ENGAGING EACH OTHER:
Rediscovering Meaning in Medicine

March 7-10, 2019 | Rosen Shingle Creek, Orlando, Florida
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2019 ACGME Annual Educational Conference

Conference Overview

This year’s ACGME Annual Educational Conference will be held at Rosen Shingle Creek in Orlando, Florida. Our Welcoming Poster Reception and Exhibitor Kick-off will take place Thursday, March 7 at 5:30 p.m. The conference runs until Sunday, March 10.

Conference registration opens in early November. Only online registration is available; faxed or mail-in registrations are not accepted. Registration for sessions is done on a first-come, first-served basis, so be sure to register early!

Early Bird Registration at a reduced rate ends January 4, 2019. The registration deadline is February 8, 2019. On-site registration will be available.

Conference Highlights

PRE-CONFERENCES (MARCH 7, 2019)

• Introductory Course for New Program Directors
• ACGME/AOGME Pre-Conference for Osteopathic Programs and Institutions
• DIO 101: The Basics of Institutional Accreditation
• DIO 102: Improvement and Innovation in the Sponsoring Institution
• Back to Bedside (Closed, by Invitation Only)*
• Coordinator Forum: Inspiration, Ideation, Impact*

EDUCATIONAL CONFERENCE (MARCH 8-10, 2019)

• Over 140 forward-thinking sessions
• Over 50 posters displaying educational research
• Notable speakers in the GME and broad medical community
• ACGME Initiatives
• Educational Exhibit Hall
• Interactive Mini Courses

CME INFORMATION

The Accreditation Council for Graduate Medical Education (ACGME) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The ACGME designates the “2019 ACGME Annual Educational Conference, Engaging Each Other: Rediscovering Meaning in Medicine” as a live educational activity. AMA PRA Category 1 Credits™ will be included on the conference mobile app. Physicians should claim only the credits commensurate with the extent of their participation in the activity.

AMERICAN ACADEMY OF FAMILY PHYSICIANS (AAFP) PRESCRIBED CREDIT INFORMATION

Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending.

*This session does not qualify for CME.
Vice Admiral Vivek H. Murthy (@vivek_murthy) served as the 19th Surgeon General of the United States from 2014-2017. As Surgeon General, Dr. Murthy commanded the US Public Health Service Commissioned Corps, a uniformed service of 6,600 public health officers serving vulnerable populations in 800 locations domestically and abroad. During his tenure, he helped address critical public health issues, including the Ebola outbreak, the Zika virus, low rates of physical activity, and the explosion in e-cigarette use among youth. In 2016, he launched the TurnTheTideRx campaign to combat the opioid epidemic. Dr. Murthy also issued the first Surgeon General’s report on Alcohol, Drugs, and Health to mobilize the nation to address its addiction crisis, and the first report on e-cigarettes and youth.

Dr. Murthy has called emotional well-being one of the most important and most underappreciated drivers of health. In particular, he has drawn attention to the profound impact that loneliness and social disconnection have on health, productivity, and education.

Dr. Murthy received his bachelor’s degree from Harvard University and his MD and MBA degrees from Yale University. He completed his residency at Brigham and Women’s Hospital and Harvard Medical School, where he later joined the faculty as an internal medicine physician and instructor. As a clinician-educator, Dr. Murthy has cared for thousands of patients and trained hundreds of residents and medical students.

In addition to clinical practice, Dr. Murthy has dedicated himself to improving health through the lens of service, research, and entrepreneurship. He co-founded VISIONS, an HIV/AIDS education program in India and the US, and the Swasthya project (“health and wellbeing” in Sanskrit), a community health partnership in rural India that trained women to be health providers and educators. As a research scientist, Dr. Murthy conducted laboratory research on vaccine development and studied the participation of women and minorities in clinical trials. He also co-founded TrialNetworks, a software technology company that accelerates collaboration in clinical trials.
# Agenda

## WEDNESDAY, MARCH 6

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<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>5:30 p.m. – 8:00 p.m.</td>
<td>Conference Registration</td>
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</table>

## THURSDAY, MARCH 7

### PRE-CONFERENCES

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<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>6:30 a.m. – 8:30 p.m.</td>
<td>Conference Registration</td>
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<tr>
<td>8:00 a.m. – 5:00 p.m.</td>
<td>PC001 Introductory Course for New Program Directors</td>
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<tr>
<td>8:00 a.m. – 4:15 p.m.</td>
<td>PC002 ACGME/AOGME Pre-Conference for Osteopathic Programs and Institutions</td>
</tr>
<tr>
<td>8:00 a.m. – 11:45 a.m.</td>
<td>PC003 DIO 101: Basics of Institutional Accreditation</td>
</tr>
<tr>
<td>11:45 a.m. – 4:45 p.m.</td>
<td>PC004 DIO 102: Improvement and Innovation in the Sponsoring Institution</td>
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<tr>
<td>12:15 p.m. – 5:30 p.m.</td>
<td>PC005 Back to Bedside (Closed, by Invitation Only)*</td>
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<tr>
<td>8:30 a.m. – 5:15 p.m.</td>
<td>PC006 Coordinator Forum: Inspiration, Ideation, Impact*</td>
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<tr>
<td>5:30 p.m. – 8:30 p.m.</td>
<td>Welcoming Poster Reception and Exhibitor Kick-off</td>
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## FRIDAY, MARCH 8

### EDUCATIONAL CONFERENCE

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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>6:30 a.m. – 8:00 a.m.</td>
<td>Continental Breakfast</td>
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<tr>
<td>6:30 a.m. – 5:00 p.m.</td>
<td>Conference Registration</td>
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<tr>
<td>8:00 a.m. – 8:30 a.m.</td>
<td>Welcome and Opening Remarks</td>
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<td>8:30 a.m. – 9:30 a.m.</td>
<td>NAM Action Collaborative on Clinician Well-Being and Resilience: Perspectives from the Leaders</td>
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<tr>
<td>9:45 a.m. – 5:00 p.m.</td>
<td>ACGME Data Collection Systems Consultations*</td>
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<tr>
<td>9:30 a.m. – 10:00 a.m.</td>
<td>Break (Visit Exhibit Hall and Posters)</td>
</tr>
<tr>
<td>10:00 a.m. – 11:30 a.m.</td>
<td>SES001 Using Public Data to Follow GME Graduates in Clinical Practice</td>
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<td>SES002 Addressing the Opioid Epidemic: The Responsibility of Physicians</td>
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<td>SES003 NIDDK Initiatives to Eliminate Health Disparities and Train a Diverse Workforce</td>
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<tr>
<td>11:30 a.m. – 1:30 p.m.</td>
<td>Lunch</td>
</tr>
<tr>
<td>1:30 p.m. – 2:15 p.m.</td>
<td>SES004 Institutional Accreditation Update</td>
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<tr>
<td>1:30 p.m. – 3:00 p.m.</td>
<td>SES005 Specialty Update: Internal Medicine</td>
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<td>SES006 Specialty Update: Pediatrics</td>
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<td>SES007 Specialty Update: Emergency Medicine</td>
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<td>SES008 Specialty Update: Psychiatry</td>
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**SES = Session**  **BR = Breakout Session**  **PC = Pre-conference**  **CP = Coordinator Forum Plenary**  
*This session does not qualify for CME.*
## Agenda

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<td>SES009 Specialty Update: Surgery</td>
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<td>3:00 p.m. – 3:30 p.m.</td>
<td>SES010 Specialty Update: Neurological Surgery</td>
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<td>3:30 p.m. – 4:15 p.m.</td>
<td>SES011 Specialty Update: Osteopathic Neuromusculoskeletal Medicine</td>
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<td>3:30 p.m. – 5:00 p.m.</td>
<td>SES012 Specialty Update: Radiation Oncology</td>
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<td>SES013 Specialty Update: Ophthalmology</td>
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<td>SES014 Specialty Update: Dermatology</td>
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<td>SES015 Milestones Update: Lessons Learned, Research Findings, and the Milestones 2.0 Journey</td>
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<td>SES016 Burnout and Depression among Residents: An Update on the Evidence</td>
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<td>SES017 A Life Lost Every Nine Minutes: How GME Can Help Solve the Opioid Crisis</td>
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<td>SES018 COMLEX-USA Use by Program Directors as Part of a Comprehensive Assessment System</td>
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<td>SES019 Illuminating the Closet: Mentoring and Advising LGBT Learners</td>
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<td>SES020 Tackling Professionalism Issues in Residency Training</td>
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<td>SES021 Well-Being Programs: Achieving a Sunshine State</td>
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<td>SES022 Behind the Scenes: Your Paper from Submission to Publication</td>
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<td>SES023 Longitudinal Assessment: Roles in Continuing Certification and Graduate Medical Education</td>
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<td>SES024 IMG Trainees: How Program Directors Can Support their Experiences and Success</td>
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<td>SES025 Partner with Purpose – How Small Programs Can Expand Training Site Options</td>
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<td>SES026 A Research Agenda in Health Disparities for GME</td>
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<td>SES027 Process Improvement of GME QI Curriculum: Leveraging the GME, MOC, and CME Connections</td>
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<td>SES028 Gamification: A Teaching Tool to Engage Adult Learners</td>
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<td>SES029 I Suspect Physician Impairment, What Should I Do?</td>
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<td>SES030 The Science of Effective Mentoring in Medical Education: Does the Style Matter?</td>
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<td>SES031 Mistreatment in GME: See One, Do One, Teach One?!</td>
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<td>2:15 p.m. – 3:00 p.m.</td>
<td>SES032 CLER Program Updates</td>
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<td>3:00 p.m. – 3:30 p.m.</td>
<td>Break</td>
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<td>3:30 p.m. – 4:15 p.m.</td>
<td>SES033 Sponsoring Institution 2025</td>
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<td>3:30 p.m. – 5:00 p.m.</td>
<td>SES034 Specialty Update: Physical Medicine and Rehabilitation</td>
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<td>SES038</td>
<td>Specialty Update: Orthopaedic Surgery</td>
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<td>SES039</td>
<td>Specialty Update: Urology</td>
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<td>SES040</td>
<td>Specialty Update: Anesthesiology</td>
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<td>SES041</td>
<td>Specialty Update: Pathology</td>
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<td>SES042</td>
<td>Specialty Update: Family Medicine</td>
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<td>SES043</td>
<td>Specialty Update: Preventive Medicine</td>
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<td>SES044</td>
<td>ABMS: The Future of Continuing Certification</td>
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<td>SES045</td>
<td>JGME Favorite Papers from 2018: Strategies for Curating the Medical Education Literature</td>
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<td>SES046</td>
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<td>SES047</td>
<td>Wellness in GME: The Florida Experience</td>
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<td>SES048</td>
<td>Creation of ACGME Survey Scorecards to Drive Program and Institutional Improvement</td>
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<td>SES049</td>
<td>ACGME Scenario Planning: New Project, New Insights from 2050</td>
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<td>SES050</td>
<td>Developmental Education Models: Facilitating the Professional Development of Learners</td>
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<td>SES051</td>
<td>Clinical Integrity and Ethics Education: A Framework for Teaching Ethics</td>
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<td>SES052</td>
<td>Entrustable Professional Activities for General Surgery: A Pilot Program of the ABS</td>
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<td>SES053</td>
<td>One Size Does Not Fit All: Creating an LGBTQ-Inclusive Curriculum and Clinical Environment</td>
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<td>SES054</td>
<td>Gold, Engagement, and Data – Challenges in the Safety and Quality Journey</td>
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<td>SES055</td>
<td>Helping Residents RISE: Adapting a Peer Responder Program to Meet Trainee Resiliency Needs</td>
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<td>SES056</td>
<td>Conducting the Self-Study in Residency: An Organizational Performance Model Approach</td>
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<td>SES057</td>
<td>No Intern Left Behind: Designing a Boot Camp around the Milestones</td>
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<td>SES058</td>
<td>Resident Training in Social Determinants of Health: Innovations for Program Leadership</td>
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<td>SES059</td>
<td>Beyond Collaboration: Real-Time Integration with the C-Suite Using CLER, ACGME, and GME Data</td>
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<td>SES060</td>
<td>Reducing Waste and Enhancing Meaning in the Learning and Working Environment</td>
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<td>4:15 p.m. – 5:00 p.m.</td>
<td>SES061  ACGME Accreditation and Medically Underserved Areas and Populations</td>
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<td>5:15 p.m. – 6:30 p.m.</td>
<td>Successful Practices for Engaging Residents and Fellows in Patient Safety</td>
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### SATURDAY, MARCH 9

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<tr>
<td>6:30 a.m. – 8:00 a.m.</td>
<td>Continental Breakfast</td>
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<tr>
<td>6:30 a.m. – 3:00 p.m.</td>
<td>Conference Registration</td>
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<tr>
<td>8:00 a.m. – 5:00 p.m.</td>
<td>ACGME Data Collection Systems Consultations*</td>
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<tr>
<td>7:00 a.m. – 10:00 a.m.</td>
<td>MINI COURSES (limited to 100 participants)</td>
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<tr>
<td>SES062</td>
<td>Co-production: A Core Professional Development Strategy for Learners and Programs*</td>
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<tr>
<td>SES063</td>
<td>Remediation of the Struggling GME Learner Part 1: Individualized Remediation Plans</td>
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<tr>
<td>SES064</td>
<td>Integrating Technology into Teaching: From the Big Auditorium to the Bedside</td>
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<td>SES065</td>
<td>Promoting Resident and Faculty Well-Being</td>
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<tr>
<td>SES066</td>
<td>Diversity and Inclusion in GME – Realities, Challenges, and Solutions</td>
</tr>
<tr>
<td>7:30 a.m. – 9:00 a.m.</td>
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<tr>
<td>SES067</td>
<td>Coordinator Plenary: Building Strong Relationships between the GME Office and Programs*</td>
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<td>SES068</td>
<td>Review Committee-International Update</td>
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<td>SES069</td>
<td>Site Visit Confidential: Behind the Scenes at Different Accreditation Site Visits</td>
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<td>SES070</td>
<td>Household-Centered Care: Linking Resident Training, Community Benefit, and Population Health</td>
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<td>SES071</td>
<td>Town Hall – Surgical Accreditation</td>
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<td>SES072</td>
<td>What is Happening to the IMG Applicant Pool? Some Observations and Predictions</td>
</tr>
<tr>
<td>SES073</td>
<td>Single GME Accreditation System Update</td>
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<td>SES074</td>
<td>Career Skills Beyond the Competencies: Career Planning, Business, and Leadership</td>
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<td>SES075</td>
<td>CLER Ideas Exchange (limited to 50 participants)</td>
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<tr>
<td>SES076</td>
<td>Interprofessional Collaboration: Essential to Clinical Learning Environments of the Future</td>
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<tr>
<td>SES077</td>
<td>Enhancing the Learning Environment through Root Cause Analysis Briefing and Debriefing</td>
</tr>
<tr>
<td>SES078</td>
<td>Keep Calm and Carry On: How to Effectively Manage a Crisis</td>
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<tr>
<td>SES079</td>
<td>Discrimination, Bullying, Harassment, and Sexual Harassment: Lessons Learned and Next Steps</td>
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*This session does not qualify for CME.*

REGISTER ONLINE AT WWW.ACGME.ORG BY FRIDAY, FEBRUARY 8, 2019  •  FOLLOW US @ACGME AND #ACGME2019
## Agenda

### SATURDAY, MARCH 9

| SES080 | Learning to LEAD: Building Leadership and Scholarship Capacity in Diversity and Inclusion |
| SES081 | The Challenges of Creating and Maintaining a Graduate Medical Education Program |
| SES082 | Putting Innovative Simulation Methods into Action for Communication Skills Training |
| SES083 | The Changing Physician Expectations for Certification from an Osteopathic Perspective |
| SES084 | Better Patient Care is the Outcome: Diversity, Equity, and Inclusion at Kaiser Permanente |

9:00 a.m. – 9:15 a.m.

**Break**

9:15 a.m. – 10:15 a.m.

**SES085** President’s Plenary

10:30 a.m. – 12:00 p.m.

**SES086** Marvin R. Dunn Keynote Address: Rediscovering Meaning in Medicine

12:00 p.m. – 1:30 p.m.

**Lunch**

1:30 p.m. – 4:30 p.m.

**MINI COURSES** (limited to 100 participants)

| SES087 | Polarity Thinking: An Effective Approach to Solving Challenges in Programmatic Assessment |
| SES088 | Remediation of the Struggling GME Learner Part 2: Programmatic Considerations |
| SES089 | The Humanism Project: Designing a Communication Skills and Professionalism Curriculum |
| SES090 | Going Beyond Green, Yellow, Red to Visualizing Data Trends to Assess GME Programs |

1:30 p.m. – 2:15 p.m.

**SES091** Planning for your First CLER Experience

1:30 p.m. – 3:00 p.m.

**SES092** ACGME Resident Wellness Data: Results from Five Years of Surveys

**SES093** Physician Migration and GME

**SES094** Target 2025: Interprofessional Clinical Learning Environments for Team-Based Care

**SES095** Distinction and Recognition: What you Need to Know About Osteopathic UME and GME

1:30 p.m. – 3:00 p.m.

**SES096** Making the ACGME Resident Survey a Catalyst for Program Improvement: Resident Voices Heard

**SES097** Does a Wellness Curriculum Impact Resident Burnout and Medical Knowledge?

**SES098** Transforming Interprofessional Quality Improvement: What’s your Best Practice?

**SES099** Developing Residents as Leaders for Transformational Change

1:30 p.m. – 3:00 p.m.

**SES100** Improving your Graduate Medical Education Committee

**SES101** True Stories about Physicians’ Struggles with Mental Illness and Strategies for Recovery

**SES102** Remediating without Shaming: Addressing Unprofessional Behaviors without Inducing Shame
Agenda

SATURDAY, MARCH 9

SES103 Defining a Structured Program of Assessment for Clinical Competency Committees

SES104 Safety Takes Culture Change: Lessons Learned from Implementing a Standardized Hand-Off

SES105 Aligning Medical Education and Health Systems

SES106 Ready, Set, Action! Utilizing Quality Improvement Tools to Plan Program Improvements

SES107 Dynamic Design: Applying Design Thinking to Catalyze Creativity and Innovation

SES108 Engaging Residents in Real-World Quality Work: Leveraging Interprofessional Learning

SES109 Connecting the Annual Program Evaluation, the Self-Study, and the 10-Year Site Visit

SES110 Specialty Update: Nuclear Medicine

SES111 Specialty Update: Colon and Rectal Surgery

SES112 Specialty Update: Obstetrics and Gynecology

SES113 Specialty Update: Thoracic Surgery

SES114 Specialty Update: Medical Genetics and Genomics

SES115 Specialty Update: Transitional Year

SES116 CLER Special Topics: Interprofessional Education and Team-Based Care in the CLE (limited to 12 participants)

SES117 CLER Special Topics: Continuously Engaging Senior Leadership After your CLER Visit (limited to 12 participants)

SES118 CLER Special Topics: Assessing and Monitoring in the Context of the CLER Report (limited to 12 participants)

SES119 CLER Special Topic: Systematic and Comprehensive Approach in the Context of the CLER Report (limited to 12 participants)

2:15 p.m. – 3:00 p.m.

SES120 The CLER Program: Insights for Program Coordinators*

3:00 p.m. – 3:30 p.m.

Break

3:30 p.m. – 5:00 p.m.

SES121 Update: Osteopathic Recognition

SES122 Specialty Update: Allergy and Immunology

SES123 Specialty Update: Otolaryngology - Head and Neck Surgery

SES124 Town Hall – Institutional Accreditation

SES125 A World of Good: “Best Practices” of Our International Colleagues

SES126 A Roadmap to Improve Gender Equity in International Academic Medicine

*This session does not qualify for CME.
## Agenda

### SATURDAY, MARCH 9

| SES127 | Due Process Challenges for the GME Leader: “Lay your Burden Down” |
| SES128 | SMART Goals and PDSA: Combining Simple, Practical Tools for Program Improvement |
| SES129 | GME Program Dashboard Creation, Implementation, and Utility as a Predictive Measure |
| SES130 | A Multi-Modal Approach to Teaching the Value in Patient Experience |
| SES131 | Implicit Bias: Conscientious Interventions to Tackle the Elephant in the Room |
| SES132 | Leveraging Interprofessional Education to Improve Mental Health in Chronic Pain Treatment |
| SES133 | Integrating a Learning Management System into your Milestones Assessment |
| SES134 | When and How to Withdraw “Life Support” – When Remediation of a Learner Fails |
| SES135 | Mentoring in the #HeForShe #MeToo Era |
| SES136 | Advising the Resident Parent: Navigating the Abyss of Policy and Work-Life Integration |
| SES137 | Teaching Shame Resilience to Residents to Combat Burnout |
| SES138 | The Other Side of the Coin: Preparing Learners to Receive Feedback |
| SES139 | New Program Director Skills Lab: from Theory to Practice |
| SES140 | Educating to Eliminate Gender and Orientation Health Disparities |

### SUNDAY, MARCH 10

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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</thead>
<tbody>
<tr>
<td>7:00 a.m. – 8:15 a.m.</td>
<td>Continental Breakfast</td>
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<tr>
<td>8:30 a.m. – 10:00 a.m.</td>
<td>SES141 Conversations with the CEO</td>
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</tbody>
</table>
Conference Learning Tracks

The following are recommended sessions for:

1. Program and Institutional Coordinators
2. Program Directors and Faculty
3. Institutional and GME Personnel

All attendees registered for the educational conference are welcome to attend any session. Attendees are encouraged to attend their Specialty Update session.

Sessions Applicable to All of the Above Groups:

<table>
<thead>
<tr>
<th>Session Code</th>
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<td>PC002</td>
<td>ACGME/AOGME Pre-Conference for Osteopathic Programs and Institutions</td>
</tr>
<tr>
<td>SES001</td>
<td>Using Public Data to Follow GME Graduates into Clinical Practice</td>
</tr>
<tr>
<td>SES002</td>
<td>Addressing the Opioid Epidemic: The Responsibility of Physicians</td>
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<tr>
<td>SES003</td>
<td>NIDDK Initiatives to Eliminate Health Disparities and Train a Diverse Workforce</td>
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<tr>
<td>SES004</td>
<td>Institutional Accreditation Update</td>
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<tr>
<td>SES015</td>
<td>Milestones Update: Lessons Learned, Research Findings, and the Milestones 2.0 Journey</td>
</tr>
<tr>
<td>SES016</td>
<td>Burnout and Depression among Residents: An Update on the Evidence</td>
</tr>
<tr>
<td>SES018</td>
<td>COMLEX-USA Use by Program Directors as Part of a Comprehensive Assessment System</td>
</tr>
<tr>
<td>SES019</td>
<td>Illuminating the Closet: Mentoring and Advising LGBT Learners</td>
</tr>
<tr>
<td>SES021</td>
<td>Well-Being Programs: Achieving a Sunshine State</td>
</tr>
<tr>
<td>SES023</td>
<td>Longitudinal Assessment: Roles in Continuing Certification and Graduate Medical Education</td>
</tr>
<tr>
<td>SES024</td>
<td>IMG Trainees: How Program Directors Can Support their Experiences and Success</td>
</tr>
<tr>
<td>SES025</td>
<td>Partner with Purpose – How Small Programs Can Expand Training Site Options</td>
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<td>SES026</td>
<td>A Research Agenda in Health Disparities for GME</td>
</tr>
<tr>
<td>SES027</td>
<td>Process Improvement of GME QI Curriculum: Leveraging the GME, MOC, and CME Connections</td>
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<tr>
<td>SES029</td>
<td>I Suspect Physician Impairment, What Should I Do?</td>
</tr>
<tr>
<td>SES030</td>
<td>The Science of Effective Mentoring in Medical Education: Does the Style Matter?</td>
</tr>
<tr>
<td>SES031</td>
<td>Mistreatment in GME: See One, Do One, Teach One?!</td>
</tr>
<tr>
<td>SES032</td>
<td>CLER Program Updates</td>
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<tr>
<td>SES033</td>
<td>Sponsoring Institution 2025</td>
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<tr>
<td>SES047</td>
<td>Wellness in GME: The Florida Experience</td>
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<tr>
<td>SES048</td>
<td>Creation of ACGME Survey Scorecards to Drive Program and Institutional Improvement</td>
</tr>
<tr>
<td>SES049</td>
<td>ACGME Scenario Planning: New Project, New Insights from 2050</td>
</tr>
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<td>SES050</td>
<td>Developmental Education Models: Facilitating the Professional Development of Learners</td>
</tr>
<tr>
<td>SES052</td>
<td>Entrustable Professional Activities for General Surgery: A Pilot Program of the ABS</td>
</tr>
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<td>One Size Does Not Fit All: Creating an LGBTQ-Inclusive Curriculum and Clinical Environment</td>
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<tr>
<td>SES054</td>
<td>Gold, Engagement, and Data – Challenges in the Safety and Quality Journey</td>
</tr>
<tr>
<td>SES055</td>
<td>Helping Residents RISE: Adapting a Peer Responder Program to Meet Trainee Resiliency Needs</td>
</tr>
<tr>
<td>SES056</td>
<td>Conducting the Self-Study in Residency: An Organizational Performance Model Approach</td>
</tr>
<tr>
<td>SES058</td>
<td>Resident Training in Social Determinants of Health: Innovations for Program Leadership</td>
</tr>
<tr>
<td>SES060</td>
<td>Reducing Waste and Enhancing Meaning in the Learning and Working Environment</td>
</tr>
<tr>
<td>SES061</td>
<td>ACGME Accreditation and Medically Underserved Areas and Populations</td>
</tr>
<tr>
<td>SES062</td>
<td>Co-production: A Core Professional Development Strategy for Learners and Programs</td>
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<tr>
<td>SES063</td>
<td>Remediation of the Struggling GME Learner Part 1: Individualized Remediation Plans</td>
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## Conference Learning Tracks

