



Children's
Healthcare of Atlanta

Practice Change and Education: Outcomes from the Addition of a Diversity, Equity, and Inclusion Series to Pediatric Grand Rounds



EMORY
UNIVERSITY

Michelle Wallace MD, Anthony Cooley MD

Department of Pediatrics, Emory University School of Medicine, Children's Healthcare of Atlanta, Atlanta, GA

Background

The murder of George Floyd and other racial injustices during a pandemic brought the topics of bias and inequity to the forefront of the medical community. In response, many academic institutions enhanced the curriculum of trainees and faculty to address diversity, equity, inclusion, and justice (DEI). The concept of grand rounds has been credited to Dr. William Osler of John Hopkins Medical School (1). Since 1889, numerous institutions have evolved the format and content from patient presentations to include topics that stimulate professional development by fostering emotional intelligence, social engagement, and professional competence (2,3,4). This has been successful at our own institution as well as others suggesting that the well-established forum of Grand Rounds can be used to bridge a gap in physician education in DEI.

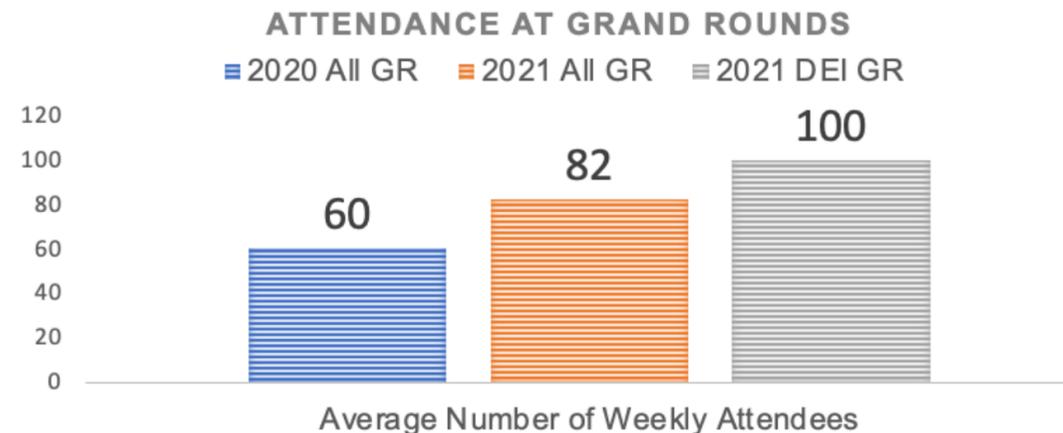
Methods

Children's Healthcare of Atlanta (CHOA) sponsors Continuing Medical Education (CME) for Pediatric Grand Rounds (GR) at three centers. As a primary teaching site for the Department of Pediatrics (DOP), Egleston's GR engages students, residents, and faculty in the Emory School of Medicine. Although already offering periodic collaborations, beginning in 2018, the DOP Diversity and Inclusion (D&I) Committee and CME leadership committed to an annual DEI GR. With the formation of CHOA DEI Council in June 2020, enhanced education was identified as a priority after surveying physicians and staff. In December 2020, CME leadership collaborated with CHOA and DOP D&I leaders to further expand education. On February 24, 2021, these teams co-hosted the inaugural "Egleston Grand Rounds: Diversity, Equity, and Inclusion Series," followed by three additional sessions throughout 2021. See Table 1 for topics. Attendance was tracked and compared to other GR sessions. Follow-up surveys asked participants to identify performance changes.

Table 1. Quarterly Topics and Speakers

Topic	Speaker
Pandemics and Policing: On Racism and Child Health	Rhea Boyd, MD, MPH
The Myth of Meritocracy: How Our Selection Processes Perpetuate Inequity & Steps We Can Take to Rectify It	Jennifer Spicer, MD, MPH
Revisiting the Flexner Report: Unintended Consequences	Helen Hughes Evans, MD, PhD Taryn Taylor, MD, MEd, FAAP, FACEP
Diversity and Wellness	Sheryl Heron, MD, MPH, FACEP

Figure 1. Attendance at Grand Rounds



Outcomes

Attendance at Diversity, Equity, and Inclusion (DEI) GR exceeded other sessions. Average attendance was 100 participants, compared to 82 for all GR in 2021. Overall attendance in 2021 was better than in 2020, with averages of 82 and 60, respectively (Figure 1). Without other changes in 2021, the DEI Series may have amplified interest in GR. In addition to improved reach, these GR were impactful with participants identifying practice changes (Table 2). Attendees reported intentions of addressing bias in recruitment and evaluation and of being mindful of the present-day impact of historical events

Table 2. Practice changes reported

- Be more mindful of my biases as I interview candidates for fellowship
- As someone who serves on an admission/recruitment committee, I plan to share this information with my team and intend to make changes to our process
 - Be more cognizant of the language I use when writing letters of recommendation
 - Examine my implicit bias more when hiring
 - Review letters of recommendation for gendered language
- Better understanding of unintentional impacts of Flexner report and how this will impact recruiting and retention efforts and overall medical education opportunities
- Have some of our providers get engaged in pipeline programs to increase diversity

Conclusion and Future Directions

The DEI Series enhanced GR by addressing an identified gap in education. Performance changes and increased attendance rates support further expansion of this offering. Starting 2022, this quarterly series will add a second site and time for each session.

References

1. Osler, William. "The natural method of teaching the subject of medicine.." *JAMA* 36,24 (1901): 1673-1679.
2. Mueller, Paul S et al. "Current status of medical grand rounds in departments of medicine at US medical schools." *Mayo Clinic proceedings* vol. 81,3 (2006): 313-21. doi:10.4065/81.3.313
3. Dolcourt, Jack L et al. "Learners' decisions for attending Pediatric Grand Rounds: a qualitative and quantitative study." *BMC medical education* vol. 6 26. 27 Apr. 2006, doi:10.1186/1472-6920-6-26
4. Lewis, Donald W. "Are pediatric grand rounds dead?." *The Journal of pediatrics* vol. 160,5 (2012): 711-2. doi:10.1016/j.jpeds.2012.01.034