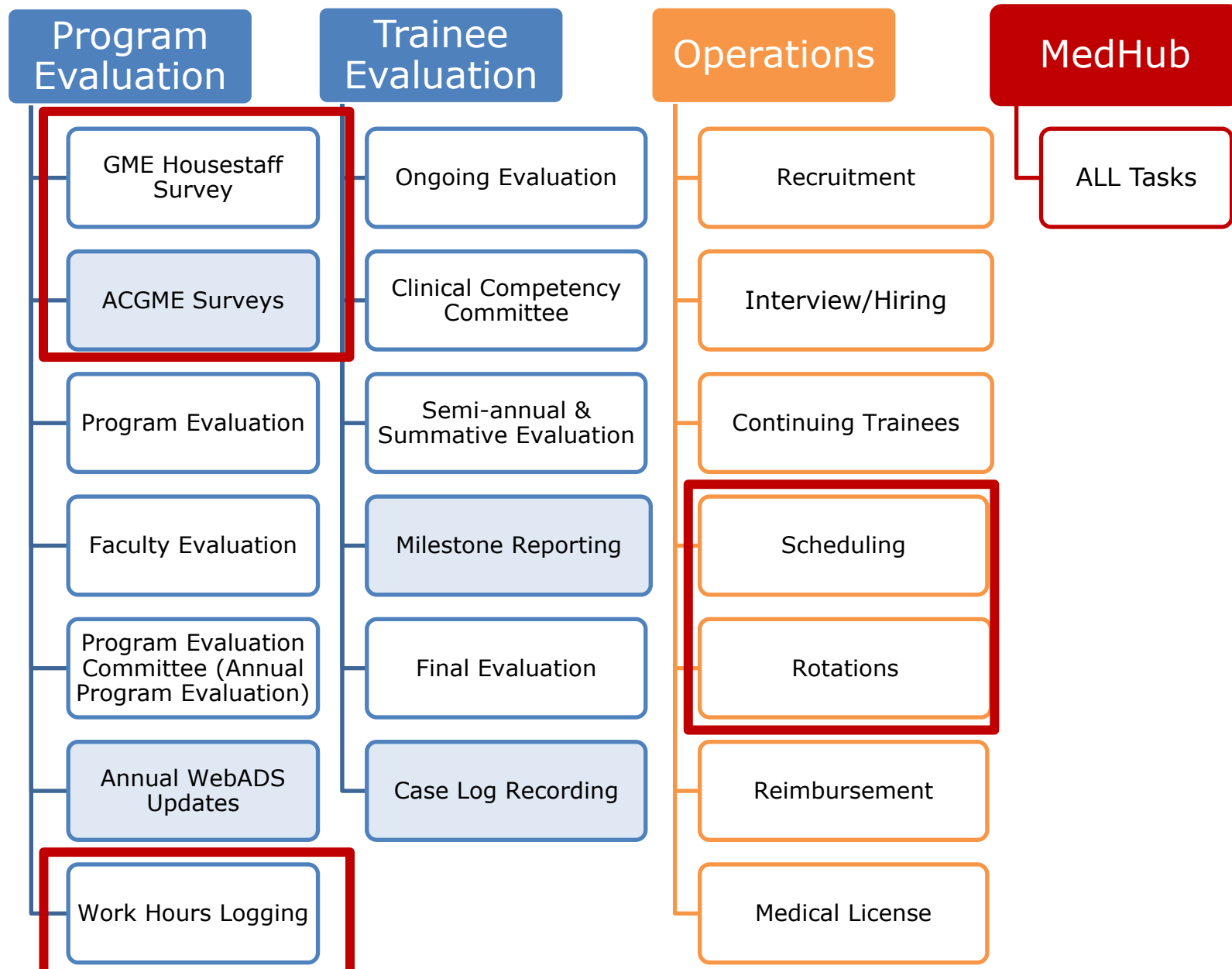


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## Major Responsibilities & Timeline



# Program Major Responsibilities



# GME Timeline 2021-2022

Tasks	<a href="#">JAN</a>	<a href="#">FEB</a>	<a href="#">MAR</a>
Milestones	Submit Milestone Reports to ACGME.	Send out milestone-based evaluations of residents/fellows to attending physicians.	
Clinical Competency Committee	Meet, Review, Finalize in MedHub's Milestone Management section. Submit to ACGME		
Semi-Annual Evaluations	Meet with resident. Document in MedHub.		
ACGME Survey for Faculty and Residents/Fellows	ACGME delivers confidential survey.		
Duty Hours	Monthly Ongoing: Review all violations.		
GME Special Review	Occurs any time at GME's discretion.		
Site Visit	Occurs at any time with an ACGME notification (minimum 30 days prior to visit).		
Self Study	Occurs approximately every 10 years. Advance notice will be posted in ADS (ACGME Self Study letter of notification).		
CLER	Takes place every 18 months.		