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<td>Promoting Resident and Faculty Well-Being</td>
</tr>
<tr>
<td>SES066</td>
<td>Diversity and Inclusion in GME – Realities, Challenges, and Solutions</td>
</tr>
<tr>
<td>SES068</td>
<td>Review Committees-International Update</td>
</tr>
<tr>
<td>SES069</td>
<td>Site Visit Confidential: Behind the Scenes at Different Accreditation Site Visits</td>
</tr>
<tr>
<td>SES070</td>
<td>Household-Centered Care: Linking Resident Training, Community Benefit, and Population Health</td>
</tr>
<tr>
<td>SES071</td>
<td>Town Hall – Surgical Accreditation</td>
</tr>
<tr>
<td>SES073</td>
<td>Single GME Accreditation System Update</td>
</tr>
<tr>
<td>SES074</td>
<td>Career Skills Beyond the Competencies: Career Planning, Business, and Leadership</td>
</tr>
<tr>
<td>SES075</td>
<td>CLER Ideas Exchange</td>
</tr>
<tr>
<td>SES077</td>
<td>Enhancing the Learning Environment through Root Cause Analysis Briefing and Debriefing</td>
</tr>
<tr>
<td>SES078</td>
<td>Keep Calm and Carry On: How to Effectively Manage a Crisis</td>
</tr>
<tr>
<td>SES079</td>
<td>Discrimination, Bullying, Harassment, and Sexual Harassment: Lessons Learned and Next Steps</td>
</tr>
<tr>
<td>SES080</td>
<td>Learning to LEAD: Building Leadership and Scholarship Capacity in Diversity and Inclusion</td>
</tr>
<tr>
<td>SES081</td>
<td>The Challenges of Creating and Maintaining a Graduate Medical Education Program</td>
</tr>
<tr>
<td>SES082</td>
<td>Putting Innovative Simulation Methods into Action for Communication Skills Training</td>
</tr>
<tr>
<td>SES083</td>
<td>The Changing Physician Expectations for Certification from an Osteopathic Perspective</td>
</tr>
<tr>
<td>SES084</td>
<td>Better Patient Care is the Outcome: Diversity, Equity, and Inclusion at Kaiser Permanente</td>
</tr>
<tr>
<td>SES085</td>
<td>President’s Plenary</td>
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<tr>
<td>SES086</td>
<td>Marvin R. Dunn Keynote Address: Rediscovering Meaning in Medicine</td>
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<tr>
<td>SES087</td>
<td>Polarity Thinking: An Effective Approach to Solving Challenges in Programmatic Assessment</td>
</tr>
<tr>
<td>SES088</td>
<td>Remediation of the Struggling GME Learner Part 2: Programmatic Considerations</td>
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<tr>
<td>SES089</td>
<td>The Humanism Project: Designing a Communication Skills and Professionalism Curriculum</td>
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<tr>
<td>SES090</td>
<td>Going Beyond Green, Yellow, Red to Visualizing Data Trends to Assess GME Programs</td>
</tr>
<tr>
<td>SES092</td>
<td>ACGME Resident Wellness Data: Results from Five Years of Surveys</td>
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<tr>
<td>SES094</td>
<td>Target 2025: Interprofessional Clinical Learning Environments for Team-Based Care</td>
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<tr>
<td>SES095</td>
<td>Distinction and Recognition: What you Need to Know about Osteopathic UME and GME</td>
</tr>
<tr>
<td>SES096</td>
<td>Making the ACGME Resident Survey a Catalyst for Program Improvement: Resident Voices Heard</td>
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<tr>
<td>SES098</td>
<td>Transforming Interprofessional Quality Improvement: What’s your Best Practice?</td>
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<tr>
<td>SES103</td>
<td>Defining a Structured Program of Assessment for Clinical Competency Committees</td>
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<tr>
<td>SES104</td>
<td>Safety Takes Culture Change: Lessons Learned from Implementing a Standardized Hand-Off</td>
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<tr>
<td>SES106</td>
<td>Ready, Set, Action! Utilizing Quality Improvement Tools to Plan Program Improvements</td>
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<td>SES107</td>
<td>Dynamic Design: Applying Design Thinking to Catalyze Creativity and Innovation</td>
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<tr>
<td>SES108</td>
<td>Engaging Residents in Real-World Quality Work: Leveraging Interprofessional Learning</td>
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<td>SES109</td>
<td>Connecting the Annual Program Evaluation, the Self-Study, and the 10-Year Site Visit</td>
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<tr>
<td>SES121</td>
<td>Update: Osteopathic Recognition</td>
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<td>SES126</td>
<td>A Roadmap to Improve Gender Equity in International Academic Medicine</td>
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<tr>
<td>SES128</td>
<td>SMART Goals and PDSA: Combining Simple, Practical Tools for Program Improvement</td>
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<td>SES129</td>
<td>GME Program Dashboard Creation, Implementation, and Utility as a Predictive Measure</td>
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<tr>
<td>SES130</td>
<td>A Multi-Modal Approach to Teaching the Value in Patient Experience</td>
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<td>SES131</td>
<td>Implicit Bias: Conscientious Interventions to Tackle the Elephant in the Room</td>
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<td>SES132</td>
<td>Leveraging Interprofessional Education to Improve Mental Health in Chronic Pain Treatment</td>
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<tr>
<td>SES133</td>
<td>Integrating a Learning Management System into your Milestones Assessment</td>
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<tr>
<td>SES134</td>
<td>When and How to Withdraw “Life Support” – When Remediation of a Learner Fails</td>
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<td>Coordinator Forum: <em>Inspiration, Ideation, Impact</em></td>
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<td>SES067</td>
<td>Coordinator Plenary: Building Strong Relationships between the GME Office and Programs*</td>
</tr>
<tr>
<td>SES100</td>
<td>Improving your Graduate Medical Education Committee</td>
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<tr>
<td>SES120</td>
<td>The CLER Program: Insights for Program Coordinators*</td>
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<td>ABMS: The Future of Continuing Certification</td>
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<td>SES045</td>
<td><em>JGME</em> Favorite Papers from 2018: Strategies for Curating the Medical Education Literature</td>
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<td>Clinical Integrity and Ethics Education: A Framework for Teaching Ethics</td>
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<td>SES064</td>
<td>Integrating Technology into Teaching: From the Big Auditorium to the Bedside</td>
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<td>What is Happening to the IMG Applicant Pool? Some Observations and Predictions</td>
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<td>Does a Wellness Curriculum Impact Resident Burnout and Medical Knowledge?</td>
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<td>SES099</td>
<td>Developing Residents as Leaders for Transformational Change</td>
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<td>SES101</td>
<td>True Stories about Physicians’ Struggles with Mental Illness and Strategies for Recovery</td>
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<td>Remediating without Shaming: Addressing Unprofessional Behaviors without Inducing Shame</td>
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*This session does not qualify for CME.*
Conference Learning Tracks

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<td>Successful Practices for Engaging Residents and Fellows in Patient Safety (Friday Sunset Session)</td>
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<td>PC004</td>
<td>DIO 101: Basics of Institutional Accreditation</td>
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<td>SES116</td>
<td>CLER Special Topics: Interprofessional Education and Team-Based Care in the CLE</td>
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<td>SES117</td>
<td>CLER Special Topics: Continuously Engaging Senior Leadership After your CLER Visit</td>
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<td>CLER Special Topics: Assessing and Monitoring in the Context of the CLER Report</td>
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<td>CLER Special Topic: Systematic and Comprehensive Approach in the Context of the CLER Report</td>
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## Session Descriptions

### THURSDAY, MARCH 7, 2019

**8:00 a.m. – 5:00 p.m.**  
**PC001: Introductory Course for New Program Directors**  
- Mary Lieh-Lai, MD; Louis Ling, MD; Rebecca Miller, MS; John Potts, MD; Jessica Bienstock, MD, MPH; Christian Cable, MD, MHPE; Stacy Potts, MD, ME; Lorraine Lewis, EdD; Susan Day, MD

This course is designed for program directors new to the ACGME accreditation process. Sessions will include information about the ACGME and the Review Committees, ACGME data collection systems, and an overview of the review process. Unwritten, as well as written jobs of the program director will be covered. There will also be discussion about how to approach challenging issues that arise with programs and residents/fellows in administrative and educational roles. The course will include didactic presentations and small-group breakouts with time for questions and perspectives from Review Committee Chairs who are current or former program directors. There will be a session at the end for individuals applying for ACGME Initial Accreditation.

*Target Audience: Program Directors*

### 6:30 a.m. – 8:00 a.m.  
Continental Breakfast

### 8:00 a.m.  
Introduction to the ACGME  
- Mary Lieh-Lai, MD; Louis Ling, MD

### 8:40 a.m.  
Small Group Discussions: Challenging Program Issues – Six Cases  
- Jessica Bienstock, MD; Christian Cable, MD; Mary Lieh-Lai, MD; Louis Ling, MD; John Potts, MD; Stacy Potts, MD, ME

### 10:00 a.m.  
Break

### 10:00 a.m. – 12:00 p.m.  
International Breakout Session  
- Lorraine Lewis, EdD; Susan Day, MD

### 10:10 a.m.  
Written Jobs of the Program Director: New Common Program Requirements I-VI  
- Louis Ling, MD; John Potts, MD

### 11:00 a.m.  
Financial Aspects of Graduate Medical Education  
- Louis Ling, MD

### 11:45 a.m.  
Lunch

### 12:15 p.m.  
Accreditation Data Systems  
- Rebecca Miller, MS

### 1:00 p.m.  
Milestones, the Clinical Competency Committee, and Resident Evaluations  
- Jessica Bienstock, MD, MPH

### 1:40 p.m.  
Scholarly Activities  
- Mary Lieh-Lai, MD

### 1:55 p.m.  
Break

### 2:05 p.m.  
Program Evaluation, Annual Program Evaluation, and Self-Study  
- Christian Cable, MD, MHPE
Session Descriptions

THURSDAY, MARCH 7, 2019

2:45 p.m.  Small Group Discussions: Challenging Resident Issues – Six Cases
          – Jessica Bienstock, MD, MPH; Christian Cable, MD, MHPE; Mary Lieh-Lai, MD; Louis Ling, MD;
          John Potts, MD; Stacy Potts, MD, MEd

4:00 p.m.  Unwritten Jobs of the Program Director
          – Mary Lieh-Lai, MD

4:30 p.m.  Application for a New Program (US only)
          – John Potts, MD

5:00 p.m.  Adjourn

5:30 p.m.  Welcoming Poster Reception and Exhibitor Kick-off
# Session Descriptions

**THURSDAY, MARCH 7, 2019**

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<td>8:00 a.m. – 4:15 p.m.</td>
<td><strong>PC002: ACGME/AOGME Pre-Conference for Osteopathic Programs and Institutions</strong>&lt;br&gt;This course is intended for individuals from AOA-approved programs and institutions that wish to learn more about ACGME accreditation and Osteopathic Recognition. The ACGME is delighted to partner again with the Assembly of Osteopathic Graduate Medical Educators (AOGME) in delivering this course and offering focused sessions designed to appeal to the broad group of osteopathic educators and leaders in various stages of transitioning to ACGME accreditation. The course is highly interactive with didactic presentations and concurrent breakout sessions. There will be ample time for questions.&lt;br&gt;&lt;br&gt;<em>Target Audience:</em> Osteopathic Program Directors, Designated Institutional Officials (DIOs), Directors of Medical Education (DMEs), Directors of Osteopathic Education (DOEs), Chief Academic Officers, Faculty Members, OPTI Staff Members, Program Coordinators, and GME Office Personnel</td>
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<td>8:00 a.m.</td>
<td>Welcome and Introduction to the Day’s Activities&lt;br&gt;– Lorenzo Pence, DO, FACOFP, FAODME; Lisa Nash, DO, MS-HPEd, FAAFP, FAOGME</td>
</tr>
<tr>
<td>8:05 a.m.</td>
<td>Structure and Function Part I: The ACGME as your New Accreditation Home&lt;br&gt;– Lorenzo Pence, DO, FACOFP, FAODME</td>
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<tr>
<td>8:15 a.m.</td>
<td>Year in the Life of a Program&lt;br&gt;– Joanne Baker, DO, FACOI, FAODME, FHM; Denise King; Donna Lamb, DHSc, MBA, BSN&lt;br&gt;– Executive Director Panel: Eileen Anthony, MJ; Felicia Davis, MHA; Jerry Vasilias, PhD&lt;br&gt;This session will provide program directors, DIOs, and coordinators with an overview of the seasonal activities and responsibilities involved in operating an ACGME-accredited program.</td>
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<tr>
<td>9:45 a.m.</td>
<td>Break</td>
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<tr>
<td>10:00 a.m.</td>
<td>NRMP Match Update&lt;br&gt;– Mona Signer, MPH&lt;br&gt;This session will offer an overview of the 2019 Main Residency Match, with an emphasis on the outcomes for programs previously accredited by the American Osteopathic Association and DO applicants from these programs.</td>
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<tr>
<td>10:30 a.m.</td>
<td>Structure and Function Part II: Role of the Graduate Medical Education Committee (GMEC)&lt;br&gt;– Paul Foster Johnson, MFA</td>
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<tr>
<td>11:15 a.m.</td>
<td>Understanding the Recent Revisions to the Common Program Requirements&lt;br&gt;– Jessica Bienstock, MD, MPH; Christian Cable, MD, MHPE&lt;br&gt;This session will provide an overview of the changes in the Common Program Requirements that become effective on July 1, 2019.</td>
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<tr>
<td>11:45 a.m.</td>
<td>Structure and Function Part III: Understanding the Clinical Competency Committee (CCC) and the Milestones (including the Osteopathic Recognition Milestones)&lt;br&gt;– Laura Edgar, EdD, CAE&lt;br&gt;This session will provide an overview of the Milestones, their basic function, how the assessment process informs Milestones reporting, and the function of the CCC.</td>
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<tr>
<td>12:15 p.m. – 12:45 p.m.</td>
<td>Lunch</td>
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</tbody>
</table>
Session Descriptions

THURSDAY, MARCH 7, 2019

12:45 p.m. – 1:30 p.m.  Breakout Session 1

BR01: Tools for Programs in Continued Pre-Accreditation
  – Donna Lamb, DHSc, MBA, BSN; Cheryl Gross, MA, CAE
  This session will focus on programs in Continued Pre-Accreditation that are submitting their first application or are resubmitting an application for accreditation. The presenters will provide an overview of the application process and areas of general emphasis for all Review Committees, provide tips for how to respond to questions and citations, and provide time for questions.

BR02: Osteopathic Recognition: Review of Recent Requirement Revisions (Effective July 2018) and Recent Application Updates
  – Natasha Bray, DO; Tiffany Moss, MBA
  This session will provide an overview of the Osteopathic Recognition Requirement revisions that went into effect July 1, 2018. The updates to the Osteopathic Recognition application and to general Osteopathic Recognition data collection elements in the Accreditation Data System that were made in conjunction with the requirement revisions will also be discussed.

1:30 p.m. – 1:35 p.m.  Transition

1:35 p.m. – 2:20 p.m.  Breakout Session 2

BR03: Overview of the Clinical Learning Environment Review (CLER) Program
  – Robin Wagner, RN, MHSA
  This session will provide an overview of the CLER Program and highlights of the 2018 CLER National Report of Findings.

BR04: Osteopathic Recognition: My Program Has Initial Recognition, Now What?
  – Lora Cotton, DO; Sarah Hall, DO
  This session will provide an overview of how the Osteopathic Recognition Requirements can positively impact GME programs. Resources will be presented for integration of the Osteopathic Recognition Requirements into residency recruitment, faculty development, didactics, clinical care, procedural training, and evaluation.

2:20 p.m. – 2:30 p.m.  Break

2:30 p.m.  Thinking Developmentally in Assessment for the Competency-Based Medical Education Era
  – Eric Holmboe, MD, MACP, FRCP
  This session will provide an overview of key theories in professional development and their implications for assessment in competency-based medical education. This session will explore evolving concepts in assessment, including the Milestones, entrustment, and the implications for faculty development and programmatic assessment. Lessons learned from the first five years of Milestones and how longitudinal data can be used for learning analytics and feedback to help learners in their individual professional development and help programs improve will also be discussed.

3:00 p.m.  Creating a Scholarly Culture to Support Resident and Faculty Scholarly Activity
  – Robert Hostoffer, DO, FAAP, FACOP
  This session will provide an overview of how to develop a scholarly culture among program faculty members and residents in Institutions and programs transitioning to ACGME accreditation.
## Session Descriptions

**THURSDAY, MARCH 7, 2019**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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| 3:45 p.m.| **The Single GME Accreditation System, AOA Board Certification, and the Final AOA Match**  
Lorenzo Pence, DO, FACOFP, FAODME; James Swartwout, MA; Maura Biszewski  
This session will include updates on the progress of the transition to a single GME accreditation system, AOA policy changes, including AOA Board certification, and the final AOA Match. |
| 4:15 p.m.| Adjourn                                                                 |
| 5:30 p.m.| **Welcoming Poster Reception and Exhibitor Kick-off**                    |
# Session Descriptions

## THURSDAY, MARCH 7, 2019

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Description</th>
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<tbody>
<tr>
<td>8:00 a.m. –</td>
<td>PC003: DIO 101: The Basics of Institutional Accreditation</td>
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<tr>
<td>11:45 a.m.</td>
<td>This pre-conference course is intended for new designated institutional officials (DIOs). Didactic and interactive learning activities will focus on the roles and responsibilities of the DIO, especially as they relate to overseeing ACGME-accredited programs and ensuring compliance with ACGME requirements. Target Audience: DIOs</td>
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<tr>
<td>6:30 a.m. –</td>
<td>Continental Breakfast</td>
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<tr>
<td>8:00 a.m.</td>
<td>Transforming the Sponsoring Institution</td>
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<td>– Susan Kirk, MD; Kevin Weiss, MD, MPH; Paul Foster Johnson, MFA</td>
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<tr>
<td>8:30 a.m.</td>
<td>Institutional Accreditation Overview</td>
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<td>– Susan Kirk, MD; Paul Foster Johnson, MFA</td>
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<td>9:15 a.m.</td>
<td>Characteristics of an Effective GMEC</td>
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<td>– Ronald Amedee, MD</td>
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<tr>
<td>9:45 a.m.</td>
<td>Break</td>
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<tr>
<td>10:00 a.m.</td>
<td>Clinical Learning Environment Review (CLER) Program</td>
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<td>– Robin Wagner, RN, MHSA</td>
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<tr>
<td>10:30 a.m.</td>
<td>Sponsoring Institutions in Partnership with Programs</td>
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<td>– Richard LaBaere, DO, MPH</td>
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<tr>
<td>11:00 a.m.</td>
<td>Break</td>
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<tr>
<td>11:15 a.m.</td>
<td>Special Reviews and Annual Institutional Reviews</td>
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<td>– Joseph Jaeger, DrPH</td>
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<tr>
<td>11:45 a.m.</td>
<td>Ask the Institutional Review Committee</td>
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<td>(over lunch; includes DIO 101 and 102 participants)</td>
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</table>
# Session Descriptions

## THURSDAY, MARCH 7, 2019

### 11:45 a.m. – 4:45 p.m.

**PC004: DIO 102: Improvement and Innovation in the Sponsoring Institution**

This pre-conference course is designed for both new and experienced DIO and will emphasize the professional development of the DIO as a health systems leader. In this half-day course, DIOs will learn to lead the transformation of their Sponsoring Institution into a "learning organization" that fosters continuous improvement through strategic planning and structured educational activities and encourages the integration of graduate medical education and the clinical learning environment.

**Target Audience:** DIOs

### 11:45 a.m.

**Ask the Institutional Review Committee**

*(over lunch; includes DIO 101 and 102 participants)*

### 12:30 p.m.

**Social Networking and Peer-to-Peer Consultation, Part I**

*– Susan Kirk, MD*

This session will use participant contributions as the basis for group exercises.

### 1:00 p.m.

**Sponsoring Institution 2025 (SI2025)**

*– Kevin Weiss, MD, MPH*

### 1:30 p.m.

**Integrating GME and the Clinical Learning Environment**

*– Diane Hartmann, MD*

### 2:00 p.m.

**Break**

### 2:15 p.m.

**Team Collaboration in the Context of GME**

*– Laurinda Calongne, EdD*

### 2:45 p.m.

**Managing Up and Managing Change: The DIO in the C-Suite and on the Front Lines**

*– Rita M. Patel, MD*

### 3:15 p.m.

**Break**

### 3:30 p.m.

**Social Networking and Peer-to-Peer Consultation, Part II**

*– Susan Kirk, MD*

This session will continue the group exercises from Part I.

### 4:15 p.m.

**The DIO as Health Systems Leader: Lessons from the Pathway Innovators of the Pursuing Excellence Initiative**

*– Anita Blanchard, MD*

### 4:45 p.m.

**Adjourn**

### 5:30 p.m.

**Welcoming Poster Reception and Exhibitor Kick-off**
### Session Descriptions

**THURSDAY, MARCH 7, 2019**

<table>
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<tr>
<th>Time</th>
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</table>
| 8:30 a.m. – 5:15 p.m. | **PC006: Coordinator Forum: Inspiration, Ideation, Impact**  
Facilitator: Debra Dooley  
This year’s Coordinator Forum: *Inspiration, Ideation, Impact*, will feature a day-long series of sessions designed for new and experienced coordinators to gain knowledge and network with their colleagues. The Forum offers three plenary sessions for coordinators at all levels, as well as a choice of three breakout sessions with multiple topics that have been selected to enhance coordinator education.  
*Target Audience: All Coordinators* |
| 7:00 a.m. – 8:30 a.m. | Continental Breakfast                                                                                  |
| 8:30 a.m.       | Welcome  
– Debra Dooley                                                                                       |
| 8:45 a.m.       | **CP001: Joy!**  
– Timothy P. Brigham, MDiv, PhD  
*Target Audience: All Coordinators*                                                                    |
| 9:45 a.m.       | Break                                                                                                  |
| 10:00 a.m.      | **BR01: Alphabet Soup: The A to Zs of GME for the New Program Coordinator**  
– Caroline Diez, C-TAGME  
Being a program coordinator in the Next Accreditation System is challenging and demanding without familiarity and awareness of graduate medical education terminology, resources, and the residency databases used. This session will provide a thorough walk-through of the “Graduate Medical Education Alphabet,” discussing in detail the terminology, resources, and databases used in GME. This session will be particularly useful for the new residency coordinator, as a variety of topics will be covered, including: accreditation, work hours, the Clinical Competency Committee, the Milestones, ADS, and resident well-being. Audience participation will be highly encouraged, and time will be allotted for a discussion of best practices by presenters and members of the audience.  
*Target Audience: Beginner Program Coordinators*                                                      |

*This session does not qualify for CME.*
BR02: Program Coordinators as Adaptive Leaders

- Artina Dawkins, PhD, MPA, C-TAGME

Although both the program director and program coordinator provide administrative and educational direction for all residents and fellows during their tenure in the program, few empirical articles have been written containing specifications about the vital role of the program coordinator (Cottrell et. al., 2010; Grant, 2008; Norwood et. al., 2006), and few articles provide insight into the integral role that coordinators have as members of the administrative team (Woll et. al., 2015). The program director is held accountable for the GME program by the ACGME and the institution’s GME office; however, the program coordinator is often the sole member of the administrative team whose efforts are 100 percent dedicated to the operation of the program (Otterstad, 2003). In the coordinator’s day-to-day management of the program, he or she will interface with many internal stakeholders (medical students, local GME office, etc.) and external stakeholders (ACGME, NRMP, governing bodies, etc.). Therefore, coordinators are in a pivotal position to ensure that any required changes are addressed on a programmatic, departmental, and institutional level. Much of the administrative responsibilities of the program are delegated to the coordinator, and nearly every facet of the coordinator’s role interfaces with the program director (Collins, 2005). The scope of the program coordinator role has expanded significantly over the past 20 years, indirectly based on the changing needs of the public and directly due to the implementation of the ACGME’s Outcome Project (Stuckelman et. al., 2017). Therefore, the necessary level of skills, knowledge, accountability, and expertise of the coordinator has evolved in concert with the program director. This session will focus on the shift in the role of program coordinator from a clerical, to a managerial, to a leadership role, using the theoretical orientation of adaptive leadership. Adaptive leadership deals with four main skills that leaders cultivate to cope with a changing environment: cultural competency; managing knowledge; creating synergy; and adaptive vision (Glover, Friedman, et. al., 2002). This session will also examine how organizational changes have propelled program coordinators into a leadership role.

Target Audience: All Coordinators

BR03: Put your Oxygen Mask on First

- Jennifer Ianni, MHA; Frances Clark, C-TAGME

Have you ever wished someone was there to guide you through leadership possibilities and identify mentoring opportunities within your area? Presenters will walk participants through establishing a mentor group and how to identify professional growth within the organization by teaching them how to identify opportunities, listen to colleagues, and develop habits to further their individual growth. Listening is an essential tool for developing leaders and understanding how to increase buy-in within an organization. Presenters will teach participants a quick tool for actually hearing colleagues’ input and giving feedback on continual process improvements for listening techniques. Additionally, they will teach participants how to increase the chances of buy-in from the program director and how to establish their role within the leadership team. These tools will not only earn coordinators a spot at the table, but will grow their support network within their area.

