Graduate Medical Education

2019 Annual Graduate Medical Education Community Report [Review of the 2017-2018 Academic Year]

Sandra E Moore MD MS
Designated Institutional Official (DIO)

Ann Thaxton, Director of GME

June 2019
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WELCOME

Welcome to the 2019 Annual Graduate Medical Education Community Report. As the Designated Institutional Official (DIO), it is my role to oversee and advocate for all the physician residency and fellowship programs, advance Graduate Medical Education (GME) and ensure institutional resources for are available for GME. This is all in compliance with the Accreditation Council of Graduate Medical Education (ACGME) accreditation standards, which we follow. I have been at the Medical Center in this role for almost two years and have immensely enjoyed working with the residents, program leadership/staff, faculty and executive leadership to accomplish our goals.

As we start our new academic year, we are proud to release our annual report to the community and share the status of our programs.

We want to also acknowledge our residents / fellows, programs administrators and GME office staff for all their hard work to maintain and build upon exceptional training programs.

We hope you find this Annual Report a valuable source of information.

Please feel free to email me with any questions, comments, suggestions or concerns.

Sincerely

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SECTION 1: INTRODUCTION TO GRADUATE MEDICAL EDUCATION AT NAVICENT HEALTH

A. INTRODUCTION

I. Background

Graduate Medical Education (GME) at Navicent Health dates back to World War I when we were the Macon Hospital. During that time, we established an internship program for new medical school graduates and by 1927, the hospital’s surgery residency program became accredited by the American College of Surgeons. This would lead to the formation of modern residencies in the 1950’s, including Surgery and the General Practice Residency Program (now known as Family Medicine) in the 1950’s. Over the next 40 years, GME would continue to grow to our current state of 5 residency programs and 5 fellowship programs. Affiliated with Mercer University School of Medicine, our academic partner, GME at Navicent Health continues to lead the way and stay committed to high quality education of resident physicians. We are proud of our graduates, who serve the citizens of Bibb County, the state of Georgia and the nation.

Currently Navicent has 5 core programs (family medicine, internal medicine, pediatrics, surgery and obstetrics and gynecology) and 5 fellowship programs (hospice medicine/palliative care, geriatrics, infectious diseases, surgical critical care and micrographic surgery and dermatological oncology). We have a total of 113 residents for the current academic year.

II. Individual Programs at a Glance

CORE programs

Surgery

- Current Accreditation Status – Continued Accreditation
- Self-Study date: October 31, 2018
- Accreditation visit: April 01, 2020
- Year program was (formally) founded – 1958 by Milford B. Hatcher, MD
- Total number of graduates/ program since being founded –since 1985, 87 graduates.
- Percent of all graduates that remain in state previous 5 years – 23%
Obstetrics and Gynecology

- Current Accreditation Status – Continued Accreditation
- Self-Study date: January 31, 2018
- Accreditation visit: July 01, 2019
- Year program was founded – 1970
- Current Accreditation Status – Continued Accreditation
- Total number of graduates/ program since being founded -118
- Percent of all graduates that remain in state past 5 years – 56%

Family Medicine

- Current Accreditation Status – Continued Accreditation
- Self-Study date: October 01, 2019
- Accreditation visit: April 01, 2021
- Year program was (formally) founded – 1973
- Total number of graduates/ program since being founded – 300+
- Percent of all graduates that remain in state past 5 years – 63%

Pediatrics

- Current Accreditation Status – Continued Accreditation
- Self-Study date: October 31, 2015
- Accreditation visit: August 07, 2018
- Year program was founded -1995
- Total number of graduates/ program since being founded -108
- Percent of all graduates that remain in state past 5 years – 52%

Internal Medicine

- Current Accreditation Status – Continued Accreditation
- Self-Study date: January 31, 2018
- Accreditation visit: July 01, 2019
- Year program was founded – 1995
- Total number of graduates/ program since being founded – 204 (188 categorical and 16 preliminaries)
- Percent of all graduates that remain in state past 5 years – 40%
FELLOWSHIPS

Surgical Critical Care
- Current Accreditation Status – Continued Accreditation
- Self-Study date:
- Accreditation visit:
- Year program was (formally) founded – 2009
- Total number of graduates/ program since being founded – 12
- Percent of all graduates that remain in state past 5 years – 38%

