<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1854</td>
<td>Precursor of Emory School of Medicine</td>
</tr>
<tr>
<td>1892</td>
<td>Grady Memorial Hospital Built</td>
</tr>
<tr>
<td>1910</td>
<td>Emory’s Precursors “fail” in the Flexner Report</td>
</tr>
<tr>
<td>1917</td>
<td>Emory University School of Medicine founded</td>
</tr>
<tr>
<td>1929</td>
<td>Evangeline Papageorge - 1st SOM female faculty member</td>
</tr>
<tr>
<td>1943</td>
<td>Elizabeth Gambrell – 1st female faculty member</td>
</tr>
<tr>
<td>1963</td>
<td>Hamilton Holmes – 1st African-American medical student</td>
</tr>
<tr>
<td>1968</td>
<td>Marshalyn Yeargin-Allsop – 1st African-American medical student</td>
</tr>
</tbody>
</table>
| 2020... | }
Medical Education Programs

• Undergraduate Medical Education
  • MD (+/- PhD, MPH, MSCR, MA –bioethics)
  • Doctor of Physical Therapy
  • MMSc (Physician Asst, Anesthesia Asst, Genetic Counseling)
  • BMSc (Medical Imaging)

• Graduate Division of Biologic and Biomedical Sciences (GDBBS)
  • PhD and MSCR

• Graduate Medical Education (GME)
• Continuing Medical Education (CME)
Medical Education Leadership

J. William (Bill) Eley, MD, MPH, Executive Associate Dean
Marilane Bond, MEd, EdD, MBA, Associate Dean

GME
Maria Aaron, MD, Associate Dean
Phillip Shayne, MD, Assistant Dean

Grady Health System
Jaffar Khan, MD, Assistant Dean

UME
Ira Schwartz, MD, Associate Dean, Director of Admissions
Erica Brownfield, MD, Associate Dean, Chair, Executive Curriculum Committee
Joel Felner, MD, Associate Dean, Clinical Education
Gordon Churchward, PhD, Assistant Dean
Douglas Ander, MD, Assistant Dean, Allied Health and IPE
Hugh Stoddard, PhD, Assistant Dean, Medical Education

CME
Nathan Spell, MD, Associate Dean
Laney Graduate School

- Graduate Division of Biological and Biomedical Sciences
  - Cancer Biology
  - Genetics and Molecular Biology
  - Immunology and Molecular Pathogenesis
  - Microbiology and Molecular Genetics
  - Molecular and Systems Pharmacology
  - Neuroscience
  - Nutrition and Health Sciences
  - Population Biology, Ecology, and Evolution
Graduate Medical Education
Emory University School of Medicine

Philip Shayne, MD
Assistant Dean of Graduate Medical Education
Professor, Emergency Medicine
Emory University School of Medicine
Emory: GME
The GME Team

• Maria Aaron, MD, Associate Dean of GME and DIO
• Philip Shayne, MD, Assistant Dean of GME and Associate DIO
Emory GME

• 1322 trainees, 75% are in core programs
• 108 training programs, 25% are core programs
• ~100 non-ACGME fellows in 90 fellowships

• Location: 327 SOM Education Bldg.
• Anonymous Email: http://www.med.emory.edu/gme/housestaff/index.html
• Google “Emory GME anonymous feedback”
Emory: GME

- Emory Healthcare
  - EUH
  - EUH Midtown
  - EUOSH

- Atlanta VA

- Children's Hospital of Atlanta

- Grady Memorial
Emory: GME

Admin

Wellness

Accreditation

Education

Emory GME
Education Leadership Team

- Bill Eley, MD, MPH, Executive Associate Dean of Education
- Marilane Bond, EdD, MBA, Associate Dean of Education
- Jaffar Khan, MD, Assistant Dean of Education at Grady
The GME Team

- Jianli Zhao, Ph.D., Director of GME
- Taiwana Mearidy, M.B.A., Associate Director of GME
- Nancy DeSousa, PhD, MPH, Assistant Director, Multicultural Affairs, Learner Diversity Programs for GME
- Janice Harewood, PhD, FSAP GME Psychologist
- Ulemu Luhanga, MSc, MEd, Ph.D., GME Education Researcher
Emory Residency Tracks

The Emory University School of Medicine (EUSOM) and Graduate Medical Education (GME) Office recognizes that some residents have the desire to gain knowledge and skills in a specific focus area that is related to healthcare but outside the normal residency program curriculum. To this end, the GME Office has/has developed residency tracks; these experiences will complement and not replace any aspect of residency training.

These unique pathways will offer improvement in resident training outside the standard training program and will also benefit EUSOM and participating training sites by providing resident input in critical focus areas. Upon completion of a track, residents will be awarded a Certificate of Distinction from Emory University School of Medicine.

