DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



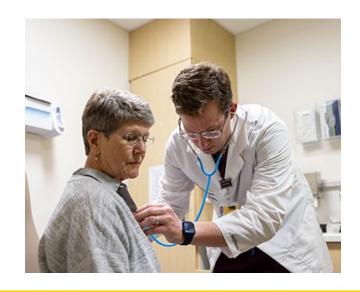
WELCOME TO INTERNAL MEDICINE

Isabella Grumbach, MD, PhD, FAHA Kate Daum Endowed Professor Interim Chair & DEO Department of Internal Medicine

Our Mission

is to provide superior healthcare and to inspire and educate world-class health care providers and scientists for the people of Iowa and our global community.

We are changing medicine and changing lives.











Who is Internal Medicine?

Faculty Count	FY24-25
Primary Faculty	410
Secondary Faculty	44
Emeritus	78
Volunteer	230
TOTAL	762

Non-faculty Count	FY24-25
PA and ARNP	142
Fellow	101
Resident	94
Predoc and Postdoc	57
Admin (HR, Finance, Research Support, division support)	579
TOTAL	973

Leadership Team



Kimberly Staffey, MD Vice Chair for Clinical Programs



Chad Grueter, PhDVice Chair for Research



Jeydith Gutierrez, MD, MPHVice Chair for Engagement and
Belonging



Eli Perencevich, MD, MS Associate Vice Chair for Clinical and Health Services Research



Manish Suneja, MDVice Chair for Education



Bradley Dixon, MDChief of Medical Services, VAMC



Christie Thomas, MBBS Vice Chair for Faculty Advancement



Mark Yorek, PhD Associate Chief of Staff for Research, VAMC

Division Directors



Benjamin Davis, MD, PhD Interim Director Division of Immunology



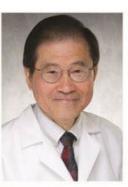
Ayotunde Dokun, MD, PhD Endocrinology and Metabolism



David Elliott, MD, PhD Gastroenterology and Hepatology



Kevin Glenn, MD, MS Interim Director, General Internal Medicine



Chou-Long Huang, MD, PhD Nephrology and Hypertension



Barry London, MD, PhD Cardiovascular Medicine



Mohammed Milhelm, MBBS Hematology, Oncology and Blood & Marrow Transplantation



Judy Streit, MD Interim Director Infectious Diseases



David Stoltz, MD, PhD Pulmonary, Critical Care and Occupational Medicine



Preview



Amy McDonald Senior Business Analyst



Kaila Boothroy Human Resources Director



Jeydith Gutierrez Vice Chair for Engagement and Belonging



Trevor JacksonCommunications Manager



Kristin Goedken Associate Clinical Department Administrator



Manish Suneja Vice Chair for Education Director, Internal Medicine Residency Program



Justin SmockDeputy Chief of Medical
Services, VAMC



Chad Grueter Vice Chair for Research



Lori Bassler Research Administrative Services Director

UI HEALTH CARE PHILANTHROPY

Proud to Support the Department of Internal Medicine



Hayden Bevelacqua
Associate Director of Development
Health Sciences
hayden.bevelacqua@foriowa.org
319.467.3382



Scott Smith
Associate Director of Development
Health Sciences
scott.smith@foriowa.org
319.467.3371



Center for Advancement

FY25 Areas of Focus

- Support for junior faculty & postdoc research efforts
- Support for clinical staff
- Grateful Patient & Family referrals and interactions



We need your feedback

- New Provider Orientation Evaluation
- Institutional surveys throughout the year

Internal Medicine Feedback

ype of feedback: *		
Select from list		,
eedback comments:	*	



^{**}Items submitted are completely anonymous.**





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!



DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



CLINICAL AFFAIRS

Amy McDonaldSenior Business Analyst

Our Mission & Vision

- We train and recruit the best people
- We have rigor
- We are nimble
- We are innovative
- We are committed to lifelong learning & discovery
- We are diverse in experience and opinion
- We are a respectful & open community
- We contribute to the alleviation of suffering and the cure of human disease

Acronyms to know

UIP – University of Iowa Physicians	RVU – Relative Value Unit
IRL – Iowa River Landing	KPI – Key Performance Indicators
ATC – Admission & Transfer Center	PCD - Provider Coding Division (billing & coding)
ICC - Integrated Call Center	IPPE – Initial Provider Practice Review
OPE – Office of Patient Experience	OPPE – Ongoing Provider Practice Review
CORS Co-worker Observations Reporting System	FPPE – Focused Provider Practice Review
PARS – Patient Advocacy Reporting System	CDI - Coding Documentation Improvement
PSN - Patient Safety Net	DRG – Diagnosis Related Group
PAC – Patient Access Center	JOC – Joint Office of Compliance
MCU – Medical Campus University	MCD Medical Campus Downtown
MCNL - Medical Campus North Liberty (opening 2025)	

UIP Policies

UIP Documentation Policy

- >10 encounters that are >7 <u>days</u> in age including outpatient open encounters (including procedures)/H&P/Discharge summary
- Greater than 20% of charges entered (and encounter appropriately closed) beyond 7 calendar days from the date of service for current month AND trailing three months)
- Past due status on required compliances via ICON/CQ

UIP Physician Clinic Cancellation Policy (bumped clinics)
Physician and APP driven cancellations will not be allowed within eight weeks of clinic session

Policies

Inpatient Diagnosis Related Group (DRG) Query Response

- CDI nurses
- Goal of 100% response rate
- Initial queries sent to APPs, Residents or Fellows (if involved). If no response within 48 hours, query is escalated to faculty provider
- If resident or fellow disagrees with query, it will be sent to the faculty provider for final review

Responding to DRG Queries

Improved workflows have recently been put in place based off of provider feedback



- Multiple choice responses are now available
- Please note, responding to the query will automatically enter a note in the permanent medical record, when clinically appropriate. This be available via MyChart to the patient

Policies

<u>Inpatient Consultations – Clinical Care Policy – CC.P.66</u>

- Routine inpatient consults should be seen within 12 hours of the consult request, and the consulting
 attending should evaluate the patient within 24 hours of the request, unless other arrangements have been
 made with requesting team. The consulting team should directly communicate recommendations to the
 requesting inpatient team. Initial documentation in the EMR must be completed as soon as possible, and a final
 recommendation should be recorded in the EMR within 24 hours of the request.
- ASAP Consults should be seen within 4 hours of the request and immediately discussed with the consulting
 attending physician, with recommendations communicated directly to the requesting team, unless other
 arrangements have been made with requesting physician. Initial documentation in the EHR should be
 completed as soon as possible, and a final recommendation should be recorded in the EHR within 6 hours of
 the request.
- STAT Consults should be seen as soon as possible and no later than 60 minutes of the request and immediately discussed with the consulting attending physician, with recommendations communicated directly to the requesting team, unless other arrangements have been made with requesting physician. Given the patient's emergent condition, a member of the requesting team should be present at bedside for direct discussion with the consulting team. Initial documentation in the EHR should be completed as soon as possible, and a final recommendation should be recorded in the EHR within 4 hours of the request.

Clinical Practice Review

KPI – Key Performance Indicators

 Physician/APP Billing Productivity & KPI monthly e-mail notifications from Dr. Doug Van Daele, Executive Director, UIP. This provides you with a view of your RVUs, billed charges, payor mix, payments, patient access, documentation completion, patient satisfaction and more, specific to your individual practice

Patient Satisfaction -- Press Ganey (PG) & Hospital Consumer Assessment of Healthcare Providers & Systems (HCHAPS)

- Surveys are sent out to our patients to receive feedback on their visits and inpatient stays
- Provider Communication Workshop
 - Attendance required during your first year
 - 5-hour physician led educational course followed by one on one coaching sessions

Clinical Practice Review

Relative Value Unit (RVU) Productivity

- Individual RVU targets and goals will be provided by your Division
- Department compensation plan

Professionalism & Professional Practice Evaluations (IPPE, OPPE, FPPE)

- IPPE The first six months of employment you will be reviewed by another faculty member
- OPPE -Every six months following the IPPE period, you will receive an ongoing professional practice evaluation.
 - You will receive feedback if necessary
- FPPE If necessary, due to professionalism or performance issues

Clinical Practice – Focus Areas

- Patient-centered care delivery
- Timely access to high quality care for our patients
 - Thorough attention to patient safety
 - Continuous improvement in clinical performance
 - Exceptional patient care outcomes
 - High levels of patient satisfaction
- Documentation of care delivery
 - Timely, accurate, and reflective of severity of illness
- Length of stay/timely discharge/mortality

Quality & Safety Reporting Systems

- Co-worker Observations Reporting System (CORS) & Patient Advocacy Reporting System (PARS) – (Point)
- Blind Spots reporting (Point)
- Compliance and Ethical concerns (Point)
- Patient Safety Net (PSN) Safety incident reporting (Point)
- Office of the Patient Experience (OPE)
- Clinical Quality, Safety and Performance Improvement (CQSPI)
- Sharps Injury and Blood/Body Fluid Exposure (7-8425 STICK)
- Quality and Safety Reports examples include, infection prevention, readmissions, patient satisfaction

Well-Being & Workplace Safety

Employee Assistance Program (EAP)

- Support and Crisis Line
- UI Emergency Hardship Fund
- Substance Abuse
- Mental Health and Well-Being Course

COPE Team

 Provides emotional support to staff after challenging events, as well assisting in creating a supportive work environment.

Threat Assessment Team

- Supports Campus Safety by assessing, monitoring, and providing support for unusual distress, fixated grievances, or troubling behaviors.
- Monitor potential safety threats and intervene with supportive campus resources to maintain campus safety.

Riskonnect

Allows employees to report incident in 3 different categories - Patient event, visitor event, or employee event.

Resources

Area	Resource
Departmental Clinical Revenue Cycle Team	Amy McDonald, Kristin Goedken, JT Kosier
Provider Coding Division	Alysa Coppinger, Manager, PCD
Epic Help – MCU & MCD Locations	Shelby Lombard, Informatics Specialist, HCIS
Epic Help – Holden Comprehensive Cancer Center	Julia Freel, Informatics Specialist, HCIS
Epic Help – Digestive Health Center	Leah Kirkendall, Informatics Specialist, HCIS
Epic Help – IRL	Jen Bunning, Informatics Specialist, HCIS
Physician Informatics Officers	Dr. Wendy Fiordellisi
Patient Access Center	Keri Semrau, Director Neil Christiansen, Assistant Director
HCIS Help Desk	6-0001
The Point, The Loop, and Noon News	Website resources

Provider Documentation & Coding Leads

Name	Division
Allergy/Immunology	Dr. Ben Davis
Cardiology	Dr. Chris Benson
Endocrinology	Dr. Amie Ogunsakin
Gastroenterology/Hepatology	Dr. Alan Gunderson
General Internal Medicine	Dr. Christina Charis-Donelson
Hematology/Oncology	Dr. Dr. Saima Sharif
Hospitalist Program	Dr. Carly Kuehn
Infectious Disease	Dr. Ben Appenheimer
Nephrology	Dr. Mony Fraer and Dr. Sarat Kuppachi
Pulmonary	Dr. Joel Kline and Dr. Nabeel Hamzeh

Welcome to Internal Medicine!



Kim Staffey, MD, MHCDS, FACC Vice Chair for Clinical Programs



Amy McDonaldSenior Business Analyst

https://medicine.uiowa.edu/internalmedicine/





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!





DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



HUMAN RESOURCES

Kaila Boothroy, BS, SPHR, SHRM-SCP HR Director, Internal Medicine



Human Resources

Our team strives to provide exceptional operational and strategic HR support while building strong engagement with each employee throughout their journey with us.



Kaila Boothroy, BS, SPHR, SHRM-SCP H.R. Director



Eileen Fuerstenberg, MA H.R. Specialist



Barbara Jaeger H.R. Specialist



Ashley Rayer, BA H.R. Coordinator



Michaela Davis, MBA H.R. Generalist



Jack Oller, BBA H.R. Coordinator



Who do I contact?