Hospice/Palliative Care
- Current Accreditation Status – Continued Accreditation
- Self-Study date: October 01, 2019
- Accreditation visit: April 01, 2021
Year program was (formally) founded – 2010
- Total number of graduates/ program since being founded – 10
- Percent of all graduates that remain in state past 5 years - 60%

Geriatrics
- Current Accreditation Status – Continued Accreditation
- Self-Study date: October 01, 2019
- Accreditation visit: April 01, 2021
- Year program was (formally) founded – 2006
- Total number of graduates/ program since being founded – 19
- Percent of all graduates that remain in state past 5 years – 80%

Infectious Disease
- Current Accreditation Status – Continued Accreditation
- Self-Study date: January 31, 2018
- Accreditation visit: July 01, 2019
- Year program was (formally) founded – 2013
- Total number of graduates/ program since being founded – 1
- Percent of all graduates that remain in Macon /Bibb County past 5 years – 50%
- Percent of all graduates that remain in state past 5 years -100%

Micrographic Surgery and Dermatological Oncology
- Current Accreditation Status – Continued Accreditation
- Self-Study date: October 01, 2023
- Accreditation visit: April 01, 2025
- Year program was (formally) founded – 2013 (prior to that, ACMS fellowship since 2003)
- Total number of graduates/ program since being founded - 5 since ACGME (2013) / 9 since ACMS (2003)
- Percent of all graduates that remain in Macon /Bibb County past 5 years – 0%
- Percent of all graduates that remain in state past 5 years -11%
III. Current Quick Program Statistics for Resident

a. Five-year average of graduate location and type of practice.

- % Resident graduates that remain in GA 2013-2017: 52% GA, 48% Other
- % Resident graduates that remain in Primary Care 2013-2017: 35% Primary Care, 65% Other

b. Resident rating of residency program per 2017-2018 ACGME Resident Survey

- Institution Means at-a-glance:
  - Clinical Experience and Education: 4.8 (Institution), 4.6 (National)
  - Faculty: 4.5 (Institution), 4.3 (National)
  - Evaluation: 4.8 (Institution), 4.5 (National)
  - Educational Content: 4.8 (Institution), 4.4 (National)
  - Resources: 4.5 (Institution), 4.4 (National)
  - Patient Safety/Teamwork: 4.5 (Institution), 4.4 (National)

- Residents' overall evaluation of the program:
  - Very negative: 0%
  - Negative: 3%
  - Neutral: 4%
  - Positive: 19%
  - Very positive: 73%

IV. Total 2017-2018 GME slots

a. 2017-2018 Currently Navicent had 116 residents/fellows
V. GME office structure (org chart)

VI. GME office function

a. Review/approve all request to and from the ACGME for the institution and any program
b. Serve as a GME expert for Program Directors (PD), Fellowship Directors (FD), coordinator and institutional stakeholders
c. Ensure substantial institutional and program compliance with accreditation standards, including direct interaction with external partners (ACGME, AAMC, NRMP, etc.)
d. Liaison to health care system for any systemic GME issues (local programs issues deal directly with PD or FD)
e. Ongoing monitoring of programs (and residents) through various methods including:
   - New Innovations (electronic residency management suite)
   - Annual Program Evaluation (APE) – completed by each program annually
   - ACGME annual program updates
   - ACGME resident and faculty surveys
• Program surveys of resident
• GME surveys
• Program/institutional dashboard (newly created)
  f. Resident orientation and system onboarding
  g. Any changes to resident contracts/benefits
  h. Hospital resources as utilized by (or affected by) residents, including call rooms, resident work stations, food, computers, etc.
  i. Program, faculty and staff development
  j. Ensure adequate and compliant GME policies are in place and are being followed
  k. Collect, monitor and collate various program data from various sources
  l. Advocate for GME and residents within the system and community

VII. GME Committee (GMEC)
  a. ACGME requires oversight committee for GME. Nearly every aspect of the GME program is required to be approved through this committee
  b. Meets every 3rd Thursday of every month 12-1:30pm
  c. Voting members include PDs, residents/fellows, other faculty, a hospital patient safety officer and physician group representative.
SECTION 2: GME ACCREDITATION and EXTERNAL PARTNERS