Target Audience: All Coordinators
**Session Descriptions**

**THURSDAY, MARCH 7, 2019**

**BR04: Finding a Shoe that Fits: Best Practices for Interview Season**  
— Abbe Lynch, MA; Linda Woltz, C-TAGME; My-Phuong Jawort

The importance of interview season for any program cannot be overstated. As a key partner in the recruiting process, program coordinators have a unique opportunity to utilize their organizational and communication skills to facilitate an interview day that will allow both the program and its applicants a platform to determine “fit.” Developing a process from applicant screening to final ranking meeting that meets unique program needs and resources is one that should result in efficient and informative interview days for both the applicant and the program. During this session, program coordinators from the University of Washington will share best practices and tools that have been utilized in a variety of programs, large and small, during interview season. There will be an opportunity for critical discussion and information sharing around processes for applicant screening and communication; various structures of interview days; preparing faculty and staff; and preparation for the ranking meeting.

*Target Audience: All Coordinators*

**BR05: Using Coordinator Engagement to Connect to the GME Community and Enhance Well-Being**  
— Rhea Fortune; Jessica Burkhart

Having a healthy, resilient, professionally developed, and engaged program coordinator contributes to the health, wellness, and resilience of a program, its residents or fellows, and the learning environment. The presenters have been working hard to build their program coordinator networks to foster collaboration and support of one another, and increase program coordinator well-being. As the position of the program coordinator has evolved, the impact that he/she has on the learning environment has also grown. The presenters have been working over the past three years to empower program coordinators by increasing their engagement with each other and cultivating their connection to the larger GME community and the demands facing residents and fellows. A 2017 pilot included having program coordinators shadow a resident or fellow in order to gain a better understanding of their experience and therefore how program coordinators can better support them. Over the past year, several program coordinators have participated in this program. In this session, presenters will share the lessons learned in this experience by both the program coordinators and the residents/fellows they shadowed. They will share some of the challenges they have faced in engaging coordinators, and strategies to combat program coordinator burnout. They will share the impacts of new coordinator programs and opportunities on engagement, empathy, and job satisfaction.

*Target Audience: All Coordinators*

**BR06: Carpe Diem for Career Professional Development Opportunities for Program Coordinators**  
— Jessica Green; Liz Fawthrop, PMP; Alex Stoller, MPA

The ACGME’s accreditation model presents a variety of new challenges to program operations and reporting. In the Next Accreditation System era of 10-year accreditation cycles and increased annual reporting, methods of tracking, monitoring, and follow-up are instrumental to program accreditation. The program coordinator role has evolved to meet the demands for accreditation. This evolution demands increased education and professional development opportunities to gain the advanced skills necessary for program coordination. This session features a panel of program coordinators who will present multiple pathways to pursue professional development opportunities and how these affected their careers. Participants will be encouraged to ask questions about the panelists’ experiences and how they influenced their role as a program coordinator.

*Target Audience: Program Coordinators*
Session Descriptions

THURSDAY, MARCH 7, 2019

BR07: Annual Program Evaluations to Self-Studies – Putting the Accreditation Puzzle Pieces Together
— Ann Dohn, MA; Nancy Piro, PhD
While most programs have experience with Annual Program Evaluations, many have yet to encounter the “Self-Study experience.” This session will take the required data sets from both the Annual Program Evaluation and the Self-Study and merge them into a five-year “look back” and five-year “look forward” instrument. This 10-year analytic instrument aligns processes that integrate diverse data sources that meet specific Annual Program Evaluation and Self-Study requirements. This session will also focus on leveraging the data sets obtained for Self-Study reuse. Additionally, the speakers will describe how to easily obtain and track the defined data sets. A tool to track action plan items that identifies dropped or unresolved items will be described. These instruments in combination enable the painless completion of the Self-Study documents.

Target Audience: All Coordinators

BR08: Preparing your Institution for a CLER Visit: Best Practices
— David Kountz, MD, MBA; Danette Meyer
Preparing the Sponsoring Institution for a CLER site visit can be an anxiety-provoking experience. One minute you are wondering when the visit will be scheduled; the next you are confirming the availability of your DIO and CEO and have only a few weeks to make sure all key stakeholders are on board. Fear not! This session will review strategies and best practices for the DIO, GME institutional coordinator, and program coordinators to employ to ensure a smooth and coordinated CLER site visit.

Target Audience: GME/Institutional Coordinators

BR09: Have No Fear, We Will Make Sense of the Academic Year!
— Susan Coull, MBA; Lioudmila Cruz
This session will focus on a year in the life of a coordinator, breaking down the academic year month by month, and focusing on the primary activities required for each time period. It will include timelines and responsibilities of: (1) national deadlines (ACGME, NRMP, ERAS, FREIDA, board certification, etc.); (2) residency/fellowship program management (CCC, PEC, recruitment, on-boarding, graduation, etc.); and (3) regular reminders (verifications, call room oversight, evaluations, expenses, meal allowance, compliance, etc.). New coordinators often find themselves overwhelmed with new terminology and the alphabet soup of GME, accountable to multiple layers of leadership, with competing priorities presented on a daily basis, and the various internal and external systems to navigate. This session will present the specific breakdown of the academic year’s activities, how a coordinator can prioritize his/her workload and remain focused on achieving his/her critical responsibilities, and provides a tool that can be used on a daily basis to stay on track. There will be ample time for questions and discussion throughout this presentation.

Target Audience: Beginner Coordinators
Session Descriptions

THURSDAY, MARCH 7, 2019

BR10: The Road Less Traveled – Becoming an Innovative Program Coordinator
— Mandy Velligan; Crystal Cannon
This session will focus on giving coordinators tools, tips, and best practices to assist them in becoming an innovator for their program. Before the pre-conference, presenters will solicit best practices from session attendees that will be incorporated into a “Tool Box” to be shared with the group during the session. Additionally, there will be two round-table discussions during the presentation that will afford all participants the opportunity to share best practices and report out. Two 15-minute sessions will provide details and tools to assist coordinators in preparing for two major accreditation events that occur during the academic year: the Clinical Competency Committee (CCC) and the Program Evaluation Committee (PEC) meetings. The first half of the workshop will focus on: strategies for managing the CCC meeting; preparing for semi-annual reviews; and Milestones reporting to the ACGME. The second half of the workshop will discuss: tips and guidelines for a successful PEC meeting; the Annual Program Evaluation Form; and incorporating Annual Program Evaluation data elements into the ADS Annual Update.
Target Audience: Program Coordinators

BR11: Keeping the Peace: Conflict Management and Resolution for Program Coordinators
— Jessica Craig
Conflict is an inevitable part of the workplace. Accreditation standards combined with the rapidly changing nature of graduate medical education at the national level have led to increased roles for the program coordinator, as well as to coordinator burnout. This session will provide coordinators with an overview of common conflicts that can arise within the GME enterprise. Different strategies to successfully manage conflict that can be used by both entry-level and senior coordinators will be discussed. This session is particularly designed for coordinators who are, or who wish to become, supervisors in GME.
Target Audience: All Coordinators

BR12: Single GME: What AOA Program Coordinators Need to Know, including Osteopathic Recognition
— Tiffany Moss, MBA
AOA-approved programs operate in a similar manner as ACGME-accredited programs, but ACGME accreditation may bring new challenges and opportunities. As a result of the transition to a single accreditation system, seasoned AOA program coordinators may find themselves in uncharted GME territory. This session will help program coordinators better understand how an ACGME-accredited program may differ from an AOA-approved program, including how the associated activities of coordinating the program may vary. Program coordinators will also be provided with an overview of Osteopathic Recognition for ACGME-accredited programs.
Target Audience: All Coordinators

11:15 a.m. Breakout Sessions

BR13: Exercising Power, Influencing People, and Negotiating What you Want
— Katharina Wang, MPH
The program coordinator is a leader of the education department in which he/she serves. Being seen as or feeling like a leader, however, can often be a challenge and inhibit us from influencing others. But power comes in multiple forms and there is not a one-size-fits all approach to how a coordinator can exhibit authority. This session will unpack how power is perceived by the coordinator and others during day-to-day interactions, and how this can influence relationships, interactions, and outcomes. By understanding how we project power, coordinators can become better negotiators, seek better outcomes, and get what they want and need.
Target Audience: All Coordinators
**Session Descriptions**

**THURSDAY, MARCH 7, 2019**

**BR14: Leading Up: How Residency Coordinators Can Foster Synergy and Innovation in GME**  
- *Malin Cannon, C-TAGME; Celina Heredia; David Ninan, DO, FAOCA, CPE*

As the nation’s health care system is expected to do more with less, interdisciplinary collaboration becomes crucial. Residency programs must collaborate in order to maximize resources. This session provides an overview of how one institution is responding to these demands and collaborating in innovative ways. Presenters will discuss interdisciplinary efforts at their institution, including obtaining “buy-in” from participating programs, organizing joint sessions to share best practices, and executing interdisciplinary collaborations. Referencing a case study of their interdisciplinary “Career and Leadership” course, in which multiple programs worked together to pool resources, leverage outside business education, and address areas of common need, they will share valuable insights on the coordinator’s role in both the planning and execution phases of the project. Presenters will describe how joint efforts between coordinators and program directors built a framework in which the parties used combined strengths and addressed areas of common need. In addition, coordinators will be provided with ideas on how collaborative projects can be developed into professional growth opportunities needed to obtain and maintain TAGME certification. Presenters will give tips on how program coordinators can increase their effectiveness by “Leading Up” through communication, persuasion, and collaboration.

*Target Audience: All Coordinators*

**BR15: Fostering Wellness for Program Managers and Coordinators**  
- *Deborah Richards, MS; Lori Berryman; Deborah Cini*

Coordinators have an essential role in helping residency programs succeed; however, there is often little acknowledgment given to the importance of helping them maintain their own well-being. With increasing program and learners demands, it is important to create a space for coordinators to develop along with the rest of the education team. This immersive session will focus on the development of a sustainable wellness program for coordinators, which can be duplicated at other institutions.

*Target Audience: All Coordinators*

**BR16: Successfully Creating a GME Job Family that Leads to Coordinator Growth and Satisfaction**  
- *Erin Snow, C-TAGME; Vicki Hamm, C-TAGME*

For many institutions, current position classifications for GME education coordinators no longer accurately reflect the realities of these positions. In the Review and Comment document regarding the Common Program Requirements, the ACGME stated that the program coordinator is a member of the leadership team and is critical to the success of the program. The program coordinator position has been transformed in recent years for the following reasons (not an exhaustive list): educational programs have increased in terms of sophistication, and the coordinator role has expanded to keep pace with the expanding program director role; accreditation and other governing bodies have tightened requirements, increased scrutiny over programs, and made sweeping changes to accreditation processes; national certification for coordinators has been developed, supporting the argument that the role of the coordinator has evolved to an advanced professional position; highly developed communication and interpersonal skills are necessary to succeed as a coordinator; and introduction of advanced information systems that must be utilized to manage a program. In order for University of Nebraska Medical Center to keep pace with these changes, a committee was formed and tasked with creating an education job family that reflects the complexity of the coordinator position, offers a path of professional growth for individual coordinators, and has the goal of increasing job satisfaction among coordinators. The session presenters were key players in creating the education job family at UNMC, and will share successes and failures, as well as detailed steps to developing a new job family at other institutions.

*Target Audience: All Coordinators*
Session Descriptions

THURSDAY, MARCH 7, 2019

**BR17: Influencing Change: Cross-Collaboration between Divisional Program Coordinators**  
– L. Robin Newcomb; Donna Riley; Jamie Hoffberger

How are you learning what is required in the coordinator role? Who is serving as your go-to when questions arise? Who should be responsible for “training up” new coordinators? If a built-in network of resources doesn’t currently exist, then how do you start the process? This session will teach and discuss policies, methods, and actions that stimulate cross-collaboration among subspecialty administrators/coordinators. Presenters will explore the benefits provided by cross-collaboration to an entire institution, as well as to off-site locations. Speakers will highlight their collaborative best practices, roadblocks, and goals moving forward.

*Target Audience: Beginner Program Coordinators*

**BR18: Self-Study Process – A Collaborative Approach**  
– Krista Lombardo-Klefos, MBA; Nicole Fennell, MBA

As GME embarks on unchartered waters of the Self-Study and 10-Year Accreditation Site Visit, are you struggling with where to start? Presenters of this session will describe the process the Cleveland Clinic took to create a collaboration of efforts between the GME office and programs. This all began back in 2015 when the Cleveland Clinic’s diagnostic radiology program and its six subspecialty programs completed their Self-Study Summaries by meeting monthly as an interprofessional team with a GME liaison as their guide. The idea continued to grow as staff members reviewed the institutional list of upcoming programs that would undergo their Self-Study, and collectively GME and the programs decided that a GME liaison would be implemented as part of each program’s Self-Study group. Neurology and its subspecialties were next to undergo the Self-Study, while diagnostic radiology and its subspecialties were preparing for the 10-Year Accreditation Site Visit. Participants will hear the step-by-step sequence and timeline Cleveland Clinic took in assisting its programs in completing the Self-Study process. From receiving the first ACGME letter, assembling the precise Self-Study groups, working through the SWOT analysis and quality improvement tools, ensuring the stakeholders were informed and engaged, and finally uploading the Self-Study Summary document into ADS, a tremendous amount of effort and collaboration went into this work. The tools and resources developed will be shared: presentations, checklist, project plan, data collection plan, and how to create an online location for easy access to all materials. Lastly, presenters will share their survey data, which were obtained by asking all individuals involved in the Self-Study to provide feedback on the process, tools, resources, and GME liaison role. This information will assist the entire GME community as it prepares for the Self-Study process. Attendees will leave this session with a variety of ideas that are easily implemented into their program or institution, no matter the size or structure. Come navigate the Self-Study and 10-Year Accreditation Site Visit waters with us—we will figure this out together!

*Target Audience: All Coordinators*

**BR19: Automating Candidate Itineraries Using Excel**  
– Amanda Stadler

Program coordinators spend an extensive amount of time planning for interview season. When it comes to the interview day, a well-organized, comprehensive itinerary is essential for the coordinator to keep the day running smoothly and on time. Candidates also appreciate receiving a personalized itinerary that shows them what their day will entail and helps them know what to expect next. Creating these itineraries can take a considerable amount of the program coordinator’s valuable time, and can also leave room for human error. This session will walk through the steps a coordinator can take to create templates in Excel that will generate fool-proof itineraries moving forward. Even coordinators who are beginner-level Excel users will be able to use formulas and macros to automate the creation of multiple versions of an itinerary, saving them hours of time during interview season and greatly reducing the chance for human error.

*Target Audience: All Coordinators*
Session Descriptions

THURSDAY, MARCH 7, 2019

BR20: “What Did you Say?” Improv to Improve your Active Listening Skills
– Carrie Johnson, MBA; Carrie McGaughhey

Listening skills are critical in business, in life, and certainly in our work. We put forth so much energy toward practicing and refining our writing and speaking skills that our listening skills are often overlooked. Active listening is work. It takes practice and intention. Unfortunately, many of us don’t do it. Active listening is one of the most important skills we can develop that will have significant impact on our personal and work relationships. The best way to learn how to actively listen is to practice it using improvisation techniques. Improvisors constantly practice active listening to hone their craft. They can’t create a scene if they are not paying attention and listening to cues and what others are saying on stage. This workshop will lead participants through activities that will have them experience active listening and become more self-aware of everyday situations in which active listening can be practiced. Participants will be asked to play improv games that demonstrate how to listen to understand so that a dialogue can be created. We will expand what we learn and experience to our relationships, work, and personal growth.

Target Audience: All Coordinators

BR21: No Need to Reinvent the Wheel! Sharing Program Best Practices
– Nilda Gonzalez, MHSA, C-TAGME; Tanya Spencer

Learn from peers as they share their proven, most efficient approaches to complying with programmatic, administrative activities in their program. This workshop will focus on best practices for common processes/activities, including the interviewing process, increasing compliance with faculty members’ completion of evaluations, wellness plans and activities, documenting scholarly activity, and conducting Annual Program Evaluations and Self-Studies.

Target Audience: Program Coordinators

BR22: Boom, X, Y, Z: Understanding Generational Differences to Effectively Lead Teams
– Charlene Larson Rotandi, C-TAGME; Pamela Carpenter, MEd, C-TAGME

Differences across generations can create many challenges for teams, including conflict and frustration, often leading to a reduction in both workplace productivity and employee satisfaction. Today’s workplace can include four generations collaborating on the same team, and it is critical for individuals to possess leadership skills that give them the ability to relate and communicate effectively in this multi-generational framework. This workshop will identify common generational characteristics, including both differences and similarities, and share strategies for effectively leading teams and improving communication skills. Interactive scenarios will assist participants in learning and applying strategies to effectively lead teams across generations, thereby promoting an appreciation for varying work styles and shifting the focus from differences to a source of strength.

Target Audience: All Coordinators

BR23: Data Tracking Done Right and Done with Delight
– Denise Lesniak, MA, C-TAGME; Abdulla Ghorai, MD

The program coordinator can greatly influence the success of a program by tracking performance data of both the program and the residents. Fully understanding the purpose of the data provides meaning to the daunting and overwhelming task of data collection. This session focuses on why the data is necessary, what data is required, time-saving strategies to collect data, and successful reporting strategies of data, particularly for Clinical Competency Committee meetings and annual ADS reporting. The session will guide program coordinators in analyzing current tracking methods and making necessary adjustments resulting in clarity of information, efficiencies, and process improvements.

Target Audience: Program Coordinators

12:15 p.m.  Lunch
## Session Descriptions

**THURSDAY, MARCH 7, 2019**

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<th>Time</th>
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| 1:30 p.m.  | **Plenary Session 2**  
**All Coordinators Need to Attend**  
**CP002: The New Common Program Requirements**  
– George Keepers, MD; Kathy Malloy  
Dr. Keepers, a member of the task force that revised Section VI and co-chair of the task force that revised Sections I-V, will describe the major changes in the Common Program Requirements. The philosophy and rationale that resulted in these changes will be discussed, as well as the practical implications for programs and institutions. Special attention will be given to those sections that most affect programs’ administrative personnel. Ample time will be provided for questions.  
**Target Audience: All Coordinators** |
| 2:30 p.m.  | Break                                                                               |
| 3:00 p.m.  | **Breakout Sessions**                                                                |
|            | **BR24: Saving Time with Lean**  
– Katherine Cich, MM  
Have you ever met coordinators who felt they had plenty of time to accomplish everything that’s important to them, their program, and their institution? The ever-growing number and complexity of coordinator responsibilities can leave you feeling as though you will never catch up. Lean Quality Improvement methodology can help us find some “extra” time to accomplish both required and aspirational work. This session will focus on ways in which coordinators can apply Lean principles and tools to their daily work, as well as larger processes involving multiple stakeholders. Participants will learn about the eight forms of waste and their common “antidotes,” as well as objective problem-solving techniques. Both “quick fix” and larger-scale problems and their potential solutions will be discussed.  
**Target Audience: All Coordinators** |
|            | **BR25: Shifting the Focus: Coordinator-Centered Networks for Personal and Professional Growth**  
– Kaytlyn Darling, MHA, C-TAGME; Tery Noseworthy, C-TAGME  
The professional nature of the coordinator role has grown over the past decade. However, coordinators often focus on the career development of their residents and fellows without taking the time to focus on their own. In this workshop participants will learn to recognize support networks by shifting the focus from a traditional mentor/mentee relationship to a community of people that provides professional and personal support. Participants will learn practical ways to develop and strengthen their network, ultimately increasing their professional development and career opportunities.  
**Target Audience: All Coordinators** |
|            | **BR26: How to Evaluate and Redesign your Recruitment Process**  
– Brad Clark, MS, MBA; Cuc Mai, MD  
In this workshop, participants will learn about Robert Cialdini’s Six Principles of Persuasion and the science of influence from his 1984 book, *Influence: The Psychology of Persuasion*. While the business world routinely uses these principles in marketing, they are not commonly used by residency programs as a tool to analyze the recruitment process and applicant experience. Residency programs allot many resources to recruitment, but rarely consider application of principles of the science of persuasion to identifying areas for improvement in that process. During this interactive workshop, presenters will show data from their program and collect information from the audience to demonstrate application of these principles to the residency interview process. The outcome of this exercise will give participants tools to make positive changes for their residency program marketing and the applicant experience during recruitment. Finally, they will share lessons learned and practical changes they have made to the recruitment process during the past six recruitment seasons.  
**Target Audience: Program Coordinators** |
Session Descriptions

THURSDAY, MARCH 7, 2019

BR27: Growing your Program: How your Role as Coordinator is Essential to your Program’s Success
— Barbara Burns, C-TAGME; Elaine Danyew, C-TAGME

Often, the coordinator is seen as a manager, an organizer, event planner, etc. This workshop will explore the role of the coordinator as a nurturer for the program, as well as help new coordinators appreciate the importance of wellness for themselves, their residents or fellows, and their program. Like a farmer tends to his crops, the coordinator tends to the residency program, nurturing all the various components and helping each component thrive. Presenters will demonstrate to new coordinators how their role is essential to the growth and continued success of their program, and in turn will emphasize how the coordinator’s personal well-being contributes to his/her effectiveness. Participants will be given an overview of the residency year and see how their role in managing the various components of residency helps ensure the program’s success. A calendar with monthly tasks will be provided, and presenters will facilitate open discussion on coordinator effectiveness.

Target Audience: Beginner Program Coordinators

BR28: Stop... in the Name of Wellness: Promoting Program Coordinator Wellness and Combating Burnout
— Caroline Diez, C-TAGME; Shannon Papazian, C-TAGME

Resident wellness is a topic that has been discussed in great detail over the last several years; however, an equally important and less discussed area is the importance of program coordinator wellness. Coordinators serve in multiple roles across graduate medical education, and they have a direct impact on the satisfaction of the residents in their program. Not only that, but many program coordinators become a large part of their residents’ personal support system. Additionally, as the role of the coordinator continues to evolve, the level of burnout increases. According to a recent nationwide study by the GME Office at Boston Medical Center, nearly 50 percent of program coordinators reported symptoms of burnout, and 50 percent reported that they were considering resignation due to burnout and stress. Alarmingly, in the same study, only 15 percent of respondents reported institutional interventions. The goal of this workshop is to address this topic and send participants home with a toolkit for self-assessment, tools for prevention of burnout, and a variety of coping strategies to be used during difficult times.

Target Audience: All Coordinators

BR29: Program Leadership: How to Lead and Serve in Graduate Medical Education
— Tanya Keenan, MA; Jean Ashley, MSBC

The leadership team of any ACGME-accredited program includes varied individuals with their own perspectives. This includes the program director, associate program directors, chief residents, resident councils, coordinator councils, and the program coordinator/manager. The attrition rate of program directors averages seven years or less depending on the specialty. Chief residents serve for a year, and core faculty members come and go based on clinical needs. This leaves the coordinator/manager to maintain the leadership continuity for programs. As the complexity of graduate medical education grows, it is critical for program coordinators/managers to assume a variety of roles within the program. Often, the least recognized is that of a leader. Leadership is an essential skill for program coordinators/managers to have to effectively engage in the graduate medical education community. The abundance of leadership materials can be overwhelming. While we all possess traits of various types of leaders, successful program coordinators/managers are often those with the characteristics of servant leaders. One must lead through service and function across the continuum, encouraging and empowering new members as they are welcomed into graduate medical education.

Target Audience: All Coordinators
Session Descriptions

THURSDAY, MARCH 7, 2019

BR30: An Active Approach to Healthy Finance in Graduate Medical Education
  – Diana Wang, MBA; Julie Beckerdite, MBA
Graduate medical education finance can be intimidating for program coordinators, resulting in financial mismanagement. By proactively thinking about the budget, the program coordinator can take the initiative to manage the finances of a program or GME department. An active approach to healthy finance results in a healthy organization. This session will explore one institution’s experience with the hidden costs of GME, taking an historical perspective and updating to the current environment to illustrate one aspect of the financial challenges in GME. Presenters will show how program coordinators are uniquely positioned to identify these hidden costs. This session will assist program coordinators in building and managing a budget by using techniques such as negotiation, appropriate planning, setting priorities, and obtaining alternative funds to bridge any budget gaps.

  Target Audience: All Coordinators

BR31: Session Cancelled

BR32: Speak Up! Preparing Coordinators for Effective Presenting and Public Speaking
  – Jason Homme, MD
Great public speakers aren’t born… they’re made! The skills critical to effective public speaking can be learned – and practice results in improvement. Interpersonal and communication skills are among the ACGME’s Core Competencies. Everyone involved in graduate medical education will be called upon to give formal presentations, but few receive specific training to aid improvement. Effective public speaking addresses the needs of the audience, has defined learning objectives, is organized around those objectives, and engages the audience. A well-crafted and skillfully delivered presentation can improve the retention of information and result in improved knowledge, skills, attitudes, and behaviors. This interactive mini course is aimed at helping participants improve their public speaking skills and learn ways to help others improve. Small and large group activities focus on developing a personal toolkit, including exercises on writing captivating titles, formatting presentations, and key presentation tips. Participants will receive resources to use as part of their ongoing efforts to resuscitate the art of effective public speaking.

  Target Audience: All Coordinators

BR33: Quality Improvement and the Program Coordinator’s Role
  – Crys Draconi; Carrie Racsumberger, MS
Implementing a robust Quality Improvement (QI) curriculum into any program must involve the administrator. Many senior faculty members still wrestle with teaching this requirement because they didn’t receive training in it themselves until recently. Institutions are getting increasingly more involved by offering QI academies and supporting a culture of change. As much as we learn about the concepts of QI models, it is hard to fully understand without implementing them into practice. Improvement requires constant effort, and shouldn’t be tackled alone. QI models help us to recognize areas for improvement, plan solutions, and evaluate effectiveness. Since the implementation of the ACGME’s current accreditation model and the CLER Program, it has become crucial for administrators to understand QI processes. With this understanding, administrators will be better equipped to be quality agents of sustainable change for themselves and their programs.

