

Emergency Medicine Resident/Faculty Retreat

Minnesota Transportation Museum - Jackson Street Roundhouse

October 29, 2009

| Residents | | | | Support/Guests | | | |
|-----------|-----------------------------|---|---------------------|----------------|----------------------|---|--------------------|
| ✓ | Aaron Burnett, MD | ✓ | Kara Kim, MD | ✓ | Pat Anderson | ✓ | Beth Heinz |
| | Nate Curl, MD | ✓ | Kolja Paech, MD | ✓ | Lori Barrett | ✓ | Mary Healy, RN |
| ✓ | Aaron Feist, MD | ✓ | Jillian Smith, MD | ✓ | Ryan Aga | ✓ | Louis Ling, MD |
| ✓ | Leah Gapinski, MD | ✓ | Timmy Sullivan, MD | ✓ | Eugenia Canaan | ✓ | Gary Mayeux |
| ✓ | Shani Go, MD | ✓ | Peter Baggenstos | ✓ | Nicole Cox | ✓ | Jennifer Neville |
| ✓ | Nicci Stoik, MD | ✓ | Eric Dahl | ✓ | Debra Curran | ✓ | Carl Patow, MD |
| ✓ | Heather Sutherland, MD | | Tyler Ferrell | ✓ | Marcella de la Torre | ✓ | Eric Peterson |
| ✓ | Greg Vigesaa, DO | ✓ | Kate Graham | ✓ | Jennifer Feeken | ✓ | Debi Ryan |
| ✓ | Brent Walters, MD | ✓ | Clint Hawthorne | ✓ | Richelle Jader, RN | ✓ | Jennifer Schiffler |
| ✓ | Catie Carlson, MD | ✓ | Bjorn Peterson | ✓ | Linda Hart | | |
| ✓ | Katie Davidson, MD | ✓ | JR Walker | | | | |
| ✓ | Autumn Erwin, MD | ✓ | Ben Watters | | | | |
| ✓ | Alex Gerbig, MD | ✓ | Casey Woster | | | | |
| Faculty | | | | | | | |
| ✓ | Felix Ankel, MD | | Paul Haller, MD | | Kevin Kilgore, MD | ✓ | Karen Quaday, MD |
| ✓ | Emily Binstadt | | Carson Harris, MD | | Peter Kumasaka, MD | ✓ | Marty Richards, MD |
| | Mary Carr, MD | ✓ | Cullen Hegarty, MD | | Levon Ohaodha, MD | | Sam Stellpflug, MD |
| | Won Chung, MD | ✓ | Keith Henry, MD | ✓ | Richard Lamon, MD | ✓ | Stephanie Taft, MD |
| ✓ | Rachel Dahms, MD | ✓ | Brad Hernandez, MD | ✓ | Robert LeFevere, MD | ✓ | Michael Zwank, MD |
| | Kristen Engebretsen, PharmD | ✓ | Joel Holger, MD | | Barb LeTourneau, MD | | Drew Zinkel, MD |
| ✓ | RJ Frascione, MD | ✓ | Kurt Isenberger, MD | | Matt Morgan, MD | | |
| ✓ | Brad Gordon, MD | | Kory Kaye, MD | | Jessie Nelson, MD | | |

| Person | Agenda Item | Action Plan/Key Points |
|--------|------------------------------------|--|
| Ankel | Welcome and Historical Perspective | Dr. Ankel welcomed and acknowledged invited guests. Presented historical perspective. |
| | Updates | <p>Department Review: Kurt Isenberger and Richelle Jader</p> <p>Nursing Update: Mary Healy</p> <p>IME/GME Update: Carl Patow</p> <p>Quality Committee, Hospital Board of Directors: Karen Quaday</p> <p>Best Care/Best Experience: Beth Heinz:</p> <p>Quality Measures: Marcella de la Torre and Kara Kim</p> <p>UMN Emergency Department: Louis Ling:</p> <p>Residency Schedules, G2 updates: Rachel Dahms</p> <p>Residency Conference and G1 updates: Stephanie Taft</p> <p>Student and Residency Recruitment: Cullen Hegarty:</p> <p>Chief Residents: Aaron Burnett, Leah Gapinski, Brent Walters</p> |
| | Small Groups | Attendees were divided into small groups. Group were led by N Anderson, A Burnett, L Gapinski, P Tanghe, B Walters. Participants were asked to identify residency strengths, areas of focus, and quality issues. |

Large Group

Each facilitator presented their groups findings. Attendees were then asked to identify their top 3 strengths, top 3 areas for focus and ways to integrate quality into EM residency.