I. Accreditation Council Graduate Medical Education (ACGME)
   a. National organization that accredits all sponsoring institutions (e.g. Navicent Health) and all residency /fellowship programs. Accreditation status includes:
      i. Continued Accreditation
      ii. Initial phase of accreditation
      iii. Continued Accreditation with Warning
      iv. Probation
   b. Sets all the rules and regulations that institutions and programs must follow. These are known as the:
      i. Institutional Requirements,
      ii. Common Program requirements and
      iii. Specialty Program requirements
   c. Conducts Institutional site visits
      i. Clinical Learning Environment (CLER) is approximately every 18-24 months and focuses on the following six areas:
         • Patient Safety
         • Health Care Quality
         • Care Transitions
         • Supervision
         • Professionalism
         • Well-being (Just added in 2017)
         a. NOT an accreditation visit
         b. Involves C-Suite
      ii. Institutional Site Visit (accreditation)
         a. Routine due every 10 years, Navicent due in 2026
         b. Can come sooner if concerns for institution or multiple programs
   d. Conducts Program site visit
      i. Self-Study (not actual visit any longer) every 10 years 12-18 months before accreditation visit.
      ii. Accreditation visit – Usually every 10 years, but can be sooner if ACGME concerned about program
   e. Website - http://www.acgme.org/
II. National Resident Matching Program (NRMP)
   a. Governs all the rules, processes and system for institutions, programs and applicants for the Match Program
   b. The Match program facilitates the applicants and programs preference for residency spots, with each applicant “Matching” into only 1 program
   c. NRMP has very strict rules and committing a “Match Violation” is a major infraction

III. American Association Medical Colleges (AAMC)
   a. Traditional leader in Academic medicine, hence large and varied membership but have a major investment and resources within the GME program.
   b. Maintains the resident application system as well (ERAS), through which all institutions and applicants must apply
   c. https://www.aamc.org/about

IV. Association for Hospital Medical Education (AHME)
   a. Similar (but smaller than) to AAMC, but represent more of hospital-based perspective
   b. https://www.ahme.org/

V. American Board of Medical Specialty (ABMS)
   a. Each residency program is also regulated by its’ specialty board requirements that trainees must meet in order for the trainee to be “board eligible” at the end of residency or fellowship.
SECTION 3: COMPARISON OF NAVICENT HEALTH GME TO NATIONAL AND STATE

I. SPONSORING INSITUTION ACCREDITATION STATUS

<table>
<thead>
<tr>
<th>Sponsoring Institutions characteristics - Nationally</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continued Accreditation</td>
<td>665</td>
<td>77.6%</td>
</tr>
<tr>
<td>Initial phase of accreditation</td>
<td>156</td>
<td>20.8%</td>
</tr>
<tr>
<td>Continued Accreditation with Warning</td>
<td>8</td>
<td>(1.2%)</td>
</tr>
<tr>
<td>Probation</td>
<td>1</td>
<td>0.4%</td>
</tr>
<tr>
<td>TOTAL accredited Sponsoring Institutions (SI)</td>
<td>830*</td>
<td>100%</td>
</tr>
</tbody>
</table>

* 19.5% increase in SI since 2012-2013

| TOTAL accredited SIs in Georgia                      | 25 (up 1 since last year) | 2.9% |
| TOTAL multi-program sponsoring SIs GA               | 13 (up from 11 since last year) | 1.3% |

II. SPONSORING INSTITUTION TYPE DEMOGRAPHICS

<table>
<thead>
<tr>
<th>Institution Type</th>
<th>Number (%) SIs</th>
<th>Number (%) Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>General/Teaching Hospitals</td>
<td>387</td>
<td>4686</td>
</tr>
<tr>
<td>Medical School</td>
<td>117</td>
<td>4692</td>
</tr>
<tr>
<td>Community Hospital</td>
<td>79</td>
<td>110</td>
</tr>
<tr>
<td>Consortium</td>
<td>49</td>
<td>552</td>
</tr>
<tr>
<td>Other</td>
<td>40</td>
<td>455</td>
</tr>
<tr>
<td>Ambulatory Care Clinic/Office</td>
<td>30</td>
<td>51</td>
</tr>
<tr>
<td>Specialty Hospital</td>
<td>18</td>
<td>112</td>
</tr>
<tr>
<td>Children’s Hospital</td>
<td>20</td>
<td>258</td>
</tr>
</tbody>
</table>