  Target Audience: Program Coordinators
BR34: The Institutional Requirements Administrative Team (IRAT) Provides Accreditation Oversight
– Krista Lombardo-Klefos, MBA; Lori Smith, MBA

How can you build a GME administrative structure to navigate the rapidly changing ACGME environment of new requirements through engaging initiatives? The creation of a functional workgroup, the IRAT, was the answer at the Cleveland Clinic’s centralized GME Office. Implementing the ACGME’s current accreditation model for 86 ACGME-accredited programs would not have been feasible with one Accreditation Manager, the DIO, GMEC, and subcommittees, as everyone needed assistance with the substantial amount of required work. The IRAT, composed of GME subject matter experts, was tasked with overseeing administrative and compliance initiatives regarding the Institutional and Common Program Requirements, ensuring the DIO and GMEC were involved along the way. Throughout the last five years the IRAT has proven to be a valuable asset to effectively and efficiently manage changes in the accreditation world. Amplified attentiveness and understanding of accreditation processes and requirements is now more evident amongst the organization’s GME community; especially as we collaborate with program directors and coordinators on new processes and strive to develop tools and resources for all. This presentation will share what the Cleveland Clinic GME Office has done, including: designing an Annual Program Evaluation template; contributing to AIR reports; creating an internal Self-Study process; and successful completion of three CLER site visits. Attendees will leave this session with a reflective perspective asking themselves if they could see the creation of functional workgroup benefiting their institution, as well as the tools needed to get one started.

Target Audience: Experienced GME/Institutional Coordinators

BR35: Sharing of Best Practices: Keeping Program Coordinators Engaged and Abreast of Changes
– Li Xuan Tan; Pearlene Sim

In this session, presenters will share how they leverage their monthly Program Coordinator meetings as a platform to keep coordinators engaged and abreast of changes that are inevitable in their work. These meetings are also used as a forum to exchange ideas and share best practices. Since not all program coordinators are physically located within the same office, there is value in the face-to-face interactions when they come together as a team. At these sessions, program coordinators share their challenges and are able to brainstorm ideas. They are also updated about policy changes at the Ministry of Health and decisions made by the GMEC that affect their day-to-day operations in their program. Presenters will also share about the formation and evolution of the meetings over the years to the current structure. With the typical hectic daily schedule of program coordinators, it is paramount that the meetings are well-planned with agendas that are relevant to the programs. We hope to encourage sharing across programs which helps in forming a support network that will assist program coordinators in the course of their daily work, especially for new coordinators and to keep more senior coordinators engaged and informed.

Target Audience: All Coordinators
Session Descriptions

THURSDAY, MARCH 7, 2019

4:15 p.m.  
Plenary Session 3  
All Coordinators  
Need to Attend  

CP003: Microaggressions: The Power and Impact of Words  
– Beth Payne, MAEd, C-TAGME, LSSBB  
Seminal sources state that “microaggressions are commonplace, interpersonally communicated, ‘othering’ messages related to a person’s perceived marginalized status” (Pierce et al. 1977; Sue 2010). Microaggressions are regularly found in social interactions and vary greatly from bullying or intimidation. They are often unintentional messages that become visible via snubs, insults, or other mortifications, ingrained in daily verbal and non-verbal communication (Sue, 2010). Microaggressions are perplexing and often difficult to recognize and receive, yet even harder to address in most team dynamics. Often microaggressions stem from an implicit bias we as individuals have yet to recognize, and therefore are not aware of the impact our behavior or words have on others around us. Frequently, you will hear the term “microaggressions” with regard to race, gender, sexual orientation, and age. However, the term and the behavior can also be seen within interprofessional groups such as physicians and non-physicians, between members of the health care team or in academically-based groups of learners. It is important to learn how to spot the incidence of microaggressions both in ourselves and our environment, and learn the tools necessary to stop the cycle of implicit messaging.

Target Audience: All Coordinators

5:15 p.m.  
Adjourn

5:30 p.m.  
Welcoming Poster Reception and Exhibitor Kick-off
### Session Descriptions

**FRIDAY, MARCH 8, 2019**

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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>6:30 a.m. – 8:00 a.m.</td>
<td>Continental Breakfast</td>
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<tr>
<td>6:30 a.m. – 5:00 p.m.</td>
<td>Conference Registration</td>
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<td>8:00 a.m. – 8:30 a.m.</td>
<td>Welcome and Opening Remarks</td>
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<tr>
<td>8:30 a.m. – 9:30 a.m.</td>
<td>NAM Action Collaborative on Clinician Well-Being and Resilience: Perspectives from the Leaders</td>
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<td>Moderator: Timothy P. Brigham, MDiv, PhD</td>
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<td>9:45 a.m. – 5:00 p.m.</td>
<td>ACGME Data Collection Systems Consultations*</td>
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<td>9:30 a.m. – 10:00 a.m.</td>
<td>Break</td>
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<td>10:00 a.m. – 11:30 a.m.</td>
<td>SES001: Using Public Data to Follow GME Graduates into Clinical Practice</td>
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<td>Moderator: Darrell Kirch, MD; Victor Dzau, MD; Thomas J. Nasca, MD, MACP</td>
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<td>Marc Triola, MD; Patrick Cocks, MD</td>
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<td>10:00 a.m. – 11:30 a.m.</td>
<td>SES002: Addressing the Opioid Epidemic: The Responsibility of Physicians</td>
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<td>Leana Wen, MD</td>
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- Residency and fellowship programs strive to prepare physicians for unsupervised practice in clinical fields being transformed by changing care models and new technology, but there is often little feedback on how they fare after graduation. Public data sets from CMS and others hold a wealth of information about your graduates, the nature of their clinical practice, and quality outcomes of the care they deliver. This session will give an overview of how public and open data can provide insights about current and past graduates that programs can use to guide program changes. Practical examples will be given evaluating outcomes of practice type, procedures performed, and quality outcomes of the internal medicine programs at NYU Langone.

  *Target Audience: All*

- Overdose is now the leading cause of death for Americans under 50. However, the opioid epidemic did not arise overnight; our culture of a “pill for every pain” contributed to the worsening of this crisis. This session will discuss the role physicians and health care providers played in contributing to the opioid epidemic, as well as the responsibility they now have to address it. Medication-Assisted Treatment (MAT) – the gold standard for addiction treatment – combined with wraparound services and psychosocial support have been available for decades. However, addiction treatment remains separate from the rest of the health care system. This session will discuss the importance of incorporating addiction treatment into graduate medical education and within mainstream hospital services; employing judicious prescribing practices; and compassionately treating addiction as the disease that it is. This session will also highlight programs and collaborations ongoing in Baltimore City, including the Baltimore City Health Department’s Levels of Care initiative with the City’s hospitals; the development of a Stabilization Center, in partnership with the City’s behavioral health authority; and efforts to make MAT available on demand in the City’s 11 emergency departments.

  *Target Audience: All*

*This session does not qualify for CME.*
### Session Descriptions

**FRIDAY, MARCH 8, 2019**

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<th>Time</th>
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| 10:00 a.m. – 11:30 a.m. | **SES003: NIDDK Initiatives to Eliminate Health Disparities and Train a Diverse Workforce**  
Griffin Rodgers, MD, MBA, MMSc, MACP  
Dr. Rodgers will address the importance of eliminating health disparities and the approach his Institute takes to address disparities through education and training a workforce of basic and clinical researchers. One approach in particular he will describe is the National Institute of Diabetes, Digestive and Kidney Diseases (NIDDK)'s longstanding partnership with the National Medical Association to train underrepresented minority fellows in clinical research methods and leadership. He will also address the Institute’s measures to build the pipeline of underrepresented minority students through programs his institute sponsors that aim to connect early learners and productive research scholars. Dr. Rodgers is a master educator in a non-university based environment, and presents a model for what GME leaders in such settings can do in disparities research and workforce pipeline development.  
**Target Audience:** All |
| 11:30 a.m. – 1:30 p.m. | **Lunch** |
| 1:30 p.m. – 2:15 p.m. | **SES004: Institutional Accreditation Update**  
Kevin Weiss, MD, MPH; Paul Foster Johnson, MFA; Susan Kirk, MD; Ronald Amedee, MD  
This session will offer information about the Institutional Review Committee’s recent work, including its annual accreditation review of Sponsoring Institutions and its focused revision of the ACGME Institutional Requirements.  
*You may pair this session with SES032.*  
**Target Audience:** DIOs, Faculty, Coordinators, GMEC Members |
| 1:30 p.m. – 3:00 p.m. | **SPECIALTY UPDATES**  
These sessions include an update on recent Review Committee and ACGME activities. There will be ample time for Q&A.  
**Target Audience:** DIOs, Program Directors, Coordinators, Faculty |
| 1:30 p.m. – 3:00 p.m. | **SES005: Specialty Update: Internal Medicine**  
Christian Cable, MD, MHPE; Jerry Vasilias, PhD |
| 1:30 p.m. – 3:00 p.m. | **SES006: Specialty Update: Pediatrics**  
Susie Buchter, MD; Caroline Fischer, MBA |
| 1:30 p.m. – 3:00 p.m. | **SES007: Specialty Update: Emergency Medicine**  
Steven Bowman, MD, FACEP; Felicia Davis, MHA |
| 1:30 p.m. – 3:00 p.m. | **SES008: Specialty Update: Psychiatry**  
Andrea Stolar, MD; Louise Castile, MS |
| 1:30 p.m. – 3:00 p.m. | **SES009: Specialty Update: Surgery**  
David Han, MD; Donna Lamb, DHSc, MBA, BSN |
| 1:30 p.m. – 3:00 p.m. | **SES010: Specialty Update: Neurological Surgery**  
Nicholas Barbaro, MD; Pamela Derstine, PhD, MHPE |
| 1:30 p.m. – 3:00 p.m. | **SES011: Specialty Update: Osteopathic Neuromusculoskeletal Medicine**  
Eric Hunter Sharp, DO; Tiffany Moss, MBA |
Session Descriptions

FRIDAY, MARCH 8, 2019

1:30 p.m. – 3:00 p.m. **SES012: Specialty Update: Radiation Oncology**
- Ann Spangler, MD, MS; Cheryl Gross, MA, CAE

1:30 p.m. – 3:00 p.m. **SES013: Specialty Update: Ophthalmology**
- Joel Schuman, MD; Kathleen Quinn-Leering, PhD

1:30 p.m. – 3:00 p.m. **SES014: Specialty Update: Dermatology**
- Erik Stratman, MD; Eileen Anthony, MJ

1:30 p.m. – 3:00 p.m. **SES015: Milestones Update: Lessons Learned, Research Findings, and the Milestones 2.0 Journey**
- Eric Holmboe, MD, MACP, FRCP; Laura Edgar, EdD; Stanley Hamstra, PhD
  
The Milestones are now entering a new phase. Over the last six years much has been learned about what works (or does not), for whom, in what contexts, and why regarding the Milestones across multiple specialties. Over 100 articles on Milestones validity and experience have been published for multiple specialties to date. Presenters will share the lessons learned from this research and implications for the future, as well as effective use of the Milestones framework, and will share plans for providing predictive analytics to guide Clinical Competency Committees in assessment of and feedback to learners and programs. The multi-faceted research and evaluation studies has provided a robust foundation for the Milestone 2.0 revision process that is well underway. The majority of the core specialties have begun their Milestone 2.0 work. Presenters will share important findings emanating from this multi-staged, collaborative process, including the creation of new tools and educational resources for the implementation of Milestones 2.0. Ample time will be included for group discussion.
  
**Target Audience: All**

1:30 p.m. – 3:00 p.m. **SES016: Burnout and Depression among Residents: An Update on the Evidence**
- Lotte Dyrbye, MD, MHPE; Srijan Sen, MD, PhD; Colin West, MD, PhD
  
Burnout and depression among residents is prevalent and increases the risk of medical errors, suboptimal professionalism, poor performance on in-training examinations, suicidal ideation, and attrition from the field. Resident well-being is a shared responsibility of individual residents, the residency program, and the sponsoring organization. Commitment to residents’ careers and well-being requires a multi-pronged organizational approach that includes investing in program director leadership and faculty development, monitoring and responding to resident well-being scores, having supportive policies and procedures, cultivating community, and providing resources to promote resilience and self-care. In this didactic session Drs. Dyrbye, Sen, and West will provide a scoping review of the existing literature related to resident burnout and depression to help leaders in GME gain a thorough understanding of the prevalence, drivers, and consequences of resident well-being. Using the available evidence, the presenters will provide suggestions for individual and organizational primary and secondary prevention strategies. Lastly, presenters will highlight gaps in the literature and research needed to advance the field. Although the initial content sections will be largely lecture-based, the session will conclude with a vibrant discussion and extended exchange of ideas. Take home messages will focus on practical steps program directors can take to support resident well-being.
  
**Target Audience: All**
1:30 p.m. – 3:00 p.m. SES017: A Life Lost Every Nine Minutes: How GME Can Help Solve the Opioid Crisis
- Mark Rosenberg, DO; Seth Landa, MD; Alexis LaPietra, DO

For the second straight year, life expectancy in the United States dropped, attributable to the current widespread opioid epidemic that claims a life every nine minutes. The best solution to this crisis is prevention. Graduate medical education must address and change the way physicians are taught to think about and treat pain and prepare them to educate their patients as well. St. Joseph’s University Medical Center has pioneered the ALTO® (Alternative To Opioids) Program which, through education and interdisciplinary collaboration, has developed an approach to pain management that minimizes opioid use and subsequent addiction. This program has led to an 83 percent reduction in opioid use in the medical center’s ER and is now being adopted in other departments, as well as in hospitals across the country and internationally. ALTO® has received national attention, being featured in The Annals of Emergency Medicine and The New York Times, and on NPR, NBC, Fox News, and CNN. It is the subject of federal legislation to create a three-year nationwide pilot project based on the St. Joseph’s program. Drawing from lessons learned from this project, the session will discuss the root causes of the opioid epidemic and how graduate medical education can help solve the crisis facing our country.

Target Audience: DIOs, Program Directors, Faculty, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel, Residents/Fellows

1:30 p.m. – 3:00 p.m. SES018: COMLEX-USA Use by Program Directors as Part of a Comprehensive Assessment System
- John Gimpel, DO, MEd; J. Michael Finley, DO

This session will highlight areas of harmonization between the COMLEX-USA licensure examination program completed by all osteopathic medical students and DO residents, and the structure of a high performing resident assessment system. From the holistic review of applicants for residency interviews, to the regular assessment of residents’ performance related to competency domains and Milestones throughout the program, this session will review how the competency-based COMLEX-USA scores, performance profiles, and cross-walks relate to the Milestones and entrustable professional activities. Participants will learn how COMLEX-USA information can provide value in augmenting their program’s comprehensive assessment system for DO applicants and residents. Resources designed to help residents prepare for COMLEX-USA Level 3, as well as information on involvement with NBOME National Faculty initiatives as scholarly activity, will be reviewed.

Target Audience: DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel
1:30 p.m. – 3:00 p.m. **SES019: Illuminating the Closet: Mentoring and Advising LGBT Learners**

- Joel Moll, MD; Sheryl Heron, MD, MPH; Audrey Bickel, MD; Nicole Nemore, MD

Obtaining and supporting equity, diversity, and inclusion that reflects our multifaceted society is desirable and achievable in medical education. Lesbian, gay, bisexual, and transgender (LGBT) learners in undergraduate and graduate medical education face unique challenges and barriers. Studies have suggested that a large number of LGBT providers in medicine report homophobia and even overt discrimination due to their sexual orientation or gender identity. Recent AAMC data report 7.8 percent of current medical school seniors identify as LGBT. In order to competently and compassionately mentor and advocate for these learners, educators should be aware of factors that can contribute to their success or failure that differ from sexual majority students. Institutional and legal factors can adversely impact LGBT students and residents, and can significantly affect all aspects of their wellness, health, and ability to focus on learning. Although limited in number and scope, studies indicate that many students and residents do not disclose their sexual orientation, and often purposely hide their identity in fear of adverse consequences on their medical careers. Students go back into the closet in medical school, and even more so in residency, especially when programs and states lack employee nondiscrimination protections. Mentors to advise and support their unique challenges can be difficult to find, due both to LGBT underrepresentation in medicine, and also to LGBT faculty members and senior residents not being visible due to their own concerns for their careers and employment. All educators, regardless of their sexual orientation or gender identity, should become competent in advising and mentoring LGBT students through their own education and awareness. This interactive session will advance the knowledge and competency of medical educators in mentoring and advising aspiring LGBT students and residents in a safe environment.

*Target Audience: All*

1:30 p.m. – 3:00 p.m. **SES020: Tackling Professionalism Issues in Residency Training**

- Patricia Pepper, MD, MSc; Mark Tschanz, DO, MACM

Dealing with professionalism lapses in residents is one of the most difficult challenges program directors face. Although certain violations of the professionalism Competency are so egregious that disciplinary issues are handled by the state Medical Board, remediation of the vast majority of lapses must be handled internal to the program. This is often a complex process with scant evidence to provide direction. Presenters will review the use of a professionalism contract as a means to outline the expectations of a program and to serve as a remediation guide in dealing with deficiencies in the professionalism competency. Strategies and methods to remediate professionalism, including formal counseling documentation, will be reviewed. An example of a professionalism contract will be presented with discussion on how to maximize impact.

*Target Audience: DIOs, Program Directors, Faculty*
Session Descriptions

FRIDAY, MARCH 8, 2019

1:30 p.m. – 3:00 p.m. SES021: Well-Being Programs: Achieving a Sunshine State
- Shannon Ramirez, DO; Krishna Patel, MD; Stuart Slavin, MD; Jeffrey Dewey, MD; Dhruvika Mukhija, MD; Erin Goode, DO

Burnout is one of the most prevalent challenges facing physicians today, affecting more than half of physicians. Burnout among resident physicians remains a constant battle with many residents unable to take time to improve their well-being or unwilling to voice their concerns to their superiors for fear of retribution. There is now nation-wide data obtained through the ACGME Resident/Fellow Survey that gives a clearer picture of where shortcomings are, and where to focus well-being improvement efforts. The goal of this session is to help attendees use this information to identify attributes of a thriving resident so that they may come up with a concrete plan to improve their own well-being program. The discussion will allow opportunity for open dialogue on possible shortcomings of the well-being portion of the ACGME Resident/Fellow Survey, and what possible ways of improvement might be.

The ACGME Council of Review Committee Residents (CRCR) is a 34-member multi-specialty group of residents and fellows. Last March, members of that group presented a well-attended workshop at the 2018 ACGME Annual Educational Conference, the goal of which was to foster a discussion on ways to improve well-being in individual programs. Participants left that discussion with many ideas to use at their own programs. The goal for this year’s workshop is to build on the work that attendees are already doing in their home programs with resident responses to these efforts. This year’s session will focused on the following questions: What does a “thriving” resident look like? What have we done to improve well-being? What do residents feel is working? Where are continued areas for improvement? Are there better ways to ask well-being questions? The presenters hope to foster an environment in which innovative ideas and problem solving can encourage attendees to continue to improve the well-being in their own programs.

Target Audience: All

1:30 p.m. – 3:00 p.m. SES022: Behind the Scenes: Your Paper from Submission to Publication
- Gail Sullivan, MD, MPH; Lalena Yarris, MD; Anthony Artino, PhD; Deborah Simpson, PhD

This session will arm all levels of medical educator with insider knowledge that will be useful in preparing future manuscripts for submission, and can also be applied to reviewer and editorial board activities.

Target Audience: DIOs, Program Directors, Faculty, Residents/Fellows

1:30 p.m. – 3:00 p.m. SES023: Longitudinal Assessment: Roles in Continuing Certification and Graduate Medical Education
- David Swanson, PhD; Mira Irons, MD

This session will begin with an overview of the underlying theories and evidence on the use of longitudinal assessments in health professions education. The range of longitudinal assessment program designs under development by ABMS boards and preliminary results from several of the boards using ABMS’s CertLink infrastructure for assessment delivery will be discussed. Potential longer-term research and evaluation questions will be highlighted. In small groups, participants will discuss the relevance of longitudinal assessments for graduate medical education and explore alternate approaches that residency programs might use in mounting longitudinal assessment programs for learners.

Target Audience: DIOs, Program Directors, Faculty, Coordinators
Session Descriptions

FRIDAY, MARCH 8, 2019

1:30 p.m. – 3:00 p.m.  SES024: IMG Trainees: How Program Directors Can Support their Experiences and Success
   – Erica Schuyler, MD; Eleanor Fitzpatrick, MA

This session will focus on the international medical graduate (IMG). The first part of this workshop will provide an overview of current and future contributions of non-US IMGs to the physician workforce and to GME programs. Ms. Fitzpatrick from the ECFMG will then present information that program directors need to know about the process of ECFMG certification, immigration laws, and visas. The second part of the workshop will focus on the IMG resident experience with internationally-trained trainees who will share their experiences about preparing for US residency, orientation to the US health care system, discrimination in the workplace, career planning, and other relevant topics to program directors. Group discussion will be focused on how program directors can promote a learning environment that optimizes the wellness and success of IMG residents.

Target Audience: Program Directors, Faculty, Coordinators, Institutional/GME Personnel

1:30 p.m. – 3:00 p.m.  SES025: Partner with Purpose – How Small Programs Can Expand Training Site Options
   – Amanda Cernovich, MPH; Samantha Kreis, MPH

Partnerships are integral components of any residency program. They are particularly critical for smaller programs that may lack the resources and diversity of training options commonly available to larger institutions. This interactive session will show participants the value of having external and non-traditional partnerships to enhance their curriculum and expand training opportunities. By using a self-assessment tool and group discussions, participants will pinpoint areas for improvement in their programs and brainstorm innovative ways to maximize their local community resources. In addition, best practices in starting conversations for collaboration and maintaining sustainable partnerships will be discussed. Participants will leave this session ready to confidently partner with purpose in their learning communities for the benefit of their residency programs.

Target Audience: All

1:30 p.m. – 3:00 p.m.  SES026: A Research Agenda in Health Disparities for GME
   – Cato Laurencin, MD, PhD

Dr. Laurencin will address the history of racial and ethnic health disparities in the US and why what has been done to date has not been effective in eliminating the gaps. He will present an innovative approach to positively impacting the research agenda through education of the GME workforce in methodology and targets for health disparity elimination.

Target Audience: All
1:30 p.m. – 3:00 p.m. SES027: Process Improvement of GME QI Curriculum: Leveraging the GME, MOC, and CME Connections

- Rani Gereige, MD, MPH; Beatriz Cunill-De Sautu, MD

All ACGME-accredited programs are expected to teach residents and fellows how to conduct interprofessional QI activities preferably linked to the institutional QI initiatives and the learning environment. Faculty members who are board certified must maintain their certification by participating in MOC through self-assessment activities and approved QI projects. Sponsoring Institutions often struggle with achieving these goals as well as providing enough structure to the QI curriculum to allow all of those enrolled in multiple residency and fellowship programs of varying lengths to complete a meaningful QI activity under the mentorship of faculty members. This session highlights the experience of one Sponsoring Institution where PI principles were applied in multiple cycles to successfully link the GME QI goals to faculty professional development through MOC and CME. The session will start with a needs assessment of the audience members, their challenges, and expectations, followed by a brief didactic session focusing on CME, MOC, and professional development. Several table-top small-group exercises (20 minutes each) will be facilitated whereby attendees will brainstorm challenges/barriers encountered and tools/resources (institutional and departmental) needed to apply the improvement process to their existing QI by linking it to MOC and CME. This will support the residents and fellows, the supervising faculty members, the Sponsoring Institution, and the learning environment.

Target Audience: All

1:30 p.m. – 3:00 p.m. SES028: Gamification: A Teaching Tool to Engage Adult Learners

- Gretchen Diemer, MD; Dimitrios Papanagnostou, MD

Educators frequently look for new ideas to help fully embrace the tenets of adult learning theory to improve educational content and retention of their curricula. Gaming uses activities that are competitive with a set of rules and a specific reward. This session introduces gamification as a useful tool with which to design educational content for residents and fellows that meets the criteria for high quality adult learning. Presenters will review best practices in adult learning theory; describe how gamification can help achieve these practices; and emphasize gamification’s intrinsic ability to push residents to apply knowledge. Presenters will cite several examples of successful gaming modalities in undergraduate and graduate medical education that will serve as vehicles for discussion. Examples will include high-tech games (i.e., escape rooms) and low-tech games (board games, puzzles); participants will have the opportunity to explore and adapt these examples to their respective learners. Participants will be provided with a guide to game design that will help them successfully ‘gamify’ their curriculum at their home institutions.

Target Audience: DIOs, Program Directors, Faculty, Institutional/GME Personnel, Residents/Fellows

1:30 p.m. – 3:00 p.m. SES029: I Suspect Physician Impairment, What Should I Do?

- Elexis McBee, DO, MPH; Justin Harder, MD

When a resident or staff physician is suspected of having a substance use disorder, the implications can be far reaching, both for patient safety and provider well-being. This can be particularly challenging during residency when high training demands increase fatigue and stress. Distinguishing between illness, whether it is mental illness, physical illness, or a substance use disorder, and impairment is important. However, even if illness has progressed to impairment, data for physicians supports that treatment usually results in remission and safe return to patient care. Most, but not all, states have adopted Provider Health Programs that work to provide monitoring after treatment and in recovery. This workshop will compare and contrast physician illness with physician impairment, discuss the signs and symptoms of substance use disorders in physicians, lay out a strategy for how to intervene when physician impairment is suspected, and using case studies, examine best practices for physician monitoring and how programs or institutions can work to ensure safe return to patient care and compliance with provider health programs.

