

WRIGHT STATE UNIVERSITY BOONSHOFT SCHOOL OF MEDICINE
Executive Committee Meeting
April 11, 2019
MINUTES

Presiding: Margaret M. Dunn, Dean

Present: Drs. Eric Bennett, Bruce Binder, John Duby, Kim Gilliam, Tom Hardy, Mike Johnson, Madhavi Kadakia, Paul Koles, Marietta Orlowski, Al Painter, Brenda Roman, Daniel Swagerty, Steve Swedlund, Ted Talbot, Jeff Travers, and Julian Trevino

Staff: Drew Dieckman, Kim Paul and Sue Polanka

Guests: Lindsey Allison, Lisa Boydston, Colleen Hayden

The meeting was called to order at 4:32 p.m. by Dean Margaret Dunn

1. Approval of Minutes:

A motion was made, seconded and passed unanimously to approve the minutes of March 14, 2019, as written.

2. Report of the Dean:

A. WSU Update:

The AAUP contract has yet to be signed. The university sent out a modified retirement plan to bargaining unit members. If members decide to take the retirement plan they have the opportunity to work as an adjunct faculty member for three years. It is unclear if any eligible faculty members in BMB and NCBP will consider the offer.

The WSU budgeting process has begun. Other units have already started meeting with Walt Branson and John Shipley. BSOM's budget hearing is scheduled for mid-April.

B. Ohio Council of Medical School Deans:

The Governor's budget was submitted with the medical school funding being flat. There haven't been any updates from the Ohio medical schools' legislative representatives since the budget was submitted to the General Assembly.

3. Information Items:

A. Personnel Actions:

Dr. Painter presented the personnel action items that were distributed with the agenda. A motion was made, seconded and unanimously approved to accept the personnel actions as distributed.

B. Members' Items:

- Dr. Kadakia: Chris Spohn accepted a position at the University of Louisville. His last day at WSU is Friday, April 26th.

- Dr. Bennett: Drs. Orłowski, Overman, Cowan and Bennett are BSOM's representatives on the Faculty Senate. Either Dr. Bennett or Dr. Orłowski will serve as the BSOM representative on the Executive Committee of the Faculty Senate.

4. New Business:

A. BAMS Overview – Colleen Hayden, M.S., Director, Medical Education and Lindsey Allison, M.Ed., Manager, Curriculum Development

Colleen and Lindsey presented an overview of BAMS, the new BSOM learning management system. If you have any questions about the system, would like a BAMS presentation for faculty or staff, or if you need assistance please contact them at: Colleen Hayden colleen.hayden@wright.edu (937) 775-2161 or Lindsey Allison lindsey.allison@wright.edu (937) 775-2161

B. Annual Institutional Report for GME – Albert Painter, Psy.D., Associate Dean of Faculty Affairs; BSOM Designated Institutional Official Graduate Medical Education

- The 2018 Annual Institutional Report was presented and is attached.

C. Approval of Graduates – Kim Gilliam, Ed.D./PC, Director, Medical Student Services

- Dr. Dunn presented the list of candidates for graduation in May 2019. A motion was made, seconded and passed unanimously to approve the list of students for graduation.

5. Adjournment:

There being no further business, the meeting was adjourned at 5:40 p.m.

The next scheduled meeting is Thursday, May 9, 4:30 p.m. in the WSP Health Center, 725 University Blvd., Third Floor, Large Conference Room.

Respectfully submitted,
Drew Dieckman
 Recorder



Annual Institutional Report

Albert F. Painter, PsyD

Associate Dean for Faculty and Clinical Affairs

ACGME Designated Institutional Official (DIO)



2018

DRAFT

**Wright State University Boonshoft School of Medicine, (WSUBSOM)
Sponsored Graduate Medical Education
Annual Institutional Report 2018**

Albert F. Painter, Psy.D.

Associate Dean, Faculty and Clinical Affairs
Designated Institutional Official (DIO) WSUBSOM

Randon Welton, M.D.

Chair, Graduate Medical Education Committee (GMEC) WSUBSOM
Program Director, WSU BSOM Psychiatry Residency Program

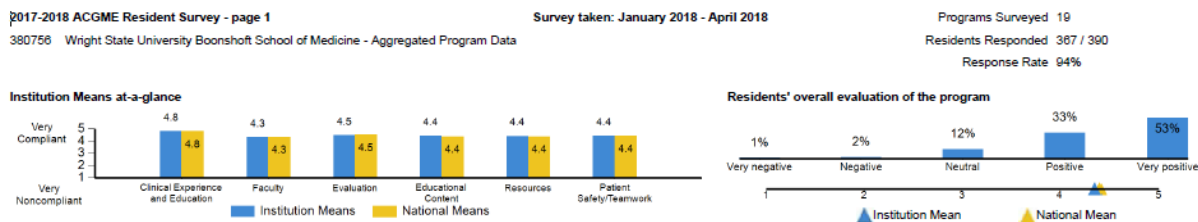
2018 GME Highlights

The Wright State University Boonshoft School of Medicine:

- Trains 390 residents and fellows
- Sponsors 23 programs (21 ACGME accredited and 2 non-ACGME accredited)
- Oversees and provides support to approximately 23 program directors, 16 program coordinators, and 500 fully-affiliated and 1300 partially-affiliated faculty
- Partners with 3 hospital systems, 2 government facilities, & 1 clinical affiliate
 - Dayton Children’s Hospital, employs residents
 - Kettering Health Network, employs residents
 - Premier Health, employs residents and fellows
 - Dayton Veterans Administration Medical Center
 - Wright Patterson Air Force Base Medical Center (WPAFB), employs residents
 - Wright State Physicians, Inc., employs residents
- Combined civilian/military programs with WPAFB and the USAF School of Aerospace Medicine

Emergency Medicine	Internal Medicine
Child and Adolescent Psychiatry	OB/GYN
Family Medicine	Pediatric Medicine
General Surgery	Psychiatry

- The Boonshoft School of Medicine received Continued Accreditation with substantial compliance with criteria for sponsorship by the ACGME Institutional Review Committee. This marked the 12th consecutive year of this designation by the ACGME. A major marker of institutional health is the aggregate data of the annual ACGME residency survey. BSOM scored at or slightly above the national average in all major categories of this important measure. Below is a table with this information in a bar graph format.



- Anticipates its ACGME Institutional Self-Study in approximately April 2024 and the 10-year site visit October 2025
- Program Citations – Citations and action plans are being reviewed and monitored by the GMEC.

- OB/GYN – 1 citation for Program Director oversight with regard to AOA transfer resident. Program follow-up with ACGME complete.
- Emergency Medicine – 5 citations for Faculty Responsibilities, Resources, Patient Care Experience, Procedural Experience, and Scholarly Activity.
- Sports Medicine – 2 citations for program integration with the residency and scholarly activity.
- Filled all first-year residency positions through the National Residency Match Program, (NRMP).

Challenges

- The BSOM Aerospace Medicine Residency Program announced its Voluntary Withdrawal in January 2018 due to a decreasing lack of resources to support training. The effective date announced was June 30, 2018. This allowed the current PGY2 to graduate and facilitated the successful transfer of the PGY1 to UTMB to finish his program with funding provided by the accepting sponsor. A site visit from the Preventive Medicine RRC was conducted to assure the orderly process especially with regard to the displaced resident. A positive letter was subsequently received and the program was able to make a smooth transition as a result.
- Premier Health announced the intended closure of Good Samaritan Hospital by the end of 2018. As a founding hospital partner of BSOM medical student and resident education were significantly affected. This decision had major impact on programs in Family Medicine, Emergency Medicine, Cardiology, Hematology/Oncology, Plastic Surgery, Psychiatry, and General Surgery. Individual meetings were held across the system to develop planning and monitoring of required changes. The GMEC was involved from the outset formally and informally including reports from the Resident Council on an ongoing basis.
- Good Samaritan Hospital ceased admitting and treating patients in July 2018. By that juncture all educational rotations and experiences had been successfully moved to other teaching sites. In majority, these changes have maintained the quality of previous rotations and in some programs resulted in improvements. The GMEC and its leadership continue to monitor oversight of this major event and will review any future adjustments as necessary.
- A fellow complained to the ACGME anonymously concerning the Cardiovascular Disease program. This communication was forwarded to the DIO who worked with the program director, Dr. Abdul Wase, IM program Director, Dr. Rob Colon, and the IM Department Chair, Dr. Glen Solomon. The extensive complaint was investigated including a meeting with the trainees using an audience response system to understand the issues more in depth. A letter of response including action plans was forwarded and monitored especially with respect to the effects of the GSH closure. Ultimately, it was determined that the program could not achieve the standards that BSOM requires and that a recommendation should be considered to voluntarily withdraw. We anticipate that this decision will be adopted in early 2019.

Areas for Continuous Quality Improvement 2019

- Resident Wellness and Resiliency continue to be a major focus for the ACGME and BSOM sponsored programs. It has been an ongoing item of reporting and discussion for the GMEC. This will be a continuing focus for our sponsorship, program directors and trainees. DAGMEC sponsored a Resiliency Workshop on October 31, 2018 to discuss approaches for better wellness support and BSOM will keep this issue at the forefront. We will explore ways to partner with RISHI and its resources in pursuit of preventing burnout.
- ACGME has announced new program requirements for accreditation that take effect in July 2019. These are wide ranging and will challenge all GME sponsors and programs to have definitive action plans to be in compliance. BSOM and DAGMEC will

hold a workshop in Fall 2019 to understand what these elements mean to our individual programs and to our sponsoring institutions in Dayton. It is our continuing belief that collective collaboration will achieve more than being in silos.