III. ACCREDITED RESIDENCY/FELLOWSHIP PROGRAMS AND RESIDENTS/FELLOWS

<table>
<thead>
<tr>
<th>Programs Statistics in U.S. and GA</th>
<th>Number</th>
<th>% and/or comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of Programs in US</td>
<td>11,214</td>
<td>100%</td>
</tr>
<tr>
<td>Total number of programs in GA</td>
<td>219</td>
<td>Up from 207 in previous year and 2.0% of all programs in U.S.</td>
</tr>
<tr>
<td>Total number of programs at Navicent</td>
<td>10</td>
<td>0.1% and 5% of national and state, respectively</td>
</tr>
<tr>
<td>Total number of active residents/fellows U.S.</td>
<td>135326</td>
<td>100%</td>
</tr>
<tr>
<td>Total number of active residents only</td>
<td>111758</td>
<td>82.5%</td>
</tr>
<tr>
<td>Total number of active residents/fellows in GA</td>
<td>2590</td>
<td>1.9%</td>
</tr>
<tr>
<td>Total number of active residents only in GA</td>
<td>2159</td>
<td>1.9%</td>
</tr>
<tr>
<td>Total number of active residents/fellows at Navicent</td>
<td>116</td>
<td>0.09% and 4.6% of national and state, respectively</td>
</tr>
<tr>
<td>Total number of active residents only At Navicent</td>
<td>109</td>
<td>0.1% and 5.3% of national and state respectively</td>
</tr>
</tbody>
</table>
IV. CORE RESIDENCY PROGRAMS NATIONALLY, GEORGIA AND NAVICENT

<table>
<thead>
<tr>
<th>Program statistics by Core programs</th>
<th>Number of programs in US</th>
<th>Number of programs in GA</th>
<th>Nationally, Mean # resident/program</th>
<th># residents/program Navicent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Medicine</td>
<td>620</td>
<td>16 (up by 2)</td>
<td>20</td>
<td>24</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>529</td>
<td>14 (up by 1)</td>
<td>52</td>
<td>31</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>210</td>
<td>5</td>
<td>43</td>
<td>18</td>
</tr>
<tr>
<td>Obstetrics/Gynecology</td>
<td>278</td>
<td>6</td>
<td>20</td>
<td>16</td>
</tr>
<tr>
<td>Surgery</td>
<td>301</td>
<td>8 (up by 1)</td>
<td>28</td>
<td>21</td>
</tr>
</tbody>
</table>

Source: https://www.acgme.org/Portals/0/PFAssets/PublicationsBooks/2017-2018_ACGME_DATABOOK_DOCUMENT.pdf
SECTION 4: SUMMARY OF MAJOR GME ACCOMPLISHMENTS

1. Improved Resident Lounge
   a. Cleaning
   b. Food
   c. Computers

2. Updated essential Policies
   a. Due process
   b. Moonlighting
   c. Duty Hours

3. Created GME Marketing materials and Presentations
   a. Created GME brochure of program histories
   b. GME Newsletter
   c. Updated GME intranet page
   d. Residents in Macon Telegraph

4. Revamped new resident orientation
   a. Expanded from 4 to 7 days
   b. White Coats for incoming interns/fellows
   c. Re-implemented BLS, PALS, ACLS to orientation
   d. Included IHI modules (PS and QI) trainings
   e. Added an evening social with Macon Chamber of Commerce and Coliseum Programs

5. Created Program scorecards and Annual Institutional Review (AIR) report
   a. Created Institutional and program “dashboard”
   b. Created (and presented to the Navicent Board) Annual Institutional Review

6. Programs
   a. All programs filled through the NRMP
   b. Internal Medicine welcomed our first Mercer A.C.T. graduate (accelerated medical school)

7. Other
   a. Prepared for ACGME CLER visit
   b. Developed / implemented education materials for PDs, PC and GME
   c. Personnel changes of GME office
   d. Hired 3 new GME staff members including Director of GME
   e. Funded 16 residents to present scholarly work at conferences
   f. GME offices relocated back to main campus
 SECTION 5: SPONSORSHIP OF RESIDENT RESEARCH

I. Medical Center Scholarly Activity grants (Navicent Health Resident Research Presentation Assistance Grant)

Dates of Project: October 1, 2017
End of Funding Period: September 30, 2018
Grant Award: $25,000.00
FY18 Total Funding: $26,237.29

a. Purpose: To provide funding for residents/fellows to present research/scholarly products at non-local meeting.