ACGME - External

GME - Internal

Hard Deadline Tasks

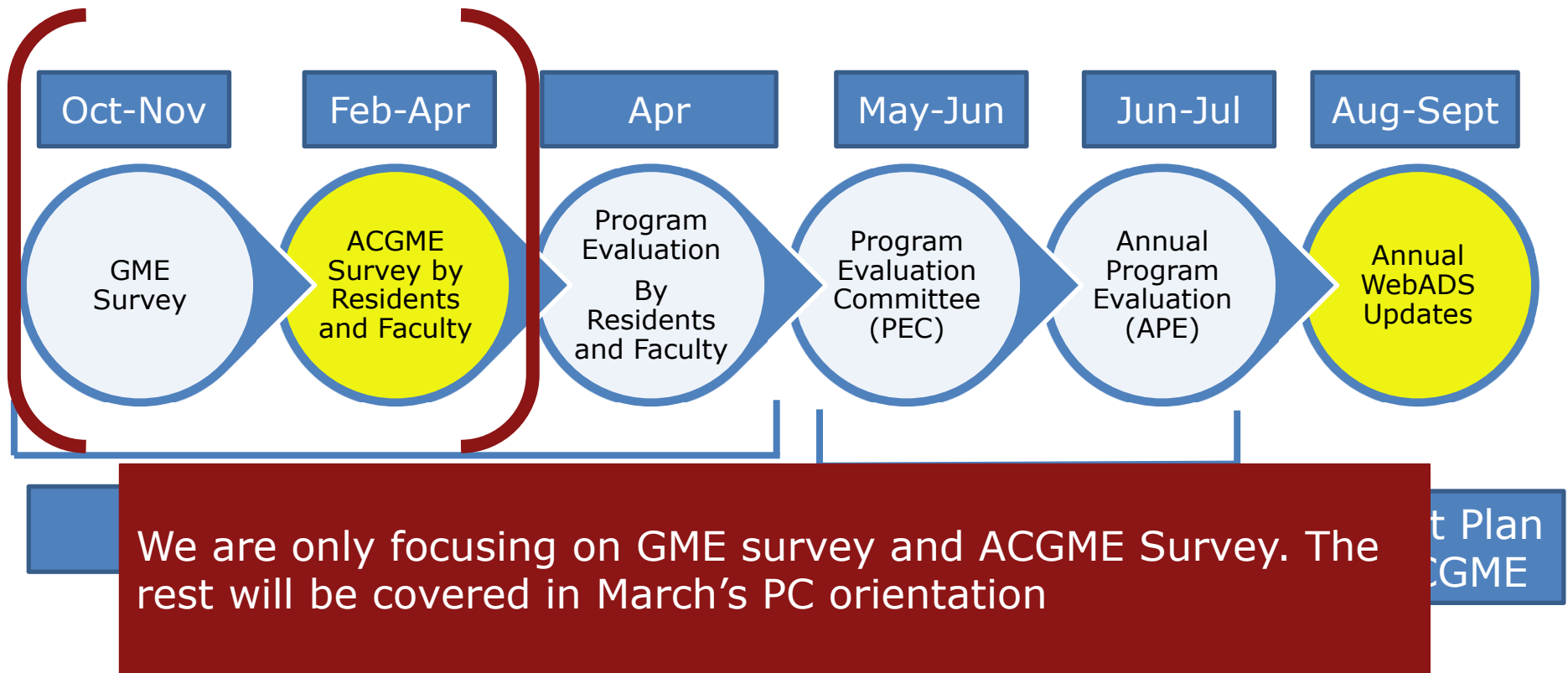
Tasks

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# Program Evaluation



# Overview of Program Evaluation Process



# GME Housestaff Survey – Tool #1

Oct-Nov

GME  
Survey

GME

Block Options

Q1

Thank you for participating in the Annual GME House Staff Survey. This survey will take 3-5 minutes. We really appreciate your opinions and suggestions. Your responses are all anonymous and only questions with 4 or more responses will be reported. To begin, please tell us a little about yourself (NOTE: Responses will be aggregated to protect anonymity).

Q2

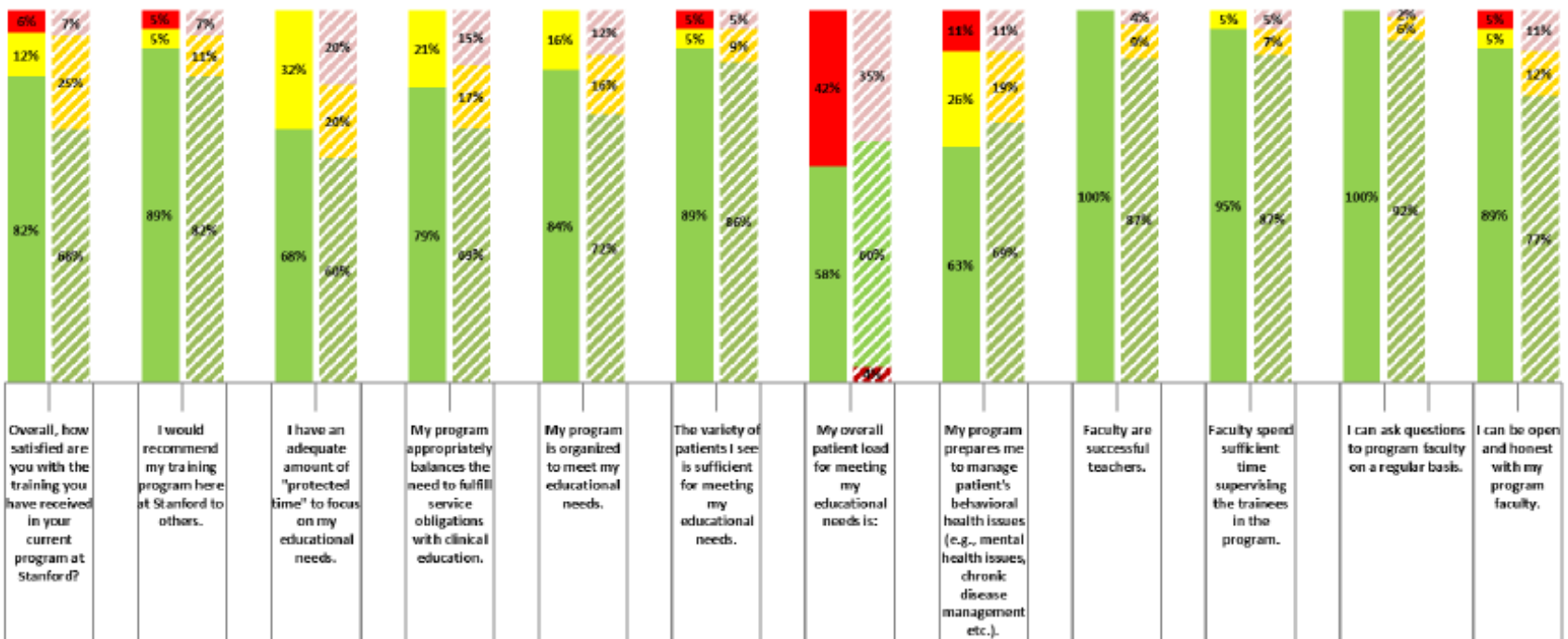
What is your current level of training at Stanford?

