Specialized Tracks: Areas of Distinction within Residency Training

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Disclosure of Financial Relationships

- I have no relationships with any entity producing, marketing, reselling or distributing health care goods or services consumed by, or used on, patients
Objectives

- Provide examples of specialized tracks within a residency program
- Discuss processes for development of specialized tracks
- Describe how tracks can be used to strengthen a particular area throughout the entire program
Why Develop Specialized Tracks in Residency?

• Address gaps in GME education
• Assist in meeting ACGME guidelines/requirements
• Return on investment – organized around topics of quality improvement, health outcomes,
• Increase competitiveness of a GME program
Specialized Tracks at UConn

- Clinician Educator
- Primary Care Focus
- Office-Based Medicine
- Healthcare Equity
- Clinical Research
Pathways/Tracks/Areas of Distinction at other programs…

• HIV Medicine  
• Global Health  
• Hospital Medicine  
• Leadership  
• Quality Improvement  

• Rural Medicine  
• Women’s Health  
• Advocacy
Clinician Educator Track

**PGY1**
- Selected readings
  - Theory and Practice of Teaching Medicine
  - Methods for Teaching Medicine
  - Feedback and Evaluation
- Facilitated discussion group to review each reading assignment

**PGY2**
- Health Professions Education Course
- Design/begin educational research project

**PGY3**
- Complete educational research project
- Clinical skills lab instructor
- Physical diagnosis teaching
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General Approach

• Identify area of interest/need
• Assess available resources (and network!)
• Champion!
Clinician Educator Track

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Readings/Discussion

- We used easily available resources
  - ACP Teaching Medicine Series
  - AAIM/APDIM Toolkits for Program Directors, Chief Residents
Clinician Educator Track: Options

Don’t have this?
• Graduate Education Course
• Educational research project
• Clinical skills lab instructor
• Physical diagnosis teaching

Try this…
• Bring in affiliated faculty
• Make their required QI an education-based project
• Put them where students are; or focus on peer teaching
What are some anticipated barriers that can impact implementation?

• Acquiring the needed resources
• Time in the curriculum
• Faculty time/expertise/interest
• $
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Clinical Learning Environment Review (CLER)

“... to provide graduate medical education (GME) leaders and executive leaders of hospitals, medical centers, and other clinical settings with formative feedback aimed at improving patient care while optimizing the clinical learning environment...” focusing on:

- Patient Safety
- Care transitions
- Supervision
- Professionalism
- Health care quality (including health care disparities)
- Fatigue management, mitigation, and duty hours
Healthcare Disparities Track

Goals

• To increase knowledge about social determinants of health and disparities in health care and explore attitudes and behaviors that promote and/or mitigate disparities

• To engage in scholarship related to healthcare disparities

• To learn the relationship of health policy and community health delivery and explore opportunities to engage in health advocacy
Healthcare Disparities Track
PGY-1 Activities

• Complete IHI Open School Courses:
  – PFC 101 – Introduction to Patient-Centered Care
  – TA 101 – Introduction to the Triple Aim for Populations
  – TA 102 – Improving Health Equity

• Quarterly mentorship meetings

• Start Certificate on Social Determinants of Health and Disparities (CSDH&D) [spring]
Healthcare Disparities Track
PGY-2 Activities

- Continue CSDH&D Program [fall & spring]
- Longitudinal experience with community partner (second continuity clinic)
- Local activities (Health Disparities Institute, e.g.)
- Mentorship meetings
- Develop QI project
Healthcare Disparities Track
PGY-3 Activities

• Complete CSDH&D Program [fall]
• Longitudinal experience with community partner (second continuity clinic)
• Advocacy activities (Connecticut Health Foundation/CT ACP/National Physicians Alliance)
• Mentorship meetings
• Teach/precept in Vertically Integrated Teams Aligned in Learning and Scholarship (VITALS) course (??)
• Complete/present QI work; present at Grand Rounds
What are the benefits of developing and implementing a specialty track?

• Recruitment Tool
• Resident perception of program’s flexibility
• Trickle-down effect
How can you measure success of your program? What are metrics/outcomes that can be used for evaluation?

Examples

• # of graduates who focus on care of underserved
• # of graduates who go into academic medicine
• # of graduates who become clinician scientists
• Recruitment impact
Thank you!

• If you have questions or are looking for resources, let me know:

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