- Lastly, we must look for new ways to further integrate CLER initiatives into our overall culture. Patient safety, quality improvement, transitions of care and the other aims of this ACGME program are imperative to impart to our learners as they grow and develop toward independently practicing physicians. We have absorbed some of these precepts over the past years but there is still much work to be done to achieve the level of competency of which we are capable.

2018-2019 GME ENROLLMENT DATA & TRENDS

23 residency and fellowship programs with 398 residents and fellows:

- 12 ACGME residency programs
- 9 ACGME fellowship programs
- 2 Non-ACGME fellowship programs

New program directors – 5 of 22 (23% turnover rate)

New program coordinators – 4 of 16 (25% turnover rate)

The BSOM Hospice and Palliative Care Fellowship Program transferred from the Internal Medicine Residency to the Family Medicine Residency with the ACGME approval.

WSU Sponsored Residency and Fellowship Programs

Program	Program Director	Self-Study Date	Site Visit Date, Approximate	Number of Residents
Dermatology	Julian Trevino, M.D.	10/01/2017	4/1/2019	6
Emergency Medicine	<i>Michael Ballester, M.D. *</i>	9/1/2015	4/2/2018	52
Sports Medicine	James Tytko, M.D.	9/1/2015	4/3/2018	2
Family Medicine	Peter Reynolds, M.D.	8/1/2018		31
Geriatric Medicine	Steven Swedlund, M.D.	8/1/2018		1
Hospice and Palliative Care	<i>Daniel Swagerty, M.D. *</i>	1/1/2017	Moved to FM	2
General Surgery	<i>Rebecca Tuttle, M.D. *</i>	2/1/2021		47
Acute Care**	Mbaga Walusimbi, M.D.	n/a	2/18/2018	1
Surgical Critical Care	Mbaga Walusimbi, M.D.	2/1/2021		1
Internal Medicine	<i>Glen Solomon, M.D. *</i>	1/1/2017	2/12/2019	79
Cardiovascular Disease	Abdul Wase, M.D.	1/1/2017	Withdrew, 6/30/19	6
Gastroenterology	Sangeeta Agrawal, M.D.	1/1/2017	2/14/2018	4
Hematology/Oncology	Howard Gross, M.D.	1/1/2017	2/13/2019	6
Infectious Disease	Steven Burdette, M.D.	1/1/2017	2/14/2019	3
Neurology	Bradley Jacobs, M.D.	1/1/2026		16
Obstetrics and Gynecology	<i>Ted Talbot, M.D. *</i>	6/1/2021		22
Orthopedic Surgery	Anil Krishnamurthy, M.D.	1/1/2017	7/1/2018	23
Orthopedic Trauma**	Michael Prayson, M.D.	n/a		1
Pediatrics	Ann Burke, M.D.	4/1/2021		47
Plastic Surgery	R. Michael Johnson, M.D.	4/1/2018		6
Psychiatry	Randon Welton, M.D.	10/1/2020		35
Child & Adolescent	Ryan Mast, M.D.	10/1/2020		4

*New program directors

**Non-ACGME Accreditation, Specialty Accreditation

^ACGME Site Visit Scheduled Date

WSU Affiliated Programs

Family Medicine, Soim Medical Center	James Tytko, M.D.
Internal Medicine, Kettering Medical Center	Lyndetta Schwartz, M.D.
Cardiovascular	Harvey Hahn, M.D.
Interventional Cardiology	Brian Schwartz, M.D.
Transitional Year, Kettering Medical Center	John Shrader, M.D.

USAF School of Aerospace Medicine

Aerospace Medicine	Michael Jacobson, D.O.
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OVERSIGHT SUBCOMITTEE

The Oversight Subcommittee of the Graduate Medical Education Committee (GMEC) functions to perform an annual review of all sponsored programs including identification of Underperforming Programs in compliance with the ACGME requirements for sponsors. This committee is composed of the following: BSOM DIO, GMEC Chair and Vice Chair, BSOM GME Administrative Director, BSOM Director of Patient Safety and Quality Improvement, Premier Health Vice President for Medical Education and a resident representative. Programs are evaluated according using the following metric sources:

1. ACGME Resident Surveys
2. ACGME Faculty Surveys
3. Program board passage rates for the past 5 years
4. ACGME accreditation letters including citations and areas of concern

The following were identified as Underperforming Programs and are being supported by the Office of GME, GMEC leadership, BSOM leadership, and hospital leadership to address areas of deficiency:

Emergency Medicine
Emergency Medicine/ Sports Medicine
Obstetrics and Gynecology

These programs will present action plans to remedy specific areas of underperformance and will be monitored by the GMEC in their progress.

