

UC Irvine

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health

Title

Academic Promotion Workshop Series Enhances Emergency Physicians' Knowledge of and Experience with the Promotion Process

Permalink

<https://escholarship.org/uc/item/37k4r2f5>

Journal

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health, 20(4.1)

ISSN

1936-900X

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Publication Date

2019

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29 February Teach-Off Competition: A \$60 Teaching Intervention to Beat the Winter Blues

McGrath M / Boston Medical Center, Boston, Massachusetts

Background: Bedside teaching is an important aspect of resident education. Demands on faculty time with rising patient volume, emergency department crowding, and charting can threaten teaching. Academic centers have seasonal flow; in summer we focus on interns assuming new roles and in spring on residents preparing for the next stages of training. For many of us, the winter brings role fatigue and loss of focus on teaching. This is also when the residents take the annual ACGME survey, which measures resident perception of faculty teaching. We piloted a February Teach-Off Competition in 2018 to address this need and boost our teaching.

Educational Objectives: We aimed to 1) increase participation in on-shift teaching; 2) recognize teaching excellence; and 3) improve ACGME resident survey responses of faculty interest in teaching.

Curricular Design: In January 2018, we promoted the competition in conference, e-mails and posters. The goal was to encourage resident and faculty participation in morning teaching rounds and change-of-shift teaching. All teaching counted: ultrasound, electrocardiogram, radiology, critical care, advances in literature, etc. We tracked rounds and reminded those responsible via e-mail. At the end of February, residents voted anonymously on-line for the best resident and faculty teacher. All nominees were recognized at conference and their names given to the residency program director and chair. The winners received a framed certificate, a coffee mug and gift card to a local café. The total program cost \$60.

Impact/Effectiveness: We expanded morning teaching rounds to six days per week and residents reported an increase in change-of-shift teaching. Fifteen residents and faculty were formally recognized for teaching. Our efforts did not lead to measurable improvements on the ACGME survey questions “faculty are interested in residency education” and “create environment of inquiry.” Mean scores were 4.0 and 3.7 in 2018, respectively, and 4.1 and 4.0 in 2017. This blunt survey may not be the correct tool to measure impact of this project. This program is applicable to any residency suffering from seasonal slumps in teaching enthusiasm. It is low cost and easy to implement. Many residents and faculty who were not nominated this year asked how they could “make the winner list” next year. The award ceremony was met with cheers and was a fun celebration. It recognizes those who are dedicated to teaching and encourages others to compete for the same.

30 Building Interest in Emergency Medicine Through a Cadaver-Based Procedural Skills Workshop

Parekh K, Brumfield E, Lei C / Vanderbilt University Medical Center, Nashville, TN

Background: Emergency medicine (EM) is often not a required course for medical students; thus, they may have limited exposure to EM in the pre-clinical curriculum. To promote early exposure to EM and to provide extracurricular opportunities for procedural skills practice, the EM Interest Group at Vanderbilt University School of Medicine developed and hosted two cadaver-based, procedural skills workshops.

Educational Objectives: The objectives of the workshop were to increase interest in EM and to increase confidence in performing procedures.

Curricular Design: Each workshop consisted of 1) a didactic session, and 2) a cadaver-based procedural session. Senior students planning careers in EM led the didactic session, reviewing the indications, contraindications, methods, and complications of each procedure. The cadaver-based session was conducted by EM faculty and residents who facilitated deliberate procedural practice. Included procedures were airway management, intraosseous and central venous catheter placement, tube thoracostomy, pericardiocentesis, and laceration repair. At the end of the cadaver-based session, participants completed anonymous paper evaluations consisting of a five-point Likert scale and two open-ended questions. Participant confidence in performing procedures was assessed using a five-point Likert scale. We compared pre- and post-workshop confidence using a Wilcoxon signed-rank test.

Impact/Effectiveness: Of the 28 students who participated, all (28/28) completed an evaluation; 67.9% of participants (19/28) were first- or second-year students. The evaluation indicated that 75% (21/28) of participants reported increased interest in EM, and 25% (7/28) reported that their interest in EM did not change. Confidence in performing procedures significantly increased for all procedures. The most significant increase in confidence was for endotracheal intubation (pre-workshop median = 2; post-workshop median = 3).

