Residency and fellowship programs often struggle to develop and implement curricula on quality improvement and patient safety. Based on consensus recommendations of the Partners Education Committee (PEC) Task Force on Quality Improvement/Patient Safety (QI/PS) Education, the GME Office initiated two types of QI/PS education courses, available to all ACGME programs, during the past academic year: the Partners CPIP (Clinical Process Improvement Leadership Program)-GME curricula and spaced education through Qstream.

Developed in partnership with Partners Quality, Safety, and Value, including CPIP leadership, the Partners CPIP-GME course offers the essential QI principles taught in the CPIP course initiated in 2010, and is offered in two formats:

A) in-person, interactive training focused on improving the quality and efficiency of care delivery by assisting trainees with identifying gaps in quality of care, applying process improvement methodology, and assessing post-implementation changes. This course requires trainees, with assistance of program faculty or departmental Quality Assurance leadership, to identify a quality improvement issue to address, to attend two sessions of the course that provide trainees with the foundation of the quality improvement process, and to complete a QI project as part of the course.

B) an abbreviated version of this in-person course through an online HealthStream module focused on providing the foundation of the quality improvement process without project work.

The Qstream challenge was also offered to first-year trainees of ACGME programs as a case-based spaced-education course focused on delivering vignettes and assessing trainee knowledge in the areas of patient safety, quality improvement and transition of care over a two-month period. During the inaugural year, 52 trainees in 17 programs have completed the in-person CPIP-GME course (including participation in and completion of a QI project) and over 150 trainees in more than 20 programs completed the online version of CPIP-GME. The GME Office is offering three in-person CPIP-GME courses as well as the online CPIP-GME and plans to open two Qstream challenge sessions during AY17-18.
In April of 2016, the Obstetrics and Gynecology program established a resident led Wellness Committee. A formal survey of resident priorities and goals in regards to wellness showed that the creation of a residency retreat was the top priority for respondents. In response to this feedback, the Committee was charged in September of 2016 with submitting a formal proposal for creation and implementation of a resident retreat during AY 2016-2017. The goals of the retreat were to build a stronger sense of residency community and support, provide respite from clinical duties to reduce burnout and promote emotional wellness, promote self-care and resiliency, and reflect on personal and professional development.

The Wellness Committee devised a feasible coverage structure, budget, and determined both a location and optimal retreat dates for each of the four resident classes. With support from the program administration, department chairs, and admin chief residents, retreats were held in Barnstable, MA in April and May of 2017. Forty out of forty-three residents attended the retreat (93%). All retreat participants were excused from clinical duties for 48 hours, and coverage was provided by residents not at the retreat. Each class’ Wellness Committee representatives tailored the curricula to that class’ objectives and goals. Activities included individual and group reflection, group bonding activities (i.e. yoga, cooking), and curriculum/rotation discussions. The PGY3 class additionally had a 4-hour professionally run leadership session to determine a common goal for their chief resident year. (continued on page 3)
Feedback from residents who attended the retreat was overwhelmingly positive. Eighty eight percent of residents were “extremely satisfied” with the retreat, with the remainder being “somewhat satisfied”. Attendees reported that the retreat was a restorative experience and helped relieve some of the burnout that many residents were experiencing at the end of the year. Furthermore, residents felt that it created a medium to openly share challenges they were experiencing, both inside and outside the hospital, and brainstorm strategies to mitigate these and support each other. Lastly, residents noted that the off-site retreat location facilitated resident bonding and helped cultivate camaraderie within each class. All residents and administration alike support continuing the annual retreats in future years.
In response to suggestions from program directors who wished for a longer, retreat-style workshop for faculty development, the GME office piloted its first annual GME Program Director Retreat on May 5, 2017. Eighty program directors from ACGME-accredited and non-ACGME accredited programs participated at the Partners Assembly Row Conference Center. The goals of the retreat were to: 1) discuss changes in GME nationally (including accreditation requirements), 2) offer faculty development activities on key topics including trainee wellness, feedback, and challenges facing GME training program directors, and 3) fortify a supportive learning community of program directors at Partners HealthCare.