Q3

Please identify your current training program at Stanford.

## Survey Report

### PART I



## GME Housestaff Survey – Cont.

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- ▶ Completely anonymous and confidential internal survey
- ▶ Your role is to remind your trainees to complete the survey
- ▶ Reports are generated if program have 4 or more responses
  - Highlights areas your program excels and are deficient in
  - Qualitative comments provide context
- ▶ Your program will use the report to address areas for improvement or critical incidents, especially before ACGME Surveys are distributed.






# GME Housestaff Survey – Report Location

- ▶ Located on MedHub → Program Accreditation → APE → Academic Year 2021-2022 under file attachments


[Dashboard](#) [CLER](#) [AIR](#) [Program Detail](#)

[Overview](#) [GME Review](#) [ACGME Review](#) [APE](#) [Surveys](#) [Scholarly Activity](#) [Correspondence](#) [Policies](#)

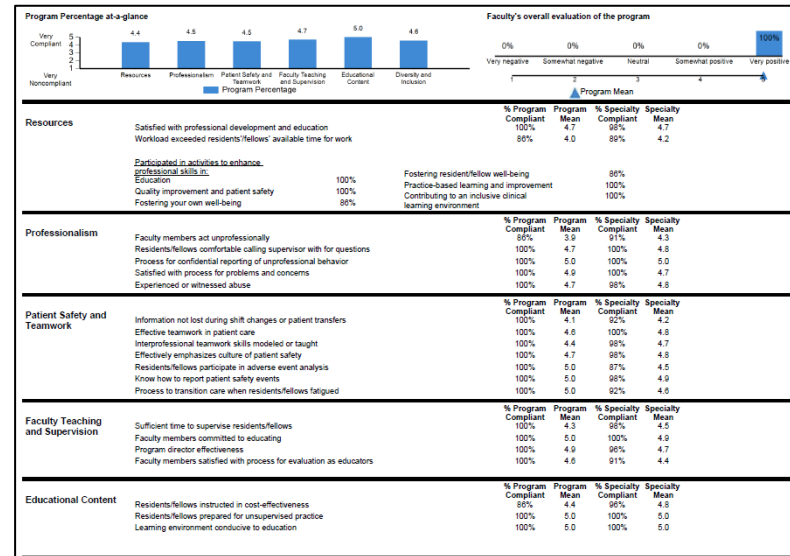
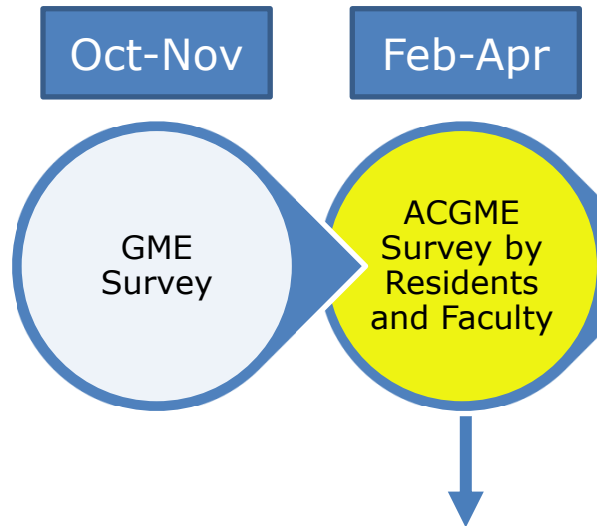
[5/1/2022](#)



File Attachments

File	Date Added	Size	Author	Actions
 <a href="#">2021-22 GME Survey - Neurology.</a>	12/20/2021	416K	Huynh-Ngo	<a href="#">Modify</a> <a href="#">Delete</a>

# ACGME Survey



Purpose: ACGME check in on program quality and another data tool (external) for your program evaluation

Your Role:

- Ensure completion rate: resident 70%; faculty 60%
- Ensure that residents and faculty understand survey is confidential

# ACGME Survey – Cont.

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- ▶ ACGME's sends annually survey to trainees and faculty
- ▶ Completely anonymous and confidential
- ▶ Survey will be live from 1/31/2022 - 4/17/2022 (roughly 11 weeks)
- ▶ ACGME will generate 4 total reports from the survey:
  - (1) ACGME survey by trainee
  - (2) Wellness survey by trainee
  - (3) ACGME survey by faculty
  - (4) Wellness survey by faculty



# ACGME Survey – Domains & Questions

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Resources

Professionalism

Patient Safety  
and Teamwork

Faculty  
Teaching and  
Supervision

Evaluation

Educational  
Content

Diversity and  
Inclusion

Clinical  
Experience and  
Education

Wellness

# ACGME Survey

2019-2020 ACGME Resident/Fellow Survey - page 1

Survey taken: January 2020 - February 2020

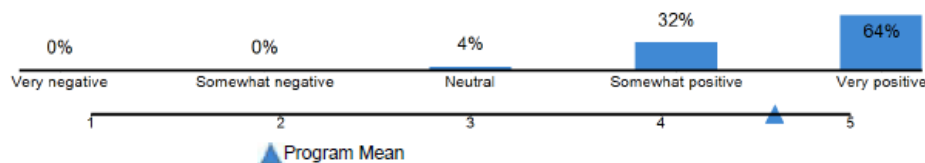
Residents Surveyed 28

Residents Responded 25

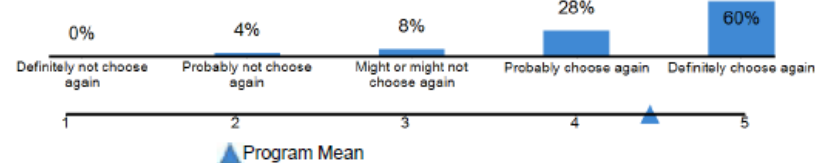
Response Rate 89%

National data has been omitted from this administration of the survey based on complications resulting from the COVID-19 pandemic.