Kaila Boothroy

- Employee Relations and Performance Management
- Furlough
- Staff Training/ Development and Compensation
- Reward & Recognition
- Reclass/Promotions
- Exit Interviews
- Community
 Engagement Services
 Initiatives
- HR Process Improvements
- Develop/Implement HR Protocol/Programs

Eileen Fuerstenberg

- Faculty Recruitment/ Onboarding/Changes in Status
- Faculty Appointments/ Transactions
- Faculty Special Compensation Payments
- Faculty
 Licensing/Credentialing
- · Faculty Recredentialing
- Faculty Separation Process/Terminations

Jack Oller

- Assist with: Faculty Promotions and Reappointments/ Annual Review Process
- Processing Incentive Payments for Faculty
- Oversight of Compliances due for staff and faculty
- Assist with Staff Recruitments
- Faculty Separation Checklist
- Lost/Replacement Badge

Barb Jaeger

- Immigration
- Payroll/Reporting/Time Records
- Leave and Disability Protocol/ Accommodations FMLA
- Workers Comp Guidelines
- APP Licensing and Credentialing

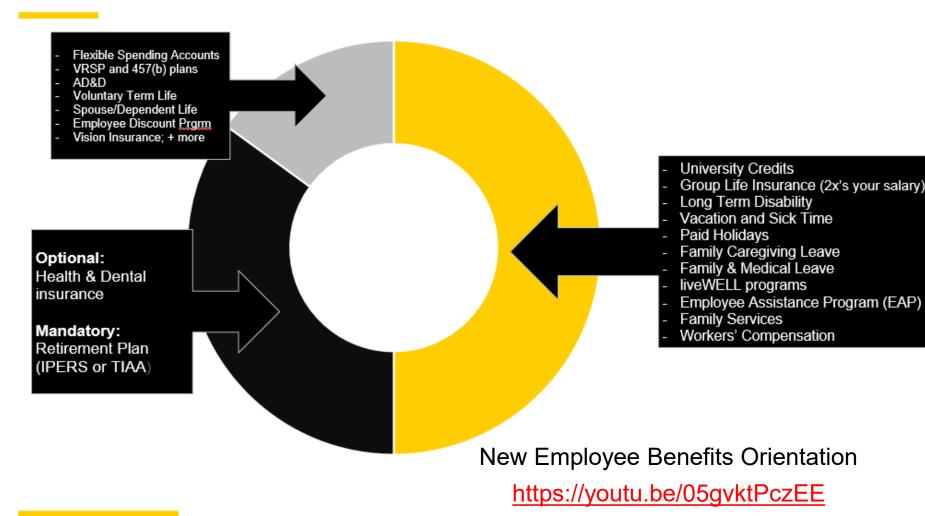
Michaela Davis

- P&S, Merit and SEIU Recruitment/ Appointments
- Position mapping
- New staff appointments and transactions
- Staff Onboarding
- Postdoctoral Scholars, Research Interns and Temporary Staff
- Volunteer Appointments
- Bloodborne Pathogens Exposure Control

Ashley Rayer

- Assist with Staff Recruitments
- Student Recruitment/ Appointments/ Onboarding
- Staff/Student Separation Checklists
- Job Description updates
- Job Shadowing
- Minors on Campus
- UI Drivers License Review system
- Lost/Replacement Badge

Picture of Your Benefit Offerings



 Benefits that are given to all eligible employees at 100% contribution from the university.

- Benefits that receive a partial contribution from university. There are optional and mandatory benefits in this category.
- Voluntary benefits that eligible employees may enroll in and have payroll deduction of premiums. No UI contribution.



benefits@uiowa.edu



Commonly Asked Questions

- Hiring Process
 - Research assistants, program support, postdoctoral scholars, hourly/volunteer appointments
- Job shadows/observers
- Minors on campus
- ELMS requests and time records
- Leave and Disability Needs
- Worker's Compensation Policy



Workers' Compensation Policy

Purpose: to treat injured employees with dignity and respect while managing the workers' compensation claims

- Needlesticks and/or Human Blood/Body Fluid exposures are treated at: University Employee Health Clinic
- All other work injuries/accidents are treated at:
 UI Occupational Health, 2591 Holiday Rd, Coralville
- Must complete the First Report of Injury form to HR via the <u>Employee Self-Service</u> website by searching "Worker's Compensation First Report of Injury." The injured or ill staff member (or supervisor) should complete the First Report of Injury form within 24 hours. When in doubt, fill it out!
- Riskonnect (UIHC)

https://thepoint.healthcare.uiowa.edu/sites/Administration/IncidentReporting/_layouts/15/start.aspx#/SitePages/Home.aspx

https://opsmanual.uiowa.edu/human-resources/accidents/procedures





Wellness Resources - hr.uiowa.edu/employee-well-being



Financial Well-Being

Browse <u>financial well-being resources</u>, or take a closer look at <u>retirement planning</u>, <u>employee</u> <u>discounts</u>, or <u>flexible spending accounts</u>.



Physical Health

We offer <u>free personalized health coaching</u>, <u>subsidized access</u> to top-notch recreation facilities, and <u>on-campus flu vaccination clinics</u>.



Workplace Wellness

Visit the <u>Well-Being Toolbox</u>, apply for <u>grant</u> <u>funding</u>, nominate <u>Wellness Heroes</u>, <u>cope with</u> <u>crisis</u> or manage <u>challenges facing supervisors</u>.



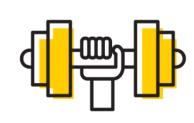
Family & Relationships

Find resources for <u>childcare</u> and <u>elder care</u>, confront <u>alcohol and substance abuse</u>, or get confidential help with <u>family concerns</u>.



Emotional Support

Talk to us about free, <u>short-term counseling</u>, or find info about <u>depression and anxiety</u>, <u>stress management</u>, or <u>grief and loss</u>.



Resilience Resources

Learn to <u>develop skills for self-care</u>, adaptability, emotional intelligence, and more, or boost your resilience through <u>healthy sleep</u>.



Wellness Resources

- liveWELL at Employee Self-Service| Benefits & Wellness
 - Personal Health Assessment and Coach (Free)
 - Health Coach
 - Mindfulness-Based Stress reduction program
- UI Employee Assistance Program
 - Email: eaphelp@uiowa.edu
 - Phone: <u>319-335-2085</u>
- Recreational Services: recserv.uiowa.edu
 - Multiple Facilities: swimming, lazy river, climbing wall, golf, tennis, intramural sports, download app
- Family Services: child care, lactation facilities, new parents resources



Confidential Resources

Employee Assistance Program (EAP)

eaphelp@uiowa.edu

Provides confidential, short-term counseling to faculty, staff and their families; consultation for supervisors/managers; information & referral to community resource

Office of the Ombudsperson

ombudsperson@uiowa.edu

A good starting point to learn about official procedures and policies, where you can go to file a complaint, or how you can notify officials of a problem.





Employee Engagement

- We want to grow our efforts around engagement!
- Based on feedback from faculty and staff, these are the top themes:
 - Recognition
 - Ability to unplug
- Experiences to look forward to:
 - Employee Appreciation Day
 - UI Health Care Week
 - Food Truck Thursdays
 - Pop-up Lounge
 - Peer Driven Recognition Program



Employee Appreciation

Employee Appreciation Day 2024!

University of Iowa Department of Internal Medicine

18th Annual

Employee Appreciation Day



Join us for lunch so we can celebrate YOU.

We are so grateful to have you as part of the IM Team.

Employee Appreciation Lunch

Wednesday, July 31, 2024 – 11am-1pm

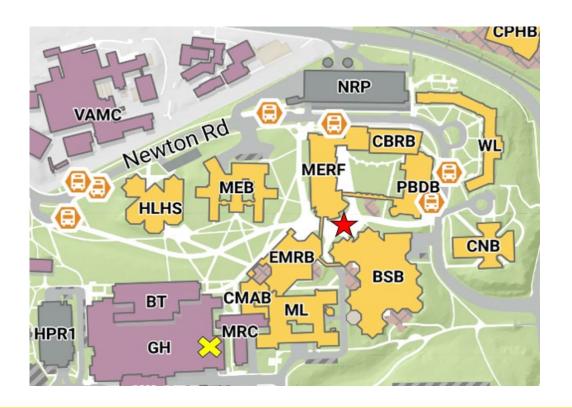
MERF Atrium | IRL | Downtown

#UIHealthCareWeek, May 12-18



Food Truck Thursdays

 Once a week on Thursdays throughout the summer and fall, visit the courtyard between the Medical Education Research Facility and Pappajohn Biomedical Discovery Building where you will find live music and about a dozen food trucks.





Pop-up Lounge



A place to unplug and enjoy a coffee or snack!



Open to all Int Med



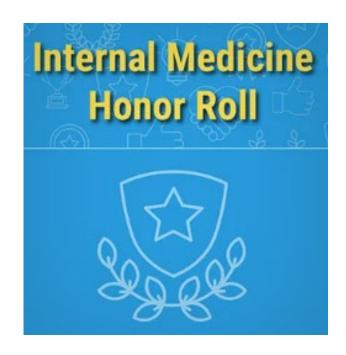
Located in GH SE309



"My colleague and I made it to the new lounge and really enjoyed our time. It is great to have a place to chat and enjoy coffee and snacks. I truly appreciate the effort by the Department to give back to its employees!"

Internal Med Monthly Honor Roll

- An employee recognition program where team members (providers, staff, etc.) can recognize other team members who are doing great things.
- Each month we receive about two dozen nominations across all our divisions and roles.
- Honorees are featured on the hall monitors and in Making the Rounds.
- Take 2 minutes to nominate your colleague. <u>HONOR ROLL NOMINATION</u>





Your feedback matters!

- Tell us about your experience
 - Questions, concerns, ideas...
 - Anonymous feedback can be submitted anytime
 - Internal Medicine Feedback Link







Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!



DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024

ENGAGEMENT AND BELONGING IN THE DEPARTMENT OF MEDICINE

Jeydith Gutierrez, MD, MPH
Vice Chair of Diversity, Equity, and Inclusion



Overview

- Commitment to Diversity
- Leaders at UI/UIHC
- Belonging: Affinity groups
- Engagement: DIHE track
- Institutional policies to support a welcoming environment for all
- Faculty resources
- Questions

Leaders at UI/CCOM



Liz Tovar, PhD

Executive Officer & Associate
Vice President, Division of
Access, Opportunity, and
Diversity



Joyce Goins-Fernandez, PhD

Interim Associate Dean for Health Parity Carver College of Medicine (CCOM)



Commitment to Diversity

- History
 - 1870 → America's first co-ed medical school
 - 1903 → Granted the first MD to an African American graduate
 - 1970 → First state university to officially recognize the Gay, Lesbian, Bisexual, Transgender, & Allied Union (1970)
 - 2012→ UI Health Care opened the first LGBTQ+ clinic in the state
- Richness of communities, activities, and events
- Look for our Engagement & Belonging newsletters

Engagement and Belonging Committee

- Claudia Corwin Faculty, Pulmonary
- Kathleen Detert Staff, Cardiology
- Dalal El Ladiki Post-doctoral scholar, Endocrinology
- Jeydith Gutierrez Faculty, GIM
- Yuya Hagiwara Faculty, GIM
- Bharat Kumar Faculty, Allergy and Immunology
- Claire McGranahan Staff, Internal Medicine
- Lama Noureddine Faculty, Nephrology
- Katie Robinson Faculty, Endocrinology
- Antonio Sanchez Faculty, GI
- Poorani Sekar Faculty, ID
- Kristine Yumul Faculty, Cardiology
- William Zeitler Faculty, Heme/Onc

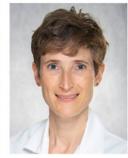


























Excellence through Engagement and Belonging

Engagement is how much we feel invested in, motivated by and passionate about our jobs.

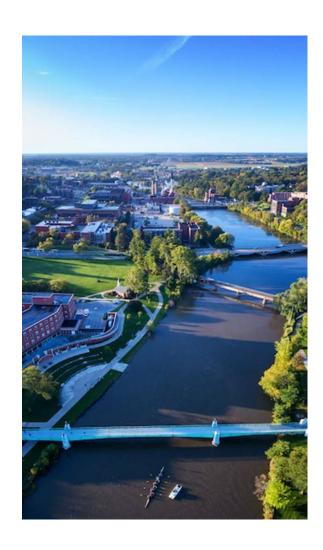
Engagement is a measure of the organizational culture

Belonging is something that we ourselves feel and results from the organization's inclusive environment.

"being for long"

Belonging: Affinity groups

- African American Council and Cultural House
- Latino/a Council and Cultural House
- Asian American Council and Cultural House
- Native American Council and Cultural House
- LGBTQ Cultural House, support groups, the Out Group
- · Council on Disabilities
- Office of International programs



CCOM Black Faculty council

UIHC Diversability Employee Resource Group

CCOM Latinx Faculty council

UIHC LGBTQ+ Group

Women In Medicine group in Internal Medicine

E&B committee

Engagement: Distinction in Health Equity Track

- Started in July 2023
- Health equity curriculum
- Community-based clinical experiences
- Capstone project on health equity
- Mentorship/teaching opportunities

Engagement:

- Community engagement events:
 - Health promotion
 - Collaboration with community organizations
 - Increasing awareness about health topics
 - Advocacy
 - Support vulnerable groups

- Opportunities to volunteer
 - Uiowa Mobile clinic
 - lowa City Free Medical & Dental Clinic

Institutional policies to support a welcoming environment for all

- Breast feeding support and policies
- Insurance coverage for same sex couples
- Mental health coverage
- Weight management clinic
- Policies to support use of preferred name and pronouns
- Gender inclusive restrooms and admission room policies

Faculty Resources

National Center for Faculty Development and Diversity **Institutional Membership**

Research Opportunities

Research Supplements to Promote
Diversity in Health-Related Research

CultureVision[™]

is the first comprehensive, user- friendly database that gives healthcare professionals access to culturally competent patient care

University of Iowa Health Care LGBTQ+ OutList

Voluntary and public listing of members of our health care community who identify as LGBTQ+

Medical Spanish Course

This course is designed for faculty with an intermediate to advanced level of Spanish

<u>Life in Iowa City |</u>
<u>Office of Health Parity (uiowa.edu)</u>

Training opportunities

Culturally Responsive Care training and conference	Responding Effectively to Mistreatment (Bystander to Upstander) Training
Sexual Orientation and Gender Identity (SOGI) traiing	Fair Search and Hire Practices Training
Responding to Patient-Initiated Identity-Based Harassment	Generational Issues in the Workplace
Implicit Bias training	And more

Welcome to the University of Iowa and the Department of Internal Medicine



You may have questions about living in lowa City, meeting communities you identify with, places of worship or recreational activities.