Strengths: Listed below in order identified as participants top 3 choices

- **Responsiveness of residency (14)**
- **ICU's (12)**
- **Procedures early in residency (8)**
- **Camaraderie/cohesiveness (5)**
- **Wellness – families and residents (4)**
- Peds trauma (4)
- Strong residency leadership (4)
- Simulation (3)
- International and national initiatives (3)
- MD/RN collaboration (2)
- New physical improvements (2)
- Ultrasound and equipment(2)
- Research funding (2)
- Social workers (2)
- Interim Department Head (2)
- Quality of residents (2)
- Evidence based medicine (2)
- Inhouse radiology (2)
- Access to pharmacy (2)
- Protective time (1)
- Patient Population (1)
- Peds experience (1)
- Graduates response (1)
- Quality of MN healthcare (1)
- Didactics (1)
- Procedure Lab(1)
- Own Vocera
- Informal staff interactions
- Access to consultants
- Resident benefits (insurance, etc)
- Teamwork
- Triage rotation
- Resuscitation/critical care
- HCMC resident exchange
- EMS – Continuity of care experience
- Flexibility
- Peds anesthesia
- Resident individuality
- Dynamic program
- Appreciation of residency
- Recruitment
- EMR Dot phrases
- Variety of community rotations
- Community respect of residency
- Openness to learning
- Opportunity to teach
- Subspecialty representation
- Quality of ancillary staff
- HP mission
- Increase faculty teaching
- Resident leaders
- Residency support
- Inhouse ancillary
- Increase provider flow

Quality of providers

Focus Areas: Listed below in order identified as participants top 3 choices

- **ED Scheduling – night/day transition (19)**
- **Ortho procedures in ED (15)**
- **Residents in Pod C (12)**
- **Education space (Sim/Conference) (10)**
- **Photos of RN's (9)**
- More computers for resident room (8)
- “Fixing” E and A (7)
- G2 ownership of side (7)
- Rural opportunity (6)
- Face-to-face communications (6)
- Research support – start up (8)
- Unequal A & E shifts – G2 scheduling (5)
- Resident coffee maker (5)
- Faculty at conference (5)
- Ultrasound – faculty comfort/probes (5)
- Quality – long term (4)
- Admin experience (4)
- Documentation education (3)
- Epic/Documentation (3)
- ED break room (3)
- Add critical decision to conference (3)
- ERIC/Internet (2)
- Vacation scheduling (2)
- Food service hours (2)
- Basic skills – IV's EKG (2)
- Rapid journal club (2)
- Consultants at critical case (2)
- Geographic isolation (2)
- Res shift/staff and times (2)
- Hospitalist hand offs (2)
- Peds Resuscitation (1)
- Decrease Pod F (1)
- Morning rounds (1)
- Integration of Children's experience (1)
- EBM (1)
- Patient feedback to residents
- Ortho rotation
- Understanding of roles in department
- Balance of initiative - clarity
- Integrate Admin with evidence based medicine
- Decreased patients/residents
- Managing expectations
- Patient education regarding ED
- AM Simulation
- Hospital library computers for non-library tasks
- Accessibility of info on web sites
- Perception of “regional” residency
- SICU schedule
- Peds EM – Split 3 weeks/3weeks
- Research support
- Fellowship opportunities
- Increase formal RN/MD interactions
- Morning sign-outs
- Peds experience in Pods A & E
- Palliative Care experience in EM-1
- Billing/Coding Education
- ED1 Orientation

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| | | <p><u>Integrate Quality into EM Residency</u></p> <ul style="list-style-type: none"> • Class collaborative quality project (3) • Simulation projects (2) • Order sets (1) • Brief Journal Reviews • Communicate quality initiatives • Team quality initiatives • Individual quality |
| | <p>Focus Areas</p> | <p><u>ED Scheduling:</u> Desire for more circadian rhythm, especially the transition from night to day shifts. This will be a focus for next year as the majority of the schedule is completed through June 2009.</p> <p><u>Pod C and Pod A:</u> Discussed how and when to change Pod C to Pod A . C Carlson, K Kim and K Davidson volunteered to work on this with Rachel Dahms.</p> <p><u>Comprehensive Education Space with simulation:</u> Being worked on the hospital level. Contact Carl Patow or Karen Quaday with questions.</p> <p><u>Ortho Procedures within the ED:</u> S Witt, K Graham, B Peterson, and T Sullivan will meet to discuss ortho reduction opportunities in the ED.</p> |