

Quarterly Newsletter



APD Executive Committee

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Check out the [APPD monthly bulletin](#) to stay informed!

Resources on Strategies to Promote Learner Autonomy on Rounds and During Mentorship

Journal Article:

Promoting Resident Autonomy During Family Centered Rounds (FCR). (Beck, Kind et al. 2016)

Qualitative study of attendings and residents at tertiary care academic hospital. Goal of identifying strategies used by attending physicians to promote resident autonomy during FCR.

- At start of FCR: Framing expectations / using nonverbal signals. (2) before FCR – pre-rounds huddle / detailed planning of rounds - logistics and teaching. (3) During FCR - deliberate positioning / delegating teaching / allowing flexibility (allow residents to develop and carry out own plan if not putting patients at harm) / relinquish control (allow residents to answer questions first). (4) After FCR - promoting reflection / facilitating feedback

Workshop:

Empowering Senior Residents as Leaders and Teachers During FCR. (Weisgerber, Toth, and Aylor, 2012:

<https://www.appd.org/meetings/2012SpringPres/WS9Slides.pdf>)

Save the Dates

September 26-27, 2019

APPD Fall Meeting
Arlington, Virginia

March 30-April 2, 2020

APPD Spring Meeting
San Diego, California

Wellness Corner

Are you a runner? Are you looking for a fun themed race?

Check out these websites:

Rock and Roll Marathon Series – infuse music with running:
[Rock and Roll Running Series](#)

runDisney – run races in the Most Magical Place on Earth:
[runDisney](#)

Additional “trendy” workout options:

[OrangeTheory Fitness](#) – run, row, and lift your way to fitness

[Peloton](#) – a stationary bike that can turn your basement into a spinning class

ROUNDING like a NINJA

Promoting Senior Resident leadership, teaching, family interactions, assessment/plan formulation and efficiency

the 4 Ss for Faculty

Silence

(be) **Second**

Safety

Secret Moves

Quality Rounds Initiative

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ROUNDING like the KARATE KID

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the 4 Ss for Senior Residents

Speak-Smile-Wave

Steal First

Safety

Secret Moves

Quality Rounds Initiative

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the 4 Ss for Faculty

Silence

- Redirect/promote eye contact toward senior
- Avoid inappropriate interruption
- Wait until the end to give input
- Opportunity spaces
- Encourage SR to answer family's questions

(be) **Second**

- Senior enters room first
- Senior introduces self/team
- Senior talks first: faculty is 2nd interrupter
- Senior's opinion is first on assessment/plan
- Faculty in non-dominant position

Safety

- Give positive feedback/senior affirmations
- Have fun
- Validate senior's ideas to family
- Gentle corrections/clue-questions
- No micromanaging
- Senior/faculty discuss as colleagues

Secret Moves

- WWW to teach problem formulation: (What is going on? What should we do? Why?)
- Encourage SR to demonstrate exam
- Facilitate good team discussion and communication
- Actively involves learners
- Efficiency moves: (SR plans order, 1-2 teaching points, use hallway special presentation styles)

the 4 Ss for Senior Residents

Speak-Smile-Wave

- Demonstrate acquired patient knowledge
- Ask intern/student for info/clarification
- Guide/redirect presenter
- Summarize
- Actively listen to family & talk with them
- Smile/play/interact with the patient

Steal First

- Senior enters room first
- Senior introduces self/team
- Senior talks first: first interrupter
- Give opinion first on assessment/plan
- Make teaching points

Safety

- No inappropriate interruptions of presenter
- Give positive feedback/use affirmations
- Have fun
- Gentle corrections/clue-questions
- Senior/faculty discuss as colleagues

Secret Moves

- WWW to teach problem formulation: (What is going on? What should we do? Why?)
- Show/demonstrate exam technique/findings
- Facilitate good team discussion and communication
- Actively involves learners
- Efficiency moves: (SR plans order, 1-2 teaching points, use hallway special presentation styles)

Effectively Mentoring Residents as an APD ([adapted from APD Handbook](#)):

One of the joys of being an APD is the opportunity for more direct mentoring with residents. Here we highlight some of the literature on what it means to be a good mentor, and discuss approaches to mentor effectively as APDs.

