Neurosurgery
New Residency Program Administrators Workshop
May 2023- Dallas

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ARANS
Association of Residency Administrators in Neurological Surgery

FUN FACTS:

We have no conflicts of interest to disclose.

- How long in Administrator role
  - Previous medical or GME experience?
- Favorite part of our job
- Hobbies? Changes since COVID?
- Degree in Administrator?
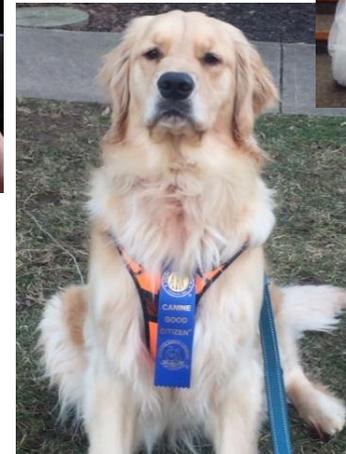
Goals & Objectives:

- Gain an understanding of tools & resources available to you to be successful in your role
- Gain a better understanding of the timelines/deadlines involved in the academic year
- Get a better understanding of your role within Graduate Medical Education
- Gain an understanding of the network available to you

Things to Remember…

- It will take time to learn your role
    - 1st year – getting through your tasks
    - 2nd year – have a better grasp on timeline/tasks overall
    - 3rd year – understanding, tweaking/putting your stamp on things

- Network/Create your support system/mentors
    - Your "pledge class"
    - Other residency administrators at your institution
    - Your PD (and remember you and your PD are a team)
    - Your GME
    - ARANS/Regional ARANS/New Member ARANS
    - It's ok to ask for help!!! Do not be shy about this!

- Learn from your mistakes and give yourself grace

Things that will help you to be successful…

- Review your timeline; set reminders and work ahead to avoid missing deadlines

- Become very familiar with the CPRs (Common Program Requirements)

- Attend national meetings (ACGME, SNS/ARANS)
    - Select courses/breakouts that will help you learn/grow
    - ACGME CPR updates
    - RRC updates

Take a minute to

- **Introduce yourself to your neighbor**
  - **How long as NS coordinator?**
  - **Previous GME experience?**
  - **Hobbies**

If you have extra time,
what super power
would you want to have?
(personally or professionally)

WHAT IS IT ALL ABOUT? (WHY AM I HERE?)

- Alphabet Soup
- Where do I (and my program) fit in?
    - ACGME/RRC
    - Documentation
    - Communication
    - Timeline
    - NRMP
    - ERAS
    - CLER
    - Resident Interviews
    - Site Visit/Self-Study
    - Resources
    - Networking

ALPHABET SOUP

Series of acronyms or abbreviations used in Graduate Medical Education (see attachment – use it for reference)

NRMP

AACOM

FSMB

PGY

APE

ANS

GME

IRB

JCAHO

HIPAA

RRC

MSPE

SNS

ACGME

USLME

FREIDA

ERAS

GMEC

AAMC

IMG

AANS

ACLS

PLA

ICD

CCC

UME

PEC

PALS

NBME

QI

NEUROSURGERY SPECIFIC ORGANIZATIONS

- **ABNS: American Board of Neurological Surgeons**
  - *Certifies Neurosurgeons, Written and Oral Exams*
- **CAST – Committee on Accreditation of Subspecialty Training**
  - *Subspecialty Training & Fellowships; part of SNS, works with ABNS*
- **RRC – Residency Review Committee - Neurosurgery**
  - *Accredits Neurosurgical Training Programs*
- **AANS – American Association of Neurological Surgeons**
  - *Scientific and educational association dedicated to advancing NS specialty*
- **CNS – Congress of Neurological Surgeons**
  - *Leader in education and innovation providing educational and career development opportunities*
  - *SANS*
- **SNS – Society of Neurological Surgeons**
  - *American society of leaders in NS residency education, "Senior Society"*
- **Regional/State Societies**
  - *i.e. New England Neurosurgical Society (NENS), ONS – Oklahoma Neurosurgical Society, Inc., WNS – Western Neurosurgical Society, Southern Society of Neurological Surgeons, Midwest Neurosurgical Society, etc.*

ADMINISTRATOR

Responsible for organizing/managing diverse parts of an enterprise or groups into a coherent or efficient whole.

- Self-Learner
- Resourceful
- Problem Solver
- Critical thinker
- Analytical
- Apply training to real life acti
- Good Communicator
- Flexible/Adaptable
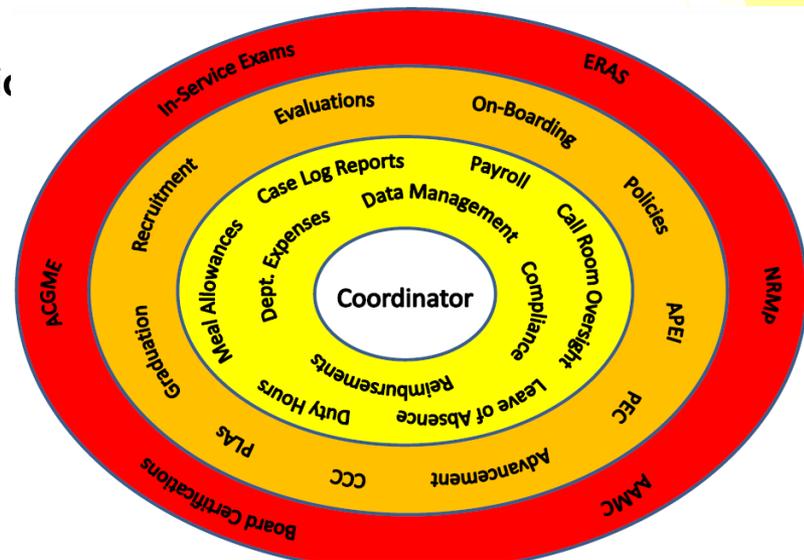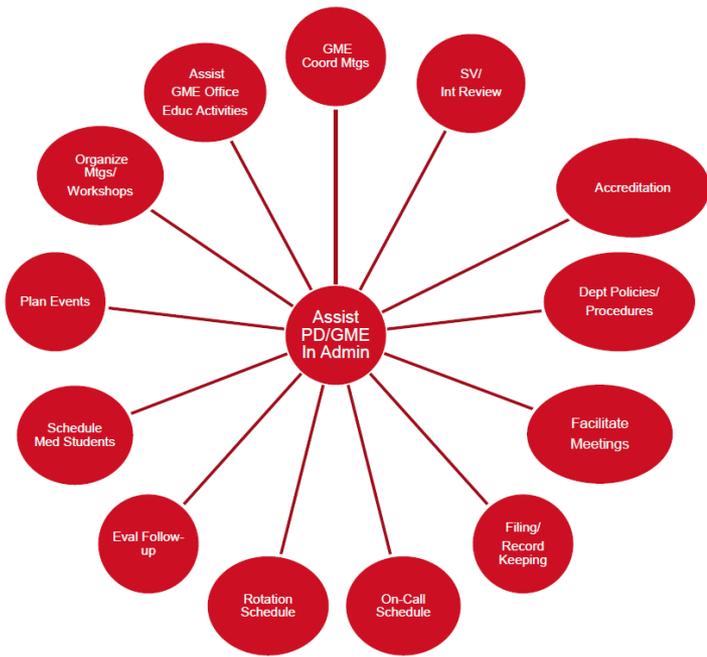
Administrator Responsibilities (ACGME Presentation)

Administrator Responsibilities

The unexpected is never convenient …

If I ignore it, will it go away???

