Regions Emergency Medicine Residency

October 25, 2007 Felix Ankel, MD

History

- Accreditation 1995, 1999, 2003
- 72 graduates 1999-present
- 99 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

72 graduates 1999-present

- 43 Minnesota: 9 Regions, 5 Fairview-U, 5 North, 5 EPPA, 4 Abbott, 2 HealthEast, 2 Waconia, 3 Duluth, 4 United, 2 Shakopee, Brainerd, Mayo
- 26 out of state (15): SD 4, NE 3, IA 3, CO 2, IN 2, WI 2 ND 2, MS, OR, NH, AK, MT, WA, UT, VA
- 11 Academic: 9 Regions, Wishard, Mayo
- 11 Hybrid: 5 Fairview-U, 5 North, Mercy-Iowa City
- 49 Community
- 5 Fellows (faculty development, critical care, simulation, informatics, toxicology)

99 residents (1996 - present) 25 medical schools

- 34 U of M,
- 8 UND
- 6 USD, Mayo, MCW, Iowa
- 4 Creighton, UW
- 2 Nebraska, Loyola, Indiana, Kansas, Chicago Med School
- SUNY-Buffalo, SLU, Des Moines, Nevada, Vermont, Penn, Hawaii, East Carolina, Arizona, Colorado, Utah, Michigan State, Albany, VA-COM

28 Faculty (14 Different EM **Residencies**)

- Regions x 9
- Henry Ford x 2
- Harvard Affiliated x 2 Christ
- Pittsburgh
- HCMC
- Illinois
- Brooke Army
- St Vincent's
- UCSF/Fresno
- New Mexico
- Indiana
- Boston Medical Center
- Grand Rapids

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 7.3, SICU 1.3, 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

2005-2006

- Ultrasound workshops, EPIC, Relationship with hospitalists, Admin education, Pt based scheduling
- Micro to macro: Integration with U of M, twin cites 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

2006-2007

Conference changes

- Move to Thursdays
- Increase critical case to 90 minutes
- Increase simulation time during conf
- Pre-conference sim sessions
- Structured ultrasound workshops
- Schedule change from teams to sides, 10-hr shifts
- Doctors Dahms, Morgan and Taft assume roles as Asst. PDs
- Incorporation of Peds-EM faculty (Ortega & Reid) into Residency
- Hosting of Ecuadorian EM residents
- EM/FM combined residency discussions
- E-portfolio application submission to ACGME
- Specialized interview days

Program review 2007

- Residency coordination
- Social work
- Resident responsibility and independence
- Residency leadership
- SPC ED rotation
- Admin rotationED Call Room
- ED Equipment
- Ultrasound
- Research
- Rese

Themes

- Bedside teaching/microskills faculty assessment cards
- Merging residency & quality movement
- Merging residency & patient satisfaction movement

Our residency efforts are guided by the Baldridge 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