The event was organized and moderated by Dr. Lori Berkowitz, Associate Director of GME, who started the day with a warm welcome to all attendees and gratitude to the Retreat Planning Committee, comprised of several program directors and GME staff. She then introduced the Keynote Speaker, Dr. Julie Silver, the Associate Chair for Strategic Initiatives in the Department of Physical Medicine and Rehabilitation at the Harvard Medical School & Spaulding Rehabilitation Network. Dr. Silver’s presentation entitled “6 Steps to Leading High Impact Strategic Initiatives” stimulated discussion on career development, how to advance strategic initiatives, consideration of “altmetrics” as a tool to assess penetrance of an idea, and thoughts about supporting the career advancement of physicians in underrepresented groups.

Dr. John Co, Partners GME Director, provided an overview of the upcoming changes to the ACGME Common Program Requirements and their impact on the learning environment in the areas of patient safety, physician well-being, and duty hours. Dr. Debra Weinstein, Partners Vice President for Education, led a Town Hall session and utilized an interactive response system to get input on the challenges of managing a training program and where the GME office can help.

The remainder of the morning was spent in the breakout sessions: 1) Physician Wellness, led by Drs. Hasan Bazari from MGH Internal Medicine and Douglas Smink from BWH General Surgery; 2) The ACGME Self-Study, led by Danielle Abraham, MHA from MGH Thoracic Surgery, Dr. Joel Katz from BWH Internal Medicine, Dr. Donna Polk, MD and Julie Beckerdite, MBA from BWH Cardiovascular Disease, and Diane Sheehan from Partners GME Office; 3) Challenges and Solutions for non-ACGME and Small Programs led by Drs. Mary Ellen Goldhamer and John Co from the Partners GME Office, and 4) Procedural Autonomy led by Dr. John Mullen from MGH General Surgery.

Dr. John Herman, Director of the Partners Employee Assistance Program (EAP), spoke to the program directors after lunch on the EAP’s role in managing trainee well-being and provided thoughts about how program directors can approach the challenge of working with a distressed trainee.

(continued on page 5)
One highlight of the event was the opportunity to learn from a panel of experienced program directors and coordinators, which included Drs. Robert Boland from BWH Psychiatry, George Dyer from MGH/BWH Orthopaedic Surgery, Donna Polk from BWH Cardiovascular Disease, Pamela Schaefer from MGH Neuroradiology, Shannon Scott-Vernaglia from MGH Pediatrics, and Doug Smink from BWH General Surgery. The panel covered a number of topics, including remediation and managing of difficult interactions, QI projects, and strategies to enhance faculty engagement in education.

The workshop was well received by the attendees. Anonymous quotes below from the event evaluations included:

“I thought bringing together the program directors and associate program directors set up a great platform for interaction on a different level and outside the normal stresses of a workday to help discuss collaborations.”

“I thought the GME update was incredibly useful, and overall the event helped me get to know the leaders in Partners GME.”

“I particularly enjoyed the wellness break out and the self study session was also informative.”

“I also appreciated hearing comments about dealing with trainees experiencing difficulties. I was unaware that EAP is available 24/7.”

I am now better aware of the resources that exist within Partners for small non-ACGME Programs.”

“The retreat was fantastic, and it is much easier to block off one day per year for several hours than a couple hours per day for a few PD workshops.”

“The PD retreat was fantastic – what a great idea – please continue for next year. Very helpful to hear from other PDs who are doing Self Study already.”

Planning for next year has already begun; please do not hesitate to contact Dr. Berkowitz at lberkowitz@partners.org with any comments or suggestions.
2016-2017 was another active and successful year for Partners Centers of Expertise (COEs). During the year we welcomed new co-leaders for the COE in Global and Humanitarian Health: Geren Stone, MD, DTM&H, Director, Global Primary Program, MGH and Lisa Cosimi, MD, Associate Physician in the Divisions of Global Health Equity and Infectious Diseases, BWH. They have been busy planning the second annual COE global health symposium, which was initiated last year by Geren and Dr. Joe Rhatigan, Associate Professor of Medicine, Associate Professor of Global Health and Social Medicine, and will be held this year on Saturday, October 21, 2017. Contributions of the prior leaders were deeply appreciated as David Bangsberg, MD, MPH left MGH to become the Dean of the OHSU-PSU School of Public Health and Michael VanRooyen, MD shifted his activities to accommodate responsibilities as Chair of Emergency Medicine at BWH.

