Annual Report on Resident Physician Education  
Academic Year 2009 – 2010

To the:  
- HealthPartners Institute for Medical Education Board of Directors  
- Regions Hospital Board of Directors  
- Regions Hospital Medical Executive Committee

IME Overview

HealthPartners Institute for Medical Education (IME) is a nationally accredited, non-profit organization providing medical education for health professionals and students: locally, regionally, and nationally. IME develops and produces clinical education that measurably improves care. It develops, organizes, directs and evaluates educational activities for nursing, allied health, medical student, resident and physician education, including the provision of specialized expertise in simulation, continuing medical education, and medical library services. Over 17,000 learners every year participate in IME educational activities. Four hundred and ninety three (493) resident physicians and 760 students participated in clinical rotations at Regions Hospital and HealthPartners Medical Group (HPMG) clinics.

Residency Education

The HealthPartners Institute for Medical Education (IME) sponsors residency programs accredited by the Accreditation Council for Graduate Medical Education (ACGME) in the following specialty areas: Emergency Medicine, Medical Toxicology, and Occupational Medicine. In cooperation with Hennepin County Medical Center (HCMC), IME jointly sponsors an ACGME accredited residency program in Psychiatry. IME also sponsors a Foot and Ankle Surgery residency program nationally accredited by the Council on Podiatric Medical Education.

In addition, IME sponsors non-ACGME residency and fellowship programs in: Hospitalist Medicine and Managed Care Pharmacy.
Regions Hospital and HealthPartners Medical Group Clinics are sites for resident physician experiences, under a master affiliation agreement with the University of Minnesota School of Medicine, in:

- Anesthesiology
- Family Medicine
- Gastroenterology
- Geriatric Medicine
- Hematology and Oncology
- Infectious Disease
- Internal Medicine
- Pulmonary Disease and Critical Care Medicine
- Rheumatology
- Dermatology
- Pediatrics
- Neurological Surgery
- Neurology
- Obstetrics and Gynecology
- Ophthalmology
- Ortho Hand Surgery
- Orthopedic Surgery
- Otolaryngology
- Pediatric Emergency Medicine
- Pediatric Gastroenterology
- Pediatrics
- Physical Medicine and Rehabilitation
- Radiology – Diagnostic
- Plastic Surgery
- Surgery
- Surgical Critical Care
- Breast Radiology

At any given time, there are approximately 145 resident physicians at Regions Hospital and HPMG clinic sites. These resident physicians are learning from recognized faculty members and providing patient care under faculty supervision.

The administration for the IME programs is provided by the Center for Undergraduate and Graduate Clinical Education; Eugenia Canaan, Director. This Center provides administrative support for all the medical student and resident activities within HealthPartners. The Center is responsible for the establishment and maintenance of affiliation agreements, accounting for resident activities for ACGME duty hours reporting and Medicare compliance, orientation, fiscal management of resident educational funds, development and implementation of policies affecting residents, liaison with other departments including Medical Staff Services, Best Care Best Experience and Regions Hospital Quality Improvement. The Center provides staff support for the Graduate Medical Education Committee (GMEC) which meets on a monthly basis.
Major Initiatives during the academic year 2009-2010

- Continued participation in Phase II of the Alliance of Independent Academic Medical Centers (AIAMC) National Initiative to improve patient care through resident engagement in quality improvement initiatives. Emergency Medicine and Psychiatry faculty and residents embarked upon a collaborative QI project to improve patient handoffs from the ED to Behavioral Health.

- Enhancement of the Resident Physician LEADER program by introducing an electronic bimonthly communiqué with pertinent references to articles or tips to improve the patient experience with care at Regions Hospital.

- Expansion of the Annual Core Competencies Conference to include residents from the University of Minnesota Internal Medicine residency program and faculty from Minneapolis Children's Hospital. The theme of the April, 2010 program was on Interpersonal Communication Skills and Professionalism. A unique addition to this year’s program was the use of Visual Thinking Strategies (VTS) facilitated by certified docents from the Minneapolis Institute of Arts. The special VTS session was designed to sharpen visual literacy skills and refine ways to read people and situations beyond the spoken word.

