Getting Started in Faculty Development: What Works?

What should programs include?

How much is enough?

How can impacts be measured?

Thursday, June 4 ~ 1:00 – 2:00 pm Eastern

Today's speakers have nothing relevant to disclose.

Today's Learning Objectives:

- **Describe needs assessment processes, startup resources, and curriculum formats** used in several faculty development program examples.
- **Enumerate learner recruiting strategies, participation of target learners,** and their roles in the medical education continuum and health system.
- **Relate learning outcomes, program impacts measured, and project completions** arising from the program examples.

Faculty Development in the ACGME 2019 Revised Common Program Requirements(Residency)

- **I.B.2.g (Faculty members must) pursue faculty development designed to enhance their skills at least annually:**
  - **II.B.2.g).(1) as <u>educators</u>** *[teaching, feedback and assessment skills]*
  - **II.B.2.g).(2) in <u>quality improvement and patient safety</u>**
  - **II.B.2.g).(3) in fostering their own and residents' <u>well-being</u>; and,**
  - **II.B.2.g).(4) in patient care based on their own <u>practice-based learning and improvement</u> efforts**

ACGME 2019 Revised CPR (Residency): POLL #1: Are we ready?

A. Enhancing faculty skills as educators *[teaching, feedback and assessment skills]* *[CPR2019.II.B.2.g).1]*

1. **My institution has an existing program to satisfy this**
2. **We are planning a program within 6 months for this**
3. **We need more expertise**
4. **We need more time!**

ACGME 2019 Revised CPR (Residency): POLL #2: Are we ready?

B. Enhance Faculty Skills in quality improvement and patient safety *[CPR2019.II.B.2.g).2]*

1. **My institution has an existing program to satisfy this**
2. **We are planning a program within 6 months for this**
3. **We need more expertise**
4. **We need more time!**

ACGME 2019 Revised CPR (Residency): POLL #3: Are we ready?

C. Enhance Faculty Skills in fostering their own and residents' well-being; *[CPR2019.II.B.2.g).3]*

1. **My institution has an existing program to satisfy this**
2. **We are planning a program within 6 months for this**
3. **We need more expertise**
4. **We need more time!**

ACGME 2019 Revised CPR (Residency): POLL #4: Are we ready?

D. Enhance Faculty Skills in patient care based on their own practice-based learning and improvement efforts
[CPR2019.II.B.2.g).4]

1. **My institution has an existing program to satisfy this**
2. **We are planning a program within 6 months for this**
3. **We need more expertise**
4. **We need more time!**

Intro: About the Speakers

- **Brandy Church, MA** serves as the Associate Director and Director of Faculty Development for the Statewide Campus System (SCS) at Michigan State University College of Osteopathic Medicine (MSUCOM). She joined SCS in 2014 after spending the previous 7 years working on curriculum, faculty development, and accreditation for MSUCOM, and as MSU's Director of Faculty and Instructional Development.
- **Maria Lyn Quintos-Alagheband, MD, FAAP** is currently Chief Quality and Safety Officer for Children's Services and Director, Organization-wide Performance Improvement Science Academy, at NYU Winthrop Hospital in Long Island, NY. She completed Pediatric Residency at NYU and Critical Care Fellowship at CHLA/USC. She is a graduate of GNYHA Quality Leadership Fellowship and HANY's Academy for Healthcare Leadership. She is a Black Belt in Lean Six Sigma and leads various regional/national QI collaboratives. She is currently developing the health systems science curriculum at NYU's Long Island School of Medicine.
- **Rob Martin, MBA, CHCP, CPHIMS** serves as Assistant Dean for Continuing Medical Education at NYU's Winthrop Hospital and Long Island School of Medicine, where he oversees accreditation and inter-professional CME/CE and QI education efforts. He developed the Clinical Educators Lead and Learn Series (C.E.L.L.S.) educator rounds for faculty development at NYU Winthrop. He currently chairs AHME's Council of Professional and Faculty Development and is also moderating this session.

Brandy Church: Faculty Development in Multi-Institutional System

Statewide Campus System
College of Osteopathic Medicine
MICHIGAN STATE UNIVERSITY

Delivering the AAMC's "Teaching for Quality" Program through a Community-based GME Consortium

Brandy Church, MA
Associate Director and Director of Faculty Development
Michigan State University College of Osteopathic Medicine
Statewide Campus System
East Lansing, MI