Across the four Centers (in Global and Humanitarian Health, Quality and Safety, Medical Education and Health Policy and Management) 24 dinner sessions were held with a total of 401 trainees in attendance (averaging 16/dinner). Residents and fellows enjoy the opportunity to interact with COE leaders and faculty, who serve as speakers, mentors and research collaborators with participating trainees.

COE Courses also had an enthusiastic response, and each filled to – or close to - capacity:

- The Global Health Symposium, in its inaugural year, welcomed 44 participants.
- The Clinical Teaching Skills course included 31 residents and fellows
- 28 trainees attended the Health Policy Course
- The Value Based Healthcare Delivery course, co-sponsored with Harvard Business School, enrolled 89 trainees

With Dr. Torchiana’s generous support, the Centers could offer the President’s Prize again this year for proposals inspired by the Value Based Healthcare Delivery course. Nine were received from 15 trainees. The four winning proposals were:

- Digital dermoscopic records to improve the diagnosis of melanoma at Brigham and Women’s Hospital (BWH) and Dana-Farber Cancer Institute
- iMOOD Heart-D: Improving Management of Outcomes for Depression and Heart Disease
- Psychosocial Support in Breast Imaging: A Multidisciplinary Experiment
- Transparency in Emergency Department Care

The COEs continue to offer funding for trainees to attend conferences, pursue global health experiences, and/or carry out research that they have initiated. In 2016-17, 28 residents and fellows attended national conferences in their area of interest—21 in Health Policy/Management, 3 in Medical Education, and 4 in Quality and Safety. Nineteen were awarded travel grants for projects in Botswana, Colombia, Haiti, Mexico, Nepal, Nigeria, Rwanda, Tanzania, and Uganda. Twelve research grants were awarded in AY16-17: 2 in Health Policy, 5 in Medical Education, and 5 in Quality and Safety.

Information on dinner sessions for AY2017-18 will be circulated directly to trainees via monthly emails and details are available at links below. Key dates for AY2017-18 are:

- October 2, 2017 at 8am: deadline for Health Policy Course applications
- February 2, 2018: Clinical Teaching Skills course (deadline is October 25, 2017 at 8am)
- March 5-9, 2019: Health Policy Course

For additional information about the Centers of Expertise calendar, please go to: http://wwwpartners.org/Graduate-Medical-Education/GME-At-Partners/calendar.aspx
PARTNERS GME FOCUS

BRIEF NOTES

2017 PARTNERS MEDICAL EDUCATION VISITING PROFESSOR

GME was honored to host Lara Varpio, PhD, Associate Professor of Medicine and Associate Director of Research for the Health Professions Education graduate degree program at the Uniformed Services University of the Health Sciences, as the 2017 Partners Medical Education Visiting Professor.

In addition to giving Grand Rounds at BWH and MGH on May 22 and 23, Dr. Varpio held sessions with program directors and trainees. Dr. Varpio’s Grand Rounds discussions focused on tackling the “wicked problems” associated with medical and health professions’ education. At the program director forums, she and panelists Dr. Douglas Smink, Editor-in-Chief, Journal of Surgical Education, and Dr. Debra Weinstein, Deputy Editor, Academic Medicine, shared their perspectives on how editors, reviewers and authors work together in publishing medical education scholarship. Trainees participating in sessions co-sponsored by the PHS Center of Expertise in Medical Education heard Dr. Varpio’s tips on being a good mentee.

Suggestions for future Medical Education Visiting Professors are welcome and should be forwarded to Jean Tammaro at jtammaro@partners.org.

