

Regions Emergency Medicine Residency

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History

- Accreditation 1995, 1999, 2003
- 63 graduates 1999-present
- 90 residents 1996-present

Mission: PAPEEMCE
Provide and promote excellence in
emergency medicine care and education

- Patient centered
- Resident focused
- Team oriented
- Transparency
- Professionalism
- Knowledge
- Skills
- Attitudes
- Core competencies
- Contribution to specialty

63 graduates 1999-present

- 38 Minnesota: 7 Regions, 5 Fairview-U, 4 North, 4 EPPA, 4 Abbott, 3 Healtheast, 2 Waconia, 2 Duluth, 2 United, 2 Shakopee, Brainerd
- 25 out of state (17): SD 4, NE 3, CO 2, IN 2, IA 2, CA, MS, OR, NH, AK, MT, WA, CA, WI, OH, ND, UT
- 11 Academic: 7 Regions, Wishard, Madigan, University of Iowa, Case Western
- 10 Hybrid: 5 Fairview-U, 4 North, Mercy-Iowa City
- 39 Community
- 5 Fellows (faculty development, critical care, simulation, informatics, toxicology)

90 residents (1996 - present) 25 medical schools

- 33 U of M,
- 7 UND
- 6 USD, Mayo
- 5 MCW
- 4 Creighton, UW
- 3 Iowa
- 2 Nebraska, Loyola, Indiana, Kansas
- Finch, SUNY-Buffalo, SLU, Des Moines, Nevada, Vermont, Penn, Hawaii, East Carolina, Arizona, Colorado, Utah, Michigan State

30 Faculty (16 Different EM Residencies)

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| ■ Regions x 7 | ■ Brooke Army |
| ■ Henry Ford x 2 | ■ St Vincent's |
| ■ Maryland x 2 | ■ UCSF/Fresno |
| ■ Harvard Affiliated | ■ Christ |
| ■ Pittsburgh | ■ New Mexico |
| ■ Virginia | ■ Cincinnati |
| ■ HCMC | ■ Indiana |
| ■ Illinois | ■ Boston |

Rotations (4 weeks blocks)

- Year 1: ED 3.7, SICU 1.3, Ortho 1, MICU 1, Cards 1, OB 1, Mpls Kids 1, Anesthesia 1, Plastics 1, EMS 1
- Year 2: ED 6.3, SICU 1.3, EMS 1, North 1, MICU 1, St Paul kids 1.3, Tox/Adm 1
- Year 3: ED/ St Paul kids 9.7, SICU 1.3, Elective 1, Selective 1

2003-2004

- One month rotation to 4 week rotation
- Incr Saint Paul kids exposure 26%
- Move EMS from EM-2 to EM-1
- Move Tox from EM-3 to EM-2
- Incr Nurse midwife from 1 to 2 week
- SICU, ortho, pediatric airway
- BEST, virtual admin curriculum
- Scrub color, cafeteria, EBM
- EMREL, education asst, annual report, newsletter
- Simulation
- Shakopee pilot

2004-2005

- Ortho rotation
- Selective
- NCS, U of M procedure lab
- Conferences (guest speakers, cath conference, board review, "you decide")
- Simulation
- 2 sides to 3 teams
- Pilot switch with HCMC
- Admin experience
- Rotation liaisons to class meetings

Residency Strategic Plan 2005-2010

4/28/05

- SWOT analysis
- Conferences
- Simulation
- Mentorship
- Administrative curriculum
- Scholarly activity
- Individualization of educational experience
- Integration with U of M
- Integration with twin city hospitals
- National presence

Retreat 2005 area of focus

- Increase ultrasound teaching time. J Geddes, Jon Shultz, and S Fritzlar have volunteered to help develop a more structured ultrasound teaching.
- EPIC – Dedicate one res/fac meeting to teaching more efficient use of templates.
- Develop a better relationship with hospitalists. B Peake, S Donner, Beth Wicklund, and M Connelly have volunteered to work on this.
- Administrative Education. J Charles, K Smith, and M Connelly will work on developing this experience.
- Discussion of patient based ED Schedule and increase number of residents.
- Discussion on resident portfolios

Program review 2006

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| ■ Residency coordination | ■ Admin rotation |
| ■ Resident responsibility and independence | ■ ED research |
| ■ Patient population | ■ OB rotation |
| ■ Social work | ■ Ultrasound |
| ■ Residency leadership | ■ Ortho rotation |
| ■ ED rotation | |

2005-2006

- Ultrasound workshops, EPIC, Relationship with hospitalists, Admin education, Pt based scheduling
- Micro to macro: Integration with U of M, twin cities hospitals
- EM education to EM delivery education: EMR, flow, quality, pt satisfaction
- Rotation CQI throughout year
- Leadership experiences: residents on national committees, society and editorial boards
- Mentorship
- Anatomy lab, procedure lab
- 3 chief residents, off-service residents
- Combined conferences, guest speakers, alumni engagement
- Increased selective site, formalized Ecuador elective
- Focus on ED teaching and feedback

Our residency efforts are guided by the Baldrige core values for educational criteria for performance excellence which include:

- Visionary leadership
- Learning centered education
- Organizational and personal learning
- Valuing faculty staff and partners
- Agility
- Focus on the future
- Managing for innovation
- Managing by fact
- Social responsibility
- Focus on results and creating value
- Systems perspective

Additionally, we strive to incorporate the Institute of Medicine's *Report on Health Professions Education: A Bridge to Quality* which suggests five core areas where students and working professionals should develop and maintain proficiency. They include:

- Delivering patient-centered care
- Working as part of interdisciplinary teams
- Practicing evidence-based medicine
- Focusing on quality improvement
- Using information technology

Questions to consider