

FROM THE SOCIETY: PART II

A Medical Education Interest Group Among Internal Medicine Residents

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Many internal medicine (IM) trainees plan careers as clinician-educators and aim to develop as teachers during residency. Unfortunately, opportunities to gain experience and mentorship in the field during this busy time are often difficult to visualize and seize. To meet the needs of Massachusetts General Hospital (MGH) IM residents with interests in teaching and education, we founded the Residents Interested in Medical Education (RIME) group in January 2013. We believe that this resident-led group has had a positive impact on our residency program and that other IM programs without a designated medical education track could benefit from the organization of such a group.

The mission of RIME is to unite residents interested in medical education in order to develop their teaching skills, facilitate medical education research projects, support career planning, and promote positive curricular changes for the larger community of residents and medical students. The group includes residents from all three classes and is led by three upper-level residents. In addition to meeting roughly quarterly, the group communicates frequently over an e-mail listserv that includes more than 70 residents as well as interested faculty members and administrators.

In order to implement its aims in resident skills and career development, curriculum redesign, and educational research, RIME has assumed several core roles:

- *Advertising and facilitating access to available teaching activities.* We created a cloud-based, modifiable spreadsheet that lists each teaching activity across the residency program and medical

school on a separate page.

The leaders for each individual activity utilize the centralized spreadsheet for scheduling and generating group e-mail lists from which to solicit involvement in future sessions. Each page provides a description of the teaching role, relevant contact information, and an up-to-date schedule that identifies open slots and allows for enrollment on the same page. Teaching opportunities include intern simulation sessions, medical student case conferences, chalk talks at student-run clinics, and physical exam rounds.

- *Liaising with residency program and medical school clerkship leadership to create new roles for resident-teachers.* By advocating for residents' roles as educators, RIME has helped create new teaching opportunities such as resident-led case presentations at noon conference, one-on-one medical student coaching, and resident-authored case summary notes from daily case conferences.
- *Increasing resident participation in existing faculty development opportunities.* Many academic institutions have robust faculty development programs that include didactics and workshops in educational topics. Residents are often welcome to attend but remain unaware of these sessions. Increasing this awareness via an e-mail listserv or easily accessible posting location—such as the spreadsheet mentioned above—allows residents to take advantage of existing resources to improve teaching skills.

- *Creating and running a residents-as-teachers elective.* Given a high level of interest for intensive resident-as-teacher training in our program, we designed a two-week immersion elective that is offered twice each academic year. Each iteration has included 10 to 15 residents and more than 10 faculty members. In addition to training residents, the course also serves as a springboard for medical education research, as its methodologies are being studied and presented at conferences.
- *Helping to redesign residency curricula.* After gathering residents' feedback on the current residency didactic curriculum, group members met with program leadership and subspecialty core faculty members to improve existing content. Through these conversations, we designed new formats for didactic information delivery such as interactive small-group case-based noon conference sessions and hands-on physical exam "skills reports" instead of case-based sessions during resident conference.
- *Generating medical education research projects.* RIME group members developed several medical education research projects on subjects such as peer observation among residents, noon conference effectiveness, and debriefing training for simulation sessions.
- *Enhancing the medical student experience.* RIME members worked with clerkship directors and administrators to improve written logistical guides to ward services, conduct orientation

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sessions, and work with students individually on clinical skills and presentations.

- *Recruiting prospective interns.* After recognizing that advertising program offerings in medical education could aid recruitment of desirable intern candidates, members of RIME started co-leading medical education interest sessions for applicants on interview days. Every applicant also receives a brochure created by RIME members that details teaching and skills development opportunities in our program.
- *Optimizing career development opportunities.* RIME has created a formal community for like-minded residents interested in medical education. The group enables members to interact with faculty as project or career mentors, creating valuable relationships and networks. Residents considering careers in medical education gain understanding of and support for possible career paths.

Maintaining a broad vision of the RIME group's purpose taught us many valuable lessons. We learned that centralization of teaching opportunity enrollment on our cloud-based spreadsheet increased the overall involvement of residents in peer and medical student teaching; more than half of our 160 residents volun-

teered for at least one advertised teaching session in 2013-2014. We garnered significant support from program leadership as they saw a high level of interest from residents. The group also became an important resource to program leadership by providing feedback on existing curricula, generating a pool of peer educators, and stimulating innovation and quality improvement in residency curricula. The two-week resident-as-teacher elective has achieved maximal resident enrollment since its inception, and teaching faculty remain very interested in leading workshops during the course. Above all, RIME remained resident-led with group members initiating all projects and liaising directly with faculty members.

Despite our successes, there were also opportunities for improvement. When we started the group as residents, we did not conduct an initial needs assessment, which may have helped us better target our efforts. Next, the group has remained entirely resident run but could benefit from more focused faculty involvement to ease the yearly transition of resident leadership. Finally, more regular group meetings (e.g. every one to two months) in the last year have enhanced communication among members and accountability from project leaders.

RIME has had a positive cultural impact across the IM residency program, increasing the focus and en-

thusiasm surrounding education. With benefits to residents, students, and the institution as a whole, a group similar to RIME can be an asset to any training program. Based on our experience, we have identified the following tips for those interested in creating a similar group at their institution:

- Identify a core group of residents from all classes who are interested in medical education and in serving as group leaders.
- Identify a core group of enthusiastic, experienced, and available faculty to serve as mentors, including an official faculty sponsor.
- Conduct a program-wide needs assessment to address medical education activity and innovation.
- Write a clear mission statement.
- Set specific annual goals for the group with embedded structural mechanisms to assess progress.
- Identify pre-existing resident teaching opportunities, and publicize these in a centralized location.
- Work with faculty and chief residents to identify new venues for resident-led teaching.
- Create a structure for networking, mentorship, and career development.
- Consider supplementing existing resident-as-teacher curricula within the program.

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