SCS.MSU.EDU

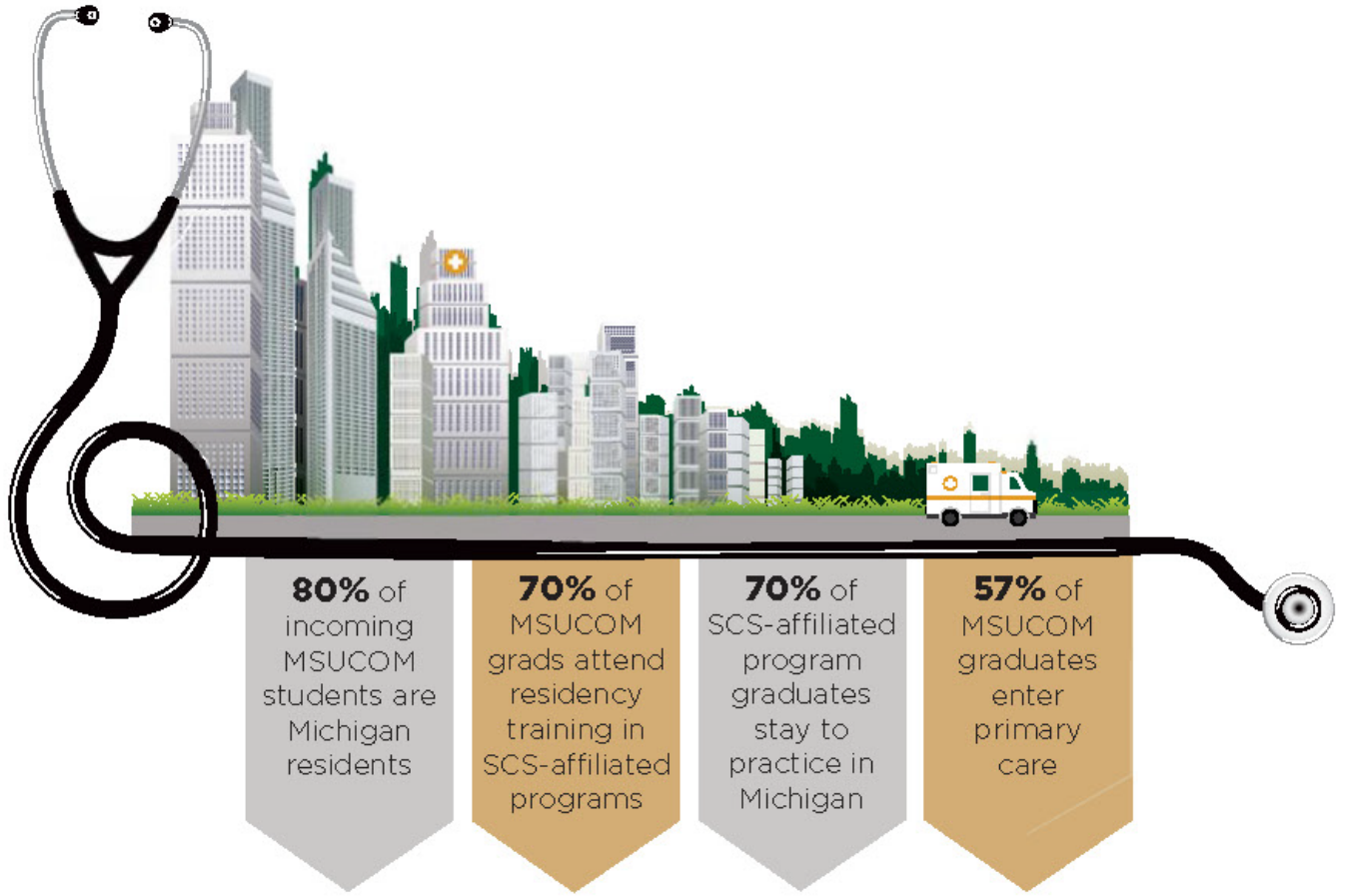
Disclosures

- I have nothing to disclose

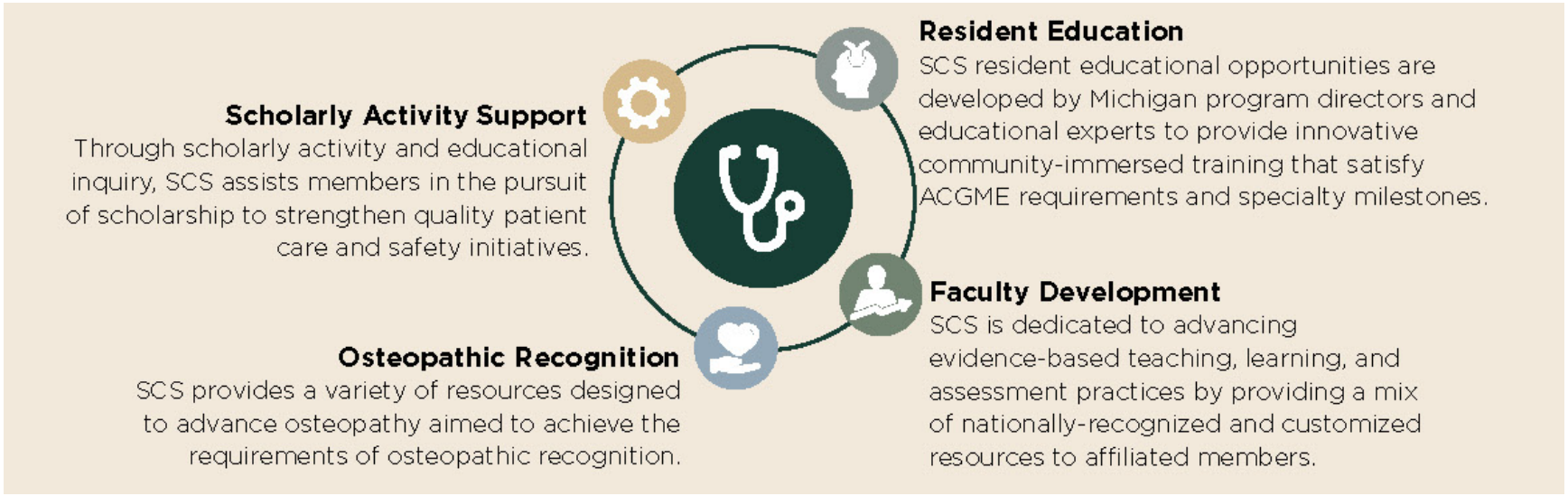
MSUCOM's Statewide Campus System

- 2,000 physicians in training
- 199 programs
- 35 training sites
- 2 FQHCs
- 4,000 clinical/adjunct faculty

MSUCOM's Statewide Campus System



MSUCOM's Statewide Campus System



Our Stakeholder Needs

- >65% wanted help achieving scholarly activity requirements
- >65% wanted programs designed to involve faculty and residents in QI projects
- >74% wanted development on how to conduct research / QI projects
- >68% wanted guidance on how to mentor resident scholarly activity projects

AAMC's Teaching for Quality Program

- Program Objectives
  - Address an identified gap in the education of residents/clinicians regarding QI/PS
  - Design an educational innovation to fill that gap
  - Implement and assess the impact of the innovation
  - Produce a scholarly poster, article, or presentation on the innovation and results