CORE CURRICULUM RETREAT

For nearly two decades the Partners GME Office has held a springtime Intern Core Curriculum retreat. The retreat provides a relaxed setting for teaching core topics that are relevant across specialties, while providing interns an opportunity to interact with each other and with faculty across departments and institutions. In order to facilitate clinical coverage, the program is held twice, this year over 300 interns and first-year specialty residents participated on March 8th or April 6th at the Metro Meeting Centers in Boston. Helen Riess, MD, Director of the Empathy and Relational Science Program in the MGH Department of Psychiatry, gave a keynote presentation about emotional intelligence in the context of healthcare delivery. Breakout sessions addressed resident wellness, unconscious bias, feedback, social media in medicine, quality improvement, patient safety, opioid education and professionalism.

CHIEF RESIDENT RETREAT

Fifty incoming Chief Residents participated in this year’s Chief Resident Retreat, held on May 3rd at the Metro Meeting Centers. This year’s program director panel included advice from Joel Katz, MD (BWH Internal Medicine), Shannon Scott-Vernaglia, MD (MGH Pediatrics), Tracey Cho, MD (BWH/MGH Neurology), and George Dyer, MD (MGH/BWH Orthopedics). Other sessions focused on challenging communications, conflict management, supporting residents with personal and professional difficulties, leadership tips for chief residents, mastering art of influence, and clinical teaching. The day ended with a panel of outgoing chief residents-- always regarded as a highlight of the day.
Dr. Jonny Kim, former intern in the Harvard Affiliated Emergency Medicine Residency Program, reported for duty in August as part of NASA’s 2017 Astronaut Candidate Class. Before earning his MD at Harvard Medical School, Dr. Kim was a Navy SEAL, completing over 100 combat operations and receiving multiple awards and honors. After completing two years of training as an Astronaut Candidate Dr. Kim will be assigned technical duties in the Astronaut Office while he awaits a flight assignment. We congratulate him on this extraordinary achievement and wish him good luck at NASA!

Boston is proud to host this year’s Association of American Medical Colleges (AAMC) Annual Conference, “Learn Serve Lead 2017,” on November 3-7, 2017 at the Hynes Convention Center. “Learn Serve Lead” is a useful learning and networking event that draws leaders, teachers and learners from across academic medicine. More information about the event can be found at - https://www.aamc.org/meetings/annual/.

Congratulations to Partners coordinators who will serve as presenters at the 2018 ACGME Annual Conference! Karen Bruynell, MM, MGH Internal Medicine, Jennifer Duane, MEd, Harvard Combined Orthopaedics and Cynthia O’Donnell, MHA, BWH Anesthesiology will co-lead a session on the role of the mentorship program for coordinators in enhancing professional development and optimizing training program quality. Their presentation will take place during the Pre-Conference program aimed at program administrators.
Recruitment season is always exciting--an opportunity to meet young, bright, and passionate professionals who are beyond excited about being a doctor and represent the future of medicine. Candidates have followed a variety of paths, including medical school or residency in a foreign country.

Programs interviewing International Medical Graduates (IMGs) must be meticulous in determining their eligibility to train at Partners Institutions. Here is a summary of the main policies impacting the IMG applicants:

1. ACGME Programs Eligibility

- **Residency**
  “A physician who has completed a residency program that was not accredited by ACGME, RCPSC, or CFPC may enter an ACGME-accredited residency program in the same specialty at the PGY-1 and, at the discretion of the program director may be advanced to the PGY-2 level based on ACGME Milestones assessments at the ACGME-accredited program. This provision applies only to entry into residency in those specialties for which an initial clinical year is not required for entry.”

- **Fellowship**
  “All required clinical education for entry into ACGME-accredited fellowship programs must be completed in an ACGME-accredited residency program, or in an RCPSC-accredited or CFPC-accredited residency program located in Canada. A Review Committee may grant an exception to the fellowship eligibility requirements allowing the program to accept an exceptionally qualified applicant. An exceptionally qualified applicant has (1) completed a non ACGME-accredited residency program in the core specialty, and (2) demonstrated clinical excellence, in comparison to peers, throughout training. Additional evidence of exceptional qualifications is required, which may include one of the following: (a) participation in additional clinical or research training in the specialty or subspecialty; (b) demonstrated scholarship in the specialty or subspecialty; (c) demonstrated leadership during or after residency training; (d) completion of an ACGME International-accredited residency program.”