Target Audience: Program Directors, Faculty, Coordinators, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel, Residents/Fellows
**SES030: The Science of Effective Mentoring in Medical Education: Does the Style Matter?**

- **Kadriye Lewis, EdD**

Mentoring is a common method of supporting and guiding learners or novices in their development when entering a program or practice in any profession. Mentoring is about creating synergy and a learning partnership between two people: a more experienced or more knowledgeable person helps to guide a less experienced or less knowledgeable person. It is a formative period where the knowledge, skills and attitudes are acquired during professional practice. Although mentoring has been in place and an integral part of medical education for many years, mentoring training is still emerging and most mentors have received no training in how to advise and mentor learners. Moreover, not many mentors articulate their core beliefs and/or describe their approach to effective mentoring strategies. This workshop will present critical mentoring skills, core values, and competencies that are vital for success both for a mentor and a mentee. Through a facilitated discussion and group activities, participants will examine nine types of mentoring models (Structured Five Cs model, One-to-One, Group, Team, Peer, Informal, Reverse, E-Mentoring, Coaching). They will also debate the benefits of mentoring to the mentor, mentee, and institution. Finally, the workshop will provide practical tools/resources for assessing mentors’ belief and evaluating mentors’ and mentees’ performance.

**Target Audience:** All

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**SES031: Mistreatment in GME: See One, Do One, Teach One?!**

- **David Turner, MD; Nancy Knudsen, MD**

Despite increased attention among GME and health system leaders, mistreatment is an ongoing concern across the educational continuum. Mistreatment leads to a toxic learning environment, which impacts both the resilience and the well-being of the entire interprofessional team, which in turn has a well-documented downstream negative effect on patient care. The impact of the hidden curriculum and role modeling for learners is often underappreciated in the academic medical environment, and unfortunately, both phenomena can be the source of negative behaviors in GME learners. Negative role modeling by supervisors leads to a hindrance to learning, and these unacceptable behaviors are often then perpetuated by GME residents and fellows toward each other, students, and other members of the team. To address this issue, the presenters’ GME leaders developed an online site for anonymous or open reporting of trainee mistreatment, a policy on the appropriate treatment of learners, and a committee comprising trainees, program directors, and GME and health system leaders to manage reports of mistreatment. This committee works in close conjunction with both the health system’s professionalism accountability program and the medical school’s committee on appropriate treatment. In this workshop, participants will share practices to address learner mistreatment and develop strategies to apply these principles in their own institutions to help break the cycle of ‘see one, do one, teach one’ for unprofessional behavior.

**Target Audience:** All

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**SES032: CLER Program Updates**

- **Robin Wagner, RN, MHSA; Baretta Casey, MD, MPH; John Patrick T. Co, MD**

This session will provide updates on the ACGME’s Clinical Learning Environment Review (CLER) Program, including preliminary findings from the first set of visits to smaller Sponsoring Institutions, information about sub-protocol activities, and work of the CLER Evaluation Committee in the area of teaming.

*You may pair this session with SES004.*

**Target Audience:** All
### Session Descriptions

#### FRIDAY, MARCH 8, 2019

**3:30 p.m. – 4:15 p.m.**  
**SES033: Sponsoring Institution 2025**  
– Kevin Weiss, MD, MPH; Paul Foster Johnson, MFA; John Duval, MBA, FACHE; Lawrence Opas, MD  
**Sponsoring Institution 2025 (SI2025)** is an ACGME project that is redefining the structure and function of accredited institutional sponsors of future-oriented graduate medical education programs. This session will provide information about new SI2025 activities and how they will guide anticipatory changes in ACGME-accredited Sponsoring Institutions.  
You may pair this session with SES061.  
Target Audience: DIOs, Program Directors, Faculty Members, Coordinators, Hospital Administration/C-Suite/Leadership, GMEC Members

### SPECIALTY UPDATES

These sessions include an update on recent Review Committee and ACGME activities. There will be ample time for Q&A.  
Target Audience: DIOs, Program Directors, Coordinators, Faculty

**3:30 p.m. – 5:00 p.m.**  
**SES034: Specialty Update: Physical Medicine and Rehabilitation**  
– David Pruitt, MD; Caroline Fischer, MBA

**3:30 p.m. – 5:00 p.m.**  
**SES035: Specialty Update: Radiology**  
– James Anderson, MD; Felicia Davis, MHA

**3:30 p.m. – 5:00 p.m.**  
**SES036: Specialty Update: Neurology**  
– Laurie Gutmann, MD; Louise Castile, MS

**3:30 p.m. – 5:00 p.m.**  
**SES037: Specialty Update: Plastic Surgery**  
– Michael Neumeister, MD, FRCSC, FACS; Donna Lamb, DHSc, MBA, BSN

**3:30 p.m. – 5:00 p.m.**  
**SES038: Specialty Update: Orthopaedic Surgery**  
– Peter Murray, MD; Pamela Derstine, PhD, MHPE

**3:30 p.m. – 5:00 p.m.**  
**SES039: Specialty Update: Urology**  
– Chad Ritenour, MD; Kathleen Quinn-Leering, PhD

**3:30 p.m. – 5:00 p.m.**  
**SES040: Specialty Update: Anesthesiology**  
– Cynthia Wong, MD; Cheryl Gross, MA, CAE

**3:30 p.m. – 5:00 p.m.**  
**SES041: Specialty Update: Pathology**  
– Kymberly Gyure, MD; Kate Hatlak, MSEd

**3:30 p.m. – 5:00 p.m.**  
**SES042: Specialty Update: Family Medicine**  
– Stacy Potts, MD, MEd; Eileen Anthony, MJ

**3:30 p.m. – 5:00 p.m.**  
**SES043: Specialty Update: Preventive Medicine**  
– Denece Kesler, MD, MPH, FACOEM; Lorraine Lewis, EdD
## Session Descriptions

**FRIDAY, MARCH 8, 2019**

### SES044: ABMS: The Future of Continuing Certification
- **Mira Irons, MD; Kathleen Ruff, MBA**

This interactive education session will update and advance the GME community’s knowledge and application of the role of the ABMS in sustaining the professional self-regulation of the medical profession by setting professional standards for certification (initial certification and continuing certification). In addition to providing updates to the requirements for board certification across the 24 ABMS Member Boards, this session will highlight the final recommendations of the Commission report from the Vision Initiative whose charge is to assess the current state of continuing board certification and make recommendations for a new framework for the future of a process that is valued by physicians, patients, hospitals, health systems, and other stakeholders.

*Target Audience: DIOs, Program Directors, Faculty, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel, Residents/Fellows*

### SES045: JGME Favorite Papers from 2018: Strategies for Curating the Medical Education Literature
- **Gail Sullivan, MD, MPH; Deborah Simpson, PhD; Anthony Artino, PhD**

The medical education literature expands annually. Faculty members are challenged with keeping up on this body of work in addition to clinical specialty and other reading demands. This session will present tips for managing the growing medical education literature and *Journal of Graduate Medical Education (JGME)* editors’ choices for “best papers” from 2018 that were published in non-JGME journals. Participants will discuss, in facilitated small groups, their strategies for keeping current, and also their own favorite medical education paper(s) from the past year. These strategies and papers will be recorded and a full list will be shared with the participants after the conference. All levels of medical education expertise, from entry level to experienced senior, can benefit from this session.

*Target Audience: Program Directors, Faculty, Residents/Fellows*

### SES046: Back to Bedside (Closed, by Invitation Only)*

### SES047: Wellness in GME: The Florida Experience
- **Joan Younger Meek, MD, MS; Lee Learman, MD, PhD**

Burnout is common among US physicians, impacting the work force and affecting physicians who serve as faculty members in medical schools and residency programs. Medical residents and fellows experience higher levels of burnout and depression than their age-related peers, which affects the quality of care delivered and results in high numbers of suicide. The ACGME has implemented Common Program Requirements that stress the importance of supporting resident and fellow wellness in an institutional, programmatic, and individual fashion. This session will provide a brief overview of the national scope of the problem of burnout and the response emphasizing clinician well-being. The Council of Florida Medical School Deans conducted a statewide survey of undergraduate and graduate medical education programs to describe the scope of the problem in the state and to assess potential solutions. GME leaders from Florida who participate in the statewide GME Working Group will review the results of these surveys, describe programs that have been developed to promote wellness, and discuss next steps. The presenters will lead attendees in a discussion examining barriers and sharing solutions from other GME programs. They will share ideas for supporting wellness among all who are present in the clinical learning environment, including medical students, faculty members, other health professionals, and staff members.

*Target Audience: All*

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*This session does not qualify for CME.*
Session Descriptions

FRIDAY, MARCH 8, 2019

3:30 p.m. – 5:00 p.m. **SES048: Creation of ACGME Survey Scorecards to Drive Program and Institutional Improvement**

- Yolanda Wimberly, MD; Tammy Samuels, MPA

The ACGME Resident and Faculty Survey reports are key performance indicators utilized by the ACGME Review Committees in making accreditation decisions for programs and institutions. ACGME full and focused accreditation site visits can be initiated due to trending of poor/low Survey results over two to three or more years. Morehouse School of Medicine Graduate Medical Education Office created ACGME survey program scorecards in the fall of 2013. The scorecards are produced and shared with all GME stakeholders each year, and serve as a powerful tool in driving and demonstrating program improvement, improving resident feedback and participation in the annual program evaluation processes, and encouraging collegial competition and support among the programs. Presenters will share their programs’ and institutional improvement journey demonstrated through use of these scorecards and dashboards containing trend data spanning the past six years. Creation of the program scorecards is completed by the GME office annually by compiling each programs’ Survey data to compare and measure the program means and compliance rates against national and specialty data in each of the six Resident (five Faculty) Survey categories and for each non-compliant Survey question that programs may have. Program directors are then responsible for submitting improvement action plans for any non-compliant question/category of the Surveys to the GME/GMEC who assist programs and monitor completion of each programs’ action plans. An institutional GME scorecard is also generated to capture and address non-compliant survey areas and issues across all programs.

Target Audience: All

3:30 p.m. – 5:00 p.m. **SES049: ACGME Scenario Planning: New Project, New Insights from 2050**

- Thomas J. Nasca, MD, MACP; Charles Thomas, MA, MPhil

This scenario-based strategic planning session is a direct follow-on to the strategic planning session at the 2018 Annual Educational Conference. The assumption is that attendees will have some familiarity with scenario-based strategic planning, and the presenters will not repeat introductory material. The presenters will briefly describe the new 2018-2019 ACGME strategic planning process and introduce a number of strategic insights about medicine in 2050 that emerged from the work to date and are robust across all the scenarios. Session participants will be asked to work in table-based groups to develop plans or actions that might be taken today to prepare for the challenges or opportunities suggested by the insights. The last 30 minutes of the session will be dedicated to brief presentations of each table’s work, and each table will also be asked to submit their plans/conclusions, so that ideas and perspectives can be added into the strategy synthesis work for the new ACGME strategic plan.

Target Audience: All
Session Descriptions

FRIDAY, MARCH 8, 2019

3:30 p.m. – 5:00 p.m. SES050: Developmental Education Models: Facilitating the Professional Development of Learners

– Eric Holmboe, MD, MACP, FRCP; William Iobst, MD

The rise of outcomes-based medical education has forced educators to rethink approaches to curriculum and assessment. Competency-based frameworks have been one key strategy in desired transformation to better outcomes. Specialty-specific, developmental Milestones were created and implemented, starting in 2013, to facilitate the incorporation and meaningful use of the Competencies.

A major aspect of competency-based medical education is greater attention to the developmental process in becoming a health care professional. This more explicit focus on the developmental process is leading to innovative and much needed new approaches to curriculum assessment. This 90-minute interactive session will focus on the history and rationale behind developmental learning models, such as Dreyfus, D’all Alba, and mastery-based methods. Participants will then discuss this important shift to developmental thinking, especially around assessments using the Competencies, the Milestones, and entrustable professional activities, using small group exercises, video review, and application of developmental assessment approaches.

Target Audience: DIOs, Program Directors, Faculty, Coordinators, Residents/Fellows

3:30 p.m. – 5:00 p.m. SES051: Clinical Integrity and Ethics Education: A Framework for Teaching Ethics

– Heather Kirkpatrick, PhD, MSCP, ABPP; Aaron Grace, PsyD

As members of a helping profession, many of us have an instinct to honor the wishes of our patients. Often, doing so is easy, or at least straightforward. But what about when the voice of the patient conflicts with our deeply held beliefs, our professional ethics, the desires of the patient’s family, or the law? What then? Furthermore, how do we responsibly teach this skill to our learners? Bioethics training and assessment is essential in training physicians to become leaders in medical settings. What can a successful ethics education plan look like? This interactive session will tackle some of these uncomfortable questions and attempt to untangle the web of honoring our patients, ourselves, and our profession as healers. This challenging issue is viewed through a professionalism lens, and is one that our residents need as they find their own professional identities and learn to balance the competing voices of patient, personal beliefs, and professional ethics. The session will discuss how to begin this conversation with residents and provide two separate activities for teaching clinical ethics. Handouts to develop this curriculum in participants’ own residency programs will be provided.

Target Audience: DIOs, Program Directors, Faculty, Residents/Fellows

3:30 p.m. – 5:00 p.m. SES052: Entrustable Professional Activities for General Surgery: A Pilot Program of the ABS

– George Sarosi, MD; Mary Klingensmith, MD

Entrustable professional activities (EPAs) are an assessment method that integrates the ACGME Competencies into clinical contexts and form a cornerstone of competency-based resident education (CBE). The success of CBE, initially in an orthopaedic residency program in Canada led to the widespread adoption of CBE across all residency programs in Canada through the Competence by Design (CBD) initiative. This session will describe the process of moving into CBE for GME in general surgery in the United States, with description of an American Board of Surgery (ABS)-convened pilot program. This pilot, launched in July 2018 across 26 general surgery residency programs, will evaluate the implementation of five EPAs in general surgery GME. Participants will learn how EPAs differ from the Competencies and the Milestones, advantages of EPAs over current assessment methods, current experience with EPAs in UME and GME, how to construct an EPA for other GME specialties, and how EPAs could be implemented locally in GME across a variety of programs, with attention to faculty development.

Target Audience: DIOs, Program Directors, Faculty Members, Coordinators, Institutional/GME Personnel
Engaging Each Other:
Rediscovering Meaning in Medicine

2019 ACGME Annual Educational Conference

Session Descriptions

Friday, March 8, 2019

3:30 p.m. – 5:00 p.m. SES053: One Size Does Not Fit All: Creating an LGBTQ-Inclusive Curriculum and Clinical Environment
- Almari Ginory, DO; Hector Ojeda-Martinez, MD; Marnie Stefan, MD

A significant portion of residency involves interacting with patients, families, and fellow professionals from diverse backgrounds with respect, compassion, and sensitivity. Despite advances in LGBTQ acceptance, there remains a significant disparity in the provision of health care services to LGBTQ patients. Some of the barriers to treatment include poor communication, improper presumptions, lack of comfort in the patient disclosing personal information, and a clinician’s own lack of knowledge or comfort in treating this in-need population. It is important for physicians to create a welcoming, inclusive environment of care, and this starts in residency. In this session, the speakers will review commonly used definitions and terminology, as well as medical and psychiatric conditions that are more prevalent in the LGBTQ population. They will review methods for providing education to residents and how to create a more LGBTQ-inclusive clinical experience, including examples to foster discussion among attendees and provide guidance on how to implement changes in their programs and institutions.

Target Audience: All

3:30 p.m. – 5:00 p.m. SES054: Gold, Engagement, and Data – Challenges in the Safety and Quality Journey
- Andrew Buchert, MD; Rita M. Patel, MD

This interactive session will explore a multifaceted approach to the engagement of residents and fellows in the patient safety and quality improvement work of specialties and the institution, with a unifying theme of providing and using meaningful and immediately-actionable data. Topics will include involvement of residents in hospital root cause analyses, committees, and culture of safety surveys, dissemination of practice points and interdisciplinary performance data, and the use of team and individual clinical effectiveness data, derived directly from the electronic medical record, to promote excellence in education and patient care. Participants will be involved in reflection and discussion of challenges and strategies to address issues that are identified.

Target Audience: All

3:30 p.m. – 5:00 p.m. SES055: Helping Residents RISE: Adapting a Peer Responder Program to Meet Trainee Resiliency Needs
- Laura Hanyok, MD; Cheryl Connors, MS, RN

Resiliency is a key component of well-being for resident physicians and other health care professionals. This interactive session will equip participants with skills to build resiliency when handling adverse patient events. Adapted from the Johns Hopkins Hospital’s Resilience in Stressful Events (RISE) peer responder program, this workshop will (1) review the importance of supporting clinicians who are second victims in adverse health care events, (2) provide training on how to personally handle stressful events, (3) provide training on how to provide support to peers, and (4) assist participants in forming an action plan to bring these skills home to their individual programs.

Target Audience: All
Session Descriptions

FRIDAY, MARCH 8, 2019

3:30 p.m. – 5:00 p.m.  SES056: Conducting the Self-Study in Residency: An Organizational Performance Model Approach
– Winnie Teo, PhD; Faith Chia, MBBS, MRCP (UK), FAMS, FRCP (Glasg); Selvia Kosim

A meaningful Self-Study process that aids in gathering knowledge from diverse stakeholders to identify areas of improvement is critical; however, the Self-Study is new to ACGME-I-accredited programs in Singapore. This session aims to highlight various organizational approaches and tools to conducting a Self-Study, and to discuss both qualitative and quantitative ways of collecting data for assessment, as well as how these can help point to areas needing improvement in programs. It is hoped that a broad engagement by those with experiences in various residency programs will result in a richer, more holistic approach to planning for the Self-Study.

Target Audience: DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel

3:30 p.m. – 5:00 p.m.  SES057: No Intern Left Behind: Designing a Boot Camp around the Milestones
– Robert Battisti, MD, MS; Briana Donaldson, DO

Interns often enter residency on uneven footing due to variability in medical school experiences. Historically, the Clinical Competency Committee first identified at-risk interns when In-Training Exam (ITE) results were available and/or during initial (six-month) Milestones evaluations. Delayed recognition led to a lag in implementing supportive and corrective resources for the residents. Often, learners continued to have problems in particular Sub-competencies on subsequent Milestones evaluations. The presenters devised a comprehensive learning tool, “Intern School.” Intern School has two aims: first, to identify at-risk learners earlier; and second, to deliver supportive resources to these at-risk learners as an early intervention. This rotation is an intensive four-week block for incoming interns. Case-based discussions, interactive lectures, simulations, and clinical core rotations were used to identify and address Milestones deficits early in an attempt to change the intern’s overall Milestones trajectory. Through a comprehensive, immersive, and evaluative education tool, the presenters showed it is possible to have early identification and correction of Milestones deficits. They also found that intervention interns were more prepared to begin their clinical rotations from a knowledge-based standpoint based upon their ITE scores, which improved compared to the non-intervention class.

Target Audience: DIOs, Program Directors, Faculty Members, Residents/Fellows

3:30 p.m. – 5:00 p.m.  SES058: Resident Training in Social Determinants of Health: Innovations for Program Leadership
– Elizabeth Philippe, MD, MPH; Saint Anthony Amofah, MD, MBA, FACP

It is estimated that up to 80 percent of a patient’s health is determined by external and non biological factors. Clinical interventions, the major focus of residency, however, impact only 20 percent of a person’s overall health care. Those external factors, social determinants of health (SDH), are fundamental building blocks for population health management and have to be addressed in efforts to improve care outcomes. Residency, however, could focus more on such social determinants of health and better ensure that residents acquire the right competencies to become even more productive members of society. This expectation is clearly defined in the ACGME Common Program Requirements and well described as a systems-based practice Competency to be acquired. Program directors and DIOs, however, have challenges in operationalizing this expectation. The session will share the experience of a HRSA-funded Teaching Heath Center in addressing this challenge, as well as offer practical, sustainable solutions. Innovations discussed will demonstrate how the integration of strategies to educate residents on SDH not only help them in acquisition of the Competencies, but also promote outcomes for populations served. This has become a critical skill for the next generation resident.

Target Audience: All
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| **SES059:** Beyond Collaboration: Real-Time Integration with the C-Suite Using CLER, ACGME, and GME Data  
– Ann Dohn, MA; Nancy Piro, PhD; David Entwistle  
Historically, many GME decisions have been made in silos devoid of any meaningful connection among GME, the clinical learning environment, and the mission and vision of the hospital. This session will focus on leveraging the perspectives of the CEO/President of the hospital and GME leadership. Initiating strategic improvement within the clinical learning environment requires DIOs, program directors, and GME to partner collaboratively with the CEO and C-Suite in unprecedented ways. Today we have the availability of multiple data sources, including CLER reports and diverse surveys, which can enable the “means” to facilitate this evolving partnership. Moving beyond the data to establish and maintain an ongoing empirical based dialogue with the C-Suite is the first step in true integration between GME and the senior administration. This full integration also engages residents and fellows in the design of health care organizations that will deliver care across a complex continuum. Collaborative, real-time integration will concomitantly promote the ACGME’s overall vision to support rethinking our health care model to enduring institutions.  
**Target Audience:** DIOs, Program Directors, Faculty, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel, Residents/Fellows |
| **SES060:** Reducing Waste and Enhancing Meaning in the Learning and Working Environment  
– Lyuba Konopasek, MD; Roger Bush, MD  
Operational dysfunction in the learning and working environment is a leading contributor to burnout in physicians in training and practice. Clinician well-being has been identified as a fourth element, changing the Triple Aim to a Quadruple Aim of activities and measures to promote high-quality care. Waste and inefficiency in the working environment and time spent in non-physician activities prevent physicians from engaging in meaningful work, including time with patients. This has a negative effect on their well-being and the quality of care they provide. The new ACGME Common Program Requirements specify efforts to enhance the meaning residents find in the experience of being a physician—including protecting time with patients, minimizing non-physician obligations, and providing administrative support—and allow attention to scheduling, work intensity, and work compression that impacts resident well-being. A key skill is work redesign to reduce waste and optimize work flow. Working with the patient care team and administrators to assess and optimize work flow is an important competency for residents to develop. It will help them improve the working and learning environment in their programs, and continue this work in the practice environment after graduation. This interactive workshop will help faculty members turn work process discussions with residents and fellows from gripe sessions into think tanks for positive change. Session participants will learn techniques for facilitating discussions with the aim to decrease waste in work processes. After a brief introduction of Lean methods and A3 thinking, participants will engage in a model A3 thinking session. They will be charged to identify waste, inefficiencies, and drivers of burnout in case-based discussions. They will then apply A3 thinking in formulating quality improvement projects to address these work flow issues. Interactive skills practice will focus on identifying work flow metrics and communicating with administrators around waste reduction using Lean principles.  
**Target Audience:** All |
Session Descriptions

FRIDAY, MARCH 8, 2019

4:15 p.m. – 5:00 p.m. SES061: ACGME Accreditation and Medically Underserved Areas and Populations

– Kevin Weiss, MD, MPH; Paul Foster Johnson, MFA; Roxanne Fahrenwald, MD, MS; John Sealey, DO

The ACGME recently convened a work group to design an accreditation framework for the enhancement of the physician workforce in communities facing substantial shortages of practicing physicians in various clinical specialties. In this session, members of that group will describe the accreditation framework, and share the results of a policy analysis and needs assessment related to ACGME accreditation and medically underserved areas and populations.

You may pair this session with SES033.

Target Audience: DIOs, Program Directors, Faculty Members, Coordinators, Hospital Administration/C-Suite/Leadership, GMEC Members

5:15 p.m. – 6:30 p.m. SUNSET SESSION Successful Practices for Engaging Residents and Fellows in Patient Safety

– Kevin Weiss, MD, MPH; Katie McKinney, MD, MS; English Gonzalez, MD, MPH; Adam Johnston, MD

Draw on the knowledge and expertise of peers and colleagues in the ACGME’s Pursuing Excellence in Clinical Learning Environments initiative who are working to produce patient safety programs for residents. Using the NCICLE framework, nine Sponsoring Institutions have created immersive patient safety learning programs. Sites will share innovative event investigation approaches serving as catalyst to deeper learning about systems improvement. Examples of concepts to be discussed include demonstrating value to the C-Suite, leveraging organizational infrastructure, and cultivating organizational relationship. Join us to find out more about these tools to inform your own patient safety journey.