DOCUMENTATION

- One of the most important aspects of being an Administrator: *Organization of your documentation*
    - National Requirements (ACGME, RRC)
        - Milestones
        - Case Logs
        - ADS Annual Update
    - Local GME Requirements (APE, etc.)
    - Program Requirements (how your program decides to meet the common program requirements)
    - Recognition of timelines/deadlines of all of the above
- Documentation helps to show that the program is doing what is required
- Coordination/Management of
    - Groups
    - People
    - Requirements
- Networking
    - Use your administrator peers!
- Consistent naming structure for online file
    - Organize by year
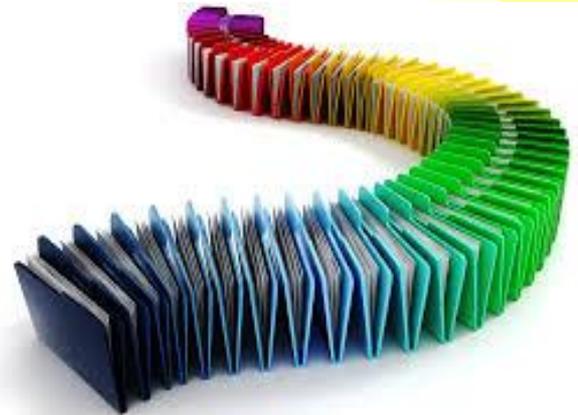
COMMON PROGRAM
and
SPECIALTY SPECIFIC REQUIREMENTS

The ACGME Common Program Requirements are a basic set of standards (requirements) in training and preparing resident and fellow physicians. These requirements set the context within clinical learning environments for development of the skills, knowledge, and attitudes necessary to take personal responsibility for the individual care of patients. In addition, they facilitate an environment where residents and fellows can interact with patients under the guidance and supervision of qualified faculty members who give value, context, and meaning to those interactions. (from www.acgme.org)

- Be very familiar with them
- Break it down by section initially
- Refer to them frequently
- Look at Tracked Changes
- Look at Background & Intent
- Look at Table of Implementation Dates
- Look at FAQs
- Faculty & Residents must know and know when there are changes

ACGME Common Program Requirements:
https://www.acgme.org

COORDINATOR PRIORITIZATION GUIDE FOR WORKFLOW

Higher Consequences	**National**
	• **Deadlines are driven by external organizations**
	• **No flexibility**
		NRMP
		  • **Registration**
		  • **Quota**
		  • **Rank List**
		
		ACGME
		  • **Annual Update**
		  • **Milestones**
		  • **Res/Fac Surveys**
		  • **Case Logs**
			ERAS
			  ***Registration**
			
			AAMC GME Track-FREIDA
			  ***Program Survey**
			  ***Resident Survey**
			
			Board Certifications
			  ***Resident Data**
			
			In-service Exams
			  ***Resident Registration**

	Program Management • **Deadlines driven by ACGME academic year** • **Limited Flexibility**	**Program Letters of Agreement** **Evaluations** **Clinical Competency Committee** **Program Evaluation Committee** **Annual Program Evaluation & Improvement Plan** **Resident On-Boarding/Advancement/Graduations** **Recruitment Season** **Program Policies**	
Lower Consequences	**Daily Operations** • **Deadlines driven by necessity in program management** • **More Flexibility**	**Work Hour Compliance** **Call Room Oversight** **Department Expenses** **Resident Reimbursements** **Meal Allowances** **Employment Compliance** **Payroll** **Leave of Absence** **Data Management** **Case Log Reports**	

Institution: CLER visits, The Joint Commission (TJC)

CLINICAL LEARNING ENVIRONMENTAL REVIEW (CLER)

CLER Pathways to Excellence
Expectations for an optimal clinical learning environment
to achieve safe and high quality patient care

- Component of the New Accreditation System
  - o Addresses six areas:
    - o Patient Safety
    - o Health Care Quality
    - o Care Transitions
    - o Supervision
    - o Well-Being
    - o Professionalism
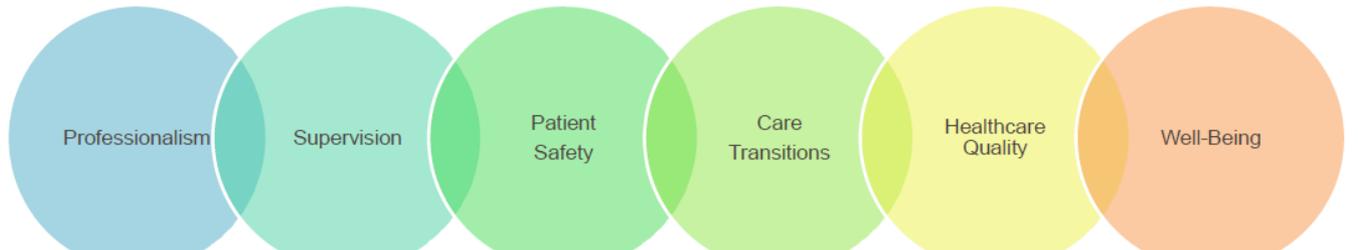
TIMELINE

NOTE:
1st Year   Surviving
2nd Year Recognition of tasks/workflow
3rd Year Comfortable with tasks/workflow; making it your own