## Residents' overall evaluation of the program



## Residents' overall opinion of the program



## Resources

Education compromised by non-physician obligations  
Impact of other learners on education  
Appropriate balance between education and patient care  
Faculty members discuss cost awareness in patient care decisions  
Time to interact with patients  
Time to participate in structured learning activities  
Able to attend personal appointments  
Access to mental health counseling or treatment  
Satisfied with safety and health conditions

% Program Compliant	Program Mean	% Specialty Compliant	Specialty Mean
96%	4.6	86%	4.3
92%	3.8	93%	3.9
60%	3.7	75%	4.0
88%	3.3	89%	3.5
92%	4.2	85%	4.2
76%	4.0	78%	4.1
72%	3.9	87%	4.5
96%	4.8	93%	4.7
80%	4.2	87%	4.4

## Professionalism

Residents/fellows comfortable calling supervisor with questions  
Faculty members act professionally when teaching  
Faculty members act professionally when providing care  
Process in place for confidential reporting of unprofessional behavior  
Able to raise concerns without fear or intimidation  
Satisfied with process for dealing with problems and concerns  
Experienced or witnessed abuse

% Program Compliant	Program Mean	% Specialty Compliant	Specialty Mean
80%	4.4	89%	4.5
100%	4.8	93%	4.6
100%	4.8	96%	4.7
96%	4.8	85%	4.4
72%	4.0	80%	4.2
80%	4.1	78%	4.1
96%	4.6	93%	4.6

## Patient Safety and Teamwork

Information not lost during shift changes or patient transfers  
Culture emphasizes patient safety  
Know how to report patient safety events  
Interprofessional teamwork skills modeled or taught  
Participate in adverse event analysis  
Process to transition care when fatigued

% Program Compliant	Program Mean	% Specialty Compliant	Specialty Mean
80%	3.9	81%	4.0
92%	4.6	89%	4.4
100%	5.0	96%	4.9
72%	4.0	75%	4.1
80%	4.2	77%	4.1
88%	4.5	88%	4.5

# Well-Being Survey

2019-2020 ACGME Resident/Fellow Survey

Survey taken: January 2020 - February 2020

Residents Surveyed 24

Residents Responded 24

Response Rate 100%

Well-Being Survey Questions

National data has been omitted from this administration of the survey based on complications resulting from the COVID-19 pandemic.

An important component of the Common Program Requirements is that physician well-being is crucial to delivering the safest, best possible care to patients. The results of the Well-Being Survey are intended to help your program and institution build and improve local well-being efforts, and make it easier to comply with the ACGME well-being requirements.

Aggregate reports will be provided to the program and sponsoring institution when a minimum number of responses is reached. This ensures anonymity and maintains confidentiality for survey respondents. **These results are NOT used by the ACGME in the accreditation process.**

	Strongly Agree	Agree	Disagree	Strongly Disagree	Program Mean	National Mean
I find my work to be meaningful.	58.3%	41.7%	0.0%	0.0%	3.6	N/A
I work in a supportive environment.	75.0%	25.0%	0.0%	0.0%	3.8	N/A
The amount of work I am expected to complete in a day is reasonable.	20.8%	58.3%	20.8%	0.0%	3.0	N/A
I participate in decisions that affect my work.	58.3%	37.5%	4.2%	0.0%	3.5	N/A
I have enough time to think and reflect.	25.0%	54.2%	16.7%	4.2%	3.0	N/A
I am treated with respect at work.	70.8%	29.2%	0.0%	0.0%	3.7	N/A
I feel more and more engaged in my work.	29.2%	50.0%	20.8%	0.0%	3.1	N/A
I find my work to be a positive challenge.	29.2%	66.7%	4.2%	0.0%	3.3	N/A
I find new and interesting aspects in my work.	33.3%	58.3%	8.3%	0.0%	3.3	N/A

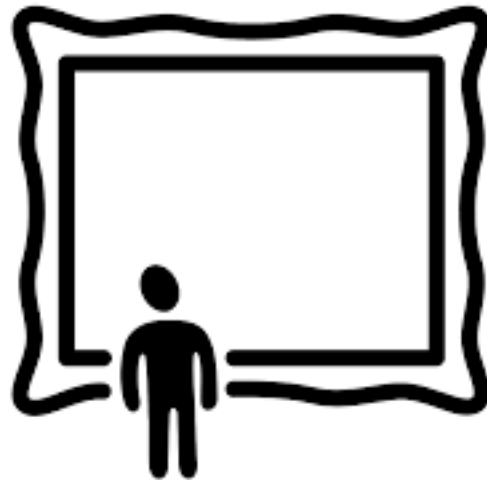
	Strongly Disagree	Disagree	Agree	Strongly Agree	Program Mean	National Mean
I often feel emotionally drained at work.	12.5%	50.0%	20.8%	16.7%	2.6	N/A
After work, I need more time than in the past in order to relax.	4.2%	50.0%	33.3%	12.5%	2.5	N/A
I feel worn out and weary after work.	8.3%	33.3%	50.0%	8.3%	2.4	N/A

***This report is confidential and not for further distribution. Please do not publish or share these results outside of your Sponsoring Institution.***

# ACGME Survey – Purpose and Accreditation

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- ▶ ACGME surveys are another tool for your program evaluation process
- ▶ ACGME reviews surveys to assess your program
- ▶ Non-compliance (<70% response rate or <80% scoring) is a deficiency and can result in a citation



## Your role in ACGME survey – Response Collection

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- ▶ Track your program's survey completion status on ACGME
- ▶ Send reminders to your trainees and faculty
- ▶ Ensure all your trainees and faculty completes survey independently and honestly
- ▶ Reports will be generated if there are 4 or more responses AND completion rate is at least 70%
  - GME will send the survey reports when available.