Target Audience: DIOs, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel
### Session Descriptions

**SATURDAY, MARCH 9, 2019**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>6:30 a.m. – 8:00 a.m.</td>
<td>Continental Breakfast</td>
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<tr>
<td>6:30 a.m. – 3:00 p.m.</td>
<td>Conference Registration</td>
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<tr>
<td>8:00 a.m. – 5:00 p.m.</td>
<td>ACGME Data Collection Systems Consultations*</td>
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<tr>
<td>7:00 a.m. – 10:00 a.m.</td>
<td>MINI COURSE</td>
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<td>SES062: Co-production: A Core Professional Development Strategy for Learners and Programs</td>
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<tr>
<td>– Eric Holmboe, MD, MACP, FRCP; Eric Warm, MD; Benjamin Kinnear, MD; Matthew Kelleher, MD; Dana Sall, MD</td>
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<td>The rise of outcomes-based medical education has forced educators to rethink approaches to curriculum and assessment. Competency-based frameworks have been one key strategy in desired transformation to better outcomes. A major aspect of competency-based medical education (CBME) is greater attention to the developmental process in becoming a health care professional. CBME also embraces another fundamental principle of adult education, namely that learners have to be active agents in their own professional development. Co-production is both a philosophy and a strategy to facilitate greater and more meaningful involvement in their own learning and assessment. Co-production, using an educational lens, can be defined as the interdependent work of learners and faculty members to design, create, develop, deliver, assess, and improve the relationships and actions that contribute to ultimate competency outcome of the learner and the clinical outcomes of patients eventually cared for in practice by the learner. In essence, the full promise of a competency-based approach cannot be realized without the full and meaningful involvement of learners in their own education. This mini course will help prepare educators to embrace and implement coproduction as a core learning approach.</td>
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<td>Target Audience: All</td>
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| 7:00 a.m. – 10:00 a.m. | MINI COURSE                                      |
| SES063: Remediation of the Struggling GME Learner Part 1: Individualized Remediation Plans |
| – Karen Warburton, MD; David Ecker, MD; Jeannette Guerrasio, MD; Joseph Rencic, MD |
| The majority of program directors across a wide variety of specialties in GME report struggling learners; however, remediation is often an uncomfortable topic. To effectively help these learners, we must embrace a culture in which it is accepted that a certain proportion of learners will struggle to the point of needing remedial teaching. This session will offer attendees practical approaches for building and implementing remediation strategies for their residents and fellows who struggling with clinical reasoning, professionalism, and interpersonal skills. After a brief review of the approach to identifying and remediating learners, the speakers will outline a theoretical framework by which to coach specific clinical reasoning, professionalism, and interpersonal communication skills. Specifically, the use of simulation will be featured as an assessment and coaching tool for remediating professionalism and interpersonal skills. Attendees will work together in small groups to review cases, assess struggling learners, and develop remediation plans. Ample time will be available for discussion and questions of both audience participants and the facilitators. |
| Target Audience: DIOs, Program Directors, Faculty, Coordinators |

*This session does not qualify for CME.*
Session Descriptions

SATURDAY, MARCH 9, 2019

7:00 a.m. – 10:00 a.m.  
**MINI COURSE**  
SES064: Integrating Technology into Teaching: From the Big Auditorium to the Bedside  
– Malford Pillow, MD, MEd; Jared Howell, MS; Anoop Agrawal, MD

Technology is expanding at an exponential rate and completely changing the educational landscape. Digital natives now integrate technology into every facet of their lives. In 2007, the AAMC called for integration of technology in teaching with its publication, *Effective Use of Educational Technology in Medical Education*. Since then, several other publications have echoed the call for “disruptive innovations” and integrating technology. We know that we must adopt these new paradigms to meet the demands of our learners. Unfortunately, the mind is willing, but the tech skills are weak. Many educators fall short in translating the principles of active learning and educational technologies into actual teaching. Our learners have called for a revolution. We must meet them at the point of learning in new ways, directly integrating educational technologies, to meet this call. The purpose of this mini course will be to discuss core educational technologies and principles and become familiar with these tools in both large group presentation and bedside teaching. Participants will begin to practice the tech skills that will help them meet the disruptive call for change.

*Target Audience: Program Directors, Faculty, Residents/Fellows*

7:00 a.m. – 10:00 a.m.  
**MINI COURSE**  
SES065: Promoting Resident and Faculty Well-Being  
– Stuart Slavin, MD; Anne Gravel Sullivan, PhD

The course will focus on three areas that can have an impact on resident and faculty member well-being: individual resilience; the clinical learning environment; and institutional, departmental, and program culture. The session will begin with a description of a resilience and well-being curriculum that has been effective in helping medical students and residents at one institution, and an overview of a new well-being curriculum being developed at the ACGME. Next, challenges and potential strategies for improving the clinical learning environment will be explored in an interactive fashion. Finally, the presenters will engage participants in a discussion of how culture can affect well-being and how it can be influenced in positive way. The course is designed to give participants concrete ideas for change and leave them inspired to take action at their own institution.

*Target Audience: All*

7:00 a.m. – 10:00 a.m.  
**MINI COURSE**  
SES066: Diversity and Inclusion in GME – Realities, Challenges, and Solutions  
– Bonnie Mason, MD; Sunny Nakae, PhD; Joseph Schwab, MD; Carla Bridges, MD

Program directors, chairpersons, and GME leaders know all too well the challenges of creating a diverse resident workforce. This mini course will provide a review of current demographic data regarding the gender and racial/ethnic composition of the GME workforce as compiled by the ACGME, along with an examination of ‘best practices’ in diversity and inclusion at the GME level. Targeting those with “boots on the ground” faculty members and leaders in GME, current challenges in the recruitment and retention of diverse residents and fellows will be discussed in small group formats. Group summaries with a robust discussion will follow to create a shared learning environment with the goal of providing tangible and implementable solutions for those tasked with the diversifying their resident workforce.

*Target Audience: DIOs, Program Directors, Faculty, Coordinators, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel*
Session Descriptions

SATURDAY, MARCH 9, 2019

7:30 a.m. – 9:00 a.m. **SES067: Coordinator Plenary: Building Strong Relationships between the GME Office and Programs**
  - Amy Day, MBA; Ann Dohn, MA; Rhea Fortune; Susan Sheehan; Eileen Molloy

The importance of having positive interactions between the DIO’s office and individual programs is essential. DIOs are responsible for the oversight of all GME programs at their institution, but each program director is responsible for his or her own program. Many times, especially in large programs, breaks in communication occur that can result in poor handling of issues. The panelists in this session will highlight how their four institutions function, interact, and work together.

*Target Audience: Coordinators, Institutional/GME Personnel*

7:30 a.m. – 9:00 a.m. **SES068: Review Committees-International Update**
  - Lorraine Lewis, EdD; Llewellyn Lee, MBBS, MMED; James Arrighi, MD

The Executive Director and two members of the Review Committees-International will discuss updates related to how these committees review Sponsoring Institutions and programs accredited by ACGME International.

*Target Audience: DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel, ACGME-I-Accredited Program Personnel*

7:30 a.m. – 9:00 a.m. **SES069: Site Visit Confidential: Behind the Scenes at Different Accreditation Site Visits**
  - William Robertson, MD, MBA; Judith Rubin, MD, MPH

In the ACGME’s current accreditation model, there are a number of different types of accreditation site visits, and their respective aims, objectives, and approaches may not be fully understood by the graduate medical education community. This interactive lecture with audience engagement and the opportunity to ask questions and provide input will offer an inside look into the accreditation site visits, including new types of visits, behind-the-scenes preparation, and lots of practical take-away information for accreditation site visit preparation and readiness.

*Target Audience: DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel*

7:30 a.m. – 9:00 a.m. **SES070: Household-Centered Care: Linking Resident Training, Community Benefit, and Population Health**
  - Michelle Agudo, MS; Gabriel Suarez, MD

This session will highlight a public-private community health partnership involving the Florida International University Herbert Wertheim College of Medicine (FIU-HWCOM) and the West Kendall Baptist Hospital Family Medicine Residency program. The Green Family Foundation Neighborhood Health Education Learning Program (NeighborhoodHELP) is a hallmark program of FIU-HWCOM. The program brings an interdisciplinary team of health care professionals, and outreach workers, together with other university, hospital, and community partners to address patients’ health and social needs. The essential element of the initiative is household-centered care – culturally competent care that identifies and addresses social determinants of health and provides primary care, behavioral health care, social services, and integrated care management – deployed in select underserved communities. The residents of the West Kendall Baptist Hospital Family Medicine Residency program are active partners in this initiative throughout the three years of their training. They provide care to families in the home and on the program’s mobile health centers and act as junior faculty members to medical students. This session will describe NeighborhoodHELP’s unique and innovative approach to creating a program that benefits resident education, hospital systems, and most importantly members of the community. The presentation will describe the development, core values, structures, curriculum, competencies, activities, outcomes, and future goals of this partnership. The goal is to illustrate the comprehensive nature of this health care initiative and the innovative approach to build a new breed of health professionals, reduce health care costs, and create a healthier society.

*Target Audience: All*

*This session does not qualify for CME.*
Session Descriptions

SATURDAY, MARCH 9, 2019

7:30 a.m. – 9:00 a.m.  SES071: Town Hall – Surgical Accreditation
– John Potts, MD
This session will provide an open forum for attendees to receive updated information regarding the latest accreditation news in their specialties, and give them the opportunity to ask accreditation-related questions. Led by the ACGME Senior Vice President, Surgical Accreditation, this session will be highly interactive and geared to the needs of the audience.
Target Audience: DIOs, Program Directors, Coordinators, Faculty

7:30 a.m. – 9:00 a.m.  SES072: What is Happening to the IMG Applicant Pool? Some Observations and Predictions
– William Pinsky, MD; John Boulet, PhD, FSSH
International medical graduates (IMGs) comprise a critical component of physicians in training and practice in the United States. Changes in the IMG applicant pool for positions in US graduate medical education have the potential to shape the clinical learning environment and the face of the US physician workforce. In this session, ECFMG and its foundation, FAIMER, analyze changes in the composition of the IMG applicant pool, assess the impacts of factors such as US immigration policy and competition from the world’s other health care systems, and make predictions for the IMG applicant pool of the future. The session will conclude with discussion of ECFMG initiatives to ensure that physicians who cross borders are qualified, regardless of their origin or destination.
Target Audience: DIOs, Program Directors, Faculty

7:30 a.m. – 9:00 a.m.  SES073: Single GME Accreditation System Update
– Lorenzo Pence, DO, FACOFP, FAODME
The ACGME, American Osteopathic Association (AOA), and American Association of Colleges of Osteopathic Medicine (AACOM) announced their agreement to a Memorandum of Understanding (MOU) on February 26, 2014 that outlined a transition to a single graduate medical education accreditation system for residency and fellowship programs in the United States, and provides the framework and timeline for how the transition would proceed. The transition to a single GME accreditation system started July 1, 2015, is currently in its fourth year, and will conclude June 30, 2020. AOA-approved programs have been successful in applying for and achieving ACGME accreditation and Osteopathic Recognition. This session will appeal to a broad group of institutional, program, medical school, and OPTI leadership and personnel who would like to learn more about the transition to a single GME accreditation system. The presentation will provide overview and background of the process, highlights of the transition, and progress of institutions and programs to date. The session will include an interactive didactic presentation and ample time for questions.
Target Audience: All
### Session Descriptions

**SATURDAY, MARCH 9, 2019**

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<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Presenters</th>
<th>Description</th>
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| 7:30 a.m. - 9:00 a.m. | **SES074: Career Skills Beyond the Competencies: Career Planning, Business, and Leadership** | David Ninan, DO; Dan Kim, MD; Parastou Farhadian, MD; Roger Garrison, DO  | An effective physician leader must possess a wide range of skills beyond the six Core Competencies. Essential, non-clinical career skills are often overlooked and not incorporated into the traditional educational curricula. One such neglected area is the development of a comprehensive strategy and approach to career planning after residency. Career management encompasses skills such as networking, CV building, interviewing, personal branding, and marketing. A second critical area is in the realm of finance, both in the personal lives of residents and in various leadership roles they may encounter in their careers. The third area covered in this session is leadership development, including conflict resolution, the science of persuasion, and a group mentorship session with a CMIO, CMO, and CEO. The program was initially developed nine years ago in the presenters’ Anesthesiology Department. Based on the successful feedback from graduates, they expanded it to include residents from six other specialties: family medicine, general surgery, internal medicine, neurological surgery, and pharmacy. The presenters will share their successes and lessons learned as they implemented this interdisciplinary program across all of their GME programs.  
*Target Audience: All* |
| 7:30 a.m. - 9:00 a.m. | **SES075: CLER Ideas Exchange** | John Hopper, MD; Marian Damewood, MD; Kathryn McGoldrick, MD; Paul Uhlig, MD | Draw on the knowledge and expertise of your peers in this fast-paced, multi-input session. Participants will share ideas in a peer consult format helping colleagues refine current or planned projects while gaining ideas for their own institutions. Roundtable discussions will be anchored by the CLER Focus Areas and moderated by CLER Field Representatives. Half of the discussion time will be devoted to the newest Focus Area of Well-Being.  
*Target Audience: All*  |
| 7:30 a.m. - 9:00 a.m. | **SES076: Interprofessional Collaboration: Essential to Clinical Learning Environments of the Future** | Kalli Varaklis, MD, MSEd; Mary Ottolini, MD, MPH; Sarah Peyre, EdD | Learn about the journey of eight organizations to frame the concept of an interprofessional learning environment that aligns with hospital and medical center needs. Draw on the knowledge and expertise of peers and colleagues in the ACGME’s Pursuing Excellence in Clinical Learning Environments initiative in this interactive session, and about Pursuing Excellence’s progress conceptualizing and developing an interprofessional clinical learning environment. Participate in discussions and exercises that will start you on your own journey to create a collaborative interprofessional environment for patient care and learning. Examples of concepts to be discussed include speaking the language of the C-Suite, leveraging organizational infrastructure, and cultivating interprofessional practice.  
*Target Audience: DIOs, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel*  |
Session Descriptions

Saturdays, March 9, 2019

7:30 a.m. – 9:00 a.m.  SES077: Enhancing the Learning Environment through Root Cause Analysis Briefing and Debriefing

Amy DiLorenzo, MA; Katie McKinney, MD, MS

Root cause analysis (RCA) is a patient safety methodology used within and outside of health care to conduct retrospective analysis of adverse events. The University of Kentucky has nearly 10 years’ experience engaging residents and fellows in RCA. Through continuous quality improvement of our RCA process, we have observed that the manner in which learners and faculty members prepare for, engage in, and debrief adverse event analysis has significant impact not only on the quality of the analysis, but also on learner perceptions regarding institutional patient safety culture. With Kentucky’s approach as background, participants will view a simulated RCA, and discuss learner, faculty member, and program director perspectives and the impact of perceived patient safety culture and learning climate. Subsequent to this activity, workshop presenters will deliver an abbreviated RCA briefing/debriefing training for participants. Participants will then divide into pairs and simulate root cause preparation for learners and faculty members. The session will include participant discussion about the impact of patient safety culture on the GME learning environment. RCA resources will be supplied to enable discussion at participants’ home institutions.

Target Audience: All

7:30 a.m. – 9:00 a.m.  SES078: Keep Calm and Carry On: How to Effectively Manage a Crisis

Cristin Owens, MEd; George Sarosi, MD

Historically, response to crisis has been reactionary, with little forethought going into notification protocols, preparing for the emotional fall-out, dealing with the media, or managing rumors and speculation. Back by popular demand, this session will facilitate discussion with leadership and management during a crisis, as well as supply a framework for an Emergency Response Flip-Chart that participants can take and personalize for their institution. We will tackle crisis at all levels, such as notifying next of kin, protecting residents’ and families’ right to privacy, as well as more complex issues, such as dealing with social media fallout, informing peers and clinical staff members, and institutional announcements.

Target Audience: All

7:30 a.m. – 9:00 a.m.  SES079: Discrimination, Bullying, Harassment, and Sexual Harassment: Lessons Learned and Next Steps

Lisa Cannada, MD; Julie Samora, MD; Carrie Sims, MD, PhD

In 2015, an incident in Australia led to a thorough assessment and action plan for addressing issues related to bullying and harassment (including sexual harassment) in medicine. Fast forward to 2017-2018 in the US, where many professions are making progress toward addressing issues related to harassment and abuse. Medical education and the medical professions have not been immune to these issues and pressures. Participate in a national conversation on how to improve the culture in medicine and medical education to create a more positive learning and working environment free of discrimination, bullying, and sexual harassment.

Target Audience: All
Session Descriptions

SATURDAY, MARCH 9, 2019

7:30 a.m. – 9:00 a.m. **SES080: Learning to LEAD: Building Leadership and Scholarship Capacity in Diversity and Inclusion**
- Carmin Powell, MD; Lahia Yemane, MD; Michelle Brooks, C-TAGME; Carrie Johnson, MBA; Rebecca Blankenburg, MD, MPH

The patient population in the US is rapidly becoming more diverse, yet the health care workforce has continued to poorly reflect the diverse backgrounds of the patients it serves. Almost 10 years ago, the AAMC outlined in its 2009 “Addressing Racial Disparities in Health Care” that the first aim is for medical institutions to work to increase racial and ethnic diversity of the US physician workforce. While recruitment efforts have enhanced diversity at the medical trainee level, there is still a lack of diversity amongst academic medicine leadership. Academic leadership needs more representation of racial and ethnic minorities, women, and LGBTQIA physicians. This interactive workshop guides participants in designing or refining their own diversity and inclusion programs. It starts with discussing the need to improve diverse representation and leadership in academic medicine. Participants will be asked to share their programs' diversity and inclusion programs for residents/fellows and identify institutional barriers to advancement in leadership roles. Next, presenters will share the lessons learned from implementing their innovative LEAD (Leadership Education in Advancing Diversity) Program across seven departments and 40 GME programs. Participants will work in small groups to create diversity and inclusion mini-curricula for trainee leadership and scholarship development. Participants will leave with a plan of action and resources for creating and implementing a diversity and inclusion program in their own institutions.

*Target Audience: All*

7:30 a.m. – 9:00 a.m. **SES081: The Challenges of Creating and Maintaining a Graduate Medical Education Program**
- Richard Terry, DO; Frank Edwards, MD; Roger Schenone, DO

The first part of the session will focus on the initial stages of developing a GME paradigm in a community hospital system with little or no background as a teaching institution, using as an example the presenters’ experience at the Arnot Ogden Medical Center in Elmira, New York. The following topics will be discussed in greater detail: 1) the rationale for having a GME program in the first place; 2) how to generate administrative, medical staff and community support; 3) the process of partnering with regional academic centers; and 4) the relevance of this process to osteopathic programs transitioning to ACGME accreditation. The second part of the session will detail the operational pitfalls encountered in developing a community hospital GME program once the decision has been made to embark upon that journey. Learners will receive practical tips on how to develop the faculty and training standards necessary to maintain a robust, academic program while avoiding common “land mines.” The final segment will offer further practical tips and strategies on how to support a scholarly environment in a community hospital system, and on the necessity of continuing to grow and develop linkages with other community hospital systems.

*Target Audience: All*
## Session Descriptions

### SATURDAY, MARCH 9, 2019

**7:30 a.m. – 9:00 a.m.** **SES082:** Putting Innovative Simulation Methods into Action for Communication Skills Training  
— Laura Morrison, MD; Stephen Berns, MD; Caroline Hurd, MD  
Recent advances in the art and science of communication skills training expand the available teaching methods for medical educators. Simulation is at the core of these options but in its most elaborate forms, can be time and resource intensive. Methods like drills, scripting, and improvisation promote skills practice through skill isolation, repetition, and reflection, and are being used and adapted in innovative ways internationally. Individuals can gain comfort with specific words and phrases and experiment with when to use different tools and strategies. These methods introduce potential flexibility in approach and are easily adaptable to different scenarios and settings. This session will provide participants with demonstrations of these methods and opportunities to explore and practice them as learners and teachers. It will also provide an educational and structured discussion about potential applications to help participants incorporate these methods into their own settings.  
*Target Audience: All*

**7:30 a.m. – 9:00 a.m.** **SES083:** The Changing Physician Expectations for Certification from an Osteopathic Perspective  
— Adrienne White-Faines, MPA, FACHE; Daniel Williams, DO; Brett Spencer, MD, MBA  
Time pressures, work-life balance, stress from high stakes examinations, technology, and generational differences drive change in the value and meaning of specialty board certification. This presentation identifies board certification (Initial and Continuing) expectations for an emerging generation of osteopathic physicians, and shares considerations based on their residency specialty and experience.  
*Target Audience: All*

**7:30 a.m. – 9:00 a.m.** **SES084:** Better Patient Care is the Outcome: Diversity, Equity, and Inclusion at Kaiser Permanente  
— Ronald Copeland, MD, FACS  
Dr. Copeland will set forth the principles behind Kaiser Permanente’s focus on diversity, equity, and inclusion that has led to creative solutions to real-world problems that are observed in the course of delivering culturally appropriate health care. He will describe how, with a large cohort of trainees, they have worked to establish a clinical learning environment that reflects the System’s values on health equity, inclusion, and elimination of disparities. Finally, he will address the System’s new mission of addressing the workforce pipeline through the founding of a medical school where the focus will be to educate leaders in diversity, inclusion, and health care equity.  
*Target Audience: All*

**9:00 a.m. – 9:15 a.m.** Break

**9:15 a.m. – 10:15 a.m.** **SES085:** President’s Plenary  
— Thomas J. Nasca, MD, MACP  
*Target Audience: All*

**10:30 a.m. – 12:00 p.m.** **SES086:** Marvin R. Dunn Keynote Address: Rediscovering Meaning in Medicine  
— Vivek H. Murthy, MD, MBA; Thomas J. Nasca, MD, MACP  
A fireside chat with the 19th Surgeon General of the United States and the President and Chief Executive Officer of the ACGME.  
*Target Audience: All*
## Session Descriptions

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<td>12:00 p.m. –</td>
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| 1:30 p.m. – 4:30 p.m. | **SES087: Polarity Thinking: An Effective Approach to Solving Challenges in Programmatic Assessment**

  - **Speakers:** Eric Holmboe, MD, MACP, FRCP; Eric Warm, MD; Benjamin Kinnear, MD; Matthew Kelleher, MD; Dana Sall, MD

The implementation of competency-based medical education has created a number of tensions in redesigning and transforming residency and fellowship programs. Too often, program and other educational leaders approach these tensions as either-or polarities (or paradoxes) than can lead to inaction, frustration, and cynicism. Examples of current polarities in medical education include standardization versus flexibility in assessment approaches; high stakes versus low stakes testing; numeric ratings versus narrative assessment; and autonomy versus supervision—to name just a few. Polarity thinking, developed by Barry Johnson, is a helpful philosophy and strategy that treats polarities as both-and propositions instead of either-or arguments. Polarity thinking can be indispensable in helping residencies and fellowships build and operate effective programs of assessment. Programmatic assessment is essential for accurately determining the professional abilities of learners, and for effectively using assessment data for making Milestones judgment and progress decisions. This mini course will explore the key elements of programmatic assessment, including the important need to engage the learner as an active agent in the assessment program. Participants will use a polarity map to review and reflect on a current challenge in their own assessment program.

  - **Target Audience:** All

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<td>1:30 p.m.</td>
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| 1:30 p.m. – 4:30 p.m. | **SES088: Remediation of the Struggling GME Learner Part 2: Programmatic Considerations**

  - **Speakers:** Karen Warburton, MD; David Ecker, MD; Jeannette Guerrasio, MD; Joseph Rencic, MD

This session will build on the skills of Remediation of the Struggling GME Learner Part 1: Individualized Remediation Plans, addressing remediation at the programmatic level. For remediation to be effective, there needs to be a greater culture of support for learner well-being and remediation. This session will begin by discussing how to manage burnout within GME programs and enhance resident well-being. It will then explore the logistic considerations involved in building a remediation program, including faculty development and coordination across departments, involvement of the GME and legal offices, and development of resources for mental health evaluation and care. The presenters will share their experiences in the development of well-being and remediation programs at multiple academic institutions. A portion of the session will be spent discussing practical legal and documentation concerns that every program needs to know. The audience will then have the opportunity to brainstorm similar programs at their own institutions. Ample time will be available for discussion and questions of both audience participants and the facilitators.

  - **Target Audience:** DIOs, Program Directors, Faculty, Coordinators
**Session Descriptions**

**SATURDAY, MARCH 9, 2019**

**1:30 p.m. – 4:30 p.m. MINI COURSE**

**SES089: The Humanism Project: Designing a Communication Skills and Professionalism Curriculum**  
– Jennifer Breznay, MD, MPH; Lawrence Wolf, MD; Mark Roberts; Renata Kuperman, DO

The ACGME Milestones for all specialties highlight competencies in interpersonal communication skills and professionalism. Yet most programs resort to an informal approach to instruction in these critical areas. Programs rely on the role modeling of senior residents and attendings to instruct trainees, when these teachers may not be expert or even competent in these areas themselves. Clinical programs will benefit from a structured curriculum that defines the set of knowledge, skills, and attitudes in an integrated curriculum on communication and professionalism. This session uses the example of The Humanism Project (THP), a curriculum developed for an internal medicine residency program with 106 trainees at an urban, community hospital. Using the experience of THP’s development, participants will map out steps to create a formal, longitudinal course for residents which holistically addresses communication skills and professionalism. Initially, participants will learn a basic set of communication skills (Open Ended Questions, Ask-Tell-Ask, NURSE, SUPER) and the techniques used to teach and evaluate these skills. This will establish the core communication curriculum upon which the other layers of THP are constructed. The next part of the session will describe how THP connects communication development to a set of core topics. Among these are unconscious bias, coping with conflict, the boundaries of advocacy, and self-care. In the third part of the session, participants will learn about the importance of Biopsychosocial Rounds, the longitudinal process group experience in THP. In this group, residents regularly debrief with each other and a facilitator about doctoring and training. These sessions are open ended and without agenda. Participants will consider ways to implement similar groups into their program. Finally, participants will identify obstacles to implementation of THP: finances; limited resident time; limited faculty skills; difficulty demonstrating impact; and others. Strategies to overcoming these obstacles will be reviewed. Participants should leave this session with resources and a plan to support a THP-like curriculum that suits their own program’s needs.

**Target Audience:** All

**1:30 p.m. – 4:30 p.m. MINI COURSE**

**SES090: Going Beyond Green, Yellow, Red to Visualizing Data Trends to Assess GME Programs**  
– Karen Miller, MS; Linsey Greenwood, MHA

There still exists a thirst for methods to visualize outcome data that truly reflect the quality of GME programs. There is a need to go beyond the traditional Green, Yellow, Red assessment methodology to visualizing trends using metrics selected based on their value and significance. This interactive mini course provides participants experience in: 1) using a Value vs. Significance Matrix to classify metrics as either essential, creditable, or distractors; 2) weighting metric categories based on participants’ perceptions of the emphasis each category should have on a program’s overall performance score 3) using a formula-driven method to compare data points; 4) producing templates to calculate metric category scores and overall program performance score; and 5) creating a GME dashboard using Excel to visualize trends in metric categories and overall program performance outcomes. If possible, participants should bring a fully charged personal device capable of running Microsoft Excel.