Please ASK! This is a lovely and inclusive community, and we are delighted to connect with you and give you more information.

Jeydith Gutierrez, MD, MPH

jeydith-gutierrez@uiowa.edu

Cell phone: 319-389-2333





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!



DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



COMMUNICATING YOUR STORY TO THE WORLD

Trevor Jackson, MFADirector of Communications



OSCEs: A Communications Case Study

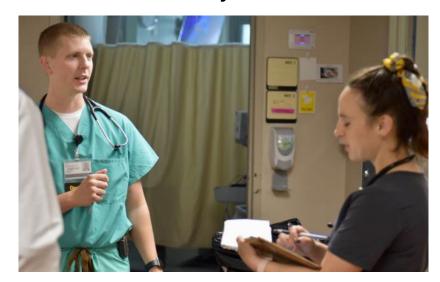
What happens between these two moments?

Medical School Graduation - May





On the Wards - July





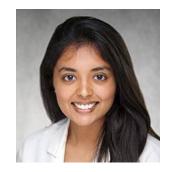
Objective Structured Clinical Evaluations



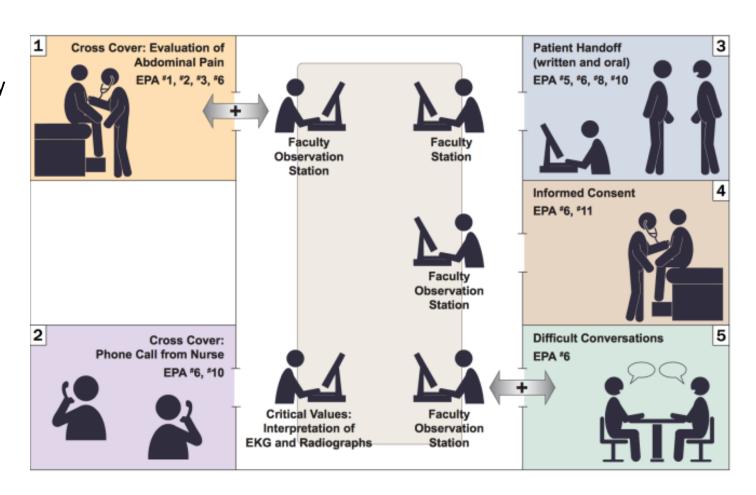
Manish Suneja, MD, Internal Medicine Residency Program Director



Jane Rowat, MS
Curriculum Development



Sheena Carl-Lee, MD Chief Resident, 2017-18





Eight years later ...







Pivoting during a Pandemic: Reimagining Intern Orientation EPA-Based OSCE.

Suneja M, Thoma KD, Franklin E, Rowat J.

Cite South Med J. 2023 Mar;116(3):312-316. doi: 10.14423/SMJ.000000000001525.

PMID: 36863054 Free PMC article.

For the safety of all of the participants, the Internal Medicine and Family Medicine residency programs pivoted from an in-person **OSCE** to a hybrid model (combination of in-person and virtual encounters) while maintaining the goals of the OSCEs administered in previous year ...

Assessing Entrustable Professional Activities Using an Orientation OSCE:

2 Identifying the Gaps.

Share

e CarlLee S, Rowat J, Suneja M.

J Grad Med Educ. 2019 Apr;11(2):214-220. doi: 10.4300/JGME-D-18-00601.2.

Share PMID: 31024656 Free PMC article.

METHODS: During orientation, all 33 interns from internal medicine (categorical, preliminary, and medicine-psychiatry) participated in the **OSCE**. Six 20-minute stations evaluated 8 EPAs. Faculty completed a global assessment, and standardized patients completed a communicat ...

In addition to publications: POSTERS



REDUCING THE "JULY EFFECT": USING AAMC EPAS TO ENSURE INSTITUTIONAL PATIENT SAFETY

Jane Rowat, MS, Kate duChene Thoma, MD, MME, Debb Szeluga, MD, Ellen Franklin, MBA, MME and Manish Suneja, MD
Internal Medicine, Family Medicine and Anesthesia Residency Programs/Carver College of Medicine



Background

- Institutions have responsibility to ensure that intems are prepared to provide high quality and safe patient care as they be gin residency
 AAMC developed Entrustable Professional Activities (EPA) for 13 core clinical
- tasks with a primary focus on patient safety at the UME/GME transition
 Internship marks a transition to greater patient care responsibilities that requires interms to possess basic clinical skills and to apply these skills in a new learning assistance.
- Interns come from different medical schools which place varying levels of emphasis on EPA-based skills
- Gaps have been identified between expectations of program directors and skills of entering interns

The Challenge

- Patient safety must be maintained while new interns are transitioning to residency
- A dominant assumption has been that trainees are ready for this transition and where gaps exist, layers of supervision will compensate for lack of skill and syndians.
- Based on available data many residency program leaders believe there is an existence of the "July Effect":
- A better understanding of interns' gaps in core EPA-based skills is essential for developing individualized as well as institution-wide skills curriculum

The Initiative

- AAMC EPAs may optimize safe and effective patient care by ensuring that each UME graduate is prepared for core duties as they begin residency
- Early identification and remediation of common skill deficiencies which impact quality patient care and patient safety remain a challenge
- Based on the AAM C EPAs and prior orientation OSCE data, interdepartmental and patient-safety-driven objective structured clinical evaluation (OSCE) assess ment with formative feedback is being developed to mitigate the "July Effect"

Goals

- Develop a standardized approach across multiple specialties (Internal Medicine, Anesthesia and Family Medicine) for assessing each of the chosen AAMC EPAs
- Provide an opportunity for chief residents across multiple disciplines to develop leadership and teaching skills
- Provide for early identification of at-risk intems, leading to development of individualized learning plans
- Guide individual residency programs as well as the institution in the area of curriculum development related to safe patient care
- Inform the institutional GME onboarding process related to safe patient care by identifying the largest gaps in intern EPA performance

EPA-based OSCE

	Gather a history and perform a physical examination	П	Cross Cover: Evaluation of Abdeninal Date			Patientikandoff
	Prioritize a differential diagnosis following a clinical encounter		_\$\$ M\\\	1.4	LA	INCK STILL
	Recommend and interpret common diagnostic and screening tests		- V	Observation Station	(settler)	Informed Consent EPA 19, 111
	Document a clinical encounter in the patient record				1	60
	Provide an oral presentation of a clinical encounter				Critical Volume: Interpretation of ISSS and Redingraphic	
	Give or receive a patient handover to transition care responsibility		Phone Cell thom Muses EPA 'S, '18	21	λ 3	Difficult Convenientems BM-V
0	Recognize a patient requiring urgent or emergent care and initiate evaluation and management		A 🕌	Cythogi Values: Assessment of Labo	Faculty Chaevation States	417

EPA10 care and initiate evaluation and management EPA11 Obtain informed consent for tests and/or procedures

Phases of Development and Implementation

Adapt previously used OSCE cases and checklists based on discussions across programs

Collaborate with the CCOM Clinical Assessment Program Director on logistics and simulated patient training for multispecialty OSCE

Phase I Provide multispecialty chief resident development workshop –

Design and provide Chief Resident-led faculty development for OSCE participants including • use of station checklists for assessment

delivery of immediate formative feedback to interns

Administer OSCE to 56 interns (~40% of all PGYI) in Internal Medicine, Internal Medicine/Psychiatry,
Anesthesis, Family Medicine, Family Medicine/Psychiatry and Medicine/Ophthalmology training
norams

ha se III Complete data analysis

EPA2

EPA3

EPA5

EPA6

EPA8

Prepare in dividualized intern as well as program data reports to be used for intern advising and for program/curriculum development

Phase IV Disseminate data to individual residency programs

Disseminate data to Graduate Medical Education and hospital leadership regarding gaps in core

sseminate data to Graduate Medical Education and hospital leadership regarding gaps in co nical skills required for safe patient care

Conclusions

- EPA-based OSCE activity allows interns, Chief Residents and faculty from multiple disciplines to work toward an
 organized educational endeavor to identify gaps in core clinical skills
- Chief Residents can be involved in a meaning ful way to help deliver the EPA-based OSCE
- Just-in-time formative feedback delivered at each OSCE station focuses on intern performance on core EPAs
- Data from this activity will help program leadership develop individualized learning plans for interns during the first six months of residency
- Data allow individual residency programs to develop curriculum directed at common EPA task deficiencies that impact safe patient care
- This model for assessment of core EPAs could be implemented at an institutional level
- Performance gaps identified through the EPA-based OSCE may inform GME and institutional curricular
 development to ensure see a patient care and may mitigate the "Lub E Mace"

Chief Resident Workshop

CHIEF RESIDENT OSCE WORKSHOP MAY 13, 2019

Welcome, Introductions and Workshop Goals

- ☐ Provide overview and orientation to the EPA-based OSCE
- ☐ Prepare Chief Residents to serve as leaders and facilitators for OSCF stations
- ☐ Prepare Chief Residents to train faculty facilitators for role in OSCE
 ☐ Provide instruction in use of OSCE checklists
- ☐ Discuss skills for delivering effective feedback

Orientation to the EPA-based OSCE

- OSCE Station Discussion
- □ OSCE logistics
- ☐ Orientation to Learning Space
- Specific station orientation with assigned committee member, view station video and complete station checklist; determine process for meeting with faculty evaluators; group discuss ion including tips for faculty development.

Chief Resident OSCE Role and Responsibilities

□ Prior to, during and following OSCE

Effective Feedback using S.T.O.P.

Workshop Wrap-up

WORK SHOP E VALUATION

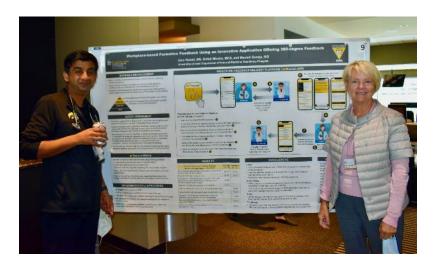
	(strongly disagree)				(strongly agree)
The workshop goals were clearly communicated.					
The content was organized in a way that was helpful to my understanding.					
The content was appropriate for my level of education.					
An appropriate amount of material was covered for the time allotted.					
I am familiar with Entrustable Professional Activities (EPAs) prior to the workshop.					
The workshop provided me with a better understanding of the EPAs.					
I am comfortable in completing and OSCE checklist.					
This workshop has prepared me to train faculty facilitators in their role in the OSCE.					
I acquired skills that will help me deliver effective feedback during the OSCE.					
This multidisciplinary activity will increase collaboration between different departments.					
Provide one "take home" point from the workshop.	•				
Additional comments:					

Reference

¹Levy, K., Voit, j., Gupta, A., Petrilli, C., Chopra, V. Examining the July Effect: A National Survey of Academic Leaders in Medicine. American Journal of Medicine. 2016, 129:7:754:e1-e5.

Experienced Professionals

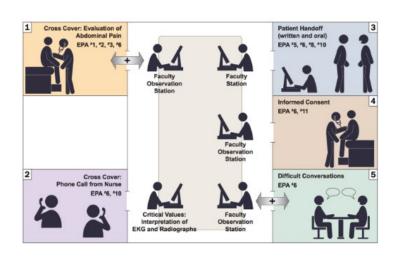
- Branding
- Printing
- Layout and design



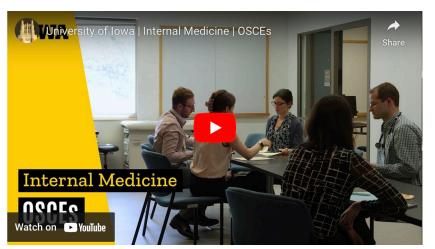
Testimonials

https://youtu.be/C5ZJQHpdLyA

Communications Team involved throughout









Welcome to the Design Center

The Design Center provides graphic design, poster printing, professional editing, and services. Our design staff offers a comprehensive array of graphic design and visual and presentation. We provide editing for all types of written materials, with a special and scientific editing. Our digital media services include scripting, filming, editing, au media.

