UC Irvine

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

Title
Resident-Led Health Equity Curriculum

Permalink
https://escholarship.org/uc/item/6z80x5ts

Journal
Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health, 21(4.1)

ISSN
1936-900X

Authors
Manchanda, Emily C.
Chary, Anita
Molina, Melanie
et al.

Publication Date
2020

Copyright Information

Table 2. Selective Activities.

Education	
Faculty meeting	(n=6)
Talk for pre-medicine students	(n=1)
Intern orientation	(n=1)
M3 simulation	(n=2)
M4 simulation	(n=2)
M4 orientation	(n=3)
Program Director's roundtable	(n=1)
EMIG social event	(n=1)
EMIG skills night	(n=3)
Medical student teaching shift	(n=1)
Medical student intern prep course	(n=1)
Residency fair	(n=1)
Chair meeting	(n=2)
EMS	
FEMA/NIMS course	(n=2)
EMS lecture for pre-hospital providers	(n=1)
Departmental disaster drill	(n=1)
EMS ride along	(n=2)
Research/Ultrasound	
QI project poster presentation	(n=1)
Ultrasound scan shift	(n=1)
Research project	(n=1)
Other	
Safety Saves (hospital QI meeting)	(n=1)
PFCCS course	(n=2)
Departmental sepsis meeting	(n=2)
Pediatric ED/Children's hospital meeting	(n=2)
Sick call coverage	(n=2)
Interview day tours	(n=8)

ED: Emergency Department, M3: third year medical student, M4: fourth year medical student, EMIG: emergency medicine interest group, EMS: emergency medical services, QI: quality improvement, FEMA/NIMA: Federal emergency Management Agency/National incident Management System, PFCCS: Pediatric Fundamental Critical Care Support

34 Resident Families: Improving Resident Wellness and Camaraderie: A Pilot Study

Reber R, Campana C, Simon E, Merrill R, Krizo J / Cleveland Clinic Akron General

Introduction/Background: Burnout is a work-related syndrome involving depersonalization, detachment, and a reduced sense of personal accomplishment. Wellness curricula during residency is aimed at providing physicians with the tools to create a sustainable work-life balance. Physician burnout (50%) ranks higher than many other professions. Emergency medicine reported one of the highest burnout rates at 48%. Therefore, it is critical to provide wellness support to physicians.

Learning Objective: To improve overall resident wellness, foster healthy coping skills, and improve peer support networks and camaraderie within an emergency medicine residency program.

Curricular Design: Residency families, modeled after undergraduate mentorship programs, were formed at the beginning of the academic year. Each consisted of one resident per class, one core faculty, and one clinical faculty member. Families were encouraged to meet outside of clinical duties. Additionally, residency wide wellness activities were arranged at least monthly. A ten question survey was distributed to measure resident wellness, assess the preliminary opinions of resident families, gauge interest in future activities, and determine areas of greatest interest. Monthly activities will be planned based on the indicated preferences, and a post-survey will be assessed at the end of the implementation period.

Impact/Effectiveness: Based on preliminary survey results, the majority of residents (57%) indicated that their home and work happiness are directly correlated. At the beginning of implementing resident families, participants revealed they felt supported at work (100%) and outside of work (77%) by fellow residents and 98% felt supported by attending physicians. Of respondents, 57% stated having a resident family has had a positive impact on their adjustment to life. The dimensions of wellness most interesting to residents are social (90.5%), physical (66.6%), and financial (61.9%).
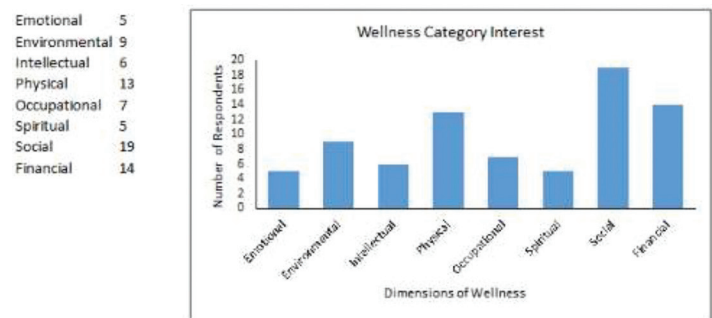

Emotional 5
Environmental 9
Intellectual 6
Physical 13
Occupational 7
Spiritual 5
Social 19
Financial 14

Image 1

35 Resident-Led Health Equity Curriculum

Cleveland Manchanda E, Chary A, Molina M, Dadabhoy F, Landry A, / Harvard Affiliated Emergency Medicine Residency, Boston, MA; Brigham and Women's Hospital, Boston, MA

Introduction: Resident physicians encounter many forms of discrimination directed towards patients and providers throughout their training. Resident-led initiatives to educate peers about health equity, implicit bias and microaggressions can increase awareness and skills for addressing these forms of discrimination, while creating peer support networks.