2018 ACGME WSU BSOM Residency & Faculty Survey Results

Residents and Faculty of all ACGME accredited programs are required to complete this annual survey. Results of the surveys are utilized by the ACGME as a key performance indicator for program quality and compliance with work and training environment requirements and for WSUBSOM institutional performance. 19 ACGME programs were surveyed in the areas of Duty Hours, Educational Content, Evaluation, Faculty, Patient Safety/Teamwork, and Resources. In July 2017, the ACGME implemented the revised Section VI of the Common Program Requirements to include Resident and Faculty Wellbeing. In 2018, Resident and Faculty Wellbeing was survey to establish a baseline and will not be assessed by the Residency Review Committees.

Resident Survey Results: 94% response rate (367/390)

Faculty Survey Results: 88% response rate (142/162)

WSU BSOM is above, at, or slightly below the national mean for all survey questions.

CLINICAL LEARNING ENVIRONMENT REVIEW (CLER) EXECUTIVE SUMMARY

BSOM received our third ACGME CLER (Clinical Learning Evaluation Review) in May 1, 2018. This activity was held at Miami Valley Hospital, our major teaching site where the majority of our residents and fellows spent most of their clinical training. The review was conducted by Drs. Zayas and Damewood and included BSOM and MVH leadership, program directors, core program faculty, trainees, MVH and BSOM patient and safety representatives, and health care team members in clinical areas visited during walking rounds. No major areas of non-compliance were found. Below is the Executive Summary of Feedback.

Accomplishments:

- 92% of residents and fellows indicate MVH provides a supportive and non-punitive environment for reporting safety events (Patient safety and QI).

- 86% of program directors reported that MVH is usually or always effective when dealing with a report of lack of respect (Professionalism).
- 92% of residents and PDs indicate there is an objective measure in place to assess and verify levels of supervision required to do a procedure- huge win for New Innovations/city-wide system.
- Nurses indicated they feel positively about working with the residents

Opportunities for Improvement:

Transitions of care

- 46% of residents report using a standardized TOC process (54% do not)
- 38% residents replied "it doesn't apply to my specialty"
- During walking rounds, nurses, residents and fellows interviewed reported "the greatest risk to pt. safety at MVH is due to incomplete or inaccurate communication including telephone handoffs, transfers from inpatient to outpatient care, transfers from the ER to inpatient floors and handoffs at change of shift."
- 77% of residents reported having inter-professional TOC training yet only 57% of PDs report the residents had the training.

Patient Safety: MVH Leadership identified reducing the number of safety events as a major priority.

- 1000s of incident reports were filed in 2017 yet only 66 were reported at DCI and online by residents.
- 6% of residents indicate they observed a safety concern and chose not to report it.
- Only 65% of residents report having any training in disclosure and only 25% report having experiential training and feedback during actual cases.
- No central monitoring exists of education and participation in safety activities.
- Residents and fellows vary in their understanding of how to investigate RCA and IAs and programs and departments vary in their teaching.

Quality:

- No central monitoring of quality education, projects and initiatives
- 46% of residents and fellows report knowing what the organization's QI processes with 60% of faculty and 86% of PDs.
- Access to and utilization of existing data does not occur. Residents are unaware of these resources eg. Analytics Mall, service-line quality scorecards and patient experience data.
- Few residents could describe the quality process used for improvement initiatives including design, implementation, evaluation and follow-up steps.

Healthcare Disparities:

- MVH does not report having a systematic approach to identifying variability in the care provided to or the clinical outcomes of their known vulnerable patient populations.

Well Being:

- Our efforts were acknowledged but we have significant work to do in all areas including burn-out, self-harm, fatigue and work life balance.

Professionalism:

- 27% residents and 8% faculty indicate they have documented a history or finding that they did not personally elicit eg. copy and paste.
- 27% indicate they had been asked to compromise their integrity at least one time while working at MVH but declined to provide examples.

ACTION PLAN:

1. Central recording of all safety and quality activities is now entered in NI by the program directors and program coordinators with monitoring by the GME Office.
2. Director for Quality and Patient Care has started Q&S education for all programs to ensure continuity. There will be at least 2 required presentations in late 2018-

- 2019: one will be on disclosure of adverse events and the other will be Q&S focused.
3. Residents on committees and their attendance will be monitored and is currently successful.
 4. A workshop on Resiliency was held in for program directors for all programs to promote wellbeing activities on October 31, 2018.
 5. Programs on health care disparities will be offered to programs and groups eg., chief residents.

Residency Closure

BSOM made the decision to close the Cardiovascular Fellowship Program on June 30, 2019. Dr. Painter and Dr. Zryd are working with Dr. Wase to ensure the fellows are appropriately transferred to new programs to complete their training as required by the ACGME.