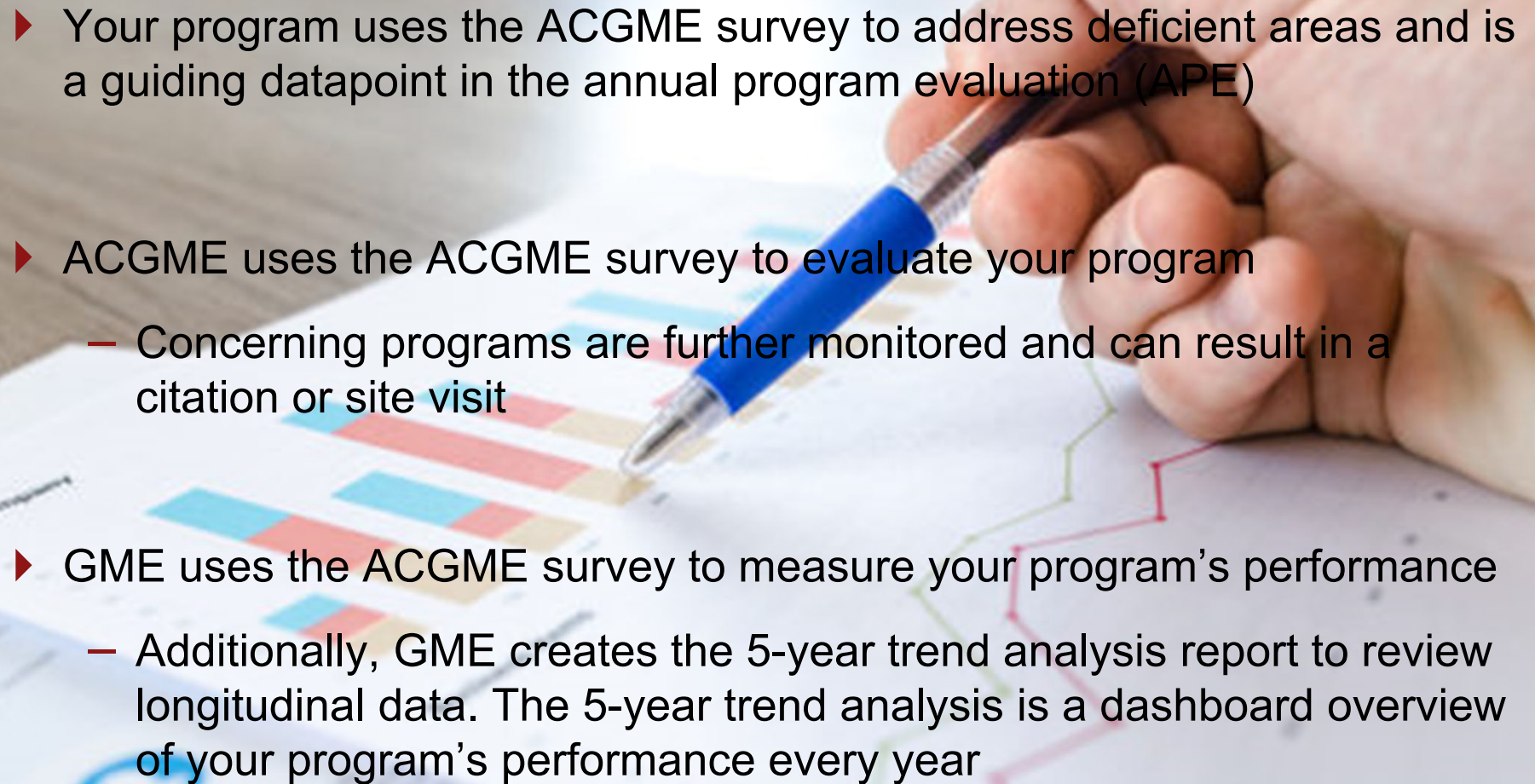


## Your role in ACGME survey – Response Collection

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- ▶ How to encourage high survey response rate
  - Weekly reminders to trainees and faculty
  - Work with PD to dedicate time to complete survey (e.g. before didactics)
  - Reiterate confidentiality and is an opportunity for improvement
  - Have PD review the house staff survey, share within the program, and openly discuss interventions

## Understanding the Report

- 
- A hand holding a blue pen is pointing at a document. The document features a bar chart with red, yellow, and blue bars, and a line graph with a red line. The background is a light blue gradient.
- ▶ Your program uses the ACGME survey to address deficient areas and is a guiding datapoint in the annual program evaluation (APE)
  - ▶ ACGME uses the ACGME survey to evaluate your program
    - Concerning programs are further monitored and can result in a citation or site visit
  - ▶ GME uses the ACGME survey to measure your program's performance
    - Additionally, GME creates the 5-year trend analysis report to review longitudinal data. The 5-year trend analysis is a dashboard overview of your program's performance every year