https://www.aamc.org/initiatives/meded/494234/howthete4qprogramworks.html

AAMC's Teaching for Quality Program

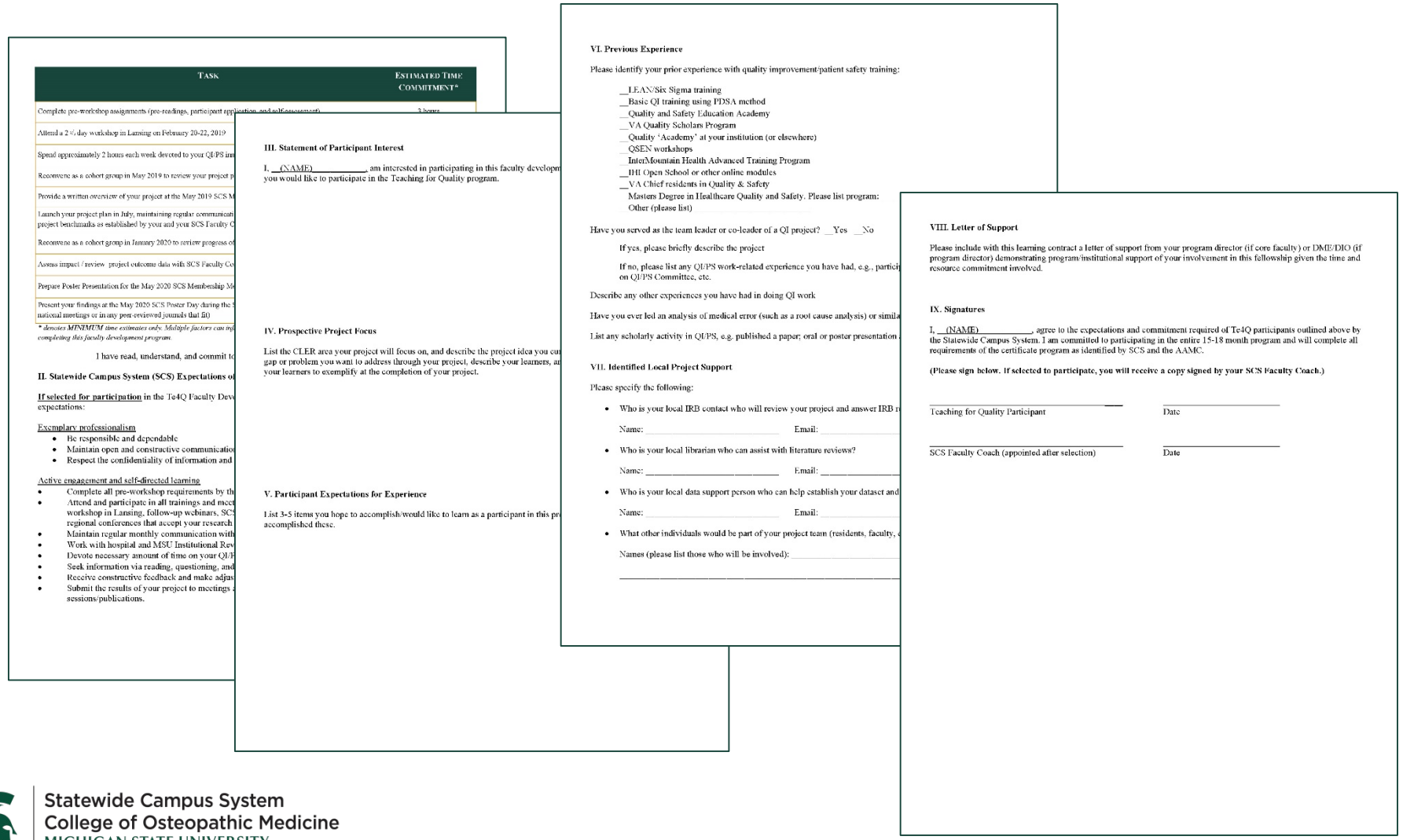
- Program Timeline

https://www.aamc.org/initiatives/meded/494234/howthete4qprogramworks.html

Curriculum Revisions

- Revised curriculum to address barriers faculty face when attending faculty development workshops or conducting QI projects
  - Lack of time
  - Inadequate training and experience
  - Lack of institutional resources

Application Process



Task	Estimated Time Commitment*
Complete pre-workshop assignments (pre-readings, participant application, and self-assessment)	3 hours
Attend a 2 ½ day workshop in Lansing on February 20-22, 2019	
Spend approximately 2 hours each week devoted to your QI/PS im	
Reconvene as a cohort group in May 2019 to review your project p	
Provide a written overview of your project at the May 2019 SCS M	
Launch your project plan in July, maintaining regular communicat project benchmarks as established by your and your SCS Faculty C	
Reconvene as a cohort group in January 2020 to review progress of	
Assess impact / review project outcome data with SCS Faculty Co	
Prepare Poster Presentation for the May 2020 SCS Membership Ma	
Present your findings at the May 2020 SCS Poster Day during the S national meetings or in any peer-reviewed journals that fit)	

* *denotes MINIMUM time estimates only. Multiple factors can influ completing this faculty development program.*

I have read, understand, and commit to

II. Statewide Campus System (SCS) Expectations of

If selected for participation in the Te4Q Faculty Deve expectations:

Exemplary professionalism
- Be responsible and dependable
- Maintain open and constructive communicatio
- Respect the confidentiality of information and

Active engagement and self-directed learning
- Complete all pre-workshop requirements by th
- Attend and participate in all trainings and meet workshop in Lansing, follow-up webinars, SCS regional conferences that accept your research
- Maintain regular monthly communication with
- Work with hospital and MSU Institutional Rev
- Devote necessary amount of time on your QI/P
- Seek information via reading, questioning, and
- Receive constructive feedback and make adjus
- Submit the results of your project to meetings sessions/publications.

III. Statement of Participant Interest

I, __(NAME)_____, am interested in participating in this faculty develop you would like to participate in the Teaching for Quality program.

IV. Prospective Project Focus

List the CLER area your project will focus on, and describe the project idea you cu gap or problem you want to address through your project, describe your learners, a your learners to exemplify at the completion of your project.

V. Participant Expectations for Experience

List 3-5 items you hope to accomplish/would like to learn as a participant in this pr accomplished these.

VI. Previous Experience

Please identify your prior experience with quality improvement/patient safety training:

__LEAN/Six Sigma training
__Basic QI training using PDSA method
__Quality and Safety Education Academy
__VA Quality Scholars Program
__Quality 'Academy' at your institution (or elsewhere)
__QSEN workshops
__InterMountain Health Advanced Training Program
__IHI Open School or other online modules
__VA Chief residents in Quality & Safety
Masters Degree in Healthcare Quality and Safety. Please list program:
Other (please list)

Have you served as the team leader or co-leader of a QI project? __Yes __No

If yes, please briefly describe the project

If no, please list any QI/PS work-related experience you have had, e.g., partici on QI/PS Committee, etc.

Describe any other experiences you have had in doing QI work

Have you ever led an analysis of medical error (such as a root cause analysis) or simil

List any scholarly activity in QI/PS, e.g. published a paper; oral or poster presentation

VII. Identified Local Project Support

Please specify the following:

- Who is your local IRB contact who will review your project and answer IRB
  Name: _____ Email: _____
- Who is your local librarian who can assist with literature reviews?
  Name: _____ Email: _____
- Who is your local data support person who can help establish your dataset and
  Name: _____ Email: _____
- What other individuals would be part of your project team (residents, faculty,
  Names (please list those who will be involved): _____

VIII. Letter of Support

Please include with this learning contract a letter of support from your program director (if core faculty) or DME/DIO (if program director) demonstrating program/institutional support of your involvement in this fellowship given the time and resource commitment involved.

IX. Signatures

I, __(NAME)_____, agree to the expectations and commitment required of Te4Q participants outlined above by the Statewide Campus System. I am committed to participating in the entire 15-18 month program and will complete all requirements of the certificate program as identified by SCS and the AAMC.

(Please sign below. If selected to participate, you will receive a copy signed by your SCS Faculty Coach.)

_____ _____
Teaching for Quality Participant Date

_____ _____
SCS Faculty Coach (appointed after selection) Date

Our Learners

- Cohort 1:
  - 13 health systems
  - 15 projects
  - 2 multi-site projects
- Cohort 2:
  - 11 health systems
  - 11 projects
  - 1 multi-site project
- Cohort 3:
  - 7 health systems
  - 9 projects

Our Projects

- QI/PS Curriculum for residents and faculty
  - 1 AMA ACE Grant
- Transitions of Care
- Supervision
- Healthcare Delivery Processes
  - Opioid prescribing
  - Diabetes management
  - Postoperative follow-up calls
  - Etc.