For more information on each residency track, please click the relevant heading below.

- **Ethics**
  
  This 18-month track will provide residents and fellows with foundational knowledge and skills to (a) prepare for in-depth contributions to healthcare system ethics committees and ethics consultation services and (b) utilize ethical thinking in clinical care, teaching and scholarship.

- **Global Health**
  
  This 12-month track aims to provide the Emory resident or fellow with learning opportunities and a one-month clinical rotation in Ethiopia, as well as opportunities to "give back" and provide education and teaching to residents, medical students and other trainees.

- **Healthcare Management**
  
  This 24-month track will support residents & fellows to gain the knowledge, skills, and methods necessary to: (a) become leaders in healthcare administration; and (b) prepare them for careers that incorporate leadership and administrative responsibilities.

- **Health Equity, Advocacy, & Policy (HEAP)**

- **Medical Education**

- **Quality Improvement & Patient Safety**
Mission Statement

- To prepare residents and fellows that will emerge from their training programs with a core set of knowledge and skills in Educational Systems and Health Care Systems (i.e., Systems-based Practice, Professionalism, & Practice-Based Learning and Improvement) needed to work effectively in clinical learning environments.

- To further educate the core faculty to enhance their skills in Educational Systems and Health Care Systems.

Goals

To produce residents, fellows, and faculty who:

- Are prepared for their roles as teachers, assessors, and supervisors
- Are experienced in the methods and tools of quality improvement and patient safety
- Participate in the quality and safety systems of their clinical learning environments

Philosophy
“Emory GME Well”
“Emory FSAP”
### GME Advice

- Role Model
- Evaluate
- Participate
- Mentor
- Enjoy
Emory: GME
Undergraduate Medical Education

Erica Brownfield, MD, FACP, MBA
Professor of Medicine
Associate Dean of Medical Education
Helpful to Know

- Medical education - complex system
- Many people, many programs
- Multiple stakeholders
- Working together
- Strategic planning
Helpful to Know

• Many opportunities in education exist – just ask
• Multiple pathways
• Education leaders often identified by patient care and role-modeling
• Learners pay attention and provide feedback through many mechanisms
• Helpful to know expectations
• Helpful to know departmental education leaders (vice chair for education, clerkship, program directors – contact them for advice and if learner concerns (early!)
• Don’t expect to be financially compensated for education efforts (at first)
• Expect homework with education roles
Advice

• Focus on being a great doctor
• Be a great role model – patient care, professionalism
• Build relationships
• Communication is critical
• Get to know your learners and let them get to know you
• Be mindful and intentional about learning environment you are creating
• Set and communicate expectations
• Goal should be to earn respect and trust (not friends)
Advice

• Pay attention – direct observation, verbal/non-verbal cues (learners, yourself)
• Give descriptive and truthful feedback and ask for it in return
• Trust your gut instinct – speak up, ask for help, reflect
• Continue to be a learner
• Explore opportunities and interests
• Say yes often; you can say no later
• If chosen, do a good job
• Help create/propose a solution
• Find someone you admire and reach out
• It never hurts to ask!
Opportunities

- Bedside teaching in clinical environment (ward attending) for required clerkships and electives
- Outpatient preceptor for M1 students (OPEX)
- Clinical preceptor for Adult Primary Care clerkship
- Electives director
- Teach in many courses, clerkships
- Small Group Advisor (Society System)
- Discovery research mentor
- Committee member
  - Admissions Committee
  - Executive Curriculum Committee
  - Task Forces
Final Thoughts

• Appreciate all education efforts
• Faculty make a profound impact on learners that lasts a lifetime
• EUSOM education community – good company to keep
• If you decide education not right path – find the path for you
• Fun, rewarding path but not without its challenges
• We are here to help
Growing as an Educator at Emory

Nathan Spell, MD
Associate Dean for Education and Professional Development
Woodruff Health Educators Academy

• Need for community-building for educators
• Fill gaps in Emory portfolio of professional development opportunities
• Recognizing that these same needs exist across WHSC
• Increase reward for faculty by enhancing recognition and academic advancement as educators
Woodruff Health Educators Academy

**Mission:** To bring together educators across the health sciences at Emory to promote and support the practice and scholarship of teaching and learning.

**Vision:** To foster an interprofessional community of educators across the health sciences at Emory
WHEA Offerings

• Teaching Scholars course
  • Applications each fall for spring start – workshop series w/ Capstone project

• AAMC Medical Education Research Certificate (MERC)
  • 18-month program for up to 25 participants
  • 6 workshops
  • Mentored education research project
  • New cohort is just beginning. Next cycle likely 1-2 yrs away.