# GME Reports on Program Quality Indices

## Program's 5-Year Trend Analysis (Program Report Card)

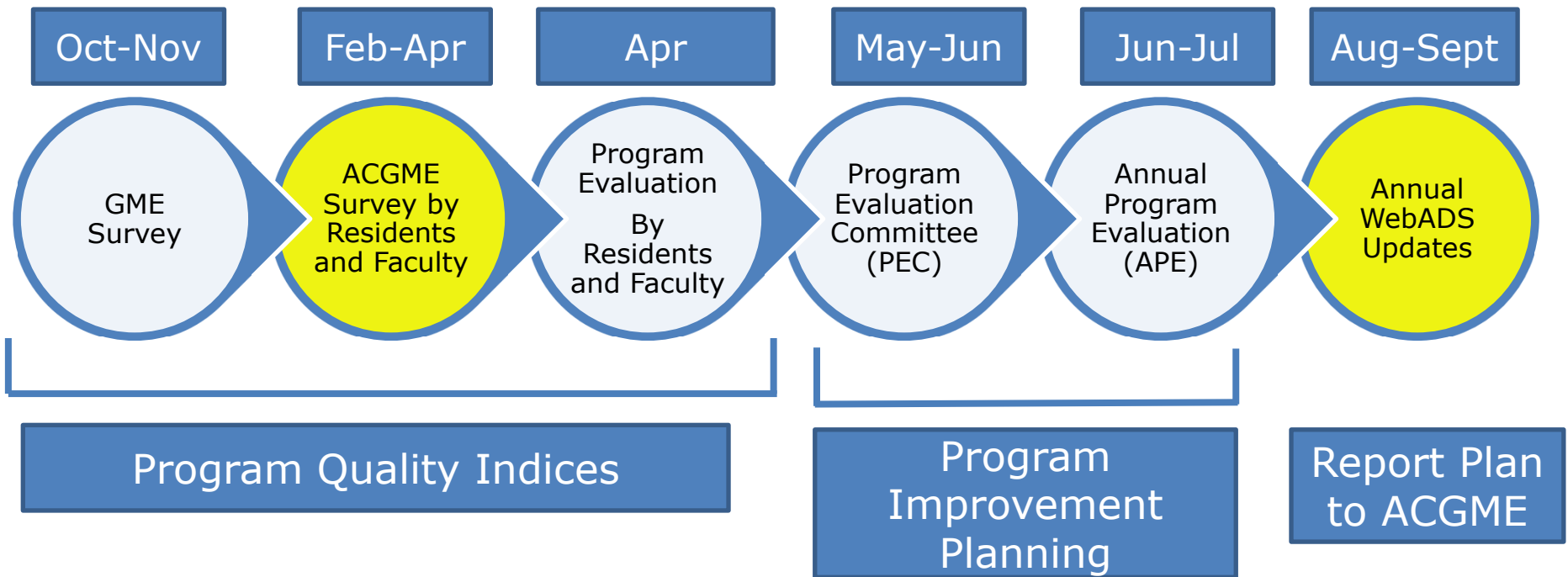
ACGME Survey

GME Survey

SHC Balanced Report Card Key Measures	SOURCE	INT/EXT	Data Source	2016-2017	2017-2018	2018-2019	2019-2020	2020-21
Sufficient Supervision	RESIDENT	EXT	Survey ACGME %-COMPLIANT	97%	85%	90%	98%	
Sufficient Instruction			Survey ACGME %-COMPLIANT	88%	64%	69%	68%	
Faculty/Staff Create Environment of Inquiry			Survey ACGME %-COMPLIANT	80%	60%	72%	70%	
Satisfied with Process for Problems and Concerns			Survey ACGME %-COMPLIANT	86%	63%	62%	53%	
Climate Where Residents Can Raise Concerns Without Fear			Survey ACGME %-COMPLIANT	83%	71%	75%	58%	
Overall Eval of the Program			Survey ACGME %-COMPLIANT	89%	83%	85%	83%	
Current Number of ACGME Citations	PROGRAM		ACGME					0
Board Pass Rates			ABMS	93%	83%	Pending	Pending	
Overall Satisfaction with Program	RESIDENT	INT	GME-Survey	90%	89%	90%	81%	83%
Program Organized to Meet Educational Needs			GME-Survey	77%	73%	65%	76%	83%
Service Over Education			GME-Survey	71%	49%	49%	52%	90%
Encouraged to Ask Questions on a Regular Basis			GME-Survey	94%	92%	92%	96%	72%
Residents Can Be Open and Honest with Faculty			GME-Survey	92%	95%	93%	83%	97%
Residents Would Recommend Program			GME-Survey	96%	86%	88%	96%	79%
Faculty Overall Evaluation Program	FACULTY		Pgm Eval Mean Score/10	8.73	7.72	7.78	9.09	pending
Resident Overall Program Evaluation	RESIDENT		Pgm Eval Mean Score/10	8.39	7.51	8.18	8.46	pending
>80 Violations / AY	PROGRAM		MedHub Duty Hr Rpt	1	2	3	2	5
# Unreviewed Duty Hr Periods by PD / AY			MedHub Detailed Rpt	0	0	0	0	0
KEY			STRENGTH			WEAKNESS		

# Overview of Program Evaluation Process

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# Work Hours



# Work hours – Guideline

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1. All trainees must adhere to the 80 hours (max) a week, **averaged over a 4-week period**.
  - All in-house clinical and educational activities, clinical work done from home, and all moonlighting hours must be counted towards the 80-hour maximum weekly limit.
2. Trainees must have 1 day in 7 days free of clinical work and required education, **averaged over a 4-week period**. At-home call cannot be assigned on these free days.
3. At least 14-hour free of clinical and educational work after 24 hour scheduled call
4. Work periods for residents must not exceed 24 hours

**For specifics, refer to ACGME program requirements**



# Work hours – Coordinator's Responsibilities

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- ▶ Your role in Trainee work hours
  - Monitor trainee are reporting their work hours weekly
  - Remind trainees to log their work hours
  - Alert PDs and trainees if a violation occurs or if you anticipate a potential violation to occur



# Responding to Work Hour Violations

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- ▶ Trainees must provide explanation on their work hour violations via MedHub. PD/APD will review these violations and intervene accordingly.
- ▶ PD reviews violations and provides explanations.
- ▶ For recurring violations, Program Evaluation Committee, PD, program leadership, and GME office may get involved





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## Rotation Schedules in MedHub

# Rotation Schedules in MedHub

- ▶ Must be completed with 0 errors
- ▶ Used by Finance department for billing
- ▶ Applicable for non-ACGME fellows, visiting residents/fellows, and postdocs


The screenshot shows the Stanford Hospital & Clinics MedHub interface. At the top is the Stanford logo and a navigation bar with links: Home, Residents, Faculty, Schedules (active), Procedures, Evaluations, Conferences, Reports, and Help. Below the navigation bar is a breadcrumb trail: Home » Rotation Schedules. The main content area is titled "Rotation Schedules" and features a tabbed interface with tabs for Rotations, Calls/Shifts, Clinics, Weekly Activity, and Individuals. A dropdown menu is open under the "Schedules" navigation item, showing "Schedule Views" (Rotations, Calls/Shifts, Clinics, Weekly Activity, Individuals) and "Extended Workflow" (Service/Shift Management, Sites/Accounts, Curriculum Objectives/Goals). At the bottom, there is a filter section for "Academic Year" (July 1, 2021 - June 30, 2022) and "View Type" (Resident, Resident (Details), Faculty, Faculty (Details), Service, Services (All)).