RESIDENCY PROGRAM TIMELINE

JULY

JUNE

AUGUST

MAY

SEPTEMBER

APRIL

OCTOBER

MARCH

NOVEMBER

FEBRUARY

DECEMBER

JANUARY

- A To-Do list in timeline form
  - ACGME has one also
- Tweak each year, make notes
- Schedule reminders
- Make your own timeline
- Work in advance
- Know your deadlines
- **Adaptability – COVID-19!**
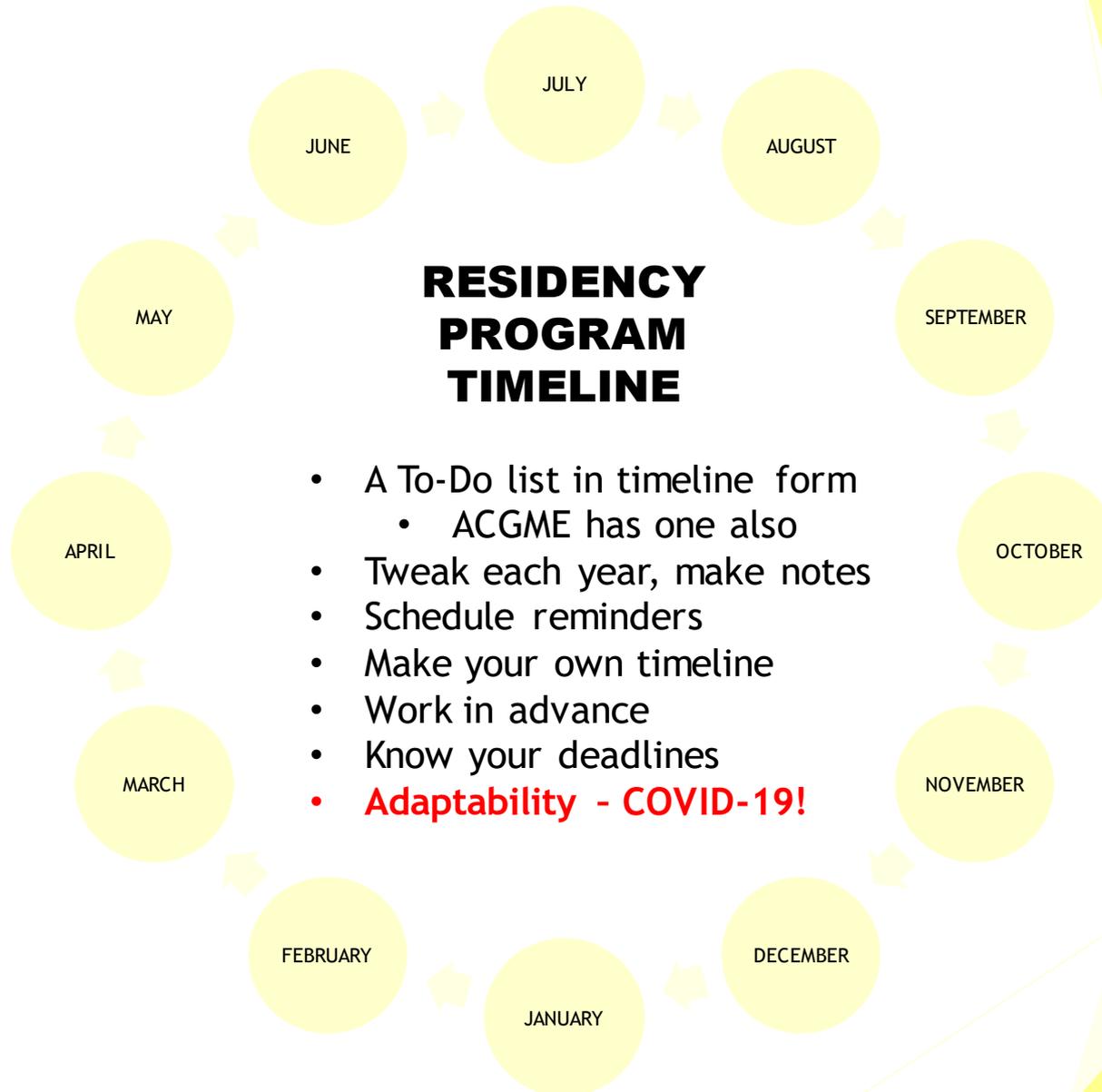
MARCH

- Main Match Day
  - SOAP if needed
- <mark>ACGME Resident/Faculty Surveys Open</mark>
  - Release Date Varies by Specialty (as then will the due da~~

Program

- <mark>ABNS Exam</mark> ERAS Export
- Advancement/Promotion requirements for continuing residents
  - License Renewal Requirements
  - Renewal of Visa Sponsorship
  - Occupational Health reminders
  - <mark>Promotions/Job Descriptions/Contracts/Non-Renewals</mark>
  - Supervision
- Send welcome letter to incoming residents (give faculty incoming resident names/contact info)
- OnBoarding Requirements/Checklist for Incoming Residents – work with GME
  - Licensing
  - HR
  - Occupational Health
  - GME
  - Visa
  - Specific Program Training
  - Access to databases
- <mark>Schedule CCC & PEC Meeting</mark>
- Release Annual Evaluations (coordinate with the timing of your CCC & PEC)
- Schedule Interview dates for next interview season
  - Block faculty calendars
  - Share per ARANS instruction/posted on SNS website in summer (July/Aug)

MARCH

- Match Day/Week!
  - MONDAY –Information is posted to the <mark>NRMP website</mark> …
  - Applicant matched or unmatched information posted
  - Programs find out if they filled all of their positions
  - Locations /institutions of unfilled positions posted

- TUESDAY–SOAP (Supplemental Offer and Acceptance Program)
  - Programs with unfilled positions may enter preference lists

- WEDNESDAY
  - Programs must finalize their SOAP preference lists
  - NRMP offers begin at noon for SOAP applicants

- THURSDAY –Programs obtain match results – <mark>but cannot share info</mark>

- FRIDAY -Match Day!–Applicants receive match results
  - You may contact matched applicants per the time given by NRMP

NATIONAL RESIDENCY MATCHING PROGRAM (NRMP)

- Established in 1950's

- Need for uniform start date for residency programs

- Used to create fair and binding system for submission of ROL

- (Rank Order List)

- Algorithm used is designed to prioritize applicant list (not program)

- Requires an *"All In"* policy

- Different from ERAS (Electronic Residency Application Service – the data/communication/scheduling system)

ELECTRONIC RESIDENCY APPLICATION SYSTEM (ERAS)

- Streamlines Residency Application Process
- Provides applicants ability to build and deliver application
- and supporting materials individually or as a package
- Provides centralized, but flexible solution to residency application
- and documentation distribution process
- Know It, Be Familiar With It
  - Lots of different features and f
- LOR's
  - Only accept what is in ERAS
- Communicate through ERAS

Know RRC meeting dates
if you have changes that
will require RRC approval.
    *PD Changes
    *Site Changes
    *Complement Increase
    *and more!

Meeting dates are listed
on ACGME website
under the Neurological Surgery
subspecialty section.

Know CAST deadlines for fellowships.

