Health Equity and Graduate Medical Education

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IOM Roundtable on the Promotion of Health Equity and Elimination of Health Disparities.
Graduate Medical Education in the U.S.

- 9,600 programs; 121,600 residents/fellows

- Accreditation Council for Graduate Medical Education (ACGME) is a private, non-profit organization that reviews and accredits Graduate Medical Education programs and the institutions that sponsor them.
ACGME Mission

• We improve health care and population health by assessing and advancing the quality of resident physician’s education through accreditation.
ACGME Strategic Priorities

• Increase the accreditation emphasis on educational outcomes
• Provide a structured approach to evaluating the competency of all residents and fellows.
• Foster innovation and improvement in the learning environment
• Clinical Learning Environment Review
Clinical Learning Environment Review (CLER) Goals:

- Enhance the safety and quality of clinical care and remove health disparities, both today in the teaching environment, as well as tomorrow in the future practice of our graduates.
- Continually assess and improve the environment in which the US physician workforce is educated.
CLER Visits

• Provide on-site review and feedback on the learning environment
• Provide opportunities for sponsoring institutions to demonstrate leadership in patient safety, quality improvement and reduction in health care disparities.
CLER Pathways to Excellence

• Pathways promote discussions and actions that will optimize the clinical learning environment.
• Pathways are designed as expectations, not requirements.
• Each pathway has a series of key properties that can be assessed for engagement of resident, fellow or faculty.
CLER Quality Pathway #5

- Resident/fellow and faculty member education on reducing health care disparities.

- Formal educational activities that create a shared mental model with regard to health care quality-related goals, tools and techniques that are necessary for health care professionals to consistently work in a well-coordinated manner to achieve a true patient-centered approach.
CLER Pathway # 5 Properties

Teach residents/fellows and faculty members

1. to identify and reduce health care disparities relevant to the patient population served by the clinical site.

2. cultural competency relevant to the patient population served by the clinical site.

3. know the clinical site’s priorities for addressing health care disparities.
CLER Pathway # 6

- Resident/fellow engagement in clinical site initiatives to address health care disparities.
- Experiential learning is essential to developing the ability to identify and institute sustainable systems-based changes to address health care disparities.
CLER Pathway # 6 Properties

• Residents/fellows are engaged in QI activities addressing health care disparities for the vulnerable populations served by the clinical site.
• Residents/fellows are engaged in defining priorities and strategies to address health care disparities specific to the site’s patient population.
Evaluating competency of all residents and fellows

6 core competencies recognized by all specialties:

- medical knowledge,
- patient care,
- interpersonal and communication skills,
- professionalism,
- problem-based learning and improvement,
- system-based practice.
Milestones are a roadmap to competency

- Milestones describe **performance levels** residents are expected to demonstrate for skills, knowledge, and behaviors in the six competency domains.

- Milestones lay out a **framework of observable behaviors** and other attributes associated with residents’ development as physicians.
Milestones (con’t)

• Developmental – progressive over time
• Five levels – no prescribed speed at which residents must progress
• Levels do not refer to post-graduate year or year within a program
• Level 4 is a target for graduation – program director decides when a resident is ready to graduate/independent practice.
• Level 5 recognizes lifetime progression
Milestones Variability

- Each specialty developed its own milestones through a long consensus process.
- Over 900 volunteer physicians involved in the development of the milestones.
Urology – Communication Milestones

• “Communicates effectively with patients and families with diverse socioeconomic and cultural backgrounds”
• “Demonstrates sensitivity to differences in patients, including race, culture, gender, sexual orientation, socioeconomic status, literacy and religious belief”
• Level 1 knows importance to Level 4 consistently and capably exhibits….
Family Medicine – Professionalism Milestones

- Level 1 – “Recognizes impact of culture on health and health behaviors”
- Level 3 – “Identifies health inequities and social determinants of health and their impact on individual and family health”
• Level 2 – “Is aware of common socioeconomic barriers that impact patient care”
• Level 2 – “Demonstrates awareness of need for coordination of patient care and patient advocacy”
• Level 4 – “Effectively communicates within hospital/clinic to advocate for patient needs”
• Level 2 – ”Utilizes effective verbal and non-verbal communication strategies (including active listening, augmentative communication devices, interpreters, etc.).”

• Level 3 – “Effectively educates and counsels patients and families, utilizing strategies to ensure understanding (e.g., “teach back”).”
Summary

- ACGME is committed to “Improving health care and population health through reducing health disparities”.
- This is a goal for the institutions under the CLER program and for individual residents and fellows through competency based educational milestones.
Questions?

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For more information visit
www.acgme.org