What Have We Found?

- Compiling resources and streamlining project design processes can reduce learner time commitment and increase their SA project engagement
- Helping learners attain a solid QI/PS knowledge base may make them more confident and capable of completing SA projects
- Providing assigned coaches with compatible project-related skills can serve to keep learner SA projects moving forward

POLL#5: In your opinion, which of the Revised 2019 CPR does **Ms. Church's** program ***most effectively satisfy***?

- **A. Enhance faculty skills as educators** *[teaching, feedback and assessment skills] [CPR2019.II.B.2.g).1]*
- **B. Enhance Faculty Skills in quality improvement and patient safety** *[CPR2019.II.B.2.g).2]*
- **C. Enhance Faculty Skills in fostering their own and residents' well-being**; *[CPR2019.II.B.2.g).3]*
- **D. Enhance Faculty Skills in patient care based on their own practice-based learning and improvement efforts** *[CPR2019.II.B.2.g).4]*

Dr. Quintos: Longitudinal Faculty Training for QI Capacity

- The Performance Improvement Science Academy (P.I.S.A.)

Building QI Capability: The NYU Winthrop Hospital Performance Improvement Science Academy

Lyn Quintos-Alagheband MD

Performance Improvement
PI
Science
Academy
2018-2019
NYU Winthrop Hospital

AHME
ASSOCIATION FOR HOSPITAL MEDICAL EDUCATION

Objectives

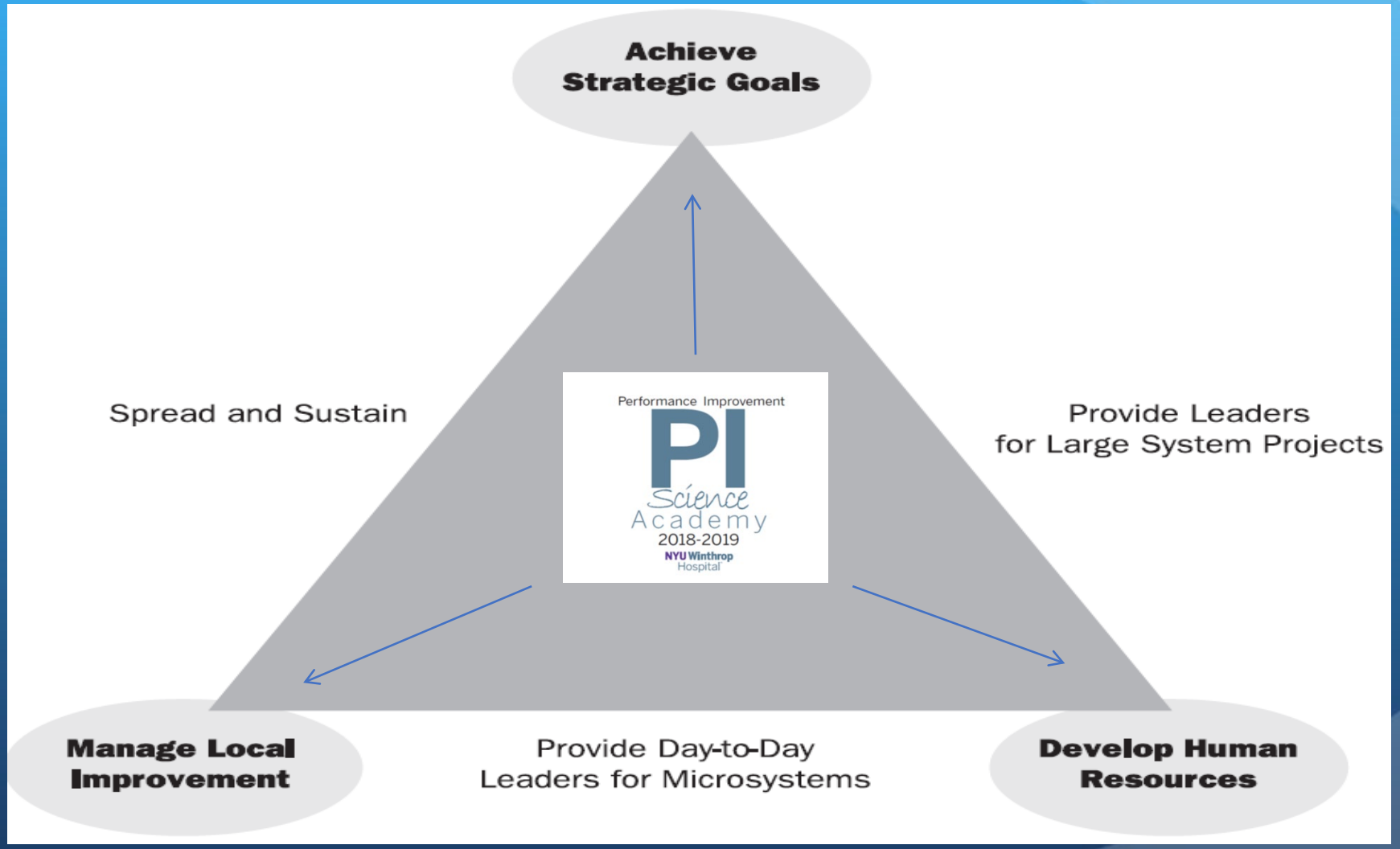
Lead a collaborative process to establish a quality science academy for faculty

Design a mixed pedagogical and experiential training curriculum in QI

Assess outcomes of the academy in building faculty capability for QI project execution, scholarship and QI education

Long Island affiliate of **NYU Langone Health**
591-bed medical center with comprehensive in-patient services and ambulatory network
U.S. News & World Report Top 10 hospital in NY metro-area
Regional academic campus
Residency in 10 specialties and 6 fellowship programs
NYU Long Island School of Medicine
-innovative 3 years medical school training primary care physician and leaders of our health system.