Review Committee Agenda Closing and Meeting Dates

MAR 31 2023 — Agenda Closing Date

APR 28-29 2023 — Meeting Date

Applications with completed site visits and interim requests accepted.

AUG 4 2023 — Agenda Closing Date

SEP 7 2023 — Meeting Date

Interim requests only.

DEC 1 2023 — Agenda Closing Date

FEB 9-10 2024 — Meeting Date

Applications with completed site visits and interim requests accepted.

MAR 29 2024 — Agenda Closing Date

APR 26-27 2024 — Meeting Date

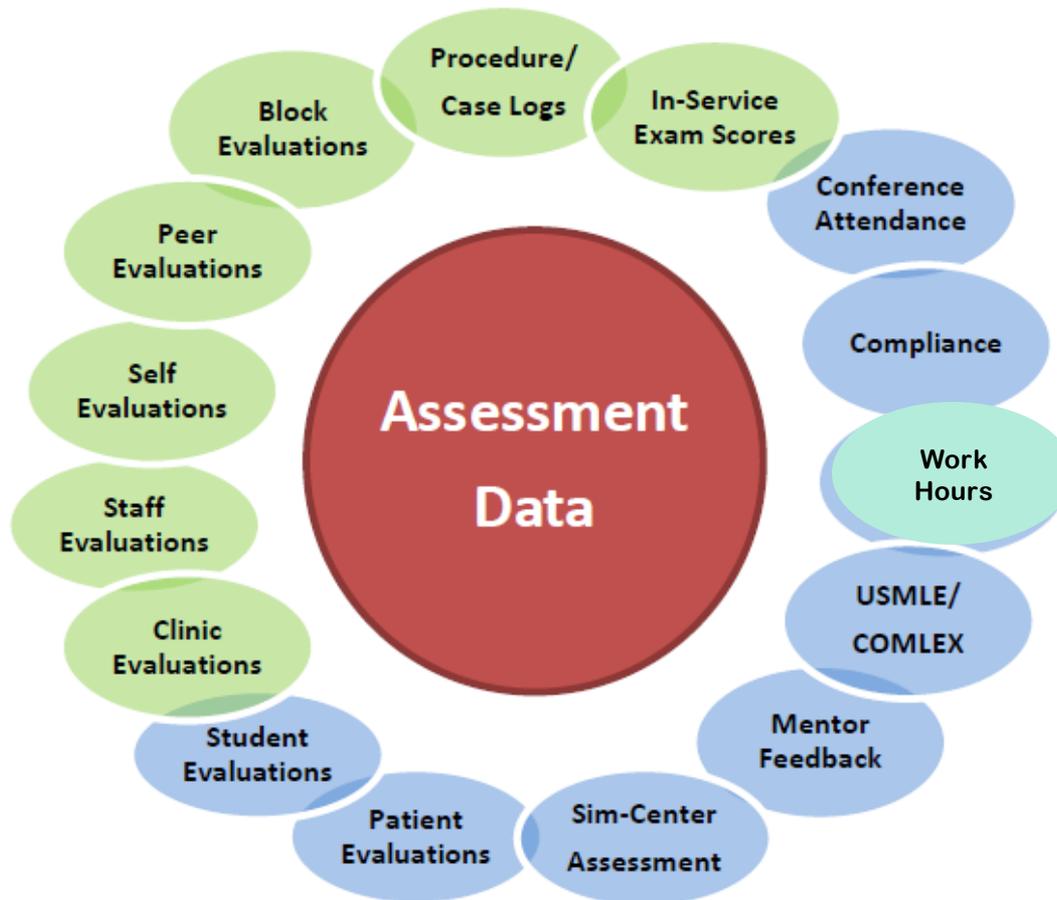Applications with completed site visits and interim requests accepted.

APRIL

- ERAS Registration
- ==ACGME surveys due==
- ==Neuroanatomy exam registration for PGY-2s==

Program

- ACGME Preparation for ADS
  - Request Resident & Faculty Scholarly activities
  - Request updated CVs
  - Major Changes
  - Response to Citations or Areas of Concern
- Preparation for Program Evaluation Committee (PEC) Meeting
  - Program Policies
  - Curriculum, Goals & Objectives
  - Program Letters of Agreement (PLA's) & Master Affiliation Agreement (MAA)
  - SWOT Analysis/Self Study Review
  - Common Program Requirement changes, FAQ changes/updates
  - Updates to Handbook
  - Citations
  - Any other changes
- OnBoarding Requirements/Checklist for Incoming Residents
  - Order supplies as needed
    - Lab Coats
    - Pagers
    - Others as designated by program (board review books, etc.)
- ==Begin CCC Meeting Preparation (schedule meeting if not done in March…)==
- Review annual budget
- Evaluations – make sure you have received them back!
- Confirm rotations for next academic year

CCC Assessment Tools

MAY

- ACGME Milestone Reporting Window Opens (but could be altered as it was this last year)
- ACGME Faculty/Resident Survey Results Released
- AMA/AAMC National GME Census/GME Track/Freida opens

Program

- Building Academic Year in Residency Management Platform (MedHub, New Innovations, etc.)
  - Academic Year & Block Schedules
  - Evaluation Sessions
  - Didactic Sessions
  - Faculty Changes
  - Template
- Budget Management
  - Close out End of Year Expenses
  - Finalize new year expenses if not already done so (find out about any anticipated changes)
  - Pay attention to timing of ordering/paying for items year-to-year
- Releasing Off-Boarding Requirements/Checklist for Graduating Residents
  - Finalize Academic Files (Evaluations, Case Logs, etc.)
  - Prepare Verification of Training
  - Collect Forwarding Information
  - Closing out hospital resources (IT, badges, pager, ID, outstanding EMR tasks, etc.)
  - Unpaid anything (parking, library, etc.)
- ABNS Examination results received
- National GME Census (GME Track Survey) reminder is sent from American Association of Medical Colleges (AAMC)
- Confirm all graduation plans (in person: venue, caterer, gifts, attendance, etc. OR virtual – practice, videos, etc.)
- Schedule Semi-Annual Evals
- Have CCC Meeting (or early June)
  - Make sure you're organized/prepared
- Promotion paperwork, job descriptions, contracts

May

MedHub/New Innovations

- Resident Management System designed to track and
- Document critical program and resident activities

- Upload documentation
  - ERAS application, medical license, training, CV, immunizations, etc.
- Tracks compliancy
  - HIPAA, TB training, Safety, etc.
- Rotation and call schedules
- Work Hours
- Conferences/Didactics
- CCC/PEC Meetings
- Conference attendance

