

DEPARTMENT OF MEDICINE
University of Massachusetts Medical School

**FACULTY GUIDE TO TEACHING
SUBSPECIALTY FELLOWS
Module 2**

March, 2007

MODULE 2

- **DEVELOPING and EVALUATING the TRAINING PROGRAM**
 - Building the program and making it better
 - Faculty development

THE PROGRAM DIRECTOR

- **The program director is the “ship’s captain” of the training program.**
- **He/she bears ultimate responsibility for**
 - **Ensuring compliance with all accreditation requirements**
 - **Coordinating faculty activities**
 - **Evaluating and maintaining training rotations**
 - **Guaranteeing a sound educational experience for trainees**
 - **Offering support to trainees as they face their personal, academic, career, and work challenges**
 - **Meeting regularly with trainees and generating summary evaluations at least twice a year**
 - **Maintaining the program’s records and files**
 - **Attending all meetings relevant to program administration**
 - **Preparing for accreditation site visits, including preparation of the Program Information Form (PIF)**
 - **Directing recruitment of future trainees**

THE PROGRAM DIRECTOR (continued)

- **The program director reports**
 - To the department chair or designee
 - To the division chief (if a subspecialty program)
 - To the Office of Graduate Medical Education (OGME) and the Associate Dean for GME (also referred to as the DIO, or designated institutional officer)
 - To the ACGME -- RRC
 - In a manner of speaking, to his/her trainees as well.
- **The program director must be an experienced, board-certified faculty member (> 5 yrs) with credibility in the clinical, educational, and scientific aspects of his/her field.**
- **The program director's job is extremely challenging and requires assistance**
 - Key faculty (> 10 hours per week)
 - Associate program directors, if any
 - Program coordinator



PROGRAM REQUIREMENTS

- The conditions that programs must meet in order to maintain their accreditation are known as “**program requirements.**”
- Program requirements for all specialties are periodically updated by the various **Residency Review Committees (RRCs)** of the ACGME.
- The natural history of program requirements is that they become increasingly stringent with each succeeding iteration. Faculty are encouraged to visit the ACGME website and stay abreast of current program requirements in their specialty.
- The rest of this module will focus on requirements pertaining to four areas:
 - Quality assurance
 - Program review
 - The trainee’s learning environment
 - Faculty development

FACULTY DEVELOPMENT

- The expectations of faculty who teach subspecialty fellows are as follows:
 - Provide **supervision** in clinical setting
 - Offer **didactic curricular teaching** on rounds, in conferences, and in “core curriculum” talks
 - Serve as **role models**
 - **Evaluate** trainees’ progress
 - Formulate thoughtful, timely, and competency-based performance evaluations (see module 1)
 - Observe trainees closely for problems such as knowledge and performance deficits, learning disorders, sleep deprivation, and stress
 - Witness and help document procedural competency
 - Participate in trainee **selection**
 - Participate in efforts aimed at **improving quality** of training program
 - Work on improving and honing their own **teaching skills**
 - Help foster a rich **learning environment**

WHAT CONSTITUTES A “RICH LEARNING ENVIRONMENT?”

- It offers abundant resources

- Library
- Equipment (eg, microscope, lab)
- Dedicated workspace
- Personnel
 - administrative support
 - Consultants
 - Hospital services



- It offers abundant opportunities

- Research projects
- Other scholarly activities (eg, collaborating on review articles and textbook chapters)
- Conferences
- Enables trainees to attend scientific and clinical meetings

FACULTY DEVELOPMENT (continued)

- Given the appropriate time, venue, and support, most academic physicians can be **good** teachers.
- To be an **excellent** teacher, clinicians need to develop certain skills. Among these are
 - Providing feedback in a candid, constructive, and tactful way;
 - Teaching in multiple venues
 - Bedside
 - Conference room
 - Office
 - Lecture hall
 - Recognizing learner problems
 - Cognitive
 - Psychological
 - Cultural and language related
 - Attitudinal
 - Facilitating discussion



FACULTY DEVELOPMENT (continued)

- There are several ways to help faculty sharpen their teaching skills.
 - Workshops
 - Retreats
 - These venues typically offer a menu of didactic sessions, simulated encounters, and videotape reviews.
 - There are national and regional workshops of this sort. Your program director's organization can help you locate them. They may even run such a program themselves. UMMS sponsors an excellent program called **“Teachers of Tomorrow.”****
 - Your department or division may elect to put together its own faculty development program.

PROGRAM IMPROVEMENT

There are no perfect training programs.

All are, to coin a cliché, “works in progress.”



As such, each program should monitor its quality indicators and modify the program as indicated.

What are these indicators?

PROGRAM IMPROVEMENT (cont.)

Fellowship program quality indicators include

- **Performance of program graduates on board certification examinations**
- **Performance of current fellows**
- **Assessment of program quality by the fellows themselves. Fellows should be allowed the opportunity to generate and submit these confidentially**
- **Regular reevaluation of the program curriculum**
- **Job procurement and performance records of program grads**
- **Surveys of former fellows done at 1 and 5 years after finishing their training. These surveys query fellows about how satisfied they were with their training, and how well it prepared them for their careers. This is a mandatory exercise.**

PROGRAM IMPROVEMENT (continued)

- **The sponsoring division must meet at least once a year to evaluate the program formally.**
 - The entire division or a subset (“fellowship committee”) may do this.
 - Minutes should be kept, and appropriate action plans developed, implemented, and documented.
 - **Fellows should be involved in this process.**

NOTE:

- Any contribution a fellow makes toward improving the program or
- Any written reflection on the quality of his/her training should be included in his/her **portfolio**.



QUALITY ASSURANCE

- **Today's trainees will be held more accountable for quality and safety of patient care than has any previous generation of doctors.**
 - **The doctor's very livelihood will depend on his/her performance, which will be a matter of public record.**
 - **Doctors themselves will be required to be the primary agents of quality improvement in medicine.**
- **It is, therefore, imperative that our trainees are made knowledgeable about **quality assurance** and gain experience in quality assurance activities.**

QUALITY ASSURANCE (continued)

- It is now not just a recommendation but a requirement that programs involve their fellows in QA activities. These must not represent merely idle projects or “busy work,” but, rather, an important part of each division’s agenda.
- Some examples of QA activities for trainees:
 - Running and presenting at **M&M conferences**
 - Keeping **records of procedural morbidity**
 - **Reporting on case complications** in the literature
 - **Divisional medical records review**

QUALITY ASSURANCE (continued)

- **Programs should keep track of trainees' QA projects and report them upon request to OGME (as part of the internal review process) and Vice Chair for GME.**
- **Quality assurance projects make good entries for a fellow's portfolio.**



ELEMENTS OF THE TRAINING PROGRAM

KEY POINTS

- **The program director shoulders most of the responsibility for making the program work. The program director needs the assistance of other divisional staff.**
- **Periodic and formal faculty development activities are mandatory. These should include**
 - **Orientation to the workings of the program**
 - **Training aimed at enhancing teaching skills**
- **Trainees must play an active role in divisional quality assurance work.**
- **The quality of the training program must be reviewed regularly by faculty and trainees. Areas in need of improvement should be identified, and action plans devised and followed.**

END OF MODULE 2