Execution of Strategic Improvement Initiatives: IHI Framework

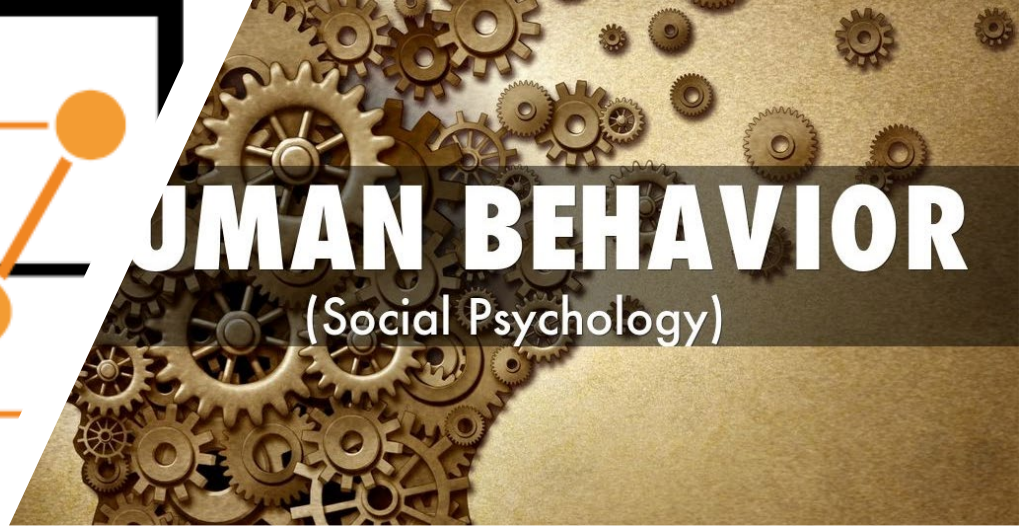


PI Science Academy

- Goal: To develop a model to build quality improvement (QI) capability which will support organizational transformation to high reliability
- Broader and deeper understanding of process improvement science
- Enhanced improvement skills –lead the design and execution of QI projects
- Educating and mentoring frontline, resident's and medical students

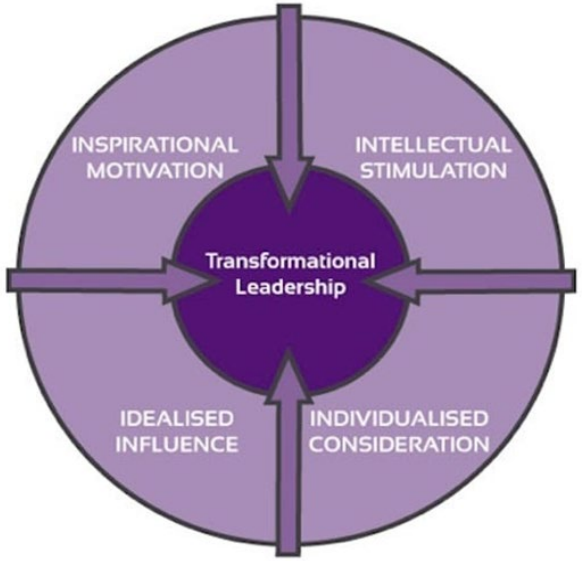
- Advancing scholarship of healthcare improvement