JUNE

National

- ==ACGME Milestone Reporting Window Closes==
- AAMC GME Census – Program Survey Closes

Program

- CCC Meeting (if not held in late May)
- ==Semi Annual Evals==
- OnBoarding Orientation
- Graduating Resident
  - Make sure all tasks are completed
- Close out End of Year Expenses
  - Finalize new year expenses if not already done so
  - Pay attention to timing of ordering/paying for items year-to-year
- Be ready to finalize the year and move on
- Confirm department orientation for *incoming residents* and all continuing residents
  - *Meet with*
    - *PD/Chairman*
    - *Chiefs*
  - ==Expectations==
  - Program Policies
  - Goals & Objectives
  - Rotations
  - Vacations/time away
  - ==Case Logs==
  - Resident Handbook
  - ==Wellness==
  - ==Follow Up Meetings with new interns at intervals early on (August, Sept, Nov possibly)==

JULY

National

- ACGME
  - <mark>Input new residents into ADS – July 1</mark>
  - <mark>Verify/update PGY level for continuing residents</mark>
- ABNS
  - Finalize & submit ABNS forms for graduating residents
  - Graduating Resident Evaluation forms with narrative summary (summative eval)
  - Rotation form – chronological listing of each rotation (showing requirements met)
  - Forwarding addresses of graduating residents
- AAMC GME Census – Resident Survey Opens (for residents)

Program

- Program Evaluation Meeting held (or could be August)
  - Start early in prep, a lot to cover!
- Onboarding should be complete
- Dept get-together to get to know new residents (how will covid restrictions play into a gathering)
- <mark>Meet with new residents</mark> (set reminders or appointments)
  - Initially as part of their orientation
    - Have residents participate
  - Aug, Sept as follow up to go over info again, see how they are doing

AUGUST

National

- ACGME
  - AAMC GME Census – Resident Survey Closes
- NRMP
  - Submit match quotas to NRMP (reminders sent to programs)
- ERAS
  - Make sure you are familiar with ERAS
  - Review interview guidelines/rules
  - View webinars
  - Check templates
- ACGME/ADS
  - Verify and update ACGME ADS data/statistics
    - Should be ongoing throughout the year as changes occur
    - Recognize Scholarly Activity can take some time

Program

- Prepare for Match Recruitment Season
  - Virtual?
    - Practice
      - With faculty and residents, breakout rooms, timing
      - With IT (or consult with them, consider having them as backup during interviews)
  - In Person?
    - Dinner reservations
    - Hotel block of rooms
    - Institutional needs (trash cans, tables, rooms, etc.)
  - SNS guidance/policies for this upcoming recruitment
- Take care of yourself – deep breath before recruitment season starts
  - Some say August the best time for vacation

Connecting the APE, Self Study, and the 10 year site visit—Cleveland Clinic & ACGME

APE (annually) CPR V.C.–V.C.2.a)	SELF–STUDY (every 10 years)	10–YEAR SITE VISIT (12–18 months between Self–Study and site visit)
Resident performance	Program Aims	Program Aims
Faculty development	Strengths	Strengths
Graduate performance	Identify areas for improvement	Areas for improvements progress
Program quality	Opportunities	No data on unresolved improvements
Written, confidential faculty' and resident's evaluation of the program	Threats	Review of Self–Studies with PEC
SWOT Analysis	Based on successive APEs, ACGME survey , ADS	12 documents to have available/ADS update
Progress of previous year's action plan and minutes	ACGME template	Self–Study Summary of Achievements –12 days before visit (8 questions)
Foundation for self study	Assesses ongoing program performance and improvement efforts	Full accreditation site visit– review of all applicable requirements

- Sets direction and priorities
- Gets everyone on same page
- Simplifies decision making
- Aligns activities & priorities
- Communicates mission/aims
- PEC
- Dynamic
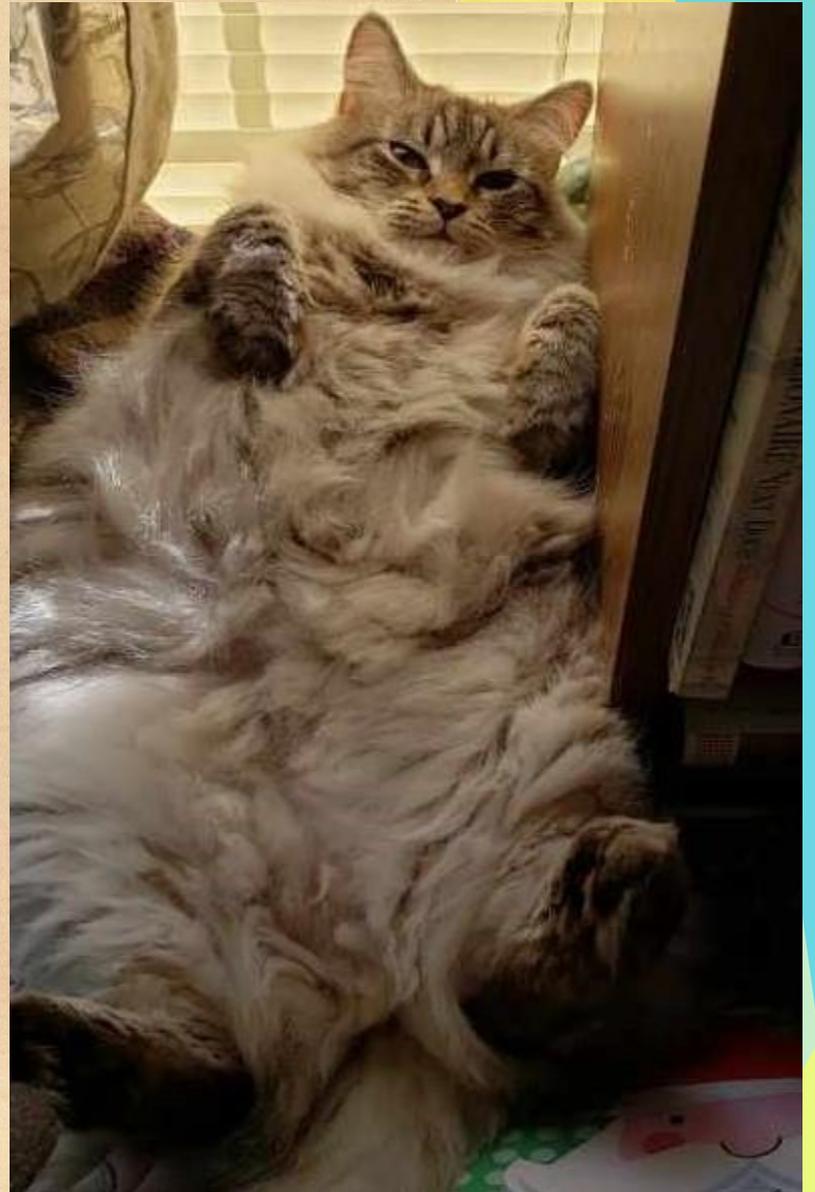
SWOT analysis and Self-Study are both required in the Common Program Requirements (V.C.1.b.4 and V.C.2.)