Programs are advised to consult their specialty specific requirements to clarify whether their RRC allows such exceptions.

2. NRMP Policy

To participate in the Match IMGs **MUST** have passed all examinations required to obtain certification from the Educational Commission for Foreign Medical Graduates (ECFMG)

- passing scores on Step 1, Step 2 Clinical Knowledge (CK), and Step 2 Clinical Skills (CS) of the United States Medical Licensing Exam (USMLE), and

- primary source verification of the IMG’s medical school transcript.

**IMGs who have not passed the ECFMG certification examinations by the Rank Order List Deadline CANNOT participate in the Match.**

3. Applicants Requiring a Visa

**Partners Office for International Professionals and Students’ (PIPS) website** contains a comprehensive guide to all visas available to Partners trainees and clarifies the process of obtaining each type of visa. In addition to advising both the hiring department and the Foreign National about initiating and extending visa status, PIPS processes visa sponsorship requests for all non-immigrant staff, scholar and student visas (including J-1, J-2, H-1B, TN, E-3 and O-1 visas). Each year PIPS offers visa workshops for the program coordinators to explain the requirements and the process for assisting prospective and current trainees with the visa issues.

(continued on page 10)
4. The Executive Order impeding travel of individuals from certain countries

On the final day of its term, the U.S. Supreme Court agreed to hear the Government's appeal of the U.S. Appeals Court's stay of the President’s revised Executive Order. The Court also reinstated parts of the travel ban, effective June 29, 2017, although the Court has permitted citizens of the affected countries to travel to the U.S. provided they could prove a "bona fide relationship" with a U.S. person or entity.

PIPS has compiled resources to help affected foreign nationals safely cross U.S. borders. Read PIPS' guidance on the reinstated portion of the Executive Order here. For questions regarding visa eligibility and processing as well as questions regarding the Executive Order and international travel please contact PIPS directly.

5. Applicants with DACA status

In its communication from September 11, 2017, the ACGME included a special update regarding the DACA program.

"While Congress may act and pass a permanent protection for Dreamers, the Memorandum issued by the Acting Secretary of the US Department of Homeland Security on September 5, 2017 provides for a six-month wind down of the program. The current guidance in the Memorandum states that the DACA Employment Authorization Documents (EAD) cards that have already been issued will remain in full force and effect, and continue to provide work authorization up to and including the date of expiration. This is true even for EAD cards that expire after the program otherwise ends on March 5, 2018.

Also per the Memorandum, for any EAD cards expiring between September 5, 2017 and March 5, 2018, the US Citizenship and Immigration Services (USCIS) will continue to accept DACA renewal requests and EAD renewal applications through October 5, 2017. Those DACA participants with EAD cards expiring between September 5, 2017 and March 5, 2018 may file for DACA and EAD renewal by October 5, 2017 for an additional two-year term of work authorization.”

The Partners Office for International Professionals and Students (PIPS) recommend that individuals with DACA status confer with a reputable and experienced immigration attorney to review available options based on individual circumstances. PIPS can provide a list of recommended, local immigration attorneys. In addition, Partners HealthCare Employee Assistance Program has a list of Immigration Service Agencies.

For more information please refer to the following resources:


The GME prepared two workshops on the topic of Visas for Clinical Trainees that are scheduled to take place in November:
* **F1 visas** – November 28th at 10-11:30am in BWH Zinner Board Room
* **J1 visas** – November 9th at 9:30-11am in MGH Yawkey 2-220

For questions regarding recruitment policies or to sign up for any of the workshops please contact Alicja Martins at amartins4@partners.org.
The 2017 Annual Partners Program Coordinator Retreat was held on May 16, 2017 at BWH. Fifty-eight program coordinators from ACGME-accredited training programs gathered to discuss ACGME requirements, learn about new GME initiatives, and to network.