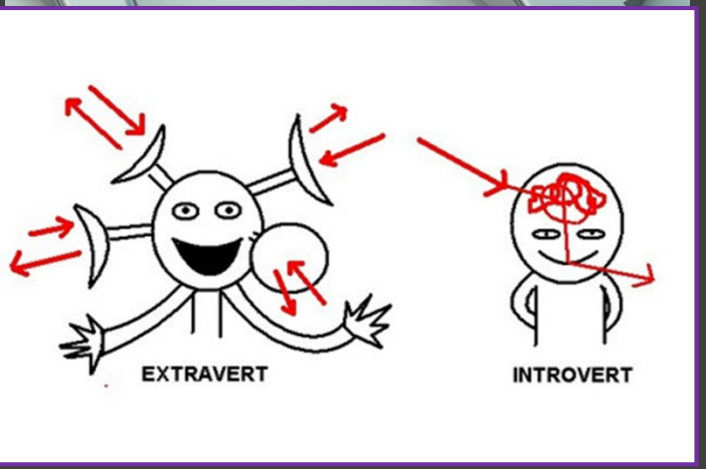
Focus first on developing leaders



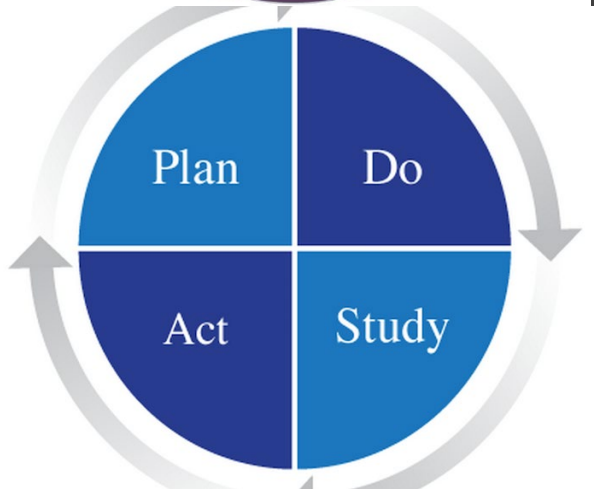
Deming's System of Profound Knowledge

In-class Sessions Active Learning
2.5 hours per month

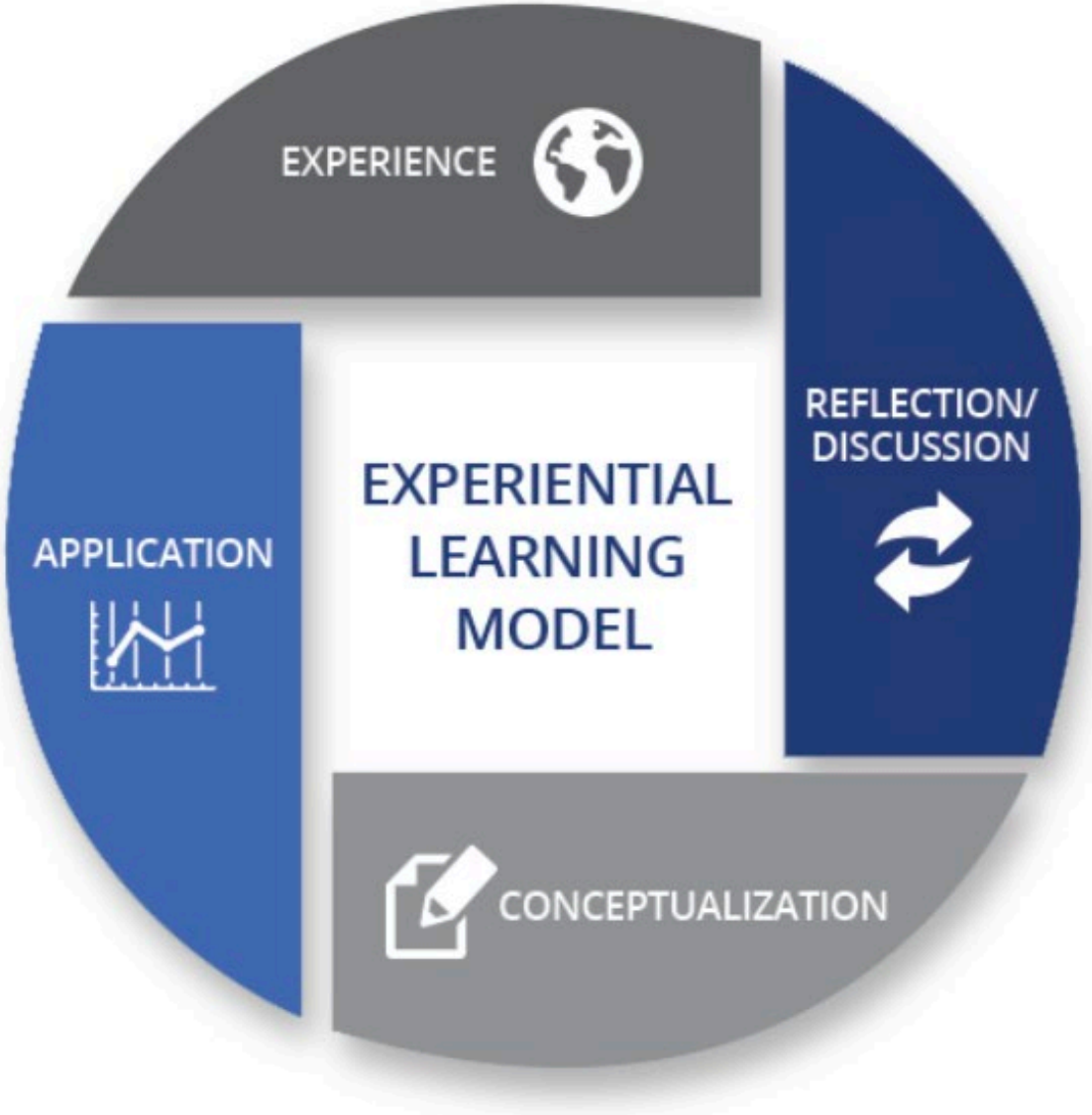




CRITICAL THINKING



Kolb Experiential Learning



Capstone Strategic Improvement Initiatives 2015-2018

- Patient Experience of Care
  - Interprofessional Communication
  - Timely Pain Management
- Patient Safety
  - Patient Verification Radiology
  - HAC Reduction – CLA-BSI, VTE, SSI, CAUTI
  - Radiation Safety
  - Safe Handoff
  - Critical Alarm Safety
  - Thermoregulation in NB delivery
  - Preventing Cast complications
- Culture of Safety
  - Unit-based CQO /PSO rounding
  - High Reliability Unit Transformation- Error prevention/Leadership/Safety Coach Program
  - Compassionate Coordinated Care Rounding Model
  - Safety Coach Program
- Efficiency
  - ED throughput
  - Early identification of PSI-4
  - Discharge before Noon
- Efficiency
  - Trauma triage system
  - Preventing Readmissions –Care transitions
  - Documentation and Capture of CC/ MCC
  - Decreasing Time to Radiation Therapy
- Clinical Effectiveness
  - Severe Sepsis / Septic Shock
  - Asthma Action Plan
  - Delirium Recognition
  - Glycemic control during pregnancy
  - Lasix Dosage Optimization in CHF
  - Quality of Bedside Spirometry
  - Antimicrobial Stewardship
- Education Process
  - Resident Clinic Continuity
  - Resident Handoff
  - Family education on cast complications
  - Improving standard of practice for simulation education
- Population Management
  - Obesity
  - T1DM control - HbA1c
  - Children with Medical Complexities

Application Process

Capstone Project Proposal

Value proposition

What they hope to learn/ achieve

Chairman's endorsement

Average 24 students per class- Interprofessional

50% are physicians,

Leadership from Nursing, Pharmacy and Operations

PI Academy Development Timeline

Sep.15'-June 16'

Pioneer Class (N=10)

Single Department Pediatric s

Attending Physician Multi-specialty

4 Faculty Mentors

September 2017 – June 2018

1st Organization-wide Class (N =18)

Inter-professional and interdisciplinary

5 graduates added to mentorship pool

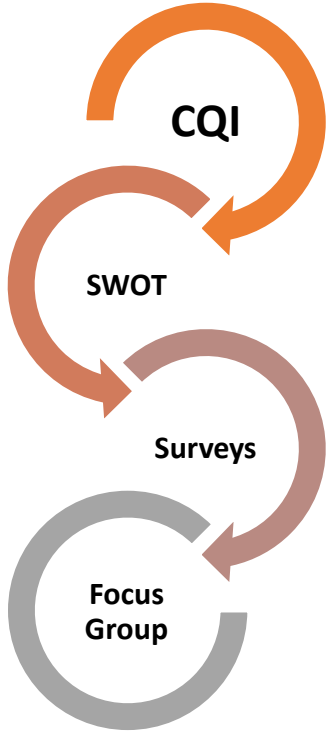
July 2017-September 2018

(N=23)