Text and photography









MAKING THE ROUNDS

University of Iowa Department of Internal Medicine

Search results for: osce



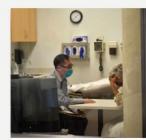
Seven years, seven OSCEs

No "seven-year itch" for the Objective Structured Clinical Evaluations (OSCEs), only smooth sailing. Since it was first designed and implemented at lowa in 2017, the goals of the OSCE have been the same. Two sets of half-day assessments of incoming interns allow residency program leadership the congrituint to establish a



OSCEs stress the "formative" for learner and faculty alike

Now in its sixth year and its impact on trainees established both locally and nationally, the organizers of our residency program's Objective Structured Clinical Evaluations (OSCE) have begun to think about how the formative assessments can also aid faculty members. "One of



OSCEs turn five, inspire other programs

Since its first year through last year's virtual version, the Objective Structured Clinical Evaluations (OSCEs) has held to its guiding principle: establish a clear sense of the incoming interior's skill level by Search..

Categories

Achievements
Administration
Education
From the Editor
News
Patient Care
Publications
Research
Uncategorized
Views from the Chair



Who We Are

- designcenter.uiowa.edu
- Teresa Ruggle Senior Designer/Art Director, Design Center
- Ann Armstrong Creative Coordinator, Design Center
- Kris Greiner Scientific Editor, Design Center
- Cory Sheets Video Production Specialist, Design Center
- Lori Strommer Technology Services
- Claire McGranahan Associate Editor
- OPEN Production Coordinator, Copy Center
- Student Videographers and Photographers

We are storytellers.

We help you find your story and make sure the right people hear it.

Everything HAS a story.

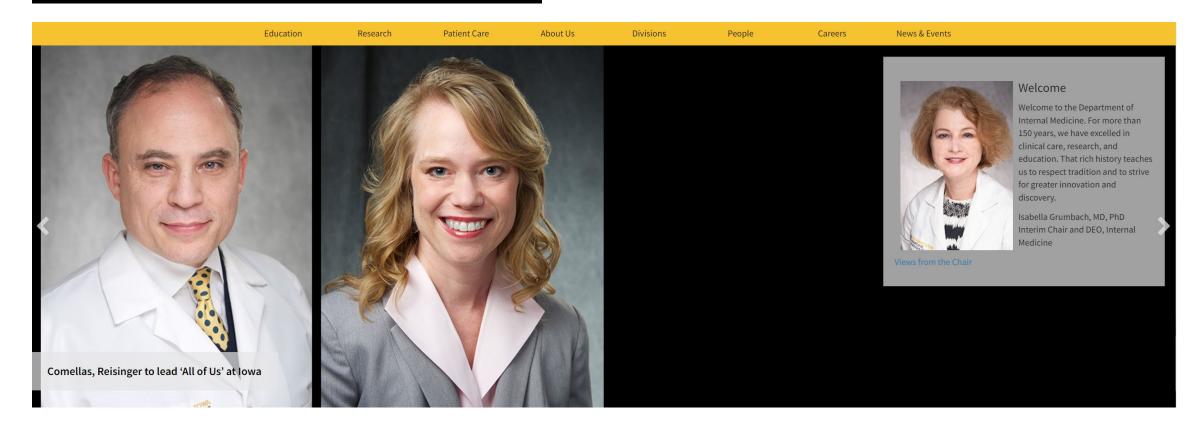
- Research discoveries, grant proposals, manuscripts
- Clinical breakthroughs, patient/provider profiles
- Innovative education techniques, recruitment material

Every medium. Every platform.



Carver College of Medicine

medicine.uiowa.edu/internalmedicine



Graduate Medical Education

gme.medicine.uiowa.edu

General Internal Medicine Department of Internal Medicine Advanced Heart Failure and Transplant Cardiology
Department of Internal Medicine

Advanced Lung Disease and Transplantation Department of Internal Medicine

Advanced Noninvasive Cardiac Imaging Department of Internal Medicine Allergy/Immunology Department of Internal Medicine Cardiovascular Disease Department of Internal Medicine

Clinical Cardiac Electrophysiology Department of Internal Medicine Endocrinology, Diabetes, and Metabolism Department of Internal Medicine Gastroenterology

Department of Internal Medicine

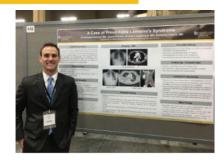
Hematology and Medical Oncology Department of Internal Medicine

Hospice and Palliative Medicine Department of Internal Medicine Infectious Disease Department of Internal Medicine

Interventional Cardiology Department of Internal Medicine Nephrology Department of Internal Medicine Pulmonary Disease and Critical Care Medicine Department of Internal Medicine











Making the Rounds

internalmedicineiowa.org

MAKING THE ROUNDS

University of Iowa Department of Internal Medicine



You Make a Difference in Internal Medicine

The University of Iowa Health Care Making a Difference program is designed to recognize individuals

New Faculty

New Faculty Additions – 2022

The Department of Internal Medicine is pleased to introduce some of the faculty members who joined us in July 2022. The group below have joined the Division of General Internal Medicine; new faculty from other divisions will be announced in the coming weeks. We are happy to welcome them to the department. Matthew Becker, MD [...]

Grand Rounds

Online presentation:
Tuberculosis: New
Approaches to an Ancient
Disease – April 8, 2021

Internal Medicine's Virtual Grand Rounds presentation for Thursday, April 8 will be: Tuberculosis: New Approaches to an Ancient Disease12:00-1:00pmThursday, April 8, 2021 Robert J. Blount, MD, MAS, Assistant Professor, Pulmonary,



Rejected! Now what?

Every author gets rejected. What to do with a rejection can be challenging. Do you revise or immediately resubmit elsewhere? The answer depends mostly on what sort of reasons you were (or were not) given for a rejection. Immediate rejection is usually due to one of a couple of reasons. The first and most common [...]



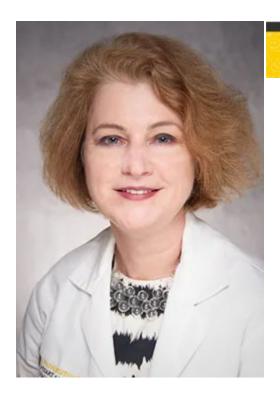
Transcatheter Valve Implantation in a Severely Regurgitant Apicoaortic Conduit

Article: Transcatheter Valve
Implantation in a Severely
Regurgitant Apicoaortic Conduit
Authors: Phanicharan A Sistla,
Prashob Porayette, Osamah T
Aldoss. Sidakoal S Panaich Journal:

Views from the Chair

internalmedicineiowa.org/category/views-from-the-chair/

Thousands of readers, state-wide, every two weeks



Views from the Chair

Our deep bench for clinical research

Pardon the pun in the title, especially since we also have a deep bench when it comes to bench research. But as this new year kicks off and because so much of its focus will be on the coming union with Mercy Iowa City, I wanted to point to an area of the department's strength [...]

Views from the Chair

A glance back and forward

Though they are needed all year long, assessments, resolutions, and recommitments always belong to the days around New Year's. This kind of reflection is not any more effective in this last week of the year, but beyond the flip of the calendar, perhaps it is the pause, the slowing down that most of us get [...]

Views from the Chair

Our new colleagues

On February 1, Mercy Iowa City will become part of University of Iowa Health Care as our new downtown campus, a great opportunity for growth and innovation and a new chapter as we become a comprehensive health care system. Over the last six weeks, we have taken many administrative steps to

integrate our new colleagues [...]

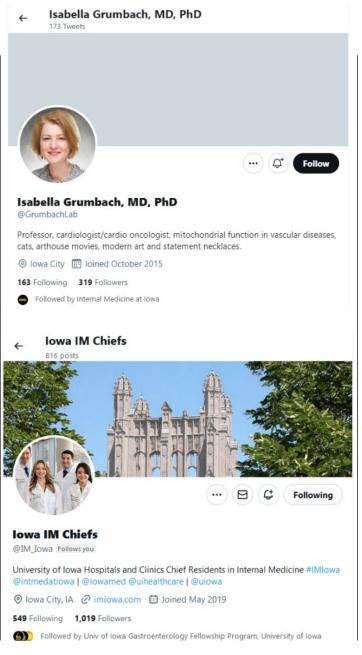
Views from the Chair

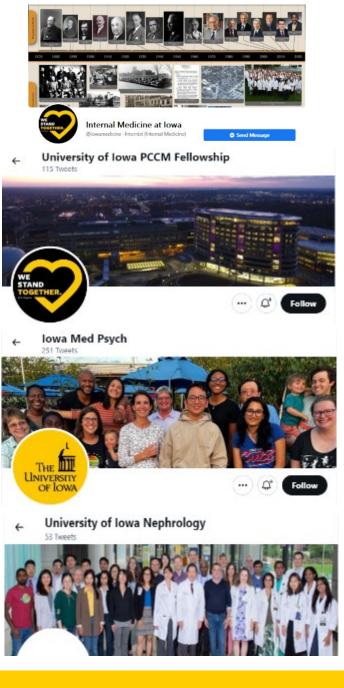
Recruitment efforts bear fruit

Wednesday of this week was
Fellowship Match Day and we
celebrated with two sets of groups
in our department. First, those
third-year internal medicine
residents who chose to pursue
subspecialty training found out
where they will be heading next.
Congratulations to all of you on the
navigation of a nerve-wracking
process, all while still completing
[...]

Social Media







Design Center



80 combined years' experience



Design Center Q SEARCH

Design & Illustration

Posters & Printing

Digital Media Services

Editing Services

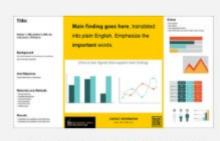
SUBMIT JOB REQUEST

People



Welcome to the Design Center

The Design Center provides campus-wide graphic design, poster printing, and text editing. Our design staff offers a comprehensive array of graphic design and visuals for print, web, and presentation. Our editing service provides professional editing services for all types of written materials, with a specialty in technical and scientific editing. With a combined 75 years of experience, we can assist in all stages of your project, from concept to completion.



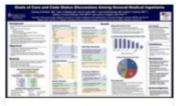
Need help with the popular 'Better Poster' design trend? Contact us!

Click to submit a job request, or learn more about our services below:



Design & Illustration

Complex illustrations, annual reports, posters, booklets, brochures, patient materials, newsletters, and more



Posters & Printing

Large format printing (conference posters, banners, signs); photo printing



Digital Media Services

Video, live streaming, podcasts, audio production, and more



Editing Services

Manuscripts, grants, abstracts, correspondence, web text, patient materials

And video



Internal Medicine at Iowa @IntMedatIowa · 2h

El intérprete Adrián Silva dice que ha visto el daño que el #COVID19 puede causar tanto a un paciente como a sus familias. "Para todos los que son importantes para usted, vacúnese." @uihealthcare #COVIDVaccines #NotGonnaMissMyShot



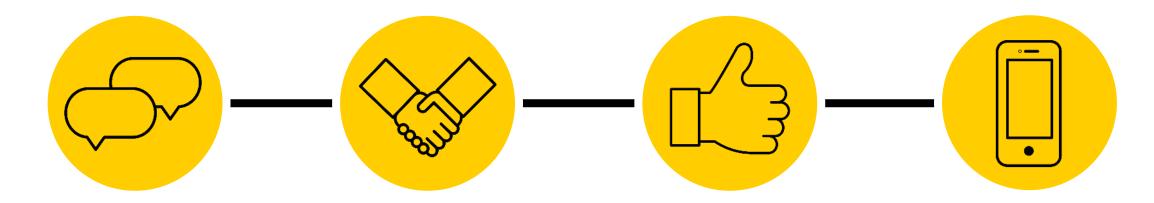








Working Together



Keep us informed

grant wins publications media requests

Keep us busy

presentations brochures illustrations interviews

Like and share

your content our content

Consider

starting your own account





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!



DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



DEPARTMENT ADMINISTRATION

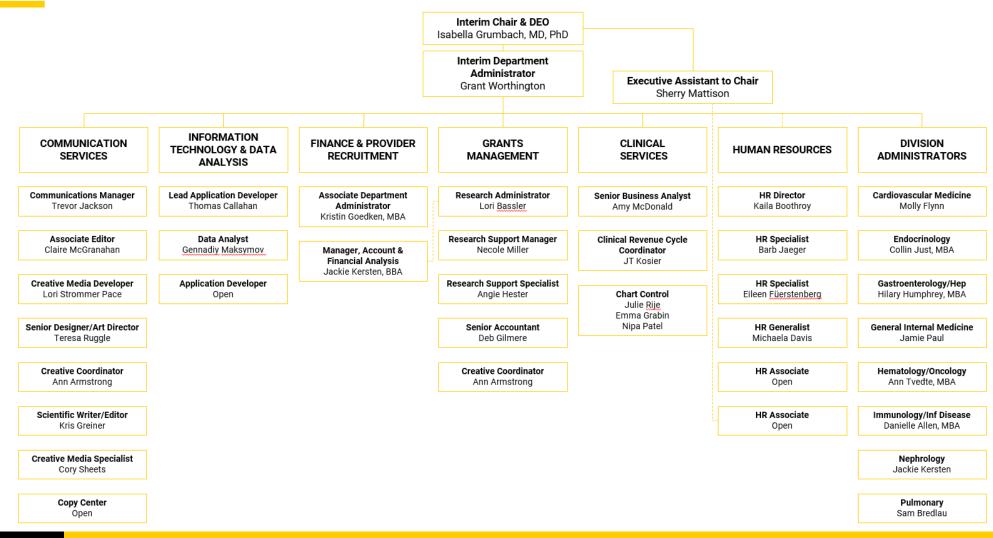
Kristin Goedken, MBA Associate Clinical Department Administrator

Topics

- Internal Medicine Administrative Team
- Internal Medicine Division Administrators
- Tools/Resources
- Internal Medicine Compensation Plan
- UI Centers for Advancement
- Feedback

Administrative Team Overview

Administrative Team





Faces in Administration



Lori Bassler Director, Research Administration & Finance Operations



Kaila Boothroy Human Resources Director



Thomas Callahan Senior Application Developer



Michaela Davis Human Resources Generalist



Eileen Fürestenberg Human Resources Specialist



Kristin Goedken Associate Clinical Department Administrator



Barb Jaeger Human Resources Specialist



Trevor Jackson
Director of
Communications



Jackie Kersten Senior Financial Analysis



Amy McDonald Senior Business Analyst



Gennadiy Maksymov Data Analyst



Sherry Mattison
Executive Assistant
to the Chair



Jack Oller Human Resources Associate

Grant Worthington
Interim Clinical
Department
Administrator

Division Administrators



Molly Flynn Cardiovascular Medicine



Collin Just Endocrinology and Metabolism



Hilary HumphreyGastroenterology and Hepatology



Jamie Paul General Internal Medicine



Ann Tvedte
Hematology, Oncology and Blood &
Marrow Transplantation



Danielle Allen Immunology Infectious Diseases (interim)



Jackie Kersten Nephrology



Sam Bredlau
Pulmonary, Critical Care, and
Occupational Medicine



Greg HamiltonSupportive and Palliative Care
Hospitalist Program

Division Administrators

Financial Analysis

Proformas

Clinical Assignments

Recruitment

Patient Satisfaction

Budgets

VA Eighths

Retirement

Changing

Day-to-day Inquiries

Credentialing

Compensation

On-boarding

Comp Model

Revenue Cycle

Malpractice

Fellowship Program

Research

PSA & Contracts

Emeritus Appointment

Staff Development

Departmental Tools & Resources

Application Development/Database Team

Quick solutions and/or long-term data needs

Oracle based technology & availability of other tools

Data manipulation, entry, & presentation

Thomas Callahan & Gennadiy "Henry" Maksymov IntMed-OracleHelp@uiowa.edu or 319-356-7162



Ask IM Reporting

Grant Profile

Physician Compensation Statement

Clinical Productivity

Faculty Profile

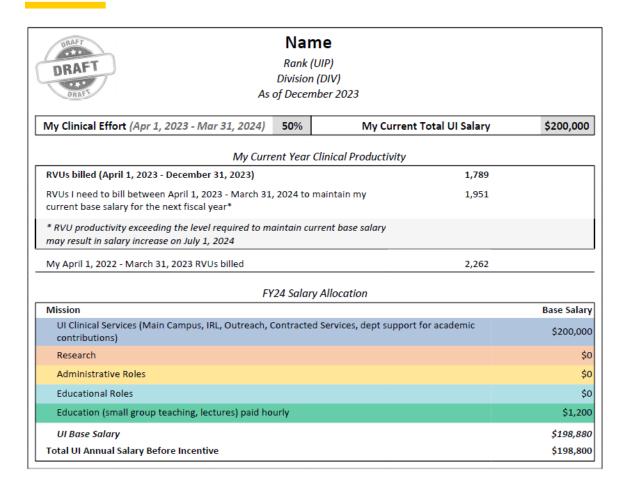
Annual Review Form

Schedule Reporting

Grant Profile

- Faculty specific document:
 - Outlines every grant proposal with individual faculty involvement (PI and other roles)
 - Separates proposals by awarded, submitted, terminated, and not funded
 - Resource to quickly and easily obtain comprehensive summary of total funding and/or extramural salary support
 - Requires the grants administrative office is made aware of all grant submissions, including federal grants, VA awards, internal awards, foundation grants, etc.

Physician Compensation Statement



- Up-to-date snapshot of individual <u>UI</u> salary and clinical productivity
- Updated quarterly and available for access via AskIM
- Please direct questions and inquiries to your Division Administrator

Clinical Productivity

- Physician and Advanced Practice Provider Clinical Productivity
- Comprehensive set of reports:
 - RVU productivity by individual or division
 - Billing reports including units billed by CPT code and procedure logs

Faculty Profile

- Faculty focused report outlining overarching details of faculty appointment
 - Track, division, rank
 - Appointment information including start date and years in rank
- Mechanism to track reappointment, promotion, etc.
- Additional resource for tracking grant support

Annual Review Form

Faculty

- Required to be completed each year
- Department streamlines process through Ask IM
- Ask IM form prepopulates certain information to aid in more comprehensive review

Advanced Practice Providers

- Required to be completed each year
- Completed through Self Service form maintained by University

Schedule Reporting

- Faculty and Advanced Practice Provider scheduling report
- Generated from QGenda schedule
 - Providers are encouraged to use QGenda for tracking their clinical schedule
 - Please speak with your Division Administrator regarding your division-specific QGenda instructions
 - Ask IM data provides mechanism for counting and tracking clinical expectations

Compensation Model

Faculty Compensation

Advanced Practice Providers

- No current compensation plan specifically designed and implemented for Advanced Practice Providers
- Compensation for APPs follows university plan guides for specific job type and classification
- Please speak with your Division Administrator for questions pertaining to compensation



Faculty Compensation Plan

- Overarching components of Faculty Compensation Plans:
 - Transparent and equitable
 - Consistent Effort Standards
 - Faculty can drive their own compensation
 - Rank-based Baseline Compensation for every faculty in CCOM
 - Recognizes achievements in Clinic, Research and Education
 - Rewards highly productive individuals AND teams
- Your Division Administrator is the expert on your Division-Specific Plan



Departmental Compliance Policy

- Clinical Compliance (UIP Documentation)
 - Level 2 UIP non-compliance: Loss of \$100 of enrichment dollars per occurrence (2 weeks to resolve prior to additional reduction)
 - Level 3 UIP non-compliance: Loss of \$200 of enrichment dollars per occurrence (2 weeks to resolve prior to additional reduction)
- Education Compliance
 - Minimum of 80% of evaluations completed within 30 days of end of rotation. Failure to meet minimum requirement results in loss of \$100 of enrichment dollars per rotation
- Research Compliance
 - Grant Reporting: Greater than 30 days overdue will result in loss of \$100 of enrichment dollars per month in non-compliance
- All Other Compliance (trainings, license, DEA, etc.)
 - \$100 loss of enrichment funds for every 30-day increment in non-compliance standing
- Any loss of enrichment funding will be reduced from the faculty enrichment allocation for the following fiscal year. Any total loss exceeding allocated enrichment funding will be deducted from potential incentive payments.
 - Compliance performance during period of April 1st-March 31st will be used to calculate subsequent fiscal year enrichment penalties.



Examples

- Dr. Jones receives \$1,500 per fiscal year in enrichment funding:
 - August 10, 2024: Dr. Jones has 5 outstanding compliance trainings
 - October 15, 2024: Dr. Jones completes all outstanding compliance trainings:
 - Dr. Jones will have \$1,300 available for FY26 enrichment funds:
 - \$100 reduction for non-compliance during August-September
 - \$100 reduction for non-compliance during September-October
- Dr. Smith receives \$1,500 per fiscal year in enrichment funding
 - Dr. Smith receives a Level 2 UIP non-compliance notice in November 2024 and resolves in the outstanding documentation in December 2024
 - Dr. Smith receives a Level 3 UIP non-compliance in January 2025 and resolves outstanding documentation in March 2025
 - Dr. Smith will have \$1,000 available FY26 enrichment funds:
 - \$100 reduction for 1 month in Level 2 UIP non-compliance
 - \$400 reduction for 2 months in Level 3 UIP non-compliance



Departmental Philanthropic Endeavors

Department of Internal Medicine

UI HEALTH CARE PHILANTHROPY III



Proud to Support the Department of Internal Medicine



HAYDEN BEVELACQUA
Associate Director of Development
Health Sciences
Hayden.Bevelacqua@foriowa.org
319.467.3808



SCOTT SMITH
Associate Director of Development
Health Sciences
Scott.Smith@foriowa.org
319.467.3371

FY25 Areas of Focus:

- Support for research and discovery
- Support to ensure access to premiere medical education and training
- Support for exceptional patient care
- Support for our people
- Grateful patient and family referrals and interactions

Philanthropic activities in 2023

- Grateful patient workshop
- Support received in 2023
 - \$828,120 estate gift in support of cardiovascular research Darrell Loan
 - \$100,000 in support of HVC and Research Albaghdadi Family
 - \$60,000 in support of liver disease research Karen Gaddis
 - \$50,000 in support of faculty support in cardiology David Kehoe

Total Productivity:

FY23: \$7.1 million FY22: \$7.3 million



We need your feedback!

New Provider Orientation Evaluation

Institutional and Department surveys throughout the year





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!



DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



EDUCATION

Manish Suneja, MD, FACP, FASN Vice Chair for Education Director, Residency Program Clinical Professor - Nephrology

Medical Student Education



Undergraduate Medical Education Leadership



Manish Suneja, MD Vice Chair for Education



Jane Rowat, MS
Educational Development Director



Kathleen Steenlage Medical Student Education Coordinator



Milena Gebska, MD, PhD, MME Subinternship Director



Lisa Antes, MD Clerkship Co-Director



Lee Sanders, MD, PhD Clerkship Co-Director

Medical Student Education: Core Clerkship

Combined IM Clerkship: 10 weeks

Organ-based Core Topics

- Renal/electrolytes: Chronic kidney disease, Acute kidney injury, Electrolytes (potassium and sodium)
- Cardiology: Acute coronary syndrome, Congestive heart failure, Hypertension
- Pulmonary: Chronic obstructive pulmonary disease, Venous thromboembolic disorders, Pneumonia
- Hematology: Anemia
- Endocrine: Diabetes, Dyslipidemia
- Gastrointestinal: Gastrointestinal bleeding, Liver disease, Pancreatitis, Gastroesophageal reflux disease
- Rheumatologic disease: Common joint pain (knee pain)
- Infectious: Skin and soft tissue infection, Urinary tract infection, Upper respiratory infection, nosocomial infections

Health Promotion and Wellness



- Substance use
- Cancer screening (colon, breast, lung, prostate)

Clinical Skills

- Intravenous fluid management
- Abdominal X-ray interpretation
- Chest X-ray interpretation
- EKG interpretation
- Acid-base interpretation

Physical Exam

- Cardiac exam
- Pulmonary exam
- HEENT exam

Clinical Reasoning (symptom-based approach)

- Abdominal pain
- Altered mental status
- Chest pain
- Dyspnea and cough

ich)

- FeverFatique
- Syncope
- Diarrhea
- Low back pain

Clinical Pharmacology

- Anticoagulation
- Antibiotics management
- Pain management

Advanced Communication Skills



- Goals of care
- Disparities and equity
- · Shared decision making

Medical Student education: Faculty Expectation

- Review your personal expectations with the student on the first day.
- Role model Communication skills and Physical Exam
- Cultivate a <u>learning climate</u> that encourages questions and discussion.
- Spend time each day reviewing a <u>learning topic</u> with the student.
- Give **feedback** to the student on written and oral presentations
- Assist in the completion of the <u>Direct Clinical Observation Encounters</u> required for each student on the clerkship.
- Complete online clinical evaluation for the student at the end of your time together.

Please read through the Mistreatment Policy and the Clerkship Goals & Objectives.

Opportunities:

- Small group teaching
- Medical student clerkship workshops: Wednesday afternoon
- CCOM course directors: (CAPS/MAS/MOHD)
- Developing new 4th year elective: Ex: Transition to GME (Matt Soltys)
- Get involved with faculty development in the department/college

Medical Student Education: Pre-clinical (MI/M2)

- M1 and M2 (First three semesters)
 - Email to all faculty from me at the beginning of each semester
 - Variety of pre-clinical experiences.
 - Expectation from faculty member: At least 10 hours of small group education hours.
 - Activities include:
 - Small group facilitation
 - Students in clinic (ECE)
 - Organized and monitored by Vice Chair of Education and Amy McDonald



Request for small group teaching

To: All Internal Medicine Faculty

Colleagues:

Thank you to the faculty who have already signed up for the small group teaching assignments. While a few activities have filled, there are still **teaching opportunities available!**

Please find attached a updated <u>course catalog</u> giving descriptions of the small group teaching opportunities (For M1s and M2s) as well as an updated <u>chart</u> (shows the days/time in the week when the small groups are offered.) This chart outlines which days of the week certain teaching activities occur for your reference: <u>sessions grayed out have already filled</u>. This should help you quickly determine what activities fit your schedule. The database should have all the faculty prepopulated, which will facilitate the process.