The event started with an overview of revisions to the Common Program Requirements (Section VI), presented by Dr. John Co, Partners GME Director and Irina Knyshevski, BWH Accreditation Manager. Changes effective July 1, 2017 include: 1) increased emphasis on patient safety and quality improvement, 2) provisions to reinforce the well-being of residents and faculty, and 3) new duty hours requirements. The Q&A session focused on how the new requirements will be addressed at the institution level and what the programs will need to tackle individually.

Next, the group heard from two coordinators about approaches to Program Self-Study. Danielle Abraham, MHA, from MGH Thoracic Surgery and Julie Beckerdlite, MBA, from BWH Cardiology shared experiences in preparing for the Self-Study, underscoring their significant role in the process. The presenters noted key differences between the Self-Study for a small, free-standing program vs. for multiple fellowships that work in tandem with their core specialty program. They emphasized the importance of adhering to a timeline when analyzing and responding to - trainee, faculty, and alumni survey data. The presenters included examples of how to organize meetings with various stakeholders, and shared templates of materials used in their Self-Studies. Discussion following the presentation highlighted that skills acquired during the Self Study (i.e. survey construction, data analysis, effective communication, leadership) are central for coordinator professional growth and career development.

After lunch, coordinators chose to join one of three discussion groups focused on: 1) coordinator well-being, 2) coordinator educational activities, 3) communication and networking. During the report-back session, each group presented their key discussion points and suggestions for improving on the existing opportunities.

- Members of the well-being group favored creating a database of activities available to coordinators at both hospitals (i.e. relaxation sessions offered by Benson-Henry Institute or BWH walk-at-lunch groups) and aimed to identify and organize coordinator-specific activities.
- The education break-out group discussed topics for future monthly workshops, and advocated for more opportunities to learn from each other by discussing success stories as well as challenges. The group unanimously favored expanding the annual retreat into a day-long activity, preferably off-site.
- The communication group suggested creating an internal mode of communication between coordinators, such as list serve or a social media group, and emphasized the need for new coordinators to have access to the database of documents containing information on how to approach commonly occurring tasks (i.e. caterers to use during recruitment).

There was a consensus that each group should continue to work together on their recommended initiatives during the upcoming year as a task force, and report their progress at next year’s retreat.

We would like to remind all coordinators of the opportunity to participate in monthly workshops dedicated to a variety of GME topics. Please refer to the GME website for the schedule - http://www.partners.org/Graduate-Medical-Education/GME-At-Partners/calendar.aspx
PEC has been working to update education policies. Policies approved at the April 24th meeting address: Program Closures and Reductions; Contracts; Disaster; Transfer Guidelines; and the USMLE Completion Policy. Updated versions have been posted on the GME website: [http://www.partners.org/Graduate-Medical-Education/Policies-Resources/Policies.aspx].

Dr. Co reported on the progress of the Credentialing Integration work group, which is part of the Partners 2.0 initiative. A vision has been developed and approved to have one centralized credentialing system across Partners, with single privileging and provider enrollment; planning is underway.

Two preliminary (“part 1”) concept proposals for new GME fellowship programs were endorsed by PEC: 1) a Partners Neurorecovery Fellowship, integrated between MGH and Spaulding Rehabilitation Hospital and 2) a Partners Women’s Neurology Fellowship, integrated between BWH and MGH. Final approval will be considered when additional materials are complete.

Dr. Weinstein discussed the results from this year’s Post Match Survey. Ratings of program characteristics have generally remained stable, and comments continue to reflect that location has a strong influence on program choice. Notable comments this year reflected that applicants are seeking greater diversity among patients and/or providers, and underscored sensitivities related to post-interview communications. Program-specific data provided to program leadership highlight other issues that may deserve attention.

June 19, 2017 meeting
Drs. Klibanski and Weinstein gave an update about Partners 2.0/Education. A planning group of education leaders from BWH, MGH, and PHS have focused on Continuing Professional Development and streamlining the education committees for greater efficiency and effectiveness—including a reclarification of PEC’s charge and reconfiguration of its membership.