**Target Audience:** DIOs, Program Directors, Coordinators, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel
Session Descriptions

SATURDAY, MARCH 9, 2019

1:30 p.m. – 2:15 p.m.  SES091: Planning for your First CLER Experience

– Jose Zayas, DO; James Zaidan, MD; Marie Trontell, MD; Sharhabeel Jwayyed, MD

Each year, new Sponsoring Institutions come off of the Initial Accreditation period and are eligible for their first CLER visit. In addition, leadership roles change and new GME leaders may not have experienced a CLER visit. ACGME CLER Field Representatives will describe the history of the CLER Program, the goals of CLER visits, the format of a CLER visit, and answer questions from participants. They will also share resources for educating local leaders about the six CLER Focus Areas. Participants will be encouraged to share ideas about how their Sponsoring Institution is approaching the integration of residents and fellows into institutional patient safety and quality improvement initiatives.

You may pair this session with SES120.

Target Audience: DIOs, Institutional/GME Personnel

1:30 p.m. – 3:00 p.m.  SES092: ACGME Resident Wellness Data: Results from Five Years of Surveys

– DeWitt C. Baldwin Jr., MD; Nicholas Yaghmour, MPP; Paul Rockey, MD

From 2013-2017, over 80,000 residents and fellows responded to a brief, anonymous survey. Self-reported burnout, depression, satisfaction, and engagement will be discussed, with a focus on differences by gender, specialty, and training level.

Target Audience: All

1:30 p.m. – 3:00 p.m.  SES093: Physician Migration and GME

– Susan Day, MD; William Pinsky, MD; John Boulet, PhD, FSSH; Lorraine Lewis, EdD

Education plays a key factor in physician migration; lack of available education is a main contributor to “brain drain.” This session will address the following areas:

1. How does the world define graduate medical education? Do international standards exist?
2. How does the ECFMG determine the quality of graduates from international programs? Who is migrating, from, and why?
3. What are the expectations of graduates of ACGME-I-accredited programs with regard to pursuit of further educational opportunities?

Target Audience: DIOs, Program Directors, Faculty, Institutional/GME Personnel, Residents/Fellows, International
Session Descriptions

SATURDAY, MARCH 9, 2019

1:30 p.m. – 3:00 p.m.  SES094: Target 2025: Interprofessional Clinical Learning Environments for Team-Based Care

- Stuart Gilman, MD, MPH; Nancy Harada, PhD, PT; Kathryn Rugen, FNP-BC, FAAN, FAANP; Mamta Singh, MD, MS, FACP; Laural Taylor, MSW

Clinical interprofessional education is increasingly advocated, yet a daunting challenge for many programs. It is envisioned that by 2025, health care delivery will occur through non-hierarchical health care teams where leadership roles will be shared between physicians and other health care professionals (Sponsoring Institution 2025 Task Force). Therefore, it is important for educational leaders to develop interprofessional training programs where future health professionals are taught to work in, lead, and improve interprofessional, patient-centered, team-based care. This session will present work within Department of Veterans Affairs (VA) primary care settings to accomplish interprofessional team-based learning and practice. This work began in 2011 when the VA Office of Academic Affiliations established the Centers of Excellence in Primary Care Education (CoEPCE), now a seven-site collaborative leading to the development of the interprofessional clinical learning environment (ICLE). Presenters will describe development of the ICLE, including organizational factors, curriculum, evaluation, and dissemination. The session will culminate with a list of ICLE “critical components” interspersed with audience engagement about barriers and facilitators to expanding the ICLE at their own institutions. The audience will receive online resources of CoEPCE scholarly articles and practical tools. This session is designed to stimulate discussions on the ICLE to prepare future health professionals to work in, lead, and improve interprofessional team-based care.

Target Audience: All

1:30 p.m. – 3:00 p.m.  SES095: Distinction and Recognition: What you Need to Know about Osteopathic UME and GME

- Mark Speicher, PhD; Stephen Shannon, DO, MPH

In this session, the American Association of Colleges of Osteopathic Medicine will present information geared to DIOs, program directors, and program faculty members on the content, growth, and development of osteopathic medical education in the US. The session will then provide information on the history, development, and growth of osteopathic medical education, including: the structure of COMs; the accreditation requirements of COMs and how those requirements compare to the requirements of the LCME; the number of COMs and campuses; curricular similarities and differences among COMs, and between COMs and LCME-accredited medical schools; information on the COMLEX examination series; clinical rotation curricula, organization, and locations; characteristics of COM faculty members; the structure of the affiliation between COMs and residencies, and the UME-GME pipeline in osteopathic medicine; and the characteristics of residency programs affiliated with COMs. This session will also discuss how osteopathic medical students are trained in osteopathic manipulative medicine, and the characteristics of programs that have received and are applying for ACGME Osteopathic Recognition. Following the presentation, discussion will center around differences in training between residents coming from COMs and elsewhere, and the likely impact of these differences on residency programs, their faculty members, and their patients.

Target Audience: DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel, Residents/Fellows
## Session Descriptions

### SATURDAY, MARCH 9, 2019

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Description</th>
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| 1:30 p.m. – 3:00 p.m. | **SES096: Making the ACGME Resident Survey a Catalyst for Program Improvement: Resident Voices Heard**  
- David Larson, MD; Donald Kraybill, PhD; Andrea Chow, MA  
  The annual ACGME Resident/Fellow Survey is an integral part of the ACGME accreditation process. Though the Resident/Fellow Survey is administered in the early part of the calendar year, it is commonly not viewed by the Review Committees or the Accreditation Field Representatives until months later. To address this possible disparity and its impact on the site visit, a Field Representative, program director, and residents/fellows of a program were surveyed at the time of their site visit. The results of these surveys and suggestions to enhance the value of the Resident/Fellow Survey to both the Field Representative and the program director will be presented.  
  Target Audience: All |
| 1:30 p.m. – 3:00 p.m. | **SES097: Does a Wellness Curriculum Impact Resident Burnout and Medical Knowledge?**  
- Elise Lovell, MD; Kelly Williamson, MD  
  The ACGME recognizes that residents are at high risk for burnout and depression. The current ACGME Common Program Requirements state that programs and Sponsoring Institutions have the same responsibility to address well-being as other aspects of resident competence. Yet there are limited studies evaluating the impact of resident wellness curricula. This session will share the presenters’ experience creating and implementing a multi-faceted year-long wellness curriculum at five emergency medicine residencies. Components of published non-emergency medicine wellness curricula were integrated with accepted domains of wellness. Didactic presentations as well as non-didactic resources and activities were included. Outcomes of resident burnout and resident medical knowledge were compared over one year between residencies introducing the curriculum and control sites. Feedback from residents about perceived high and low value curricular elements will be discussed, as well as reflections on how resident perceptions and study results will impact future curricular modifications.  
  Target Audience: DIOs, Program Directors, Faculty, Residents/Fellows |
Session Descriptions

SUNDAY, MARCH 10, 2019

1:30 p.m. – 3:00 p.m. SES101: Redefining Meaning in Medicine: How to Have a Positive Impact on Resident Well-being

1:30 p.m. – 3:00 p.m. SES102: Enhancing Resilience Among Medical Students and Residents

1:30 p.m. – 3:00 p.m. SES103: Developing Interprofessional Teams for Patient Safety

1:30 p.m. – 3:00 p.m. SES104: Interprofessional Education: A Review of Evidence and Best Practices

SATURDAY, MARCH 9, 2019

1:30 p.m. – 3:00 p.m. SES098: Transforming Interprofessional Quality Improvement: What’s your Best Practice?

1:30 p.m. – 3:00 p.m. SES099: Developing Residents as Leaders for Transformational Change

1:30 p.m. – 3:00 p.m. SES100: Improving your Graduate Medical Education Committee

1:30 p.m. – 3:00 p.m. SES101: Redefining Meaning in Medicine: How to Have a Positive Impact on Resident Well-being

1:30 p.m. – 3:00 p.m. SES102: Enhancing Resilience Among Medical Students and Residents

1:30 p.m. – 3:00 p.m. SES103: Developing Interprofessional Teams for Patient Safety

1:30 p.m. – 3:00 p.m. SES104: Interprofessional Education: A Review of Evidence and Best Practices

1:30 p.m. – 3:00 p.m. SES105: The Role of the Resident in Advancing Interprofessional Practice

Target Audience: All
Session Descriptions

SATURDAY, MARCH 9, 2019

1:30 p.m. – 3:00 p.m.  SES101: True Stories about Physicians’ Struggles with Mental Illness and Strategies for Recovery
   – Katia Mercado, MD; Susan Hill, MD
   Over the last several years, more and more stories are being told about physician and resident suicide and burnout and health professionals with drug and alcohol addiction. The statistics are staggering, with averages of 400 suicides per year and between 10-15 percent known alcohol – and/or drug – addicted physicians currently in practice. Hospitals, clinics, and residency programs are scrambling to find solutions in a culture deeply entrenched with negative ideation surrounding mental health issues. While overarching systemic change is necessary, it is often cumbersome and sluggish at best. Sometimes the best place to start is with small changes within yourself. In this workshop, a family medicine resident and a program director share their struggles with anxiety and depression and their journey toward recovery. They will teach which strategies have been effective for them, such as overcoming stigma toward mental health diagnosis and medications, mindfulness meditation, increased physical activity, cognitive behavioral therapy, acceptance and commitment therapy, and compassion toward others and to self. Come and try out a variety of coping and recovery strategies and see what works for you.
   Target Audience: Program Directors, Faculty, Residents/Fellows

1:30 p.m. – 3:00 p.m.  SES102: Remediating without Shaming: Addressing Unprofessional Behaviors without Inducing Shame
   – Catherine Kuhn, MD; William Bynum, MD
   Shame is a powerful emotion that occurs in response to negative events, such as making mistakes or experiencing mistreatment; however, despite the ubiquitous nature of shame, little is known about the role it plays in medical education. New data suggests that shame may lead to significant distress in learners and may provoke behaviors deemed unprofessional and/or requiring remediation. This finding has implications for educators, program directors, and institutional officials who may interact with or need to remediate learners whose unprofessional behavior may be driven by unrecognized shame. In this workshop, presenters will outline the psychology of self-conscious emotions (shame, guilt, and pride), discuss how shame may lead to behaviors perceived as unprofessional, and – utilizing group discussions – will brainstorm how individuals and programs might interact with struggling learners in a way that mitigates damaging shame and promotes individual resilience and growth.
   Target Audience: DIOs, Program Directors, Faculty, Institutional/GME Personnel, Residents/Fellows
**Rediscovering Meaning in Medicine**

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**Session Descriptions**

**SATURDAY, MARCH 9, 2019**

1:30 p.m. – 3:00 p.m.  **SES103: Defining a Structured Program of Assessment for Clinical Competency Committees**

- Holly Caretta-Weyer, MD, MHPE(c); Kendra Parekh, MD

The adoption of a competency-based framework of assessment has necessitated a change in how we approach the purpose of the Clinical Competency Committee (CCC) and the assessment data required to make decisions regarding entrustment, promotion, and remediation. This includes gathering multimodal assessment data across time and context from multiple assessors. The Association of American Medical Colleges (AAMC) Core Entrustable Professional Activities (EPAs) for Entering Residency pilot program has recommended guiding principles for rendering summative entrustment decisions in undergraduate medical education, which include: (1) training a specific group of administrators and faculty members for this purpose; (2) basing entrustment decisions on a longitudinal view of a learner’s performance; (3) emphasizing the use of daily ad hoc workplace-based supervisory and entrustment decisions; (4) explicitly measuring attributes of trustworthiness; (5) gathering evidence from multiple assessors; (6) ensuring a process for formative feedback; and (7) giving the learner an active voice in the entrustment process. Many in graduate medical education have begun to adopt similar processes of holistic review in their CCC proceedings and increased their emphasis on workplace-based assessment and supervisory data. There has also been a call for the use of qualitative data in addition to the typical checklists and daily milestone assessments to add richness to the data reviewed by the CCC to better inform decisions regarding progression and eventual promotion. As graduate medical education transitions to a competency-based paradigm, true programmatic assessment will be required to provide the data necessary to render meaningful and valid summative entrustment decisions for each learner and further tailor their learning moving forward. This session will discuss the development of programs of assessment to better inform CCC decision-making processes and subsequent individualization of learning for residents.

**Target Audience:** DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel, Residents/Fellows

1:30 p.m. – 3:00 p.m.  **SES104: Safety Takes Culture Change: Lessons Learned from Implementing a Standardized Hand-Off**

- Sara Andrabi, MD; Malford Pillow, MD, MEd

The ACGME recognizes the public’s need for a physician workforce capable of meeting the challenges of a rapidly evolving health care environment. Education on care transitions focuses on formal educational activities that create a shared mental model in order for residents/fellows to work in a consistently well-coordinated manner. Standardized, effective, efficient hand-offs are a prerequisite for safe patient care. No two practice environments are the same, however, so presenters will discuss how standardized processes can be customized to meet the requirements for an effective hand-off, as well as the needs of a specific health care environment. Participants will walk away from the session with an understanding of best practices and the importance of culture change associated with implementing a standardized hand-off. They will also have the resources to customize their own hand-off tool and systems-based forms.

**Target Audience:** All
Session Descriptions

SATURDAY, MARCH 9, 2019

1:30 p.m. – 3:00 p.m.  SES105: Aligning Medical Education and Health Systems
– Sawsan Abdel-Razig, MD, MEHP; Hatem Al Ameri, MD
There is a significant misalignment of global health care workforce skills and competencies with the health care needs of populations. At the core of this challenge are the often-isolated spheres of operation between health systems regulators/policy makers and educational stakeholders, including accreditors, academic institutions, and physician educators. This session provides a macro-level framework for addressing specific health systems challenges through transformative medical education policy and structure. Participants will then work in groups using three country cases applying the framework towards specific health systems’ challenges identified. Topics covered during this session include an overview of health systems’ universal components and structures, an overview of medical education systems’ components and structures, and a transformative approach towards aligning both.
Target Audience: DIOs, Program Directors, Faculty, Hospital Administration/C-Suite/Leadership, Residents/Fellows, Health Policy Makers

1:30 p.m. – 3:00 p.m.  SES106: Ready, Set, Action! Utilizing Quality Improvement Tools to Plan Program Improvements
– Megan Christofferson, C-TAGME; Charlene Larson Rotandi, C-TAGME; Michelle Brooks, C-TAGME; Carrie Johnson, MBA; Alexandra Fletcher; Gretchen Shawver
The ACGME mandates that educational programs, with the help of the Program Evaluation Committee, make annual plans to improve the program using evaluations as their guide. These evaluations, which include the annual ACGME Faculty and Resident Surveys, can help the educational program target specific areas for improvement. But how does the program plan improvements that will actually target these identified areas and effectively address the root causes? Quality improvement (QI) tools can be leveraged to identify root causes, plan improvements, and track outcomes. This workshop will highlight personal as well as educational examples using two QI tools. Attendees will be asked to identify and plan possible improvements for their own program(s) using the tools provided, and will leave the workshop with action items, plans for implementation, and a QI toolkit for future improvement planning.
Target Audience: Program Directors, Faculty, Coordinators, Institutional/GME Personnel, Residents/Fellows

1:30 p.m. – 3:00 p.m.  SES107: Dynamic Design: Applying Design Thinking to Catalyze Creativity and Innovation
– Fiona Gallahue, MD; Alisha Brown, MD
Annual program review and evaluation are required by the ACGME as an opportunity to identify problems and map progress for GME programs. Most program leaders are aware of the issues facing their programs. However, it can be difficult to consider innovative solutions to issues given the multitude of institutional, financial, and time barriers. Program leaders can feel “stuck” and limited in their ability to champion innovation and change within their programs. Design thinking was developed for engineers as a method to think and create solutions from the end-user perspective. The process of design thinking has been adopted and found successful in business. It is now being introduced into educational environments with similar success. This workshop will introduce program leaders to the philosophy of design thinking and demonstrate how this is being utilized in learning environments. The presenters will show how design thinking can be successfully used to revamp their annual program reviews and jump-start the process of change. The session will strategize how to harness the power of creativity through better learner engagement in order to empathize, ideate, create prototypes, experiment, and evolve within programs to move program leadership out of their current rut. The presenters will also address incorporating an iterative approach to design thinking and process for evaluation after the annual program review.
Target Audience: DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel, Residents/Fellows
Session Descriptions

SATURDAY, MARCH 9, 2019

1:30 p.m. – 3:00 p.m. SES108: Engaging Residents in Real-World Quality Work: Leveraging Interprofessional Learning
– Sarah Peyre, EdD; Brett Robbins, MD; Diane Hartmann, MD; Erin Duecy, MD; Suzanne Karan, MD
Workplace learning in health care provides a rich opportunity for application and experiential-based learning that we must look to for solutions in bridging clinical care redesign and education transformation. Rochester, as an ACGME Pursuing Excellence Innovator site, has begun work on leveraging workplace learning within the Unit Based Performance Improvement Program (UPP) teams to 1) help residents develop fluency in improvement science, 2) support clinical leaders developing dyad leadership skills, and 3) engage the workforce in learning teaming and operations improvement strategies. This workshop will provide an overview of their process and presenters will guide attendees through developing their own learning labs embedded within their clinical environments. This will include identification of who, what, when, where, and why for innovation, and planning for implementation of leveraging existing quality improvement activities for resident workplace learning.
Target Audience: All

1:30 p.m. – 3:00 p.m. SES109: Connecting the Annual Program Evaluation, the Self-Study, and the 10-Year Site Visit
– Joseph Gilhooly, MD; Donna Caniano, MD
This interactive lecture with audience engagement presents approaches for facilitating ongoing program improvement by seamlessly connecting the Annual Program Evaluation, the Self-Study, and the 10-Year Accreditation Site Visit. Presenters will offer an overview and a range of practical suggestions to enable this at the program level, including recommendations for data aggregation, management, use, and presentation during accreditation site visits. Other topics to be addressed include the role of the environmental assessment in enhancing the focus on data that relate to future performance and drivers of, and barriers to, program success and sustainability, and the advantages and possible barriers to coordination and integration among program-level, departmental, and institutional aims.
Target Audience: DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel

SPECIALTY UPDATES

These sessions include an update on recent Review Committee and ACGME activities. There will be ample time for Q&A.
Target Audience: DIOs, Program Directors, Coordinators, Faculty

1:30 p.m. – 3:00 p.m. SES110: Specialty Update: Nuclear Medicine
– Kirk Frey, MD, PhD; Felicia Davis, MHA

1:30 p.m. – 3:00 p.m. SES111: Specialty Update: Colon and Rectal Surgery
– Gerald Isenberg, MD; Pamela Derstine, PhD, MHPE

1:30 p.m. – 3:00 p.m. SES112: Specialty Update: Obstetrics and Gynecology
– David Jaspan, DO, FACOOG; Kathleen Quinn-Leering, PhD

1:30 p.m. – 3:00 p.m. SES113: Specialty Update: Thoracic Surgery
– Ara Vapoorciyan, MD, FACS, MHPE; Donna Lamb, DHSc, MBA, BSN

1:30 p.m. – 3:00 p.m. SES114: Specialty Update: Medical Genetics and Genomics
– Kate Hatlak, MSEd

1:30 p.m. – 3:00 p.m. SES115: Specialty Update: Transitional Year
– Nikhil Goyal, MD; Cheryl Gross, MA, CAE
Session Descriptions

SATURDAY, MARCH 9, 2019

1:30 p.m. – 3:00 p.m.  SES116: CLER Special Topics: Interprofessional Education and Team-Based Care in the CLE
- Elizabeth Wedemeyer, MD; Mark Bixby, MD

In small group discussion, participants in this session will explore the following questions in the context of how they are addressed in the CLER oral and written reports:
1. What is interprofessional learning/practice in the context of the clinical learning environment (CLE)?
2. Why is interprofessional learning/practice important in the context of the clinical learning environment?
3. How are clinical learning environments promoting interprofessional practice/learning?

Limited to 12 participants.
Target Audience: DIOs, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel

1:30 p.m. – 3:00 p.m.  SES117: CLER Special Topics: Continuously Engaging Senior Leadership After your CLER Visit
- Staci Fischer, MD; Kevin Dellsperger, MD, PhD

In small group discussion, participants in this session will address ways to continuously engage senior leadership in integrating graduate medical education into the clinical learning environment’s strategies to optimize patient safety, health care quality, and the other CLER Focus Areas.

Limited to 12 participants.
Target Audience: DIOs, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel

1:30 p.m. – 3:00 p.m.  SES118: CLER Special Topics: Assessing and Monitoring in the Context of the CLER Report
- Dale Ray, MD; Kathy Porter, MD

In small group discussion, participants in this session will explore the following questions in the context of how they are addressed in the CLER oral and written reports:
1. What is the purpose of monitoring and assessment?
2. What is meant by monitoring?
3. Can you have a monitoring plan without assessment and follow-up?
4. How do you formally utilize the data collected as part of assessment and monitoring to make informed decisions?

Limited to 12 participants.
Target Audience: DIOs, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel

1:30 p.m. – 3:00 p.m.  SES119: CLER Special Topic: Systematic and Comprehensive Approach in the Context of the CLER Report
- Robin Newton, MD; Melissa Schori, MD

In small group discussion, participants in this session will explore the following questions in the context of how they are addressed in the CLER oral and written reports:
1. What is meant by a systematic and comprehensive approach?
2. How does the clinical site and GME jointly develop a systematic and comprehensive approach to learning and practice in the clinical learning environment (e.g., approaches to address health care disparities, promote well-being, improve patient safety culture)?

Limited to 12 participants.
Target Audience: DIOs, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel
## Session Descriptions

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<th>Description</th>
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<tr>
<td>2:15 p.m. – 3:00 p.m.</td>
<td>SES120: The CLER Program: Insights for Program Coordinators*</td>
<td>Robert Casanova, MD; Kelli Corning</td>
<td>This session will introduce program coordinators to the concepts of the CLER Program and review the various components of the CLER site visit process. Through facilitated discussion participants will share examples of CLER successes at the program level and identify opportunities for graduate medical education to work across programs to make improvements in patient safety, health care quality, and the other CLER Focus Areas. <em>You may pair this session with SES091.</em></td>
<td>Coordinators</td>
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<tr>
<td>3:00 p.m. – 3:30 p.m.</td>
<td>Break</td>
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<td>3:30 p.m. – 5:00 p.m.</td>
<td>SES121: Update: Osteopathic Recognition</td>
<td>Natasha Bray, DO, MSEd, FACOI, FACP; Tiffany Moss, MBA</td>
<td>These sessions include an update on recent Review Committee and ACGME activities. There will be ample time for Q&amp;A.</td>
<td>DIOs, Program Directors, Coordinators, Faculty</td>
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<tr>
<td>3:30 p.m. – 5:00 p.m.</td>
<td>SES122: Specialty Update: Allergy and Immunology</td>
<td>Louise Castile, MS</td>
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<td>3:30 p.m. – 5:00 p.m.</td>
<td>SES123: Specialty Update: Otolaryngology - Head and Neck Surgery</td>
<td>Pamela Derstine, PhD, MHPE</td>
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<td>3:30 p.m. – 5:00 p.m.</td>
<td>SES124: Town Hall – Institutional Accreditation</td>
<td>Kevin Weiss, MD, MPH; Robin Wagner, RN, MHSA; Paul Foster Johnson, MFA; Susan Kirk, MD; Ronald Amedee, MD; John Patrick T. Co, MD, MPH</td>
<td>This session will provide an open forum for attendees to ask questions related to the ACGME's Institutional Section, which includes Institutional Accreditation and the CLER Program. The discussion will be highly interactive, with an open microphone for questions and comments from participants.</td>
<td>DIOs, Faculty, Institutional/GME Personnel, GMEC Members</td>
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<tr>
<td>3:30 p.m. – 5:00 p.m.</td>
<td>SES125: A World of Good: “Best Practices” of our International Colleagues</td>
<td>Susan Day, MD; Mary Clisbee, EdD; Dorothy Kamya, MD; Kaleelullah Saleem Farook, MD</td>
<td>Reflecting on a decade of international accreditation activity, ACGME International has viewed creativity of educators that deserves others’ attention. Implementation of new programs, coordination with experienced educators, and identification of new directions in education serve as best practices which merit consideration for our US colleagues.</td>
<td>International</td>
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*This session does not qualify for CME.*
Session Descriptions

SATURDAY, MARCH 9, 2019

3:30 p.m. – 5:00 p.m.  SES126: A Roadmap to Improve Gender Equity in International Academic Medicine
- Halah Ibrahim, MD, MEHP; Sophia Archuleta, MD; Joseph Cofrancesco Jr., MD, MPH, FACP

Gender inequity in academic medicine is a worldwide issue. Although much of the literature originates from western contexts, international studies confirm gender disparities in recruitment, retention, and advancement. Entry into medical schools has reached gender parity in the west, but women continue to be underrepresented in leadership and in the highest academic ranks. The causes of gender inequity are complex and multifactorial, and country cultural norms vary. Solutions to effect meaningful change require comprehensive, institution-wide strategies, as well as individual approaches. In this workshop, we review the current literature and describe successful strategies for international academic medicine, including schools of medicine, GME programs, and hospital centers, to promote gender equity and foster the growth and leadership of female faculty members. All aspects of the pipeline will be addressed, including recruitment, retention, promotion, and leadership. Workshop participants and institutions will be encouraged to develop a roadmap to promote gender equity for their home institutions.

Target Audience: All

3:30 p.m. – 5:00 p.m.  SES127: Due Process Challenges for the GME Leader: “Lay your Burden Down”
- Woodson Jones, MD; Kerry Richard, JD; Jacqueline Levesque; Jennifer Remington

Do the program and institution carry the “burden” for proving “beyond a reasonable doubt” a resident failed to meet standards or that each step of due process policy was precisely followed? During an appeal, the DIO and program director may engage with institutional and hospital representatives, private attorneys, and faculty members whose understanding of academic due process may vary considerably. In general, cultural norms perceive the burden of proof is on the “institutions” rather than the “individual.” For instance, most people can easily relate with the concept that one is innocent until proven guilty. We may presume that due process gives “rights” to hear directly from all “accusers” and “rights” to full access to all records, to include all deliberations that informed the decision making process. However, all of these “universally” perceived “rights” may not necessarily be a part of what is viewed as “fundamentally fair” in academic due process. In fact, adoption of such “burdens” may negatively impact academic freedom and impede educational institutions from carrying out their obligation to society to graduate only fully competent providers.