- IME launched “Black Box CME™” — a Live Theater Medical Education platform in collaboration with HealthPartners Hospital Medicine Division. This activity was featured in a presentation at the annual meeting of the Association Medical Colleges (AAMC) in Boston, Massachusetts.

- IME is now participating in the Visiting Student Application Service (VSAS); an application of the Association of American Medical Colleges (AAMC) designed to make it easier for medical students to apply for senior electives at U.S. LCME medical schools and independent academic medical centers. This service requires students to submit just one application for all institutions, effectively reducing paperwork, miscommunication, and time for students and staff.

- In October 2009, IME sponsored a 2-part faculty development retreat entitled “Discovery, Honoring and Developing the Leader Within.” Physician leaders from primary care, 11 specialties, and administration participated. Two national respected leaders in medical education, Drs. Paul Batalden and David Leach, served as the retreat facilitators, and guided the participants in utilizing the concepts of better care, better system performance and better professional development as a framework to improve health care.

- In the fall of 2009, IME registered its own chapter with the Institute for Healthcare Improvement (IHI) Open School with an Emergency Medicine resident as a “leader,” our GME Performance Improvement Manager as “faculty,” and the DIO as “dean.”
The Graduate Medical Education Committee (GMEC)

The Graduate Medical Education Committee (GMEC) meets monthly and is the principal forum for discussion of residency issues. Membership includes representatives from every residency program, the University of Minnesota Dean of Medical Education and the Regions Hospital Vice President for Medical Affairs.

The GMEC addresses many issues related to the residency programs including policies related to stipends, duty hours monitoring, resident supervision, communication with medical staff, program changes, curriculum and evaluation, resident status, oversight of program accreditation, management of institutional accreditation, and vendor interactions.

The IME residency programs were reviewed by the ACGME Institutional Review Committee (IRC) that site visited at Regions Hospital on March 16, 2010. IRC awarded IME continued accreditation with the next survey due in October 2014.

Topics discussed at the GMEC over the past academic year are arranged below under headings mandated by the ACGME.

**Resident supervision**

The philosophy of HealthPartners is that residents are primarily at our facilities to learn, and that service contributions are an integral and necessary part of learning, but not the driver for having residency programs. This philosophy has been reiterated many times at GMEC meetings and at 1:1 meetings between the DIO and the Residency Program Directors.

**Resident responsibilities**

Collaboration with Regions Hospital Patient Logistics on educating residents about discharge quality and timeliness has been a subject of discussion not only at the GMEC meetings but also at numerous faculty and leadership meetings.

Resident Research continues to receive IRB approval. There is an online resource which contains examples of how research projects should be done.

Residents participate in patient care, and are, in part, responsible for the patient experience of care in our facilities. A major effort was made to improve awareness of residents of their impact on the patient experience of care. The Resident Physician LEADER initiative, referenced earlier in this report, has garnered the attention of our peers in the Twin Cities medical education community such that other hospitals have requested our collaboration in developing a program modeled after ours.
**Resident evaluation**

The ACGME Core Competencies were discussed at many GMEC meetings, resulting in numerous ideas for interactive learning such that the topics are carrying forward into 2011. In addition to the Visual Thinking Strategies referenced earlier in this report, the 2010 conference included a workshop on Interpreters’ Observations on Medical Communication identifying cultural and language communication barriers and providing tips for improvement. A session on Difficult Conversations provided tools to understand the psychology of patients when going through life changing situations.

The May and July 2010 GMEC meetings included special presentations on the ACGME requirements for benchmarking and data measurement as a means of assessing resident education. Discussion included the use of 360 evaluations which have now been implemented by the Emergency Medicine residency program.