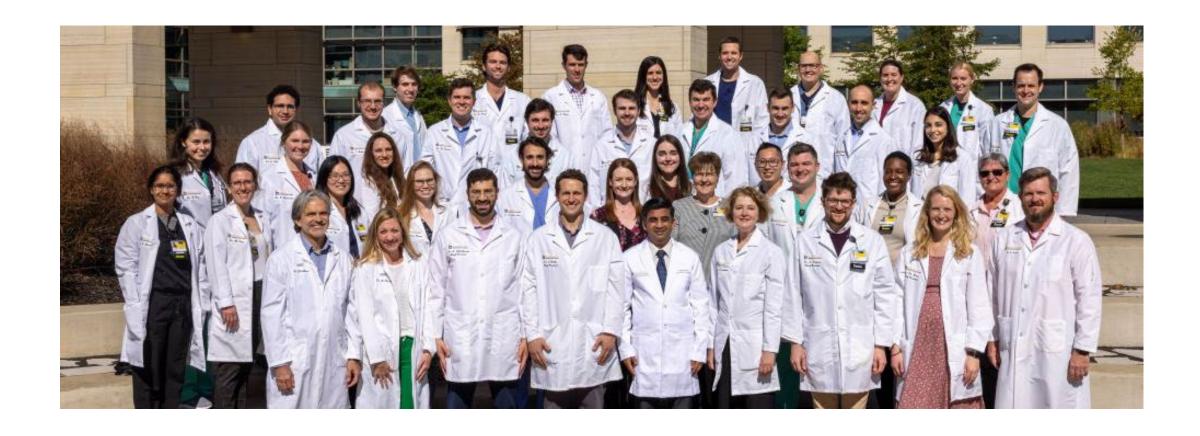
Following activities specifically need facilitators (see catalog and available teaching opportunities)

- Patient Based Clinical Reasoning (M2/PA2 FALL activity on Monday and Wednesday afternoons)
- Professional Communication Skills (M1/PA1 FALL activity on Monday afternoon (1 slot for substitute);
 Wednesday afternoon (5 slots; 2 substitutes)
- MAS Small Group (MSG) III (M2/PA2 FALL) on Thursday mornings
- Interprofessional Education II and III (see catalog),
- Early Clinical Experiences

Based on our departmental teaching goals we expect that all our faculty contribute <u>at least 9-10 hours</u> of small group teaching this year. The link for signing up for small group teaching is included in the catalog, but here it is for quick reference: https://webapps1.healthcare.uiowa.edu/FCP/recruiting

Faculty members who have previously taught can access the site; anyone who has not yet signed up for teaching experiences will need to create an account, which they can do by going to the website above and following the instructions provided.

Resident Education



DEPARTMENT OF INTERNAL MEDICINE

IOWA

RESIDENCY PROGRAM LEADERSHIP

Director



Manish Suneja, MD

Director **Educational Development**



Jane Rowat, MS

Educational Director Safety & Quality



Carly Kuehn, MD, MME

Mentor **VA Safety & Quality**



Matthew Soltys, MD, MME

Director **Med-Psych Program**



Vicki Kijewski, MD

Associate Director Med-Psych Program



Andrea Weber, MD, MME

Associate Dean Graduate Medical Education



Mark Wilson, MD

Associate Directors



Andy Bryant, MD



Brian Gehlbach, MD



Krista Johnson, MD. MME

Justin Smock, MD

Assistant Director



Jennifer Strouse, MD

Administrators



Cindy Batzkiel Program Administrator



Abbey Gilpin Associate Program Administrator

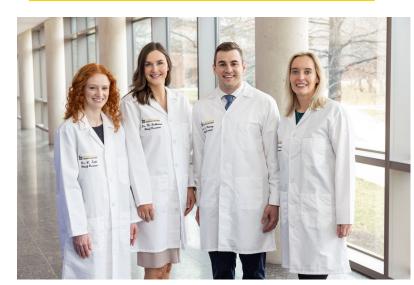


Stacy Sueppel Program Coordinator



Denise Floerchinger Fellowship Program Administrator

Chief Residents 2024-25



Lauren Zebel, MD Marie Finkbeiner, MD

Luke Morrey, MD

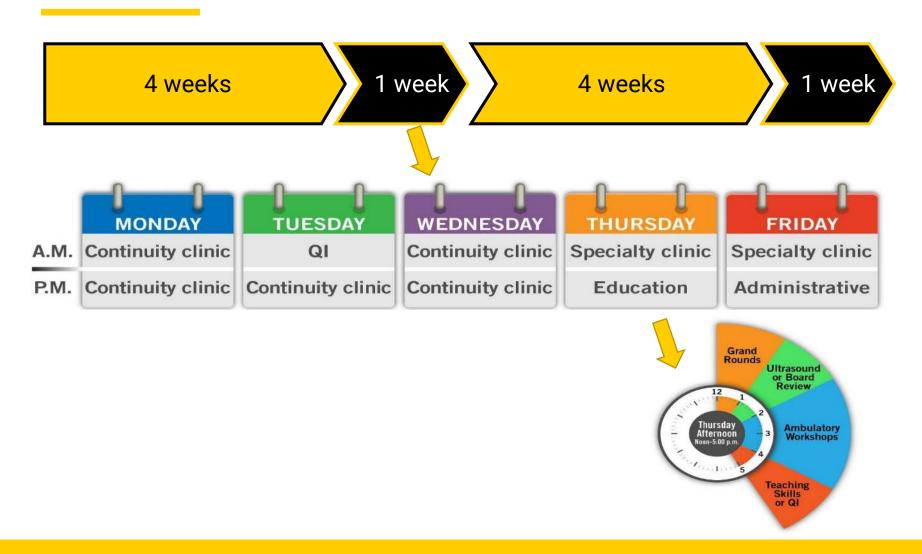
Rachel Anderson, MD

About Us: Residency Education

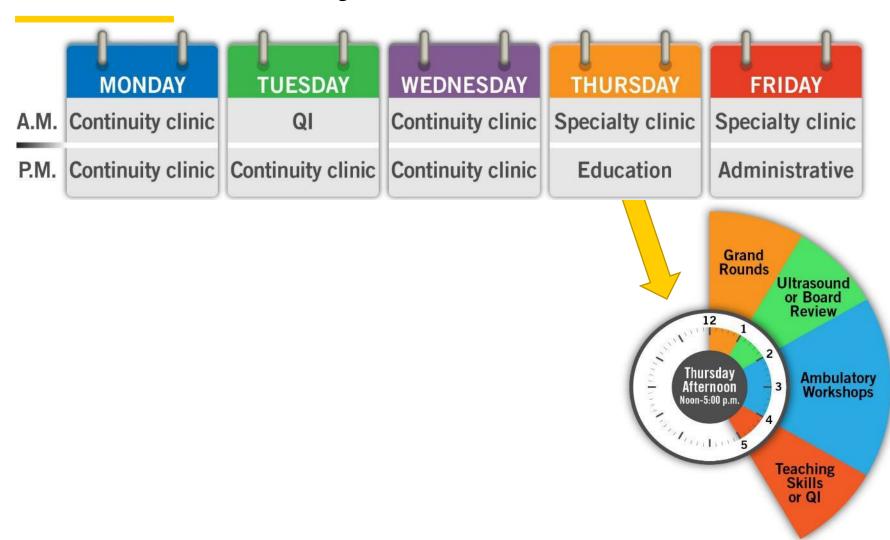
- 23 Categorical Residents
- 3 Preliminary Residents
- 5 Ophthalmology Preliminary
- 2 Med-psych Residents
- 4 Chief Residents are selected each year for a post-residency year
- 81 Total Residents are ACGME approved in our categorical program
- Approximately <u>65-70%</u> of our graduating residents go on to fellowships



Residency Schedule: X+Y→ 4+1 Schedule

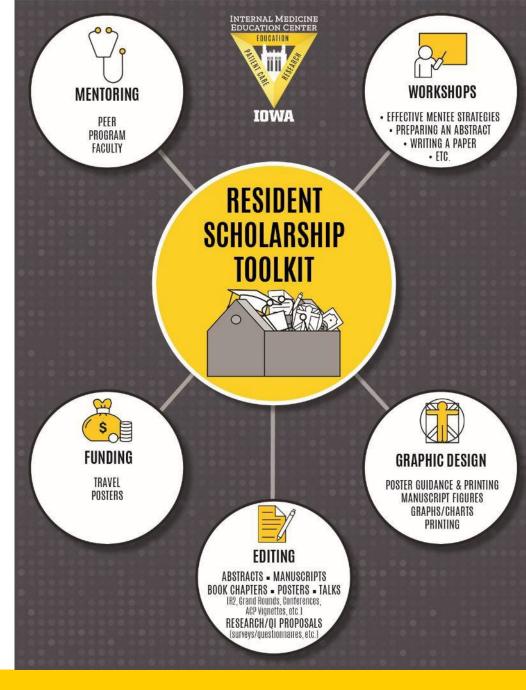


The Ambulatory Week Schedule



Research

- Up to 12 weeks of research
- Faculty mentoring from assigned APD and Dr. Gehlbach
- Administrative support for design, editing, and writing
- Funding available



Multiple Distinction Pathways: Education (DIME)

Distinction in Medical Education Residents

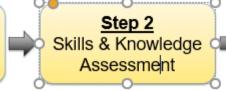
- Resident teaching skills curriculum
 - Al IM and IM/Psych
- Teaching resident rotation
 - 12-14 PGY3 residents/year
- Masters in Medical education (MME)



Multiple Distinction Pathways: Ultrasound (POCUS Distinction)

Point-of-Care Ultrasound Pathway for Internal Medicine Residents

Step 1
Application
Submission



Step 3
Committee Review
& Selection

Pathway Overview

Phase 1: Pre-Portfolio Education

- · Mentor selection & initial meeting
- ACP Ultrasound Modules
- · Live scanning sessions with mentor



Phase 2: Image Portfolio

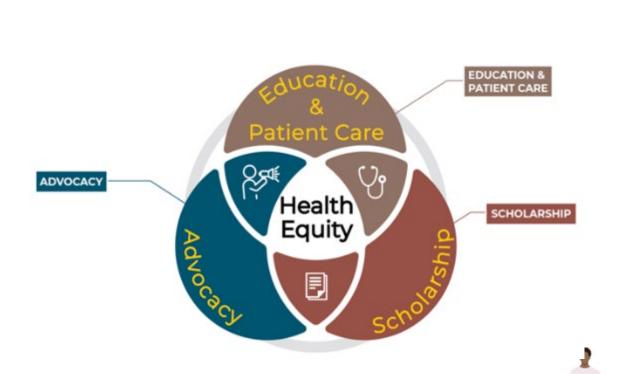
- Minimum of 90 quality-assured images
 30 to be completed by end of 2nd year
- · System-based skills assessments

Quarterly group meetings with pathway members

POCUS-focused scholarly activity



Multiple Distinction Pathways: Health Equity Distinction Track





Equality

Equity

Helpful Resource: imiowa.com



Calendars & Home Links ~

Education/Resources ~

Resident Presentations ~

Social Y Careers/Research Y



Quick Links Calendar Presentation Archive Resident Manual

Upcoming Events

2023 AUGUST

RAPID FIRE DIME PRESENTATION

09 Aug 2023 (12:00 PM) - 09 Aug 2023 (1:00 PM)

Lunch: Taco bar with chicken or beef, black beans and rice

Faculty Expectation

- Create excellent learning environment
- Providing effective feedback
- Timely completion of Clinical Evaluations
- Role model communications skill and physical diagnosis
- Professionalism

THE UNIVERSITY OF IOWA

Internal Medicine Education Center



Providing Effective Feedback

Setting the Stage

Expected

I will be giving you feedback following this encounter; Shall we spend a few minutes discussing how the clinic went after your last patient?

* Supportive learning climate

It's my job to help you improve.

Label as feedback How would you like me to focus my feedback?

Self-assessment

What were you trying to accomplish during this encounter?; Did it go as planned?

STOP

S: SPECIFIC

Your social history of the patient showed understanding of pathophysiology and allowed us to focus more on biliary tract disease and less on alcoholism.

T: TIMELY

I'll give you feedback after each patient today; Let's plan to sit down at the end of the week.

O: OBJECTIVE, based on observed behaviors

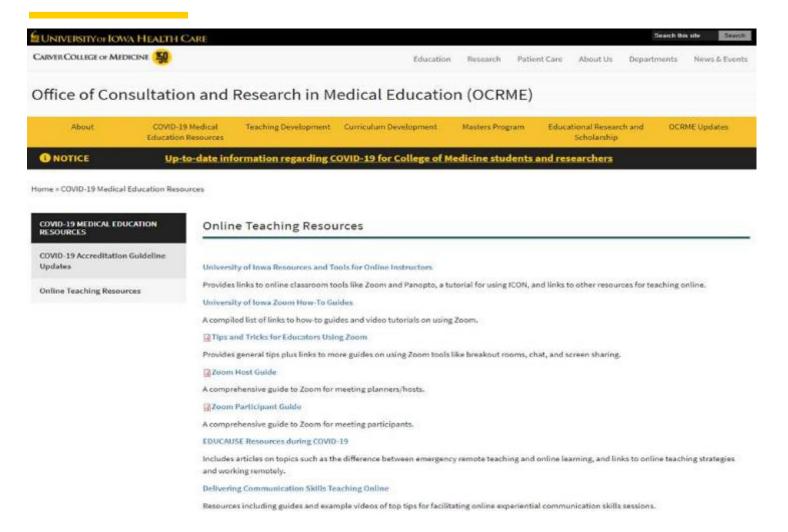
I noticed you interrupted the patient a few seconds after asking what brought her to the hospital; You lost eye contact with the patient when you were discussing the lab results.