SELF-STUDY VISIT FYI:
The ACGME will not schedule any programs to begin their Self-Study through July 2022. This deferral period will allow the ACGME to develop a sustainable model for improvement and assurance for its nearly 13,000 accredited programs and allow programs to recover from the impact of COVID-19. Click here for additional FAQs regarding the program Self-Study and 10-Year Accreditation Site Visit.

SITE VISIT FYI:
Accreditation and recognition site visits are conducted using remote technology except in specific circumstances. Sponsoring Institutions and programs will be notified if a site visit will be conducted in person.

SEPTEMBER

- ACGME
  - ACGME ADS Annual Data Submission Closes
- ERAS
  - Opens for main match programs – usually Sept 15

Program

- Recruitment officially begins
- Selection Committee should review applicants; screen out identifiers
- Begin sending out invitations to interview after selection committee makes their decision
- Order supplies for resident interviews
- Begin preparing applicant files

OCTOBER

Program

- Schedule CCC & PEC for Mid Year
- Interview season continues
- Flu Shots become available – pay attention to other rotating institution requirements
- More COVID vaccines - ?
- Reserve room for ABNS Exam (if in person)
- ABNS written board exam registration (online now)

NOVEMBER

National

- ACGME
  - <mark>ACGME Milestone reporting window opens</mark>

Program

- Prepare for CCC Mid Year Assessments
- Prepare for Program Evaluation Committee Meeting (P
- Continue interview season

DECEMBER

Program

- Interview season continues
- <mark>Have CCC Meeting (or January)</mark>
- <mark>Semi-annual resident evaluations (or January</mark>)
- Send out faculty and program evaluations (must be done at least once annually)
- Schedule graduation and send save the date (to block faculty calendar)

JANUARY

- ACGME
  - ==ACGME Milestone reporting window closes==
- NRMP
  - ==Main Match Quota & SOAP Deadline==

Program

- Semi-Annual PEC
- Continue interview season
- Schedule Faculty Rank Meeting
- Have CCC Meeting (if not in December)
- Semi-annual resident evaluations (if not in December)

FEBRUARY

National

- ACGME Resident Survey opens
- ACGME Faculty Survey opens
- NRMP
  - ==Finalize/enter/submit rank order list==

Program

- ==Prepare for ABNS Exam==
  - Review Proctors manual, practice, have backup
  - Lunch – none, virtual, in person
  - Proctor – where if in person, if virtual
  - Temperature room controls – if in person
  - IT contact if issues – if virtual consider IT available during exam
  - ABNS help number readily available
  - Reserve room afternoon/evening before if in person to keep it clean, keep others out

RESANT INTERVIEWS

- Ensure faculty know selection criteria
- Remind all of interview guidelines
- SNS reviewing processes for next interview season
- Diversity

- Applicant Communication –
  - Invitation to Interview
  - Confirmation of Interview
  - Reminder Email (one week out)

- Interview Day –
  - What makes our program stand out
  - How do we share how awesome our program is?
  - Resident led campus and hospital tour
  - Maximum resident attendance at resident dinner
  - Talk about programs unique to campus

CANDIDATE SURVEYS

- *(From OK NS program)*
  - Send survey twice
    - 48 hours after interview
    - After rank lists, before Match Day
  - Response rate is higher if use web-based system
    - (Redcap, SurveyMonkey, etc.)
  - Must be anonymous
  - Use responses/results to improve interview days and
    - Make changes

Break Time! ☺
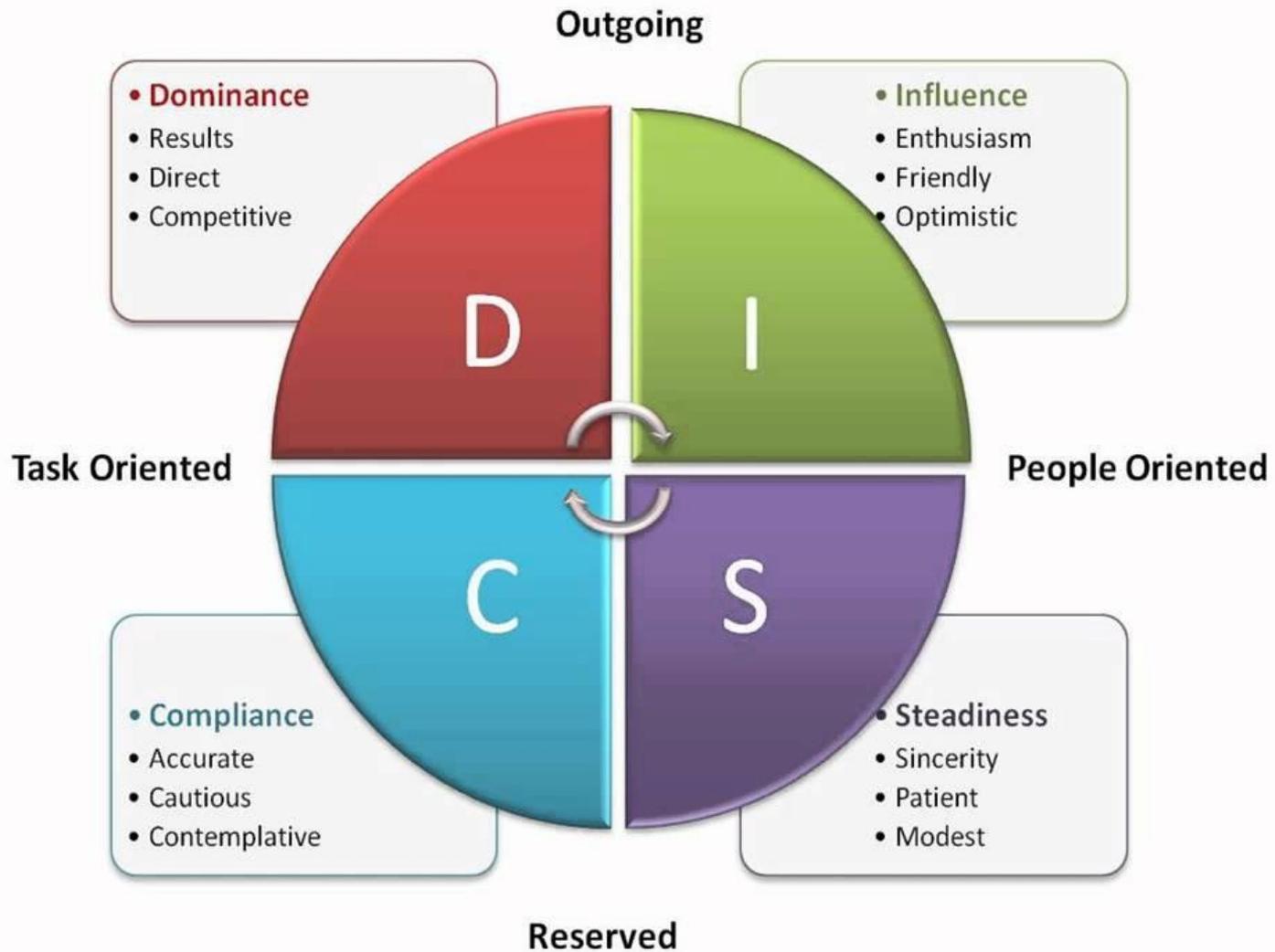
Communication – Know Your Style Know Your Audience