**Compliance with duty-hour standards**

The GME manager continues to provide quarterly printouts to the Residency Program Directors of their respective residents’ duty hours. No areas of non-compliance have been identified this past academic year.

The DIO has held private meetings with residents of both the Emergency Medicine and the Occupational Medicine programs in the absence of faculty to review the ACGME standards and to provide the residents with an opportunity to discuss their work and duty hours. These meetings have been well received by residents and faculty alike.

**Resident participation in patient safety and quality of care education**

Residents from Regions Hospital (Emergency Medicine, Occupational Medicine and Psychiatry) have all participated in several major programs to improve the quality and safety of patient care at Regions Hospital. Aside from the EM-Behavioral Health handoffs project referenced earlier in this report, residents have participated in such projects as: Falls Reduction Task Force, Medication Reconciliation Committee, Community Acquired Pneumonia (CAP) Core Measure Team, Acute Myocardial Infarction (AMI) Measures Team, and the Surgical Care Improvement Project (SCIP) Measures Team.

As referenced earlier in this report, an Emergency Medicine resident now serves as a leader in the IME Chapter of the Institute for Healthcare Improvement (IHI) Open School.

HealthPartners Clinical Simulation programs were used to improve resident skills and confidence with clinical procedures, including central line placement and “codes.”

The DIO and GME Performance Improvement Manager presented a workshop at the annual meeting of the Institute for Clinical Systems Improvement (ICSI) in April 2010.
**GME Dashboard**

The GME Dashboard contains pertinent details on the IME-sponsored residency programs including number of students, residents and active research projects.

### HealthPartners Institute for Medical Education
**GME Dashboard**

<table>
<thead>
<tr>
<th>Items/Department</th>
<th>Emergency Medicine</th>
<th>Foot &amp; Ankle Surgery</th>
<th>Medical Toxicology</th>
<th>Occupational Medicine</th>
<th>Psychiatry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accredited by</td>
<td>ACGME</td>
<td>CPME</td>
<td>ACGME</td>
<td>ACGME</td>
<td>ACGME</td>
</tr>
<tr>
<td>Current Accreditation Status</td>
<td>Full Accreditation</td>
<td>Full Accreditation</td>
<td>Full Accreditation</td>
<td>Full Accreditation</td>
<td>Full Accreditation</td>
</tr>
<tr>
<td># of Years Awarded at last review</td>
<td>5 years</td>
<td>5 years</td>
<td>5 years</td>
<td>3 years</td>
<td>5 years</td>
</tr>
<tr>
<td>Effective Date of Current Accreditation</td>
<td>February 13, 2009</td>
<td>June 7, 2007</td>
<td>July 1, 2007</td>
<td>March 17, 2010</td>
<td>October 13, 2006</td>
</tr>
<tr>
<td>Next Site Visit</td>
<td>February 2014</td>
<td>September 2012</td>
<td>February 2013</td>
<td>March-2013</td>
<td>October 2011</td>
</tr>
<tr>
<td>Next Internal Review Due</td>
<td>August 2011</td>
<td>NA</td>
<td>August 2010</td>
<td>Held Sept 2011</td>
<td>April 2014</td>
</tr>
<tr>
<td>Sponsor</td>
<td>HealthPartners</td>
<td>HealthPartners</td>
<td>HealthPartners</td>
<td>HealthPartners</td>
<td>HCMC/HealthPartners</td>
</tr>
<tr>
<td>Program Integrated with</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Major Participating Institutions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Length of Residency</td>
<td>3 years</td>
<td>3 years</td>
<td>2 years</td>
<td>2 years</td>
<td>4 years</td>
</tr>
<tr>
<td>Number of Residents (Approved/Filled)</td>
<td>30/27</td>
<td>3/3</td>
<td>2/2</td>
<td>8/7</td>
<td>28</td>
</tr>
<tr>
<td>Program Director</td>
<td>Felix Ankel, MD</td>
<td>Troy Boffeli, DPM</td>
<td>Andrew Topliff, MD</td>
<td>Jon O’Neal, MD, MPH</td>
<td>Amitabh Tipnis, MD</td>
</tr>
<tr>
<td>Associate Program Director</td>
<td>Rachel Dahms, MD</td>
<td>Cullen Hegarty, MD</td>
<td>Stephanie Taft, MD</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Carson Harris, MD</td>
<td>NA</td>
</tr>
<tr>
<td>Program Faculty (Physician/Non-Physician)</td>
<td>27</td>
<td>5</td>
<td>12</td>
<td>6</td>
<td>40</td>
</tr>
<tr>
<td>Medical Student Clerkship Director</td>
<td>Cullen Hegarty, MD</td>
<td>Ryan Pfannenstein, DPM</td>
<td></td>
<td>Robert Gorman, MD, MPH</td>
<td>Scott Oakman, MD</td>
</tr>
<tr>
<td># of students (month/year)</td>
<td>6/78</td>
<td>1-2/12</td>
<td>4/*31</td>
<td>0/2</td>
<td>10/120</td>
</tr>
<tr>
<td>Research Director</td>
<td>Bradley Gordon, MD</td>
<td>NA</td>
<td>Joel Holger, MD</td>
<td>Jeff Mandel, MD, MPH</td>
<td>Elizabeth Reeve, MD</td>
</tr>
<tr>
<td># of Current Research Projects</td>
<td>12</td>
<td>0</td>
<td>3</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
</table>