Learning Objective: This resident-led longitudinal health equity curriculum aims to 1) raise awareness of race- and gender-based inequities in resident and patient experience, and 2) build residents' skills in addressing inequities and microaggressions.

Curricular Design: Senior residents led a longitudinal five-session series (Health Equity Rounds) incorporated into the residency's yearlong didactic curriculum. Senior residents performed literature review and solicited resident-submitted experiences of diversity in our practice environment to teach residents and faculty about health equity, race as a social construct, forms of racism including implicit bias and microaggressions, and provided strategies for addressing

these topics. Quantitative (Table 1) and qualitative (Table 2) feedback was solicited through a survey with participating residents and faculty. The most useful sessions engaged residents in interactive discussions, leveraging their experiences to highlight how discrimination affects the work environment. Skill-building sessions facilitating practice of verbal interventions to address problematic interactions will be incorporated into future iterations of this curriculum.

Impact: Resident-led initiatives about diversity and inclusion educate not only peers but also faculty at their institutions. All participants reported increased understanding (Table 1), while many requested that these discussions continue (Table 2). Further work is needed to identify strategies to support residents, particularly those with underrepresented backgrounds, who pursue health equity work as clinicians and educators.

Table 1. Perception of Utility of Health Equity Retreat (n=29).

Reported increased understanding of residents' experiences of diversity in the workplace	100%
Found "Sharing Stories, Creating Definitions" very or extremely useful	94%
Found "Microaggressions Workshop" very or extremely useful	94%
Found "Verbal De-escalation of Agitated Patients" very or extremely useful	79%
Requested further training in:	
>Dealing with discrimination from patients	83%
>Best practices in hallway care	83%
>Implicit bias	59%
>Trans health	55%

Table 2. Dominant Themes from Open-Ended Survey Response (n=29).

Theme	Sample Quotes
Perceived Value	"Thanks for putting together an important training even though it can be uncomfortable at times." "So, so worthwhile." "Thank you for conducting the most thoughtful and effective professional development event that I have ever attended."
Perceptions of Format	"I liked the layout, plenty of time for audience participation and small group work." "I wish we could have had a report back for lessons learned and key discussions from the different groups."
Need for Continued Discussion	"I wonder how we keep these conversations going."
Involvement of Other Key Stakeholders	"I wish more faculty members had been there." "Next time we should have nursing come too." "The big unaddressed issue is that a lot of the tension comes from nursing…[nurses] are the front line when patients get aggressive."

36 Scholarly Work Jumpstart

McCabe K, Ranney M/ Boston Medical Center; Alpert Medical School at Brown University

Introduction/Background: The ACGME requires that residents participate in scholarly activity during training.

Challenges to involvement in scholarly work include lack of experience or comfort with scholarship, and lack of early mentorship. Delayed exposure and participation can lead to less meaningful projects than desired.

Educational Objectives:
- Provide a scaffolding to assist in developing a topic of interest into meaningful scholarly work.
- Facilitate scholarship early in residency, in a supportive environment, with a structured mechanism to enhance the project.
- Facilitate networking to assist with moving projects forward.
- Develop a curriculum to facilitate early resident involvement in meaningful scholarly work.

Curricular Design: The Scholarly Work Jumpstart (SWJ) Program, inspired by the SAEM Lion's Den event, was adapted to aid residents in developing, presenting and refining scholarly work. In the first phase, each PGY1 develops their topic of interest by answering five questions that frame the topic as a problem to be solved, then discuss it at their June semi-annual review. (Table 1) During the second phase, the PGY2 residents present their five minute jumpstart proposal to students, residents, and EM faculty, followed by five minutes of questions. (Table 2) Presentations conclude with offers from the audience to help refine the project, collaborate, or help with networking.

Impact/Effectiveness: Two classes have completed the SWJ. The structured tool was used effectively by PGY1s. The diverse audience provided dynamic discussion. Providing a deadline enhanced early involvement in scholarly work, and the templates increased the substantiveness of resident scholarly projects. Resident and faculty consensus is that this format is meeting the educational objectives. Several SWJ project abstracts and manuscripts have been submitted for peer review. While it is too early to say if there has been a significant increase in overall scholarly productivity, the SWJ provides a timeline and format to engage in meaningful work.

Table 1. Scholarly Work Jumpstart Application.
1) Project Title (make it catchy, if you can)
2) What's your question?
3) What is the unmet need that your project will address (BACKGROUND/SIGNIFICANCE)?
4) What's your vision for answering the question? How are you going to solve this unmet need (RESEARCH PLAN/ METHODS)? If you have already started to work on this project, please share with us what you have done.
5) What is your metric of success (MEASURES/OUTCOMES)?
6) What personal resources do you bring to this project?

Table 2. Scholarly Work Jumpstart Presentation Framework.
-Convince us that your topic is worthwhile, your approach is good, and you are worth mentoring or collaborating with. Have some fun with your presentation (or keep it serious...your choice)!
-5 areas to cover (1-2 slides for each)
  1) Title