b. Resident Research presentations

<table>
<thead>
<tr>
<th>Resident Research Presentation Assistance</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>October 1, 2017 thru September 30, 2018</td>
<td></td>
</tr>
</tbody>
</table>

| Jaime Barker, PGY 3 ~ Internal Medicine | $ (829.58) |
| American College of Physicians Conference |
| Poster Presentation: Sudden Blindness in Teenager |
| Savannah GA 09/28/2017-9/30/2017 |

| Amy Issa, PGY 3- Pediatrics | $ 1,665.47) |
| NASPGHAN 2017 |
| Poster Presentation: Pre-Duodenal Portal Vein and its Rare Association with a Meckel’s Diverticulum in a Pediatric Patient |
| Las Vegas, NV 11/1/2017-11/4/2017 |

| Janelle Fernandez, PGY 2- Pediatrics | $ (1,710.15) |
| NASPGHAN 2017 |
| Poster Presentation: Pre Duodenal Portal Vein and its Rare Association with a Meckel’s Diverticulum in a Pediatric Patient |
| Las Vegas, NV 11/1/2017-11/4/2017 |

| James Lawrence- PGY3- Internal Medicine | $ (178.47) |
| Poster Presentation: Colon Cancer is Associated with Colon Cancer Staging |
| American College of Physicians Conference |
| Savannah, GA, September 29-October 1, 2017 |

| Jay Dennehey, PGY3- Internal Medicine | $ (73.53) |
| participation in Jeopardy |
| Conference: ACP Georgia Chapter |
| Savannah, GA 9/29/2017- 10/01/2017 |