*Includes Medical, PharmD, and PA students/year*
Opportunities for 2010-2011

- Orthopaedics Hand Fellowship – By mutual agreement of the University of Minnesota and IME, a letter was submitted to the ACGME requesting transfer of the Orthopaedics Hand Fellowship over to Regions Hospital. The request has been approved and the transfer is effective July 1, 2010.

- Pediatrics Emergency Medicine Fellowship – The DIO has been invited by the medical leadership of Minneapolis Children's hospital to transfer the Pediatrics Emergency Medicine Fellowship from the University of Minnesota (UMN) to Regions Hospital. The ACGME approved the transfer of sponsorship from UMN to IME effective July 2011.

- Institute for Healthcare Improvement (IHI) Triple Aim – IME strives to align our education to the IHI Triple Aim. To that end, the 2011 Core Competencies Conference hopes to help residents and faculty connect with the communities they serve by providing an introduction to the history of immigration in Minnesota, touring ethnically diverse neighborhoods followed by a culturally pertinent theater production. The conference will wrap up with a presentation by a medical anthropologist who will address the question of “Why is this relevant to the patients we serve and how does this change our practice of medicine?”

- Regions Hospital Center for Undergraduate & Graduate Clinical Education is going green with a paperless “on-boarding” system. Effective July 2010, we are streamlining the new resident orientation for University of Minnesota residents rotating at Regions Hospital by providing all the requisite forms electronically via the Residency Management Suite (RMS). By July 2011, the process will be further refined by centralizing on a "IME/GME Orientation" website.

- The DIO and senior leadership of HealthPartners and Regions Hospital are actively engaged in strategic planning conversations with the MMCGME and the University of Minnesota to improve the management of medical education Twin City wide.

Respectfully submitted:

Carl A. Patow, MD, MPH, MBA, FACS
Executive Director
HealthPartners Institute for Medical Education

Associate Dean for Faculty Affairs at HealthPartners
University of Minnesota School of Medicine
This report is prepared and presented in compliance with the ACGME institutional requirement:

“The DIO and/or the Chair of the GMEC must present an annual report to the Organized Medical Staff(s) (OMS) and the governing body(s) of the Sponsoring Institution. This report must also be given to the OMS and governing body of major participating sites that do not sponsor GME programs. This annual report will review the activities of the GMEC during the past year with attention to, at a minimum, resident supervision, resident responsibilities, resident evaluation, compliance with duty-hour standards, and resident participation in patient safety and quality of care education.”