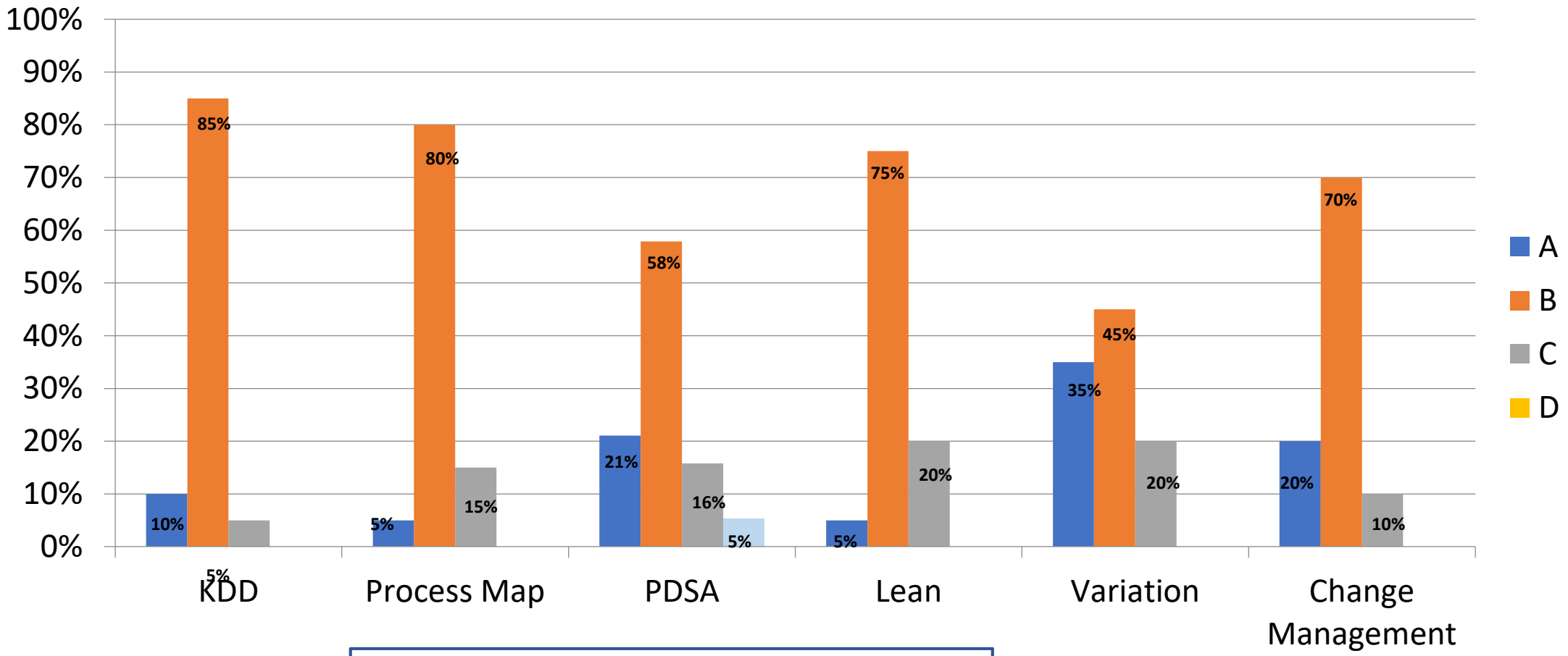
Prep course using IHI QI module

Coaching program: Teams with junior and senior faculties for synergy

Incorporated simulation



Learning and Behavior Change: Translating Tools Into Practice



A = Already using the tool prior to training
B = Adopted Tool in Practice
C = Plan to use tool in future projects
D = Tool was not necessary

Quality Improvement and Clinical Outcomes

50

Number of projects completed

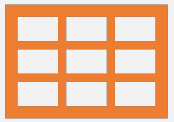
42

Number of projects completed and sustained

24

Number of projects completed, sustained and spread

Scholarly Activities Yield



38 Number of projects presented as posters

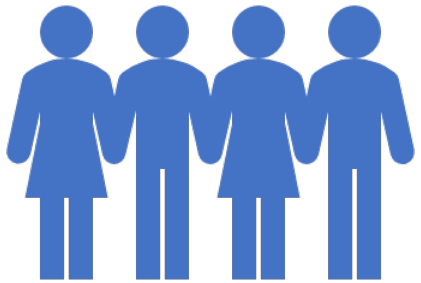
8 Number of projects presented as platform presentation

8 Number of published projects

CME GME UME

QI Mentorship Capability

- UME Core Faculty = 8
- GME = 20 faculty actively mentoring trainee
- Number of trainees mentored= 25
- MOC 4 credits



NYU | LONG ISLAND SCHOOL OF MEDICINE

High Value : ROI

- Reduction in Congestive Heart Failure length of Stay by 1.2 days (6.7 to 5.5)
- Decrease in NICU CLABSI from 1.6 to 0.34 per 1000 CVL days= $200,000/year
- Decrease Left Without Being Seen (LWBS) rate in ED from 4% to 1.3% = 500 lives
- Improvement in severity of illness (SOI) and risk of mortality (ROM) scores = estimated $143,400 per year added value
- Increase capture of CC/MCC in cardiology service line from 31 to 41% projected $ 1.9 Million gain per year. Spread to other service line.
- Glucose control during labor increase by 34%
  - Zero maternal hypoglycemia episodes during labor (from 6%) and 63% decrease in neonatal hypoglycemia episode
- Establish sustained process for handoff, safe discharge, compassionate care rounding model and resident continuity amongst other
- Establishing Joy at Work : Priceless

PI Science Academy Class 2015-2016
Faculty & Mentor

Maureen Kim, MD
Neonatology

"I'm so thankful that Winthrop provided me with the unique opportunity to participate in the PI Science Academy in its first year. The course gave me a solid background in PI Science methodology, along with practical tools to apply the PI Science I learned to current Neonatal QI initiatives and research. After graduating from the academy, I've had the rewarding experience of serving as a project mentor for this year's class and helping to spread the knowledge of PI methodology throughout our institution to improve patient care."

PI Science Academy Faculty:

Lyn Quintos
Ulka Kothari
Maureen Kim
Lee Moldowsky
Monica Santoro
Joe Greco
Gen Sicuranza
Denise May

Dinah Thomas : Coordinator

Acknowledgment:

PI Science Coaching Team

Robert Martin Academic Affairs

THANK YOU !

Performance Improvement
PI
Science
Academy
2018-2019
NYU Winthrop Hospital

POLL#7: In your opinion, which of the Revised 2019 CPR does **Dr. Quintos'** program ***most effectively satisfy***?

- **A. Enhance faculty skills as educators** *[teaching, feedback and assessment skills] [CPR2019.II.B.2.g).1]*
- **B. Enhance Faculty Skills in quality improvement and patient safety** *[CPR2019.II.B.2.g).2]*
- **C. Enhance Faculty Skills in fostering their own and residents' well-being**; *[CPR2019.II.B.2.g).3]*
- **D. Enhance Faculty Skills in patient care based on their own practice-based learning and improvement efforts** *[CPR2019.II.B.2.g).4]*

Rob Martin: The "Buffet Approach" to Faculty Development

- **Clinical Educators' Lead and Learn Series (C.E.L.L.S.)** 2018-2019 at NYU Winthrop Hospital
- Activity Co-Directed by two Assistant Deans:
  - ***Jeannine Nonaillada**, PhD, OTR/L, BCG, FAOTA (Faculty Development)*
  - ***Rob Martin**, MBA, CHCP, CPHIMS (CME)*

Needs Assessment

- As part of the Self-Study process leading to initial accreditation by the Liaison Committee of Medical Education(LCME) of the NYU Long Island School of Medicine, our **faculty began to express specific additional needs for faculty development** (beyond supervising 3y/4y UME Clerkships).
- Our full-time Faculty Developer and our CME Director collaborated to create a **lunchtime learning series to minimize schedule burden** on faculty clinic schedules and SOM-startup responsibilities.
- The C.E.L.L.S. Educator curriculum is intended to **help our core and adjunct faculty prepare for their new roles** in Undergraduate Medical education under the NYU-LISOM

Learning Objectives, Series Level

- **Identify desirable teaching competencies** of clinical educators
- **Describe how clinical activities can be used for scholarly inquiry**, research, and publication
- **Perform exercises** for improved mentoring, assessment, learner feedback, and remediation