P: PLAN for improvement

If you were going to do it again, what would you do the same and do differently?; What actions do you want to take to **improve** in this area?; How would you feel doing it again?

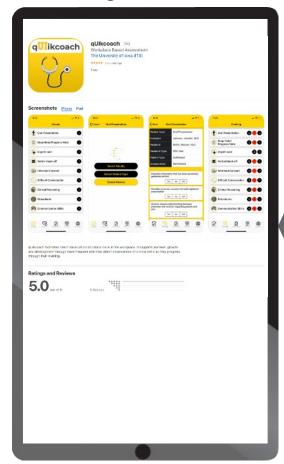
Gigante J, Dell M, Sharkey A. Getting Beyond "Good Job": How to Give Effective Feedback. *Pediatrics* 2011;127:205-207.

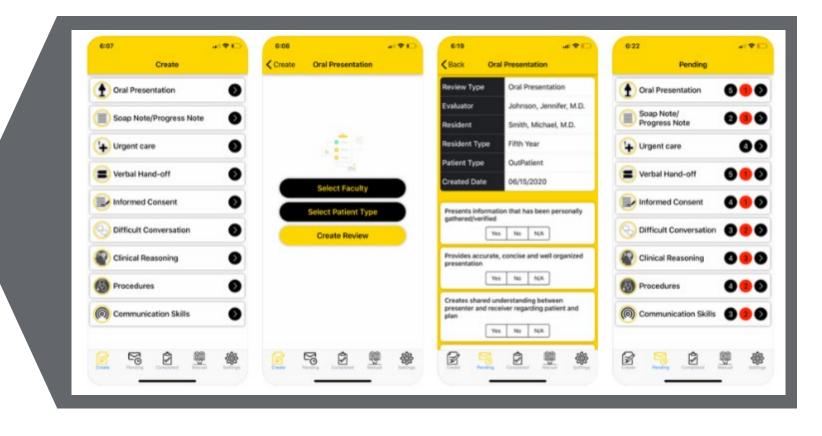
Faculty Resources/Opportunities



qUkcoach App

Homegrown evaluation application





FACE: Faculty/Fellows as Clinician Educators

 Program Goal: Introduce current and future clinician-educators to a knowledge base and skill set which may be of use in their career

Required Component:

- Educations Workshop Session: Third Thursday of every month (1:00-2:30)
- Application of Skills and Reflection
- Topical readings (on website)
- Teaching video

Residency Committees: WE NEED YOUR HELP!

- Program Evaluation Committee
- Clinical Competency Committee
- Mentorship/Scholarship
- Residency Interviews
- Residents Conferences and Curriculum

Questions related to the Educational Mission? Please contact me!





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!



DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



FACULTY ADVANCEMENT

Christie Thomas, MBBS
Vice Chair, Faculty Advancement

Objective

- Welcome
- Aspirations and goals clinical practice, teaching, publishing
 - Clinical track
 - Tenure Track
 - Research track
 - Advanced Practice Providers
- Reappointment process
- Promotion process
- Mentoring Committee

Reappointment Review

- Initial appointment: 3-4 years (1-3 years for Research Track)
- Review for reappointment in fall prior to end of appointment
 - Tenure track candidates (Tenure track review committee)
 - -Clinical track candidates (DD and DEO)
 - Research track candidates (PI and DEO)
- Assess progress in:
 - -teaching: clinical track and tenure track
 - -scholarship/professional productivity: clinical, tenure and research track
 - Service: all personnel



Know the timelines - have a system for tracking activities relevant for advancement.

Promotion

- Determine if candidates have met standards (set by Department/College/University)
 - Promotion to higher rank (+/- tenure)

- The annual process sets and maintains standards
- Recognizes accomplishments of faculty members Not acknowledgement for time in rank

Promotion Review

- Assess accomplishments in:
 - Teaching (Clinical, Tenure)
 - Scholarship/professional productivity (Research, Clinical, Tenure)
 - Service (Research, Clinical, Tenure)

Accomplishments are 'relative to a standard'

- Timing
 - Tenure Track: "Clock"

```
8 yr (physician)
6 yr (scientist)
```

- Clinical Track and Research Track: no "Clock"
- Recommended by Supervisor, PI, Division Director in consultation with VCFA and Department Chair

What is the review process for promotion?

- CV (updated, COM format, annotated references)
- Personal statement: teaching, scholarship/academic productivity, service
- Teaching evaluations (including at least 3 peer evaluations from 2 different venues)
- Teaching materials (e.g., handouts, slides) up to 5
- Selected publications (if applicable) up to 5



You should be teaching if you are clinical or tenure track - document when and where.



You should be aware of your teaching evaluations – from learners and from peers.



You should have a system for tracking teaching activities.

Promotion in the Research Track (Focus on scholarship)

- Assistant professor:
 - Productive <u>scholarship</u>
 - Ability to fulfill relevant responsibilities in the research enterprise.
- Associate professor: additional criteria
 - Evidence of extramural research funding and sustained salary support from extramural grants and/or contracts on which the faculty member is listed as key personnel.
 - Evidence of fulfillment of important responsibilities in the research enterprise
- Professor: additional criteria
 - Clear evidence of regional or national recognition by peers.

Promotion in the Clinical Track

- To Associate Professor:
 - Convincing evidence that the candidate is an effective teacher.
 - Evidence of progress toward a record of <u>professional productivity</u> beyond clinical service
 - Departmental, Collegiate, and/or University <u>service</u>.
- To Professor:
 - Continued evidence that the candidate is an effective teacher.
 - Evidence of a record of <u>professional productivity</u> beyond clinical service
 - Ongoing Departmental, Collegiate, and/or University <u>service</u>.
 - Evidence of regional or national recognition by peers.

Promotion in the Tenure Track

- To Associate professor:
 - -Convincing evidence that the candidate is an effective teacher.
 - Demonstration of <u>scholarly achievement</u>, supported by <u>substantial</u> <u>publications</u>
 - Departmental, Collegiate, and/or University <u>service</u>.
 - Evidence of regional recognition by peers.
- To Professor:
 - Continued evidence that the candidate is an <u>effective teacher</u>.
 - Demonstration of ongoing growth in <u>scholarly achievement</u>
 - Ongoing Departmental, Collegiate, and/or University service.
 - Evidence of national or international recognition by peers.

Mentoring Committee

Purpose:

- To serve as an <u>unbiased</u> candidate-centered advisory committee
- Usually has 3 to 4 member selected by the faculty member in consultation with primary mentor/DD
- Does not usually have the DD
- Can have members outside the Division or Department or College
- Provide a confidential sounding board for ideas, aspirations
- Review progress in all domains relevant to the track

Faculty member should take the initiative in setting up the committee and scheduling meeting

What should you do now?

- Consider goals beyond clinical practice or research (academic productivity)
- Participate in service (e.g committee) activities, teaching opportunities
- Network with your colleagues especially more senior colleagues
- Pay attention to your teaching evaluations
- Set up a mentoring committee
- Annual meeting with Division director



Evidence of service beyond taking care of patients; being a good citizen counts

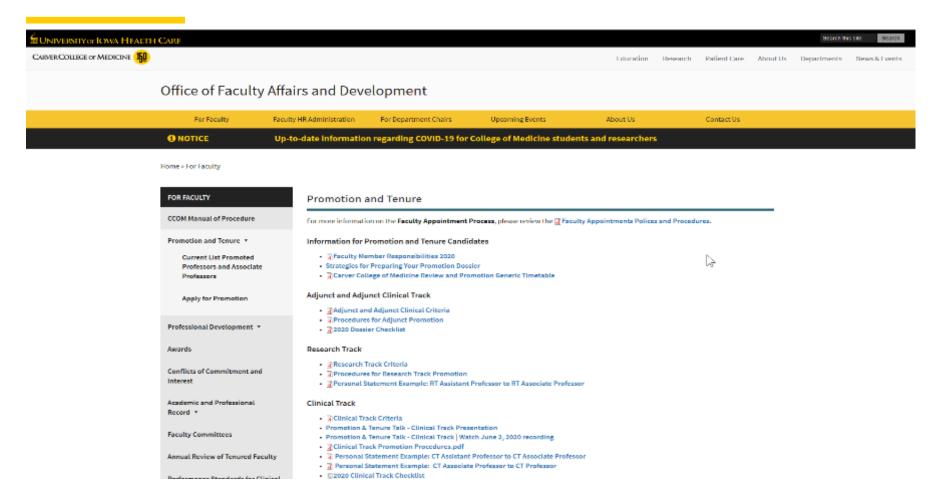


Evidence of scholarship or productivity beyond taking care of patients



Developing, improving or expanding the academic mission

Additional Information



https://medicine.uiowa.edu/facultyaffairs/faculty/promotion-and-tenure





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!



DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



IOWA CITY VAMC

Bradley S. Dixon, MD
Chief of Medicine

Justin Smock, MD

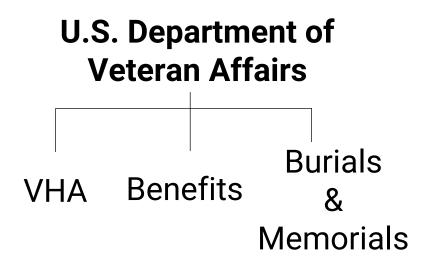
Deputy Chief of Specialty Medicine

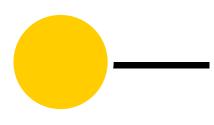
Mark Yorek, PhD
Associate Chief of Staff for Research

Objectives: Why to LOVE the VA

- Brief overview of VHA
- Highlight the Specialty Medicine Service Line at the Iowa City VAMC
- Review opportunities for faculty development and research at the lowa City VAMC
- Largest Integrated Healthcare system in US
- Outstanding opportunities for academic faculty
- Veterans are wonderful people
- Engagement by VA staff is outstanding.

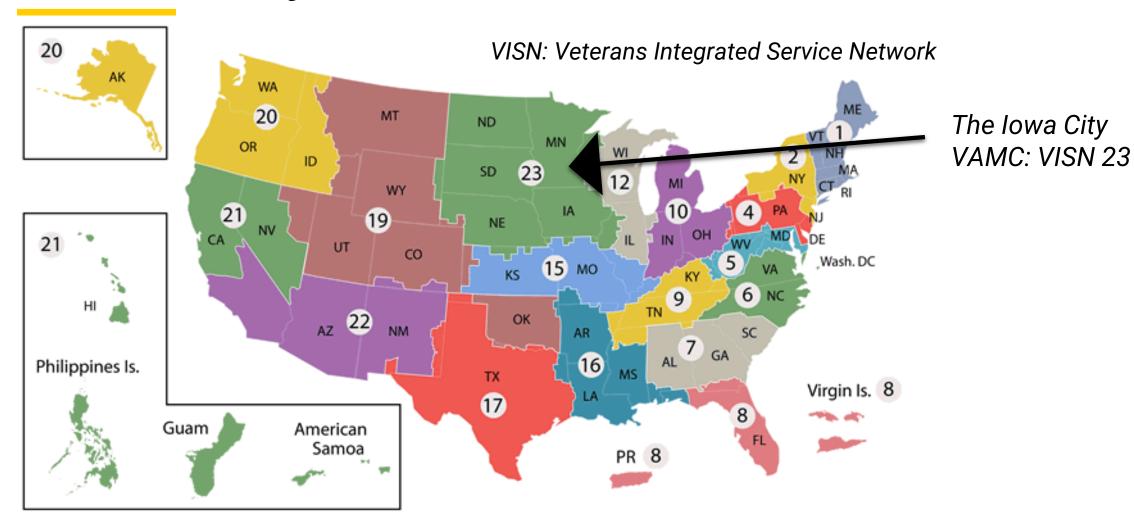
VHA is the largest integrated health care system in the US





VHA (Veterans Health Administration) supports 1,240 inpatient and outpatient facilities with ~9 million enrolled veterans

The Iowa City VAMC is one of 170 Medical Centers





The Iowa City VAMC serves a wide geographic area

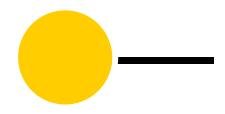
- Inpatient: 53 beds (43 medicine & 10 ICU/SD)
- Outpatient:
 - Specialty medicine clinics (Iowa City)
 - Resident primary care clinics (Iowa City)
 - CBOCs (community-based outpatient clinics)

lowa: Davenport, Waterloo, Dubuque, Cedar Rapids, Ottumwa, Decorah, Burlington + satellite clinic in Coralville