- ▶ Last business day of the month, all rotation and absences must be correct for that month.

# Guideline 1 – Schedule Length Is From 7/1-6/30

1	2	3	4	5	6	7	8	9	10	11	12
July	August	September	October	November	December	January	February	March	April	May	June

Schedule must start from July 1 and end in next year's June 30 (Academic Year) regardless of program's starting date.

July	7/1-7/26	7/27-8/23	July-September	Ped Surg
<a href="#">LPCH</a>	<a href="#">CARDIAC</a>	<a href="#">CARDIAC</a>	<a href="#">AI100%LPCH</a> (7/1-7/15)  <a href="#">P-Res</a> (7/16-8/31) <a href="#">A/I-LPCH</a> (9/1-9/30)	<a href="#">PedsSurg</a>

Blocks can be flexible

## Guidelines 2 – Continuous rotation & Vacation Overlaps

July
<u><a href="#">Orientatio</a></u> (7/1-7/19)
<u><a href="#">SHC ED</a></u> (7/20-7/26)
<u><a href="#">KSC ED</a></u> (7/27-7/31)

Dates should be continuous without any gaps. All days need to be counted for, even if the clinic is closed on the weekend.

July-September
<u><a href="#">AI-Outpatient</a></u> (7/7-7/15)
<u><a href="#">AI-Inp 8-5</a></u> (7/16-7/31)
<u><a href="#">AI-Outpatient</a></u> (8/1-8/31)
<u><a href="#">AI-Inp 8-5</a></u> (9/1-9/30)
<u><a href="#">VAC</a></u> <u><a href="#">9/7-9/11</a></u> , <u><a href="#">9/14-9/15</a></u>

Vacation time should be added in addition to service/rotation

### 3 Common Errors

#### ► Day(s) of undefined activities

December	
VAC	<a href="#">12/28-12/31</a>
LOA	<a href="#">12/1-12/25</a>

12/26 – 12/27  
undefined

December	
<a href="#">Stan.Elec.</a>	(12/1-12/4)
<a href="#">ED/Protocol</a>	(12/7-12/11)
<a href="#">M-F 10P-730A</a>	(12/12-12/13)
<a href="#">Call 7:30AM-5PM</a>	(12/14-12/18)
<a href="#">ED/Protocol</a>	(12/21-12/24)
VAC	<a href="#">12/28-12/31</a>

12/5 – 12/6  
undefined;  
12/19 – 12/20  
undefined;  
12/25 – 12/27  
undefined.

#### ► Overlapping activities

12/14-1/10	
<a href="#">NF</a>	(12/14-12/18)
<a href="#">NEURO 1</a>	(12/19-12/27)
<a href="#">DSwing</a>	(12/27)
<a href="#">ELEC</a>	(12/28-1/3)
<a href="#">NEURO 1</a>	(1/4-1/10)

12/27 of  
overlapping  
activities

12/14-1/10	
<a href="#">MAMMO SHC</a>	(12/14-12/20)
<a href="#">ELEC</a>	(12/21-12/27)
<a href="#">MAMMO SHC</a>	(12/28-1/10)
<a href="#">MAMMO SHC</a>	(12/28-12/31)

12/28 of  
overlapping  
activities

#### ► Vacation not in addition to service

December	
<a href="#">C1</a>	(12/1-12/6)
<a href="#">WARD</a>	(12/7-12/13)
<a href="#">VA</a>	(12/14-12/20)
<a href="#">WARD</a>	(12/21-12/27)
VAC	<a href="#">12/28-12/31</a>

12/28 – 12/31 vacation  
days do not overlap a  
recorded service

# Resident Scheduling Error Report

- ▶ MedHub -> Reports tab -> Resident Scheduling Errors

Trainee Type(s):\*

- Intern
- Resident
- Fellow
- Visiting Resident
- Non-ACGME Trainee
- Chief Resident
- Non-ACGME Visitor
- Counselor

Date Range:\* 12/01/2020 to 12/31/2020  
\* Date period cannot cross academic years

Warnings: ☒ Show warnings


- ▶ Error Messages:

Resident:	Level:	Scheduling Error(s):
[Redacted]	4	4 days of undefined activity between 12/18/2020 and 12/21/2020
Day(s) of undefined activities		

Resident:	Level:	Scheduling Error(s):
[Redacted]	4	Exactly one primary service not designated for overlap starting 12/15/2020
Overlapping activities		

Resident:	Level:	Scheduling Error(s):
[Redacted]	4	Warning: At least one vacation or sick day does not overlap a recorded service between 2020-12-01 and 2020-12-31 (16 days)
Vacation not on top of a service		


# How to Fix Rotation Errors – Service Dates

- Fix errors dates – Click on the pencil icon  and choose the appropriate service for the time period.