Program Structure

- **12:00 – 1:00 Thursdays,** held every 3-4 weeks, (Sept. to June)
- **"Brown-Bag",** BYO lunch if desired
- **1.0 CME credit:** Speakers were asked to prepare
  20-25 minutes of didactic material +
  30-40 minutes of interactive workshop or team discussion exercises
- **17 internal Speakers recruited** from our own Faculty, Deans and Clinical leadership
- **Two in-depth workshops (2-3 hours)** were offered as expert guest facilitators became available:
  - *Andrew Olson, MD- Teaching Diagnostic Accuracy*
  - *Jeannette Guerrasio, MD- Remediation of Struggling Medical Learners*

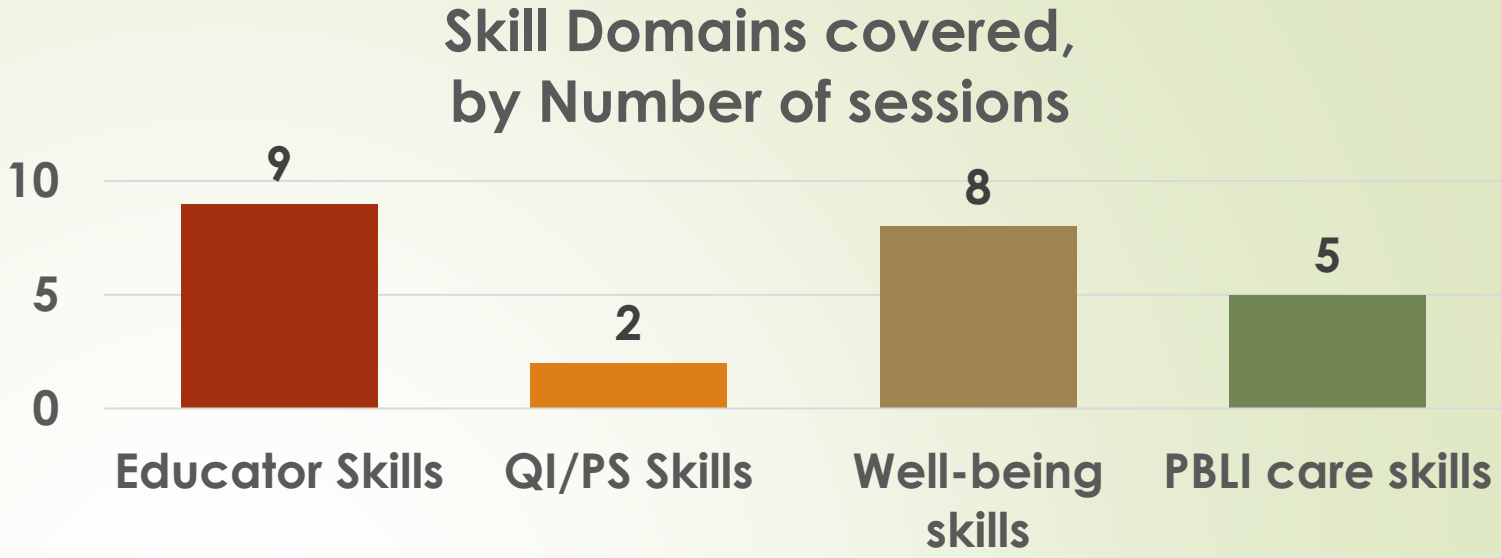
Speakers and Topics

		Educator Skills	QI/PS Skills	Well-being skills	PBLI care skills
September	• Medical School Admissions Strategies			x	
October	• Remediating The Struggling Medical Learner	x			x
November	• Assessments, Graded Quizzes, and Polls: Using Internet-based Polling to Improve Learner Engagement	x			
December	• How To Turn Your Teaching Activities Into Scholarship			x	
	• Leadership Attributes in Medical Educators			x	
January	• Key Differences Between QI and Research		x		
	• Teaching Diagnostic Accuracy *(2.5 hours)*				x
February	• How to Manage Generational Differences in the Classroom	x			
March	• Re-Imagining Your Course Content	x		x	
	• Remediation of the Struggling Medical Learner *(3.0 hours)*	x		x	x
	• Activate Your Lecture	x			
April	• Basics of Precepting: What you need to know to help a novice grow			x	
	• Incorporating Simulation into An Existing Curriculum	x		x	
May	• Effective Feedback in Clinical Education: How/When/Why	x		x	
	• Pearls of Managing a Hospital Pharmacy Residency Program		x		x
June	• TBL101 (Using Team-Based-Learning in Medical Education)	x			x

Results:

% who "Strongly Agree" that …
(N=95)

Attained objectives	**Relevant** to my Practice	**Will improve** my teaching
91%	**91%**	**85%**



Fall Semester (hrs):	Spring Semester (hrs):
5 Topics (5.0)	11 Topics (20.0)

Internal Speakers	External Facilitators	Honoraria paid
17	2	2

Topics	Contact Hours	Pre-Registered	Attended	Physician learners	non-Physician learners	Evaluated
16	20	309	210	131	79	95

POLL#8: In your opinion, which of the Revised 2019 CPR does the "C.E.L.L.S." program ***most effectively satisfy***?

- **A. Enhance faculty skills as educators** *[teaching, feedback and assessment skills] [CPR2019.II.B.2.g).1]*
- **B. Enhance Faculty Skills in quality improvement and patient safety** *[CPR2019.II.B.2.g).2]*
- **C. Enhance Faculty Skills in fostering their own and residents' well-being**; *[CPR2019.II.B.2.g).3]*
- **D. Enhance Faculty Skills in patient care based on their own practice-based learning and improvement efforts** *[CPR2019.II.B.2.g).4]*

Faculty Development Announcement

AHME Institute 2020 will feature:

Faculty Development Skills Academy, a specialized track for faculty who want to learn and polish their Faculty Development techniques:

- *Learn Train-the-trainer methods to take back to your institution!*
- *Design programs compliant with the 2019 ACGME revised criteria! [i.e. II.B.2.g.(1)-(4)]*
- *Network with your peers nationwide, while earning CME credit!*
- *Plus, get the full AHME experience in Ft. Lauderdale, including great plenaries, council meetings, and destination activities!*

- ***Four Target Domains to be covered in 2020:***
  1. *Effective Teaching Methods and Settings*
  2. *Meaningful Assessment and Feedback*
  3. *Cognitive Skills and Controversies*
  4. *Education theory and "heutagogical practice"*

We heard you:
More Target Domains are coming in 2021!

- ***We hope you can join us for Faculty Development in Fort Lauderdale, Florida: May 13-15, 2020!***
- ***Or, submit your own abstract by July 2, 2019 here →***

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