Illinois: Galesburg, Quincy and Sterling



Iowa City VA Mission



To provide world class experience to all the Veterans receiving our services:

High quality and cost-effective care

The Iowa City VAMC offers a wide range of opportunities

- Leadership opportunities and training (local & national)
- Quality Improvement:
 - Projects (lots of data)
 - Training (LEAN belts)
 - VISN & National competitions (Star, Shark Tank)
 - Programs (Diffusion of Excellence)
- Medical education (inpatient and outpatient)
- Healthcare systems (e.g., Risk Management)
- Research funding opportunities

Education

- Supports 16.5 internal medicine resident FTEs
- 3 Inpatient Teaching Services: 1 categorical senior, 2 PGY-1's
- 35 Categorical Residents complete a 3-year primary care COC experience
- 1 VA chief (3 chiefs each have a 4-month experience)
- 1 VA Chief Resident Quality and Safety (12 months)
- Outpatient clerkship students rotate in primary care and subspecialty clinics
- Sub-Interns and Inpatient Clerkship students rotate on Inpatient Teaching Services

Quality Improvement

- Many opportunities and resources to get involved
- Residents (contact):
 - VA Chief Resident Quality Scholar (Mathew Soltys)
- Fellows/Faculty (contacts):
 - VA Quality Scholar Program (Melissa Swee & Amany Farag)
 - Rural Scholar Program (Jamie Wilson, Karla Miller)
 - Advanced Fellowship in Health Services Research (CADRE; Michelle Mengeling & Michael Ohl)
 - ICVA HCS Quality and Process Improvement Department (Vishal Vashistha, Natalie Good)

Quality Improvement – VHA Awards & Programs

- VISN 23 Network Directors Star Award (e.g., Dixon/Swee Telenephrology)
- VISN 23 Strategic Initiative (e.g., Jeydith Gutierrez & Irene San Roman)
- VHA Shark Tank Competition
 - Diffusion of Excellence Program
- VACO Enterprise Wide Initiative (Jeydith Gutierrez-TeleHospitalist Program)
- Quality Enhancement Research Initiative (QUERI)
- ICVA- PCORI Health Systems Implementation Initiative (Brad Dixon)

Faculty Appreciation

- VHA awards
 - Mark Walcott Award for Excellence in Clinical Leadership
 - Mark Walcott Award for Excellence in Clinical Care Delivery
 - → Won by Dr. Adrian Holm 2021
- CCOM- Department of Medicine launched the DiBona Award of Academic Excellence in Service to ICVA
 - → Jack Stapleton 2021
 - → Warren Schmidt 2022
 - → Peter Kaboli 2023
 - →Bill Nauseef 2024

Overview of Research Program

- ICVA: Top 10-15 in VHA
- \$14.2 million in direct VA sponsored research funding and 10.4 million in non-VA funds
- 49 VA funded investigators
- 372 active research protocols (human subjects (226), animal (71) and safety (75))
- In 2023 VA funded investigators published 246 peer reviewed articles
- Accepting a VA grant requires accepting a minimum 5/8 VA appointment

Office of Research and Development - Programs

- Biomedical Laboratory Research and Development (BLR&D)
- Clinical Science Research and Development (CSR&D)
- Rehabilitation Research and Development (RR&D)
- Health Services Research and Development (HSR&D)
- Million Veteran Program

Centers of Excellence

- Centers of Innovation (COINs)
 - Center for Comprehensive Access & Delivery Research & Education (CADRE)
 - Director: Eli Perencevich; Deputy: Diana Jalal
- Center for the Prevention and Treatment of Visual Loss
 - Director: Randy Kardon

VHA Research Funding Awards

- Career Development Awards
 - -VHA CDA
 - Office Rural Health CDA
- VA Merit Review Awards
- Cooperative Studies Programs
- CADRE: Small Award Initiative for Impact (SWIFT)
- Office of Rural Health (ORH) grants

Contact Us

Bradley Dixon (Chief of Medicine): <u>bradley.dixon@va.gov</u> or <u>Bradley-dixon@uiowa.edu</u>

Justin Smock (Deputy Chief of Medicine): justin-smock@uiowa.edu

Chad Mead (Administrative Officer): chad.mead@va.gov

John Hilligas (Secretary): John.Hilligas@va.gov

Sondra Reglein (Data Analyst): <u>Sondra.reglein@va.gov</u>

Contact information for research related issues and questions at the VA:

Laura Dutca (Administrative Officer): laura.dutca@va.gov

Mark Yorek (Associate Chief of Staff for Research): mark-yorek@uiowa.edu or mark.yorek@va.gov





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!



DEPARTMENT OF INTERNAL MEDICINE NEW PROVIDER ORIENTATION August 14, 2024



RESEARCH

Chad Grueter, PhDVice Chair of Research

Lori Bassler

Director, Research Administration & Financial Operations

Research in Internal Medicine

- # PIs Overall we have about 160 faculty participating in basic, clinical and health services research.
- Funding Total funding from all sources exceeds \$109M with about \$34M from Federal grants
- NIH ranking for CCOM and Department In FY23 (the latest complete year of data) CCOM ranked 47th and Internal Medicine ranked 44rd.

Research administration in Internal Medicine

Chad Grueter, PhD

Vice-Chair for Research

Eli Perencevich, MD, MS

Associate Chair, Clinical and Health Services Research

Lori Bassler, BBA

Director, Research Administration and Financial Operations

Research administration & financial operations

Lori Bassler

Director, Research Administration & Financial Operations loretta-bassler@uiowa.edu

319-335-6947

<u>Major Responsibilites</u>: Pre-award Proposal Budget Development; Departmental Research Budget; NIH NRSAs & T32s; Effort Reporting; Data Analysis; Space Assignments; Renovations; Department non-UIP budget; Postdoc & Graduate Student Appointments

Angela Hester

Research Support Specialist angela-hester@uiowa.edu 319-335-6993

<u>Major Responsibilities</u>: Post-award Financial Support for Federal Basic Science Grants; Medical Association Funding; Non-Clinical Trial Grants; Federal Passthru; VA IPAs & Subawards; Database Management; Industry Fellowships; Problem Solving

Necole Miller

Research Manager necole-miller@uiowa.edu 319-353-5175

Major Responsibilites: Pre & Post-award NIH and Industry Sponsored Clinical Trial Awards; Subaward Processing

What can the research office do for you?

- Pre-award counselling
- Budget and Budget Justification preparation
- Post-award financial management
- Material Transfer Agreements
- Research space
- Identifying grant opportunities
- Financial management of Start-up and Commitments

Grant/manuscript review and discussion resources

- Internal Medicine has weekly discussion group meetings for grants/manuscripts.
- Internal Medicine peer review/mock study section available for grant proposals
- Internal Medicine has a scientific writer available to edit your papers and proposals.
- OVPR provides external review of grant proposals through the Research Development Office
- The University provides a license for the anti-plagiarism to iThenticate.
- The University provides Al writing assistant- CoPilot

University Resources

RESEARCH	University Resources - By Category	
About	The Core Research Facilities are a collection of centralized laboratories dedicated to developing and provide	
Research News	research resources to facilitate biomedical research. They are available on a fee-for-service basis to the ent community as well as outside entities.	ire health sciences:
Research Groups	Facilities available to Carver College of Medicine investigators include:	
For Researchers	Animal Resources	
Research Administration	Of ice of Animal Resources	Email Directory
Website Design (Laboratory)	Comparative Pathology Laboratory	Paul Naumann
University Resources □	Genome Editing Core Facility (formerly the Transgenic and Genome Manipulation Core Facility)	William Paradee, PhD
University Resources - A-Z	Metabolic Phenotyping	Jamie Soto
Department SharePoint	Small Animal Imaging Facility	John Sunderland, PhD saic@uiowa.edu
TriNetX ♣	Tissue Procurement Core Facility	C. Michael Knudson, PhD
	Bioengineering, Biosafety Labs and cGMP Facilities	
Funding Opportunities	Bioengineering Services	Dennis Wilson
aining G rants □	Biosafety Level III Laboratories	Dana Ries
ecent Publications	Center for Biocatalysis and Bioprocessing	Mani Subramanian, PhD Mitch Rotman biocatalysis@uiowa.edu
or Patients		
lob Opportunities	Free Radical Biology Resources	
	Electron Spin Resonance Facility	Brett Wagner, MS
	Radiation and Free Radical Research Facility	Douglas Spitz, PhD
	Center for Biocatalysis and Bioprocessing	Mani Subramanian, PhD Mitch Rotman biocatalysis@uiowa.edu

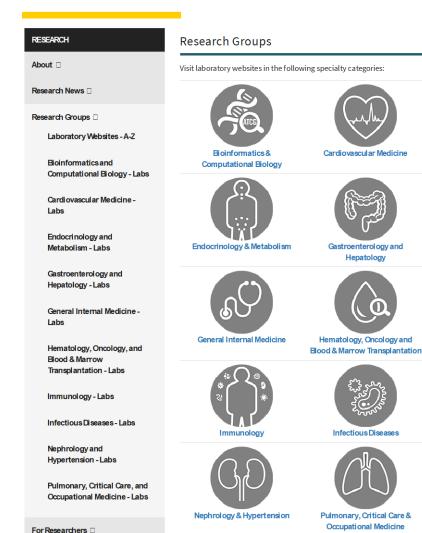
Research Events in Internal Medicine

- Monthly research seminars
- Grand Rounds held each Thursday
- Divisional Grant Rounds
- Internal Medicine Research Day

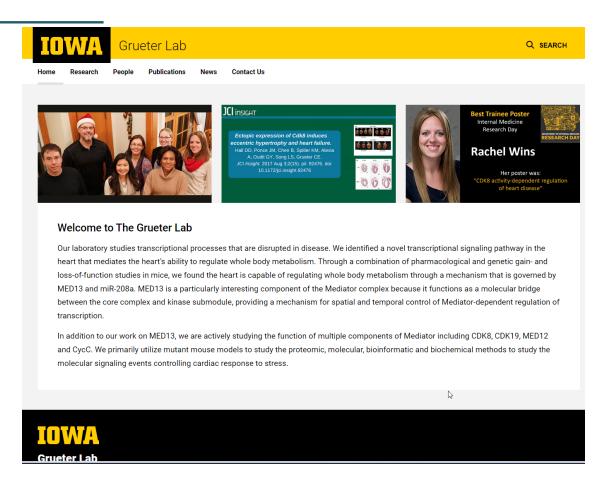


57th Annual Internal Medicine Research Day, 3 Oct 2023

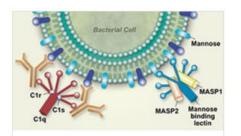
Research Groups-lab websites





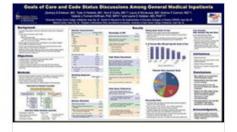






Design & Illustration

Complex illustrations, annual reports, posters, booklets, brochures, patient materials, newsletters, and more



Posters & Printing

Large format printing (conference posters, banners, signs); photo printing



Digital Media Services

Video, live streaming, podcasts, audio production, and more



Editing Services

Manuscripts, grants, abstracts, correspondence, web text, patient materials

Design Center | The University of Iowa (uiowa.edu)

Additional support services

Communications

Trevor Jackson
Director of Communications

Claire McGranahan Associate Editor

Business Analytics

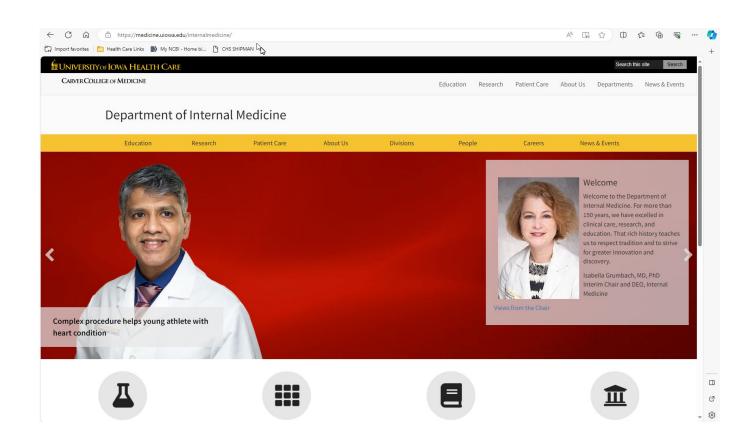
Amy McDonald

Educational Technology Services

Lori Strommer Pace

Database Group

Thomas Callahan Gennadiy Maksymov



Internal Funding Opportunities

CCOM:

- CTSA Inter-Institutional Pilot Funding
- CCOM COVID-19 Pilot Grants
- Pappajohn Biomedical Institute Seed Funds
- Research Bridge Funding
- HCCC Seed Funds

OVPR: Offerings change yearly with announcements made to all faculty.





Welcome to the Department

medicine.uiowa.edu/internalmedicine











We want your feedback!