31 Academic Promotion Workshop Series Enhances Emergency Physicians' Knowledge of and Experience with the Promotion Process

MacVane C, Strout T, Baumann M / Maine Medical Center, Portland, Maine

Background: Academic promotion is important for emergency physicians, but the lack of formal guidance in navigating complex systems can present a challenge. Our Institutional transition in university partners left our faculty with little understanding of the new promotions process and required dossier.

Educational Objectives: We sought to develop a structured, mentored academic promotion workshop series.

Goals included enhancing understanding of the promotions process; improving knowledge of the required educational dossier elements; heightening awareness of the characteristics of a strong dossier; and expanding the number of emergency medicine (EM) dossiers ready for submission.

Curricular Design: We developed a novel format using adult learning theory principles, and team-based and flipped-classroom strategies. Workshop preparation began with brief readings, review of portfolio templates, and document gathering (eg, curriculum vitae [CV], learner evaluations). Monthly two-hour peer-led workshop topics included an introduction to the promotion process; CV preparation; developing an educational portfolio and teaching philosophy; documenting teaching roles in course and faculty development, medical education, and curricular affairs; learner and peer-teaching evaluations; letters; documenting scholarship; and portfolio appraisal. Each session included review of the month's topics and materials, example sharing, discussion and structured time for dossier-preparation work.

Impact/Effectiveness: Ten EM academic-track faculty were eligible to participate. Following session one, two faculty determined that they did not meet promotion criteria and four noted that their body of scholarly work needed further development; all identified specific areas needing enrichment. The remaining four faculty participated in the full program. At completion, two participants had full, submission-ready dossiers. One had a near-complete (since submitted) dossier, and one participant chose to delay submission. All gained understanding of the process, dossier components, characteristics of a strong portfolio, and were able to discern their readiness for advancement. All reported that the program was useful and enjoyable. In sum, peer-mentored academic promotion workshops are an effective way to enhance the dossier-preparation process.

32 Rapid Cycle Deliberate Practice Simulation for Resuscitation Training of Medical Students

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Background: Medical simulation provides an opportunity for students to safely practice critical cases. However, standard simulation with post-event debriefing can overwhelm and frustrate medical students who may lack the skills to successfully complete the case. The novel simulation method of Rapid Cycle Deliberate Practice (RCDP) created by Hunt et al. may eliminate this issue and improve learning and retention. RCDP uses the concept of deliberate practice to allow learners to repeat skills after receiving targeted within-event feedback by instructors. Recent research suggests that RCDP is an ideal method of teaching the algorithms and technical skills of

resuscitation. This research is still in its infancy. Absent are data testing RCDP in medical students. Using the methods below, we aimed to fill this gap by creating a RCDP model for emergency medicine (EM) clerkship students.

Educational Objectives: The objective of using RCDP is to improve proficiency and retention of critical actions and skills while increasing student satisfaction compared to standard simulation.

Curricular Design: We created an RCDP ventricular tachycardia/ventricular fibrillation (VT/VF) simulation case for medical students. We divided the stages of the Advanced Cardiac Life Support (ACLS) VT/VF algorithm into discrete rounds, with each consisting of required critical actions. Faculty would "pause and resume" or "stop and restart" the case to give quick directed feedback. Pause and resume is used when a task has been performed incorrectly. The case continues with students in their same roles. Faculty stop and restart the case when a task is missed, performed out of sequence, or the round has been completed. The round is restarted from the beginning with students in new roles, thus giving everyone a chance to lead. This cycle repeats until case completion.

Impact/Effectiveness: We used this RCDP protocol in place of standard simulation in our EM clerkship. Informal student feedback has been overwhelmingly positive. As teachers, we were able to correct errors and teach ACLS skills in real time. Students incorporated feedback, and their performance improved over the course of the session. By the end, students were able to complete the entire case with minimal correction. Future direction of our work will focus on assessing the long-term retention of skills learned in RCDP simulation.

33 Rapid Cycle Deliberate Practice Simulation for Resuscitation Training of Medical Students

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Background: Emergency medicine (EM)-specific oral presentations differ from general oral presentations in length, focus, and structure. Although we teach medical students to present differently in the emergency department, there is no established rubric for grading EM-focused presentations. We present a novel rubric for use in EM, derived from a published, validated rubric used in other medical specialties.

Educational Objectives: Our goals were to provide a novel grading rubric for EM-specific medical student presentations, designed to specifically assess for length, focus, and structure; and improve standardization of oral presentation grading and feedback.

Curricular Design: In 2014, Lewin et al. introduced the Patient Presentation Rating tool – a validated rubric for