Is he/she:
➢ Multi-tasking or giving full attention?

Does he/she like information that is:
➢ Detail oriented or results only?

Outgoing

- **Dominance**
  - Results
  - Direct
  - Competitive

- **Influence**
  - Enthusiasm
  - Friendly
  - Optimistic

Task Oriented

D

I

People Oriented

C

S

- **Compliance**
  - Accurate
  - Cautious
  - Contemplative

- **Steadiness**
  - Sincerity
  - Patient
  - Modest

Reserved

Communication – Common Ground

➢ How do we accomplish our goals?
➢ Is there a specific list of roles and responsibilities?
➢ Should we meet weekly or monthly?
  ○ Can we schedule as a standing appointment?
➢ Who will be the first responder?
  ○ Emails from residents; tasks to complete for ACGME/GME, etc..

Communication – Listening

➤ Your PD may have their own agenda items (ask)
➤ Active listening
 ➤ Respond when appropriate
 ➤ Convey understanding or ask questions for clarification
 ➤ Body language (observe and learn)

Yes, I am listening …
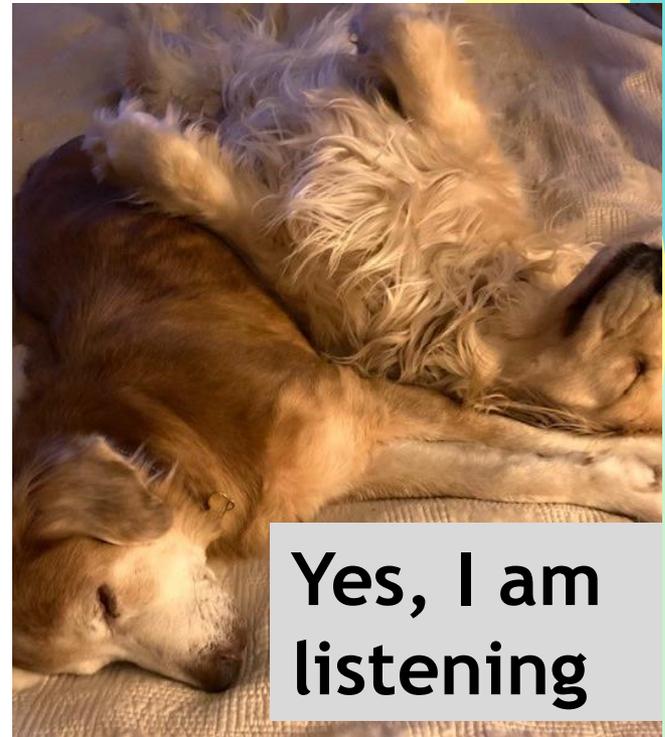
Communication – Action

> Take notes
> Make a plan of action
> Know your individual action items
> (with due dates if possible)

PC	PD	Asst PD	
Program Improvement Items Review with faculty	Review w/ Pam	Checklist meetings Program Data meetings w/PGY 5-7	
Board Exam Certify computers with IT-26th			
Resident Accountables Review case logs/duty hour activity/ clinic attendance Prepare feedback meeting documents/dictations	Review and approve		
ACGME/Web ADS Away rotation documentation Plan CCC Meeting		Plan CCC Meeting	
GME Communication as needed			
Recruiting Finalize rank list; enter NRMP	Finalize rank list		
New Innovations Manage Sessions in NI-Intern rotations Update milestone evals for end of Feb release		Review milestone evals	

Post Meeting

- ➢ Review notes
- ➢ Make calendar updates
- ➢ Think through the details and next steps
- ➢ Communicate with others
- ➢ Actively work toward accomplishing specific tasks

Communicating with Residents

- ➢ Reminders- conferences, duty hours, logs, evaluations….
- ➢ Requests/Notifications- special projects, job postings, courses..
- ➢ Problems- missed deadlines, schedule conflicts
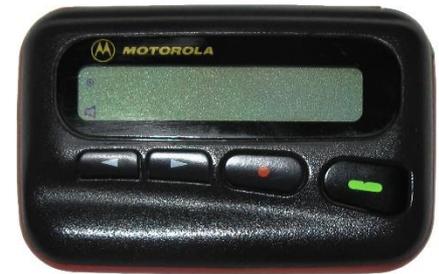
Multi-Generational Communication

Generation	Birthdates	Workforce 2015
Silent (Traditionalists)	1928-1945	3.8 million
Boomers	1946-1964	45.1 million
Gen X	1965-1980	52.8 million
Gen Y (Millennials)	1981-1996	54.0 million
Gen Z	1997+	TBD

Current Residents born 1986-1993 GEN Y

Medical Students 1994-1998 GEN Z !!!

A Struggling Resident …

- Probation/ Remediation Meetings (try to have 3 people in the room- always document the meetings)
- Should be involved in disciplinary action with residents
  - You will be providing documentation and information
  - Know where to access the house staff policies and procedures
  - Know who to speak with your Risk Management Department
    - Keep your GME office informed as well
- Should know about the residents interpersonally (Struggling? Doing well? Personal issues they have shared?)

Things We Hope Don't Happen, But Be Prepared…

Things We Hope Don't Happen – But Be Prepared…

A Struggling Resident …

- Document, DOCUMENT, **DOCUMENT!!!**
- Partner with HR
- Standardized Documentation
  - Evaluations (monthly)
  - Semi-annual reviews with feedback
  - Mid-year formative feedback
  - Individualized Education/Learning Plans (IEP or ILP)
- Good recordkeeping
  - Document struggles
    - Lateness
    - Underperforming
    - Lack of professionalism

Proper/accurate documentation is critical

WELLNESS   *We ALL need it!*

- How many are working from home, back in office, combo of both
- Have you had to alter your wellness routine?
- Since COVID are you paying more or less attention to your wellness – or about the same
- What are some things you are doing to take care of yourself

WELLNESS

We ALL need it!

