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Outpatient In-Basket Education, Monitoring, and Supervision in Internal Medicine Residency Programs

Problem/Topic/Issue of Concern.

Physicians and resident physicians are spending more time interacting with the electronic health record (EHR) than face-to-face patient care. In fact, primary care physicians spend nearly 2 hours on EHR tasks per hour of direct patient care, with 25% of this time spent in their in basket (result management, order entry, and patient communication). Little is known regarding the process of in basket management in resident physicians, and the overall impact on patient care outcomes.

Non face-to-face patient care via the in basket occurs on a daily basis by unsupervised, unlicensed residents. This raises concern for patient safety and the potential for adverse patient outcomes. The ACGME Common Program Requirements for Internal Medicine do not provide guidance for education, monitoring, or supervision of resident in baskets. The 2014 Clinical Learning Environment Review (CLER) Pathways to Excellence recommends residents, fellows, and faculty receive training on appropriate documentation and that programs regularly monitor documentation practices. However, there are no guidelines regarding policies about education, monitoring, and supervision of the in basket for internal medicine trainees.

The purpose of our survey is to assess how residency programs approach in basket management in the outpatient setting. The results will provide APDIM with key information regarding if and how programs ensure their residents are receiving appropriate training and supervision with their in basket. Ultimately, our findings could raise national awareness to accrediting bodies and policy makers to consider establishing programmatic guidelines for in basket management in graduate medical education.

What is the overall research question that you are trying to answer? Alternatively, please state one to three research aims that your proposal intends to accomplish.

- 1. Understand how Internal Medicine (IM) residency programs educate, monitor, and supervise trainee in basket management.
- 2. Collate a list of effective strategies that IM programs employ regarding trainee in basket management.

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Accommodations for Residents: PD Awareness and Practices

Problem/Topic/Issue of Concern.

In 2018, the Association of American Medical Colleges (AAMC) published an updated policy on accommodations in medical education capturing the lived experience of learners and physicians with disabilities. The report calls for disability to become fully integrated into diversity and inclusion discussions at teaching hospitals - advocating that the perspective of physicians with disability contributes to a diverse community. The 2020 ACGME common program requirements states "the sponsoring institution must have a policy, not necessarily GME-specific, regarding accommodations for disabilities consistent with all applicable laws and regulation." In theory providing accommodations to residents is very reasonable, but discussion on the APDIM listserv in March 2021 – when a Program Director (PD) wrote in reporting an intern could not work nights for health reasons - revealed that the implementation of accommodation for individuals is not straight forward. PDs are on the front lines of having to navigate the theoretical and practical. PDs must balance the accommodation needs of an individual resident with the ABIM and RRC regulations, their own program's schedule and internal requirements, their institutions' human resources policy and state legal requirements (American Disabilities Act) in addition to cost consideration and a PD's or CCC's belief of fairness. The March 2021 listserv discussion revealed a diversity of opinions and practices. While the PD's Handbook offers a few pages on residents with disabilities, little is known about how PDs view resident accommodations, their knowledge of the resources and policies available to them, and how they would implement specific cases of accommodation.

What is the overall research question that you are trying to answer? Alternatively, please state one to three research aims that your proposal intends to accomplish.

The aim of the survey questions is to better understand Program Directors' beliefs about accommodation both in theory and in practical application. The difference between the degree to which PDs agree with general policy and how they would apply the policy in their own programs is important for outlining future policies (both nationally and locally). This difference is also important for helping design useful resources for PDs - since accommodations is an area most PDs will encounter infrequently in their careers. The initial questions would ask about PDs agreement with the AAMC policy and the ACGME core program requirements. Next questions would ask if PDs are aware of their own institution's accommodation policy and would assess PDS' knowledge of the resources they would turn to if they had to implement accommodation for a resident. To truly assess PDs practical beliefs, the remaining questions would ask them how they would apply 2 or 3 specific scenarios of accommodations at their own programs. These survey results will help in crafting future policies about accommodation at a national and institutional level and can help AAIM design better resources for PDs. Results may also inform future seminars or sessions at AAIM/APDIM meetings, including information from both PDs and invited experts in workplace disability and accommodations.