Dr. Berkowitz presented a preliminary report from the GME Well-Being Task Force commissioned by PEC. Recommendations included short- and long-term suggestions, such as identifying a GME “Wellness Officer”, scheduling a wellness visit for every trainee, implementing wellness-oriented physician performance training groups, and utilizing a screening tool for burnout and/or depression. Recommendations will be discussed further with PEC and other groups.

Three part 1 concept proposals for new GME fellowship programs were endorsed: MGH Emergency Medicine Education; MGH Emergency Medicine Geriatrics; and the Partners Population Health Management fellowship. The programs are developing final applications and written curricula prior to final approval.

Dr. Co discussed the duty hour changes in the Common Program Requirements and presented proposed revisions to the Duty Hour Policy, which include that patient care activities done from home must now be counted toward the 80-hour limit. The revisions were approved and the updated policy has been uploaded to the GME Website.

August 3, 2017 meeting – to be reported in the next newsletter. (continued on page13)
June 9, 2017 meeting
Institution-level ACGME Resident and Faculty Survey results were discussed. Reports were provided about the accreditation status of several ACGME programs and the institution, recommendations from interim Internal and Special Reviews, and responses to prior reviews.

Program director transitions were approved for Medical Microbiology (Dr. Manfred Brigl) and PHS Nephrology (Dr. Ernest Mandel), effective July 1, 2017.

Dr. Berkowitz reported that feedback about the inaugural Program Director Retreat held in May 2017 was exceedingly positive, and the GME Office plans to continue offering it in the future.

Dr. Weinstein discussed the importance of trainee outcomes data and noted plans for a post-graduate/alumni survey.

Drs. Hariton and Tuomala presented their experience with a Resident Retreat held by the PHS OB/GYN program in AY16-17 to support trainee wellness.

June 2, 2017 meeting
Two new Program Directors were approved: Dr. Jennifer Huang – Dermatology, and Dr. Kathleen Doyle - Hospice and Palliative Care.

Dr. Co reviewed key changes to Section VI of the Common Program Requirements, effective July, 2017. Physician Well-Being received greater emphasis, with a new requirement about providing trainees an opportunity for time off to attend medical and dental appointments during the work day.

Dr. Weinstein discussed immigration issues potentially impacting both newly recruited and current trainees. GME and PIPS (Partners Office for International Professionals and Students) identified trainees from countries named in the Executive Order so that program directors could offer support. Efforts were initiated with the MA Board of Registration in Medicine to expedite licensing and credentialing for incoming H1B trainees to try and avoid delays associated with the suspension of “premium processing”.

April 7, 2017 meeting.
Five new GME program directors were approved: Dr. John Tannyhill - Oral and Maxillofacial Surgery; Dr. Scott Beach - Psychiatry; Dr. Whit Gould - Gynecologic Oncology; Dr. Irene Souter - Reproductive Endocrinology and Infertility; and Dr. David King - Surgical Critical Care.

Recent ACGME actions included initial Accreditation for Interventional Radiology-Independent and for Selective Pathology, and Continued Accreditation for all other MGH programs. New Internal Review reports and responses were approved and discussed.

Dr. Co noted the GME Office has initiated an effort to collect data on the “outcomes” training, including a trainee matriculation survey. He explained that soon institutions and programs will be expected to provide data on their training outcomes, and that centralizing these efforts would benefit both programs and the institution. He invited program directors to help develop the post-graduate survey, and recognized sensitivities relating to communication with graduates.

Dr. Berkowitz reported extremely positive feedback about the recent Program Director Retreat; 72% of the 88 participants completed the survey.
We would like to acknowledge the following Program Directors who have recently stepped down and thank them for their contributions to medical education:

Lynn Bry, MD, BWH Medical Microbiology
Annie Chan, MD, MGH Proton Radiation
Ruth Dunne, MD, BWH Abdominal Radiology
Anne Kathryn Goodman, MD, MGH Gynecologic Oncology
Juliet Jacobsen, MD, MGH Hospice & Palliative Care
Matthew Kim, MD, BWH Endocrinology
Rachel Reynolds, MD, MGH/BWH Dermatology
Eric Rosenthal, MD, MGH/BWH Neurocritical Care
Felicia Smith, MD, MGH Psychiatry program
Ahmed Tawakol, MD, MGH Nuclear Cardiology
Thomas Toth, MD, MGH Reproductive Endocrinology
Maria Troulis, MD, MGH Oral and Maxillofacial Surgery
J. Kevin Tucker, MD, PHS Nephrology
Stephen Wright, MD, BWH Gastroenterology