Therefore, it is imperative that GME leaders have the knowledge and skills to negotiate some of the more common challenges. This session will help GME leaders to “lay their burden down.” To do this, the session will briefly cover the tenets of academic due process. Then the speakers will present brief case-based scenarios followed by multiple action options using an audience response system. This will be followed by presentation of what the speakers believe to be the best choice, the rationale, and legal case(s) to provide support. The cases will address challenging topics that may arise during the appeal process (e.g., Do residents have a right to the presence of legal counsel? What training documents, communications, and deliberations must be made available to the resident? How do you manage a contention to follow employee-based due process if they seemingly conflict with the institutional academic due process policy?). To conclude, the floor will be open to a large group discussion and opportunity to ask questions surrounding academic due process not addressed in the scenarios.

Target Audience: DIOs, Program Directors, Faculty, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel
Session Descriptions

SATURDAY, MARCH 9, 2019

3:30 p.m. – 5:00 p.m. SES128: SMART Goals and PDSA: Combining Simple, Practical Tools for Program Improvement
- Cathy Nace, MD; Linda Andrews, MD

This workshop offers a practical hands-on learning session on how to leverage and combine SMART (Specific, Measurable, Achievable, Realistic, Time-Bound) goals and the PDSA (Plan-Do-Study-Act) cycle for program evaluation and improvement. Participants will have an opportunity to provide and receive peer feedback on SMART goals using the Troika Consulting process. Handouts will provide participants with an opportunity to develop one SMART goal, refine it through peer input, and design a PDSA cycle for it during the session.

Target Audience: DIOs, Program Directors, Coordinators

3:30 p.m. – 5:00 p.m. SES129: GME Program Dashboard Creation, Implementation, and Utility as a Predictive Measure
- Greg Ozark, MD; Jory Eaton, MBA, C-TAGME

This interactive session will review one institution’s GME Program Dashboard creation. Presenters will discuss the rationale for the metrics chosen and demonstrate how tracking and focusing on these metrics has lead to institutional improvement, as well as predicted programs being placed on probation. Attendees will be presented with worksheets for a mock program and work through calculations to create an overall “score” for the program utilizing several local and national metrics.

Target Audience: DIOs, Program Directors, Coordinators, Hospital Administration/C-Suite/Leadership

3:30 p.m. – 5:00 p.m. SES130: A Multi-Modal Approach to Teaching the Value in Patient Experience
- Akshata Hopkins, MD; Dawn Jones, MA, C-TAGME; Kim Collins, MD; Julia Noether, MD; Patricia Quigley, MD; Nicole Nghiem, MD, MBA; Katie Grabowski, MS

During the process of “Academic Transformation” an interdisciplinary team at Johns Hopkins All Children’s Hospital developed new and innovative ways to deliver and teach individualized, patient-centered care to hospitalized children. Curricula focused on connecting residents with patients remains a GME gap despite the Institute of Medicine’s emphasis on providing patient-centered care. An interprofessional team of physicians, educators, child life therapists, nurses, and patient/family members aim in this session to share their innovative patient experience curriculum and how it can be used to connect to the clinical learning environment and patient-centered care delivery in order to see the health care system from the patient and family perspective. Upon completion of this session, participants will have a toolkit of patient-centered educational strategies, exercises and multi-modal reflection that can be immediately used to easily integrate a “patient experience” curriculum for residents at their own institution.

Target Audience: Program Directors, Faculty, Coordinators, Hospital Administration/C-Suite/Leadership, Institutional/GME Personnel, Residents/Fellows
Session Descriptions

SATURDAY, MARCH 9, 2019

3:30 p.m. – 5:00 p.m.  SES131: Implicit Bias: Conscientious Interventions to Tackle the Elephant in the Room — Yael Smiley, MD; Alexandra Sims, MD; Dewesh Agrawal, MD; Cara Lichtenstein, MD, MPH

Since the 2002 Institute of Medicine Report “Unequal Treatment,” awareness has grown about disparities in health care, and a growing body of literature has shown that physicians hold implicit racial and ethnic biases that contribute to health disparities. Research suggests that implicit racial bias can impact how providers interact with patients, can change treatment recommendations, and can therefore lead to disparate treatment based on race. Despite this, physicians receive little to no training on implicit biases. This workshop will equip participants with specific tools and interventions they can introduce at their home institutions to teach residents and faculty members about implicit bias. The workshop will begin with a discussion of implicit bias and the links to health outcomes. Speakers will present seven to 10 interventions that have been developed and/or used at their institution to address implicit bias. The interventions described will include small-group workshops, large-group presentations, and systemic approaches. Using a train-the-trainer model, participants will divide into small groups to explore a selected number of interventions in depth, such as: the “Best Intentions” small-group reflective exercise for interns; “Addressing Implicit Bias on Inpatient Teams” small-group leadership workshop for senior residents; and “Health Equity Rounds” large-group presentation for a mixed group of faculty members and residents. In small groups, the participants will run through a modified version of the intervention, and then review the facilitator guides and work together to devise implementation and evaluation for residents at their home institutions. A large group activated discussion will then focus on implementation challenges and opportunities. At the conclusion of the workshop, participants will leave with a toolbox they can use to implement implicit bias trainings in their respective educational and clinical settings.

Target Audience: All

3:30 p.m. – 5:00 p.m.  SES132: Leveraging Interprofessional Education to Improve Mental Health in Chronic Pain Treatment — Juliette Perzhinsky, MD, MSc; Tamara Sawyer, MSHAL, MLIS; Brenda Lovegrove Lepisto, PsyD; John Lopes Jr., DHSc, PA-C; Bernard Noveloso, MD; Elizabeth Cleek, PsyD

How do we effectively leverage interprofessional education (IPE) to manage chronic pain? Reviewing the statistics with the current opioid crisis in the United States, patients who have undertreated or untreated mental illness tend to have co-occurring pain conditions. This session will review the experience and results of developing a pilot IPE curriculum that emphasizes the effective recognition and management of mental health conditions in patients with chronic pain. The purpose of this pilot project is to understand the needs of residents when managing patients with chronic pain complicated by mental health co-morbidity. Using baseline data from a targeted needs assessment, a pilot IPE curriculum was launched using a patient safety framework to address deficiencies in the present curriculum. The initial objective was to obtain a targeted needs assessment prior to developing an integrated IPE curriculum. Initially, a total of 10 programs were contacted, including local residency and health professions training programs; a total of six programs agreed to participate. The assessment was conducted prior to the development of the proposed pilot IPE curriculum in an effort to identify gaps in current training programs. The data were used to design a series of five IPE lessons over a six-month timeframe (from December 2017 until May 2018) to address content shortcomings in current training programs. Through synergistic discussions, this session will discuss the needs of residents while concomitantly the challenges encountered with building an IPE consortium to address both chronic pain and co-morbid mental health conditions will be illustrated. The competencies required to effectively address the opioid crisis mandates considerable training in teamwork and collaboration across the spectrum of medical and health professions education. The goal of this session is to provide a toolkit of educational topics that may help curtail the morbidity and mortality observed with the present opioid crisis, while also helping learners remain humanistic in the delivery of health care to vulnerable patients.

Target Audience: All
Session Descriptions

SATURDAY, MARCH 9, 2019

3:30 p.m. – 5:00 p.m. SES133: Integrating a Learning Management System into your Milestones Assessment
   – Malford Pillow, MD, MEd; Anoop Agrawal, MD

Let’s all be honest: the Milestones are a blessing and a curse. They are a tool for true competency-based assessment in graduate medical education, but implementing a robust, innovative, sustainable system for Milestones assessment can be extremely difficult. However, as the Milestones continue to evolve, the ACGME will call upon us to not only implement Milestone assessments, but also demonstrate the rigor and method we use to establish Milestones levels. One way to manage this call to better assessments and training for learners is to implement a learning management system (LMS). LMSes are used almost ubiquitously in undergraduate medical education, but their use falls dramatically across graduate medical education programs. Integrating an LMS into programs can improve assessments by putting graded responsibility on the learners, creating more asynchronous opportunities for assessment, empowering learners to guide their own training, and both centralizing and digitizing the “paper trail” of Milestones assessments. LMSes also offer the opportunity for shared assessments across programs, and centralized efforts at the GME level. After attending this session, participants will be empowered to pursue implementation of an LMS into their GME programs and evolve the process of Milestones assessment.

Target Audience: DIOs, Program Directors, Coordinators, Institutional/GME Personnel

3:30 p.m. – 5:00 p.m. SES134: When and How to Withdraw “Life Support” – When Remediation of a Learner Fails
   – Dominique Cosco, MD; Randall Edson, MD

The presenters of this workshop, who have extensive collective experience in managing struggling learners, will use case vignettes and available literature to illustrate the aftermath of failed remediation, and will specifically address the generation of future letters of recommendation, the dismissal process, due process, and most importantly, career counseling when appropriate. Key articles in the medical education literature will be discussed and break out sessions will give the workshop participants an opportunity to determine whether further remediation is warranted, and if not, generate an action plan following failed remediation.

Target Audience: DIOs, Program Directors, Faculty, Coordinators, Institutional/GME Personnel

3:30 p.m. – 5:00 p.m. SES135: Mentoring in the #HeForShe #MeToo Era
   – Jessica Servey, MD, MHPE, FAAFP; Joshua Hartzell, MD, MS-HPEd, FACP, FIDSA

The #HeForShe movement has been recognized as an important component of helping women break the glass ceiling in medicine. Despite greater than 50 percent of medical school matriculants being women, there are still notable gaps in academic leadership positions and pay. Mentoring has been recognized as an important component of professional development. Yet, the recent #MeToo movement has left some men questioning whether they should mentor women and how to best mentor in this era. Women also have significant biases and challenges mentoring other women with recent articles and books discussing workplace bullying. Unconscious bias occurs and can potentially cause significant differences while mentoring men and women. The added role of sponsorship, with its importance on career progression, will be highlighted in relation to mentoring. This session will use a mix of cases and small group discussion to allow participants to reflect on their own practices and develop new approaches to mentoring. Both men and women will leave this session with practical strategies to enhance mentoring and sponsoring relationships in their own careers. Come join and shape the next movement.

Target Audience: DIOs, Program Directors, Faculty, Coordinators
Session Descriptions

SATURDAY, MARCH 9, 2019

3:30 p.m. – 5:00 p.m. SES136: Advising the Resident Parent: Navigating the Abyss of Policy and Work-Life Integration
– Sharon Wretzel, MD; Jennifer O’Toole, MD; Sara Gardner, MD; Ivelisse Verrico, MD

Workforce studies have shown that nearly half of all residents have their first child while in residency. However, the demands of residency often conflict with the realities of childbearing and rearing. This is an issue that impacts both female and male residents, with work-life integration becoming increasingly important for all parents. When mentoring the resident who is starting or expanding a family, there are a number of factors for the program director to consider. Considerations, such as working with the already struggling resident, helping the returning resident flourish as a physician while in their new role as parent, supporting a breastfeeding-friendly residency program, and creating a family-friendly culture within the residency, are steps that can allow a resident, the program, and the resident’s family to thrive. This interactive workshop will provide attendees with a review of the latest evidence, as well as an opportunity to learn about work-life integration innovations that can help program directors advise and support their residents. Attendees will share their experiences and best practices and develop concrete plans for innovations they can implement in their program following the workshop. Attendees will also leave with a toolkit of information to use in their home institutions.

Target Audience: DIOs, Program Directors, Faculty, Coordinators, Residents/Fellows

3:30 p.m. – 5:00 p.m. SES137: Teaching Shame Resilience to Residents to Combat Burnout
– Amy Schill Depew, MD; Amy Hayton, MD

Medical education is faced with the reality of burnout, mental illness, addiction, and physician suicide. Residents are a particularly vulnerable population as they proceed through intense training and potentially difficult learning environments. A new area of research is exploring how the feeling of shame—the feeling of being flawed or not good enough—is the root of many of these epidemics affecting learners. Residents can experience shame on a regular basis due to the intensity of medical training and their own tendencies toward perfectionism and people-pleasing. While these tendencies can produce academic success, studies show that when learners experience shame on a regular basis, it can lead to emotional distress and isolation. Participants will learn about Dr. Brene Brown’s Shame Resilience Theory, which describes how the epidemic of shame can lead to anxiety, depression, addiction, and burnout that have become prevalent in medical education. Shame resilience involves moving away from fear, blame, and disconnection and moving toward empathy and connection with others. Participants will hear stories from faculty members who have used the tools of identifying shame and shame resilience in order to diffuse shameful experiences and prevent burnout and isolation. Participants will then break into small groups and discuss cases written by residents that triggered shame and disconnection and talk about how faculty members can respond. Specific situations that trigger shame in residents, such as medical errors, will be explored, and participants will learn to identify when residents are experiencing shame and how to guide them safely through it in order to promote safe, positive responses. The important differences between shame and guilt will be discussed: guilt can promote positive behavior change and connection with others as residents strive to improve performance, however feelings of shame will lead to questions of self-worth, isolation, and depression. Presenters will share personal stories of mistakes in residency as a model of connecting with learners, normalizing errors, and diffusing shame. Audience members will have the opportunity to share similar stories as desired.

Target Audience: DIOs, Program Directors, Faculty, Institutional/GME Personnel, Residents/Fellows
Session Descriptions

SATURDAY, MARCH 9, 2019

3:30 p.m. – 5:00 p.m.  SES138: The Other Side of the Coin: Preparing Learners to Receive Feedback
— Lawrence Loo, MD; John Byrne, DO

Historically, the medical education literature has framed feedback as a unidirectional content-delivery process (i.e., what teachers do to learners). Instead, consideration should be given to how a more dialogic process in which the context and relationship interact to affect change in behavior (i.e., the teacher working with the learner to form a therapeutic alliance). This workshop draws on the growing neurocognitive sciences, cognitive and educational psychology, and sociology literature on preparing learners to receive feedback. Presenters include two key resources; Douglas Stone and Sheila Heen’s New York Times bestseller Thanks for the Feedback: The Science and Art of Receiving Feedback Well (2015); and the scholarly research in David Boud and Elizabeth Molloy’s book Feedback in Higher and Professional Education (2013). The presenters will distill this information into Ten Best Practices to Prepare Learners to Receive Feedback. They identify three major barriers that prevent learners from hearing meaningful feedback when offered, and identify the neurocognitive limitations of self-assessment that lead to blind spots and what steps can be used to overcome these. Finally, they discuss three key emotional amplifiers that can trigger strong emotional reaction from learners, how to recognize them, and how to stay focused on the feedback message offered.

Target Audience: All

3:30 p.m. – 5:00 p.m.  SES139: New Program Director Skills Lab: from Theory to Practice
— Mark Tschanz, DO, MACM; Biraj Shah, MD

Translating educational theory to practice is a critical skill required for the new program director. This workshop will be an interactive hands-on experience to practice the procedures most frequently performed by the new program director. Through a series of case examples from the presenters’ experience as new program directors, attendees will gain experience in writing a specific probation plan, benefit from the experience of their colleagues in discussing the probation plan, practice peer counseling, and apply adult learning theory to these procedures. These skills are especially important as the new program director may experience challenges in these areas soon after assuming this new role. This workshop will connect the chasm between theory and practice to ensure attendees can translate good ideas into successful residents and faculty members.

Target Audience: Program Directors, Faculty

3:30 p.m. – 5:00 p.m.  SES140: Educating to Eliminate Gender and Orientation Health Disparities
— Karen Parker, PhD, MSW; Jesse Ehrenfeld, MD, MPH

Drs. Parker and Ehrenfeld will discuss the importance of inclusion of training in disparities and equity as it pertains to LGBTQ health. As the ACGME is working to ensure that all residents and fellows receive training in health disparities (as seen through the CLER Program), the speakers will address what the research agenda is in LGBTQ health, and how they have developed ways of helping trainees obtain the skills required to seek solutions. In addition, they will discuss how to improve the clinical learning environment to promote inclusion of LGBTQ issues in effective ways.

Target Audience: All
Session Descriptions

SUNDAY, MARCH 10, 2019

7:00 a.m. – 8:15 a.m.  Continental Breakfast

8:30 a.m. – 10:00 a.m.  SES141: Conversations with the CEO
– Thomas J. Nasca, MD, MACP
Target Audience: All
About Rosen Shingle Creek

The 2019 ACGME Annual Educational Conference will be held at the Rosen Shingle Creek Resort. The Rosen Shingle Creek is conveniently located on Universal Boulevard just off of the Beachline Expressway (SR 528, Exit #2) and a half-mile east of the Orange County Convention Center. This ideal location is also minutes away from Orlando’s world-famous attractions, like Universal Orlando®, Aquatica, Sea World Orlando®, and others.

The ACGME has secured discounted room rates at three hotels: The Rosen Shingle Creek Resort; Rosen Plaza; and Rosen Centre. All three hotels are about a 15-minute drive from the Orlando International Airport (MCO).

Hotel Reservations

The ACGME has secured the following discounted rates:

**Rosen Shingle Creek Resort**

$252.00 single/double currently subject to a 12.5% daily tax rate. There is a $20 charge per additional guest.

**Rosen Plaza**

$232.00 single/double currently subject to a 13.63% daily tax rate. There is a $20 charge per additional guest.

**Rosen Centre**

$232.00 single/double currently subject to a 13.63% daily tax rate. There is a $20 charge per additional guest.

These rates are available until 5:00 p.m. Eastern on Friday, February 8, 2019 or until the room blocks have been filled, whichever comes first. After February 8, 2019, or if the room blocks become filled, the ACGME can no longer guarantee rates and availability. We advise attendees to make room reservations as soon as possible to ensure availability and secure the discounted rates.

**How to Make Your Hotel Reservation**

To reserve a hotel room online at any one of the three official Rosen properties, click here. To reserve a hotel room by phone at any of these properties, call 1.866.996.6338. Mention “ACGME” to receive the conference rate.
Reservation Cancellation Policy

A one-night non-refundable deposit will be required to confirm your reservation. Your credit card will be charged one night’s room and tax at the time of booking. If you cancel your reservation, this deposit will not be returned, but all subsequent nights will be released. If you wish to pay the deposit by check, please contact the Annual Educational Conference Housing Office using the information below.

Why Book at the ACGME 2019 Hotels?

The ACGME works hard to make sure that the conference rate is competitive, and monitors the hotels’ other rates to ensure our attendees receive the best deal. Your stay helps the ACGME meet its obligation to the hotel, allowing us to keep registration rates low. Without your hotel stay, the ACGME may be assessed a financial penalty which would jeopardize our ability to provide quality conference opportunities in the future.

As noted, a one-night non-refundable deposit is required to confirm your reservation. Your credit card will be charged one night’s room and tax at the time of booking. See additional details under Reservation Cancellation Policy above.

Reservation Questions

For assistance with your reservation, contact the Annual Educational Conference Housing Office. Live help is available Monday-Friday from 9:00 a.m.-5:00 p.m. Eastern.

E-mail: acgmehousing@gomeeting.com
Phone: 410.224.3963
Registration Options

There are nine registration options available to online-registered conference attendees:

1. **Pre-Conference and Educational Conference Attendee**
   This is the most popular registration option, and includes both the Pre-Conference on Thursday and the Educational Conference on Friday, Saturday, and Sunday. Breakfast and lunch are included in the registration fee.

2. **Coordinator Forum Pre-Conference and Educational Conference Attendee**
   This registration option includes the Coordinator Forum: *Inspiration, Ideation, Impact* Pre-Conference course on Thursday and the Educational Conference on Friday, Saturday, and Sunday. Breakfast and lunch are included in the registration fee.

3. **DIO 101 OR 102 Pre-Conference Course and Educational Conference Attendee**
   This registration option includes either the DIO 101 or the DIO 102 Pre-Conference course on Thursday, and the Educational Conference on Friday, Saturday, and Sunday. Breakfast and lunch are included in the registration fee.

4. **DIO 101 AND 102 Pre-Conference Course and Educational Conference Attendee**
   This registration option includes both the DIO 101 and the DIO 102 Pre-Conference courses on Thursday, and the Educational Conference on Friday, Saturday, and Sunday. Breakfast and lunch are included in the registration fee.

5. **Educational Conference Attendee**
   This registration option includes only the Educational Conference on Friday, Saturday, and Sunday. Breakfast and lunch are included in the registration fee.

6. **Pre-Conference Only Attendee**
   This registration option includes only the Pre-Conference courses on Thursday: Introductory Course for New Program Directors; ACGME Accreditation Pre-Conference for Osteopathic Program and Institutions; and Coordinator Forum: *Inspiration, Ideation, Impact*. Breakfast and lunch are included in the registration fee.

7. **Coordinator Forum Pre-Conference Only**
   This registration option includes only the Coordinator Forum: *Inspiration, Ideation, Impact* Pre-Conference Course on Thursday only. Breakfast and lunch are included in the registration fee.

8. **DIO 101 OR 102 Pre-Conference Course Only**
   This registration option includes only the DIO 101 or the DIO 102 Pre-Conference course on Thursday. Breakfast and lunch are included in the registration fee.

9. **DIO 101 AND 102 Pre-Conference Course Only**
   This registration includes both the DIO 101 and the DIO 102 Pre-Conference courses on Thursday only. Breakfast and lunch are included in the registration fee.

### Conference Sessions
All conference attendees must choose sessions to attend at the time of online registration. It is very important that attendees carefully review their selections to ensure registration for desired sessions. There will be no waitlists for full sessions; once a session has reached capacity, no more attendees will be able to register for it. **Attendees’ selected sessions will be noted in their conference schedule on the ACGME Conference Mobile App.**

### Designated Institutional Officials (DIOs)
Two half-day DIO Pre-Conference courses will take place on Thursday, March 7. DIO 101: The Basics of Institutional Accreditation is intended specifically for new DIOs. DIO 102: Improvement and Innovation in the Sponsoring Institution is designed for both new and experienced DIOs.

Program Coordinators
Program coordinators are encouraged to attend the Pre-Conference Coordinator Forum on Thursday, March 7, 2019. The Coordinator Forum is a full-day course that consists of break-out sessions and three plenaries. At the time of online registration, coordinators must select three break-out sessions and the three plenaries they want to attend during the Coordinator Forum. Carefully review the break-out session descriptions listed in the Coordinator Forum agenda before making selections. Most program coordinators also attend the Educational Conference on Friday, Saturday, and Sunday, in addition to the Pre-Conference Coordinator Forum.
Registration Fees

Online Registration will be available through Friday, February 8, 2019.

### Early Bird Registration Fees are Available until January 4, 2019

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### Standard Registration Fees Apply after January 4, 2019

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### On-Site Registration

Conference attendees who are not able to register online by the deadline can register on-site in the Conference Registration Area. On-Site registration will only be available for both the Thursday Pre-Conference and the Educational Conference. Breakfast and lunch are included in the on-site registration prices.

### On-Site Registration Fees

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Registration Fees

Methods of Payment
Credit card payments are preferred and will ensure your registration is secure. Visa, MasterCard, American Express, and Discover are accepted. Once a registration payment is made, the fee cannot be transferred to another method of payment.

Paying by Paper Check
If paying by check, you will be charged a $50 check fee. This fee will be added to your registration total when you register online.

Select the check payment option while registering online (See Unpaid Registration Policy). Make checks payable to “ACGME” and mail to the attention of:

ACGME
Attention: Jay Gillett, Registration Specialist
401 North Michigan Avenue
Suite 2000
Chicago, Illinois 60611

Cancellation and Refund Policy
Attendees who need to cancel their registration must do so in writing by e-mailing Registration Specialist Jay Gillett: registration@acgme.org. A full refund will be given through Monday, December 17, 2018. For cancellations made between December 18, 2018 and February 18, 2019, an administrative fee of $125 will be charged. No refunds will be given after February 18, 2019. Refunds will be made in the same form as the original payment.

Note: An attendee who does not cancel in writing and does not attend the conference is still responsible for payment.

Unpaid Registration Policy
All unpaid registrations must be paid by either credit card or paper check within 30 days of the date of registration. If a registration fee is unpaid after 30 days from the date of registration, the registration will be canceled.

Registrations made after January 8, 2019 must be paid for by credit card at the time of online registration, as it is unlikely that check payment would arrive before the February 8, 2019 deadline. NO CHECK PAYMENTS WILL BE ACCEPTED AFTER FRIDAY, FEBRUARY 8, 2019.

Registration Substitutions
Registered attendees can transfer their registration to another attendee before the close of registration on Friday, February 8, 2019.

Name Badges
Registered attendees will print their name badges at the Self-Check-In kiosks located at Registration.
Well-Being Activities

Take advantage of these opportunities to engage with other conference participants outside of the learning space!

RUNNING/WALKING CLUB
6:00 – 6:30 a.m. Friday and Saturday*

Get some fresh air by taking a morning run or walk and enjoying the outdoors with other conference attendees! Meet in the lobby of the Rosen property you are staying starting at 6:00 a.m. to form your walking or running club. Hotel trails will be provided on the conference mobile app.

YOGA AND MEDITATION
5:30 – 6:00 p.m. Friday and Saturday†

Join us for Yoga and Meditation. Enhance your personal well-being by taking a mental break, stretching, exercising, and enjoying the outdoors. Beginners are welcome!

SAVE THE DATE FOR THE
2020 ACGME Annual Educational Conference

February 27-March 1, 2020
Marriott Marquis San Diego Marina and Hilton San Diego Bayfront