- Take a lunch
- Get away from your desk
- Take a walk
- Stand
- Stretch
- Listen to some music
- Come to the Annual Program Administrators Meeting
  - Be with your people!
- Access/Join the ARANS website
- NETWORK!

WELLNESS

We ALL need it!

FOCUS – Focus on something pleasant, not on what you can't control (quit watching
news, updates, etc. even if for a brief period of time to recenter yourself, use resident
stay at home tips for things to do)
EXERCISE – exercise releases the feel-good chemicals in your body, helps support a
healthy immune system, and is one of the best ways to reduce anxiety; yoga/stretching
BREATHE – Use deep breathing (*Belly Breathing* … not just breathing through the
nose) to help calm --- 5-10 minutes or even 1-2 minutes
EAT WELL – Nutrition is important – comfort/junk food can make you feel worse in
the long run
SLEEP – try to limit blue light (phone, tv) at least an hour before bed – try deep
breathing/meditate or reading an actual paper book; blue light glasses

RESOURCES

Beth Young (retired), Oklahoma HSC, 5.17.18 SNS Annual Residency Coordinator Conference Presentation "Neurosurgery Residency Program New Program Coordinators Workshop"

Susan Coull & Lioudmila Cruz, Temple University, March 2019 ACGME Annual Conference Presentation "Have No Fear, We Will Make Sense of the Academic Year!"

Pam Lane, Vanderbilt University, Communication Presentation, May 2018 ARANS Annual Meeting New Coordinator Session

RESOURCES

ACGME:

http://www.acgme.org/

What We Do: Milestones, Self Study, Site Visit, CLER, Physician Well Being

Program Directors/Coordinators: Overview, PD Handbook, ADS Common Errors, Policies

Residents/Fellows: ACGME for R/F, FAQs, Complaints, Back to Bedside

Meetings & Educational Activities: Annual Conference, CME, Courses & Workshops, Learn at ACGME, Webinars, Data Collection Systems: Overview, Case Logs, Surveys

Specialties: NS

ACGME Common Program Requirements/Neurological Surgery Program Requirements

www.acgme.org

https://www.acgme.org/What-We-Do/Accreditation/Common-Program-Requirements

ACGME Glossary of Terms:

www.acgme.org

https://www.acgme.org/Portals/0/PDFs/ab_ACGMEglossary.pdf?ver=2018-05-14-095135-583

Coordinator Webinars (and Education/Courses):

www.acgme.org

http://www.acgme.org/Meetings-and-Events/Webinars/articleid/2309

Avoiding Common Errors in the ADS Annual Update:

www.acgme.org

https://www.acgme.org/Program-Directors-and-Coordinators/Avoiding-Common-Errors-in-the-ADS-Annual-Update
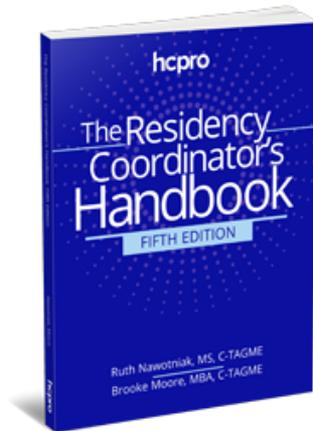
The Residency Program Coordinator's Handbook, Fifth Edition

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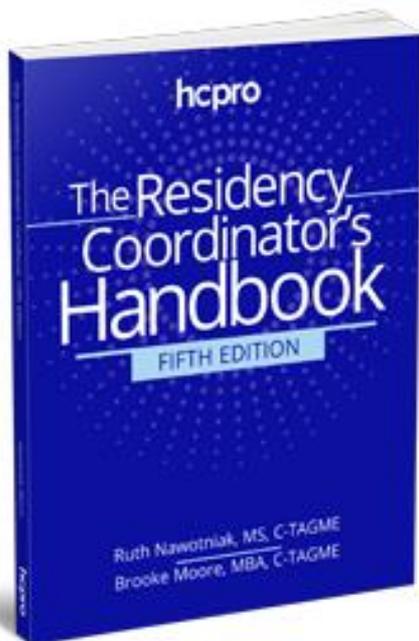## The Residency Program Coordinator's Handbook, Fifth Edition

Ruth Nawotniak, C-TAGME & Brooke Moore, MBA, C-TAGME

Residency program coordinators shoulder the broad responsibility of ensuring their program meets ever-changing accreditation requirements while also making sure residents, faculty, and program directors have all the resources they need. But what about coordinators themselves? They need a resource they can rely on too: a reference that covers the wide-ranging tasks that come up in their day-to-day duties.

The Residency Coordinator's Handbook, Fifth Edition is that resource. It offers residency program and fellowship coordinators the education and field-tested solutions needed to ensure a successful and efficiently run program. With contributors from an array of backgrounds, this book offers a global, multispecialty view of coordinator duties. Coordinators across the career spectrum will benefit from the guidance, sample policies, and program tools they can implement immediately.

This product will help residency program coordinators:

- Manage a training program that meets and exceeds ACGME requirements
- Define and elevate the role of the program coordinator
- Understand GME and related terminology
- Manage recruitment, orientation, and credentialing processes
- Create an environment that supports coordinators, faculty, and resident well-being
- Develop a strong relationship with their program directors
- Identify the key components and structure of program accreditation

Table of Contents:

CREDITS

Milestones:
https://www.acgme.org
https://www.acgme.org/Portals/0/PDFs/Milestones/NeurologicalSurgeryMilestones.pdf

ARANS website
www.nsadmin.org .

In order to access the Members Site, please register with the url:
https://nsadmin.org/membership-account/membership-checkout/?level=1 [nsadmin.org].

ARANS website contact is Beth Battisti – batisse@ccf.org

I'm A New Coordinator, Now What? University of Vermont Medical Center GME Powerpoint from ACGME 2020 Annual Meeting
ACGME Policies and Related Materials
www.acgme.org
http://www.acgme.org/About-Us/Policies-and-Related-Materials

Best Practices for Interviews
www.aamc.org
https://www.aamc.org/download/469536/data/best_practices_residency_program_interviews_09132016.pdf

A Moment of Appreciation

*We must find time
to stop
and thank the people
who make a difference in our lives.*

John F Kennedy

You make a difference.
You are appreciated.
This group makes a difference in our lives.

Good Luck!