<p>| Siva Chiranjeevi, PGY 2- Internal Medicine | $ (513.25) |
| American College of Physicians Conference |
| Poster Presentation: Bactrim- Associated Rhabdomyolysis - A case report |
| Savannah, GA 09/29/2017-10/01/2017 |</p>
<table>
<thead>
<tr>
<th>Name</th>
<th>Year</th>
<th>Event</th>
<th>Presentation Title</th>
<th>Location</th>
<th>Date</th>
<th>Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ahkeel Allen, PGY 5, Surgery</td>
<td></td>
<td>SESC Annual Meeting</td>
<td>Poster Presentation: Obstructive Uropathy Secondary to an Indirect Extraperitoneal Ureteral Inguinal Hernia</td>
<td>Tampa, FL 2/10-2/13/2018</td>
<td></td>
<td>$ (1,199.40)</td>
</tr>
<tr>
<td>Alexander Sapp, PGY 3</td>
<td></td>
<td>SSC Annual Meeting</td>
<td>Poster Presentation: The Impact of Hemodynamic Transesophageal Echocardiography on Acute Kidney Injury: Management and use of Continuous Renal Replacement Therapy in Trauma</td>
<td>Tampa, FL 2/10-2/13/2018</td>
<td></td>
<td>$ (1,595.76)</td>
</tr>
<tr>
<td>Andrew Drahos, PGY 3</td>
<td></td>
<td>SSC Annual Meeting</td>
<td>Institutional Review of Longterm Post-Operative Hardware Complications After Open Rib Fixation</td>
<td>Tampa, FL 2/10-2/13/2018</td>
<td></td>
<td>$ (1,579.22)</td>
</tr>
<tr>
<td>Christopher Jean-Louis, PGY 3</td>
<td></td>
<td>SSC Annual Meeting</td>
<td>Alveolar Rhabdomyosarcoma of the Breast in Adolescent Female</td>
<td>Tampa, FL 2/10-2/13/2018</td>
<td></td>
<td>$ (828.00)</td>
</tr>
<tr>
<td>Anthony Scott, PGY3</td>
<td></td>
<td>SSC Annual Meeting</td>
<td>A 12-Year Single Institution Experience with Accelerated Partial Breast Irradiation</td>
<td>Tampa, FL 2/10-2/13</td>
<td></td>
<td>$ (937.96)</td>
</tr>
<tr>
<td>Domonique Charles, PGY 3</td>
<td></td>
<td>Southern Society of Pediatric Research</td>
<td>A Bumpy Road: Subcutaneous Fat Necrosis of the Newborn Associated with Symptomatic Hypercalcemia</td>
<td>New Orleans, LA 2/21/2018 - 2/22/2018</td>
<td></td>
<td>$ (909.36)</td>
</tr>
<tr>
<td>Amar Shere, PGY 2</td>
<td></td>
<td>American College of Cardiology’s 67th Annual Scientific Session</td>
<td>Looking Beyond Valves and Vegetations: A Rare Case of Echocardiogram Negative Cardiac Device Related Endocarditis</td>
<td>Orlando, FL March 10-12, 2018</td>
<td></td>
<td>$ (1,362.64)</td>
</tr>
<tr>
<td>Maulikumar Patel, PGY2</td>
<td></td>
<td>American College of Cardiology’s Annual Scientific Session</td>
<td>Anabolic Steroids Induced Cardiomyopathy</td>
<td></td>
<td></td>
<td>$ (1,316.61)</td>
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<tr>
<td>James Parker, PGY2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$ (1,678.15)</td>
<td></td>
</tr>
<tr>
<td>Event</td>
<td>Title</td>
<td>Presenter, PGY</td>
<td>Cost</td>
<td></td>
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<tr>
<td>16th World Congress of Endoscopic Surgery</td>
<td>Magnetic Augmentation Device for Gastroesophageal Reflux Disease Treatment</td>
<td>Katherine Kendrick, PGY2</td>
<td>$ (2,135.00)</td>
<td></td>
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<tr>
<td>American Society for Metabolic and Bariatric Surgery</td>
<td>Variation Between Abdominal Surface and Stomach in Relation to BMI</td>
<td></td>
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<tr>
<td>Alka Kalathil, PGY3</td>
<td>2018 National Conference of Family Medicine Residents and Medical Students</td>
<td>&quot;A Case of Severe Hyponatremia in a Beer Drinker&quot;,</td>
<td>$ (1,164.14)</td>
<td></td>
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<tr>
<td>Crystal Fancher, PGY5</td>
<td>Georgia Chapter of American College of Surgeons Meeting</td>
<td>Do Isolated Traumatic Subarachnoid Hemorrhages Require Transfer? A Retrospective Review of the Inpatient Care Required of Them at a Level 1 Trauma Center Over a 3 Year Period</td>
<td>$ (249.48)</td>
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<tr>
<td>Margaret Omatsone, PGY4</td>
<td>IDSA Scientific Meeting 2018</td>
<td>Various satellite symposiums and educational events will be attended throughout the week</td>
<td>$ (1,895.00)</td>
<td></td>
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<td></td>
<td>San Francisco CA, October, 2nd-7th</td>
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<tr>
<td>Goal 1</td>
<td>2017-2018 GME Goals</td>
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<tr>
<td>1. Develop and/or update all applicable GME policies, especially the following:</td>
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<td>2. Complete dashboards (collect and gather information) that were developed for each program.</td>
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<td>3. Develop and implement a system to monitor and document residents' involvement with PS/QI.</td>
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</table>
## II. 2018-2019 GME Goals

### Instructions

Use this form for tracking areas for improvement for GME across multiple years. The intent is to create a summary of improvements achieved, and a working list of areas that are still in need of attention.

### Indicate Category

- **Individual(s)**
- **Goal(s)**
- **Initials/Name**
- **Category**
- **APE**
- **Resident Physicians**
- **Program**
- **Organization**
- **Staff**

### Indicate Change

- **Resident Physicians**
- **Program**
- **Organizations**
- **Staff**

### Plan 1st Annual Institutional Review

<table>
<thead>
<tr>
<th>Expected Resolution</th>
<th>Individual(s)</th>
<th>APE</th>
<th>Goals</th>
<th>2018-19</th>
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<tbody>
<tr>
<td>Have at least 1 resident Wellness event</td>
<td>Director of GME</td>
<td>GME to host a Wellness event</td>
<td>Resident Physicians</td>
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<td>Establish a affiliation with VA hospital</td>
<td>Director of GME</td>
<td>VA affiliation agreement</td>
<td>Resident Physicians</td>
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<tr>
<td>Implement Six Sigma Lean Green belt training for all resident physicians</td>
<td>Director of GME</td>
<td>Offer course to residents and other Navicent employees</td>
<td>Resident Physicians</td>
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<tr>
<td>Plan 1st annual Wellness event for resident physicians</td>
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</table>

### 2018-19 GME Annual Institutional Review Goals

- **Indicate Category for each achieved, and a working list of areas that are still in need of attention.**
END OF REPORT