- No gap

- One date on only one service

October-December

[AI-Outpatient](#) (10/1-10/31) 

[AI-Inp 8-5](#) (11/1-11/15)

[AI-Outpatient](#) (11/16-11/30)

[AI-Inp 8-5](#) (12/1-12/31)

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VAC [11/23-11/27](#),  
[11/30-12/1](#),  
[12/21-12/23](#)

➔

October-December

Service*	Start*	End*	Primary
Allergy Immunology Outpatient	10/01	10/31	<input type="checkbox"/>
(none)			
-----			
Adult Research	11/01	11/15	<input type="checkbox"/>
Adult Rheumatology Continuity Clinic	11/16	11/30	<input type="checkbox"/>
Adult-ALLERGY/IMMUNOLOGY			
Allergy Immunology Drug Allergy/Procedure	12/01	12/31	<input type="checkbox"/>
Allergy Immunology Inpatient (8-5pm)			
Allergy Immunology Outpatient	10/01	12/31	<input type="checkbox"/>
Allergy/Immunology Clinic			
Other Institutions (non-SU)			
Pediatrics ALLERGY/IMMUNOLOGY	10/01	12/31	<input type="checkbox"/>
Peds Research			
Research-non Patient Care			
>> Release to another Program			

VAC [11/23-11/27](#),  
[11/30-12/1](#),  
[12/21-12/23](#)

## GME Contacts

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- ▶ GME will send out email reminder on rotation schedule errors on the last Monday of each month
- ▶ Feel free to contact your GME program manager or Brett Toensing, GME Financial Analyst ([BToensing@stanfordhealthcare.org](mailto:BToensing@stanfordhealthcare.org))



# Rotation Blocks

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- ▶ Brett will send an email in May to make block rotations for next year.
- ▶ The following step only needs to be done ONCE at the beginning of each AY.
  - Create Blocks: MedHub homepage -> Task Wizards -> New Schedule Wizard

The screenshot displays the 'New Schedule Wizard' in two steps. Step 1, 'Select Reporting Group and Academic Year', includes a note about single-use, dropdowns for 'Academic Year' (July 1, 2020 - June 30, 2021) and 'Schedule' (ANES-NEURO). A large black arrow points down to Step 2, 'Define Rotation Periods'. Step 2 shows four radio button options for the 'Rotation Period Definition Method'. The first option, 'Use previous year's rotation periods if defined (recommended)', is selected and highlighted with a yellow background. A red callout box points to this option with the text 'Choose the appropriate option for your program'. At the bottom of Step 2 is a light blue input field containing '7/1,'.

**Step 1: Select Reporting Group and Academic Year**

Please note: you can use this wizard only once for a specific group/year combination.

Academic Year: July 1, 2020 - June 30, 2021 ▼

Schedule: ANES-NEURO ▼

**Step 2: Define Rotation Periods**

Rotation Period Definition Method:

☒ Use previous year's rotation periods if defined **(recommended)**

☐ Use standard calendar months

☐ Custom - define rotation periods

☐ Custom - generate from list of start dates \*

7/1,

Choose the appropriate option for your program

# How to Enter LOA Hours

- ▶ MedHub homepage -> Resident Absences -> View/Record Absences
- ▶ Only put dates when they are approved and final.

Vacation

Sick Days

Conference (away)

Leave of Absence

**Vacation Request Form**

\* Required

Please fill out and submit the form below.

Resident:\*

▼

Days Recorded:\*

21 days (7/1/20-6/30/21)

Date Range:\*

From:

To:

Purpose:  
(optional)

Status:\*

Pending (initiate approval process) ▼

Pending (initiate approval process)

Approved (by program)


Reject Request

Send Request

# How to Process Absences

## MedHub homepage -> Resident Absences -> Absence Approval Process

- ▶ If trainees send absence requests

 **Urgent Tasks**

[Resident Absence Requests \(214\)](#)  
[Demographics: License Expiration \(17\)](#)  
[Demographics: ATLS - Expires \(9\)](#)  
[Demographics: DEA - Expires \(9\)](#)

Vacation Requests

Resident	Dates / Services	Scheduled Clinics, Shifts/Calls	Days(YTD)	Details	Submitted	Approvals	Actions	Approve:
Pending approval by others								
Rogan, Daniel	5/21 - 5/27/18 Kaiser EM	(none)	21	--	2/12/2018	<a href="#">→ Chief Resident</a> <a href="#">→ Service Head</a>	<a href="#">View/Modify</a> <a href="#">Reject</a>	<input type="checkbox"/>

Approve Selected Requests

*Check what your program's LOA policies are*

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## MedHub

1. Work hour monitoring
2. How to enter LOA
3. Rotation schedule
4. Program Accreditation Page

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## Coordinator Resources

# Program Coordinator Orientation Series – Curriculum

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## ▶ 2<sup>nd</sup> Wednesday of Mar, May, July, Sept, Nov and Jan @1-2pm

### ▶ January:

- ACGME Surveys
- ACGME and GME websites
- Self-study and site visits
- MedHub

### ▶ March:

- Annual Program Evaluation
- Self-Study and self-study visit
- Program Evaluation by Trainees and by Faculty
- MedHub

### ▶ May:

- CCC, milestones, and semi-annual evaluations
- Special review
- Final evaluations
- MedHub

### ▶ July:

- WebADS Update
- Resident Evaluations
- Program Expansion and Funding
- MedHub

### ▶ September:

- Operational processes
- MedHub

# Welcome Packet

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- ▶ GME office staff and roles
- ▶ GME Yearly Calendar/Timeline
- ▶ Directions to GME offices
- ▶ ACGME “Alphabet Soup”
- ▶ GME Evaluations and Survey requirements
- ▶ ACGME Common Program Requirements
- ▶ Commonly used forms

# Essential Resources

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- ▶ GME's Welcome Packet
- ▶ Coordinator Monthly Meeting:
  - 2<sup>nd</sup> Thursday of each month 1-2pm via Zoom
- ▶ Coordinator email list (gme\_program\_coordinators@lists.Stanford.edu)
- ▶ ACGME's Common Program Requirements (CPR)
  - Read your program's specific program requirements
- ▶ MedHub's Help Portal
- ▶ GME Website:
  - Program Portal -> Forms, Templates, & Examples
- ▶ Review recording at
  - [https://med.stanford.edu/gme/program\\_portal/pc/orientation.html](https://med.stanford.edu/gme/program_portal/pc/orientation.html)
- ▶ Feel free to contact GME Office anytime you have questions!



# Q/A

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