General strategies for mentoring: Outstanding mentors in medicine share similar characteristics (Cho et al.) including:

1. Admirable personal qualities, such as enthusiasm, compassion, and selflessness
2. Acting as a career guide, offering a vision but purposefully tailoring support to each mentee
3. Making strong time commitments with regular, frequent, and high-quality meetings
4. Supporting personal/professional balance
5. Leaving a legacy of how to be a good mentor through role modeling and instituting policies that set global expectations and standards for mentorship

Roles of a mentor in GME may be broad (Woods et al.) and may include serving as a:

- Listener
- Facilitator
- Goal setter
- Advocate
- Collaborator
- Career guide
- Challenger
- Role model

Specific Strategies for Mentoring as APDs: Given the broad roles that APDs may assume as mentors to residents, below we share some approaches to consider.

Define designated mentees

- Larger programs often divide their residency into smaller groups to facilitate designated mentor-mentee relationships among the PD/APDs.

Share longitudinal relationships

- Mentor designated residents throughout their training to discern needs and recognize patterns to support them.
- Facilitates writing strong letters of recommendation, providing job references, etc. Show you care – connect with residents as people 25
- Mentoring in residency should be grounded in strong, caring relationships, just as in other aspects of life. “No one cares how much you know until they know how much you care,” an adage attributed to Theodore Roosevelt, encapsulates why caring matters.
- Consider keeping brief notes about residents handy to remember their interests, partners, birthdays, etc.
- Send emails to acknowledge successes, birthdays, and to periodically check in.

Teach mentees how to be successful “managing up”

- Coach mentees on how to be an active participant and get the most out of their mentor-mentee relationships with you and with others.
 - o Defining and asking for what they need
 - o Asking questions and defining meeting agendas

Advocate within your program to have the time and space to be a good mentor

- When doing this right, it is time consuming! Consider ways of finding designated time to fulfill this role well

APD Spotlight: Dr. Angela Veesenmeyer

Angela is an Associate Program Director for the Valley Children's Pediatric Residency Program in Madera, CA and an affiliated Assistant Professor at Stanford University. Her clinical role is as an infectious disease specialist and she has published several articles on various ID topics. Angela has served on the APPD Spring Meeting Program Committee, working to help choose the abstracts and workshops presented at the meetings. She has also presented several workshops at APPD Meetings.



Share Warehouse Spotlight:

Curriculum: Handoff Communication Workshop

Authors: Dr. Sybil Pentsil

Goal: To give learners a practicum on the thinking and medical decision-making knowledge that goes into properly transitioning a patient from one provider to another.

Approach: Workshop designed for trainees to be given in a 2.5 hour block. Learners will use data, medical knowledge, and the IPASS model to work through various patient care transition points. Reviewing this in the step-wise process provided will give learners a framework for how to use the same principles in real patient scenarios. The submission comes with a robust instructor/facilitator guide with examples.

Check out the [Share Warehouse](#)

Newsletter Ideas or Feedback for APD Executive Committee?

Please click on the link: [Newsletter Ideas](#)

Scholarship Opportunities: LEARN Studies

Read more about the current APPD LEARN studies listed below and how you can get involved by clicking here:
[APPD LEARN Studies](#)

Childbearing and parenthood decisions in pediatrics

Synopsis: the variability in use and length of parental leave in Pediatrics residency programs and associations with educational and parenting outcomes.

Do pediatric boot camps improve performance during early internship

Synopsis: Investigate whether participation in a pediatric-specific boot camp improves performance during initial inpatient Pediatrics or NICU rotations and after 6 months of internship.