Congratulations on recent approval of the following programs by the Partners Education Committee:

- MGH/SRH Neurorecovery Program, Department of Neurology
  PD: Leigh Hochberg, MD, PhD
- Partners Population Health Leadership Program, Corporate Administration
  PD: Sree Chaguturu, MD

Scott Beach, MD, MGH Psychiatry program
Manfred Brigl, MD, BWH Medical Microbiology
Kathleen Doyle, MD, MGH Hospice & Palliative Care
Henry Gewirtz, MD, MGH Nuclear Cardiology
Whitfield Growdon, MD, MGH Gynecologic Oncology
Ole-Petter Hamnvik, MBBCh, BWH Endocrinology
Jennifer Huang, MD, MGH/BWH Dermatology
Ernest Mandel, MD, BWH/MGH Nephrology
Molly Perencevich, MD, BWH Gastroenterology
Helen Shih, MD, MGH Proton Radiation
Irene Souter, MD, MGH, Reproductive Endocrinology
Daniel Souza, MD, BWH Abdominal Radiology

R. John Tannyhill, MD, MGH Oral and Maxillofacial Surgery
Sahar Zafar, MD, MGH/BWH Neurocritical Care

Meghan Dionne, BWH Orthopaedic Sports Medicine
Caitlin Lefton, BWH Cardiac Surgery fellowship programs
Hannah Rawson, MGH Interventional Radiology
Ruth Sieck, BWH Pathology fellowship programs
Keri Sperry, Partners Population Health Management Program
SAVE THE DATE

EDUCATION COMMITTEES

BWHEC
- December 7, 2017 9:00-11:00am in Zinner Boardroom

PEC
- December 4, 2017 4:00-6:00pm in PRU Warren Hamilton

GMEC
- October 5, 2017 1:00-2:30pm in Trustees
- December 11, 2017 3:00-4:30pm in Trustees

PROGRAM COORDINATOR WORKSHOPS

CCC & Milestones
- October 10, 2017 9:30-11:00am in MGH Haber Auditorium
- October 17, 2017 10-11:30am in BWH Zinner Breakout Room

Visas for Clinical Trainees
- F1 visas - November 28, 2017 10-11:30am in BWH Zinner Board Room (Claire Ayer)
- J1 visas - November 9, 2017 9:30-11am in MGH Yawkey 2-220 (Joanna Hazel)

TRAINEE EVENTS

Housestaff Town Meetings
- BWH – March 16, 2018 11:00am-12:00 pm in Zinner Boardroom
- MGH – March 20, 2018 2:00-3:00pm in Trustees Conference Room

Fellow Retreat
October 19, 2017 8:00am-4:00 at Metro Meeting Centers

COE Health Policy Course
March 5-9, 2018
Brigham and Women's Hospital (Neville) 617-732-8540
Massachusetts General Hospital (Bulfinch) 617-726-5440
Massachusetts General Hospital (Whittier Place) 617-643-6376

Sadie Barocas, MEd, COE Project Manager 617-525-7353
Lori Berkowitz, MD, Associate Director 617-726-5440
John Patrick T. Co, MD, MPH, Director 617-643-6378
Lisa DiPrizio-Monteiro, PORT Coordinator 617-726-0769
Carolyn Ellis, Administrative Assistant 617-643-6376
Mary Ellen Goldhamer, MD, MPH, Education Specialist 617-726-5440
Irina Knyshevski, Accreditation Manager 617-525-7005
Nancy Lam, Administrative Assistant 617-732-8540
Alicja Martins, Program Manager 617-643-6381
Eric Nadel, MD, Associate Director 617-732-8540
Anne Rigg, IT Project Specialist 617-732-6380
Patricia Salamone, Administrative Director 617-732-6065
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