• Educator “Salons”
  • Evening social events with speaker/activities for fun and networking

• Inter-Professional Education Journal club monthly
  • Sign up for listserv on WHEA website

• Developing a self-paced online program
EUSOM is accredited by the Accreditation Council on Continuing Medical Education as a provider of CME, and we work with the School of Nursing to provide nursing credits for applicable activities.

**CME Staff**
1 Director
1 Business Mgr
1 Account coord.
5 Program coord.
1 Admin. Asst.

- Event planning
- >40 Conferences, Courses, etc. (Mainly external audiences)
- 100 Regularly Scheduled Series (Internal audience)
- In-person attendance
- Some are recorded and streamed for outreach
Maintenance of Certification Portfolio Sponsor

- Emory Univ. School of Medicine is certified by the ABMS
- Can grant part 4 MOC for QI projects
- Projects can be interdisciplinary
- Contact Dr. Nate Spell nspell@emory.edu or Shirley Miller smill25@emory.edu
Shaping the learning environment

Maslow’s hierarchy of needs

- Self-actualisation: morality, creativity, spontaneity, problem solving, lack of prejudice, acceptance of facts
- Esteem: self-esteem, confidence, achievement, respect of others, respect by others
- Love/Belonging: friendship, family, sexual intimacy
- Safety: security of body, of employment, of resources, of morality, of the family, of health, of property
- Physiological: breathing, food, water, sex, sleep, homeostasis, excretion
Better Feedback: Coach Not Critic

Michael Greenwald, MD, FAAP
ASSOC PROF PEDIATRICS & EMERGENCY MEDICINE
EMORY UNIVERSITY SCHOOL OF MEDICINE

LISA BERNSTEIN, MD, FACP
PROFESSOR OF MEDICINE
EMORY UNIVERSITY SCHOOL OF MEDICINE
## Financial Disclosures

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<th>External Industry Relationships *</th>
<th>Company Name</th>
<th>Role</th>
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<td>None</td>
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<td>Board of Directors or officer</td>
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<td>Royalties from Emory or from external entity</td>
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<td>Industry funds to Emory for my research</td>
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<td>Other</td>
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<td><strong>Compare &amp; Contrast</strong></td>
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<td>Formative vs Summative Feedback</td>
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<td><strong>List</strong></td>
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<td>5 key components to an effective feedback session</td>
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<td><strong>Describe</strong></td>
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<td></td>
</tr>
<tr>
<td>how a “coach’s” approach can address some of the impediments to effective feedback</td>
<td></td>
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</tr>
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</table>
You are giving and receiving feedback all of the time
“I want to give you some feedback”
What kind of feedback?
### Effective Feedback?

- **Excellent resident**
- **Great with patients**
- **Clearly demonstrates proficiency**
- **I enjoyed working with this trainee**
- **Very professional attitude and approach**
- **Exemplary professionalism**
Effective feedback?

- Needs to read more
- Disorganized
- Work on presentations
3 Types of Feedback

- **APPRECIATION**: to acknowledge, give credit or thank

- **COACHING (FORMATIVE)**: to help the receiver fine-tune skills, tweak understanding, increase knowledge, improve

- **EVALUATION (SUMMATIVE)**: to score against expectations

Types of Feedback

Formative (aka “Feedback”)
- Information
- Provided during the experience
- Describes specific performance
- Intent: guide future performance
- Allows improvement

Summative (aka “Evaluation”)
- Judgment
- Performance Evaluation provided at end
- Degree to which they met set standards
- Intent: provide outcomes of a period of time

Feedback (in Medical Education) Defined

The process by which a (teacher)

- collects data by observation,
- compares (learner) performance to a standard, and provides (the learner with) information about their performance
- for the purpose of improving their performance

What are the benefits of giving feedback?

What are the benefits of receiving feedback?
Feedback IS Essential to Learning

Evidence in the literature

- Effective feedback has positive impact on academic development of learners
- Feedback is crucial to knowledge and technical skill
- Compliments do not improve technical skill

Sinclair HK, Cleland JA Undergraduate Medical students: who seeks formative feedback? Med Educ 2007;41:580-582.
Evidence on frequency & quality of feedback

Feedback in clinical training judged inadequate in frequency and quality

Learners are dissatisfied with feedback received

Evidence on frequency & quality of feedback

- Residents don’t find it useful or take it seriously
- Lack of specificity, clear performance standards or timeliness
- Inadequate observation, lack of clarity about performance standards, nonspecific feedback

Fellows WANT Feedback!

“Consider pre-defined dates for face to face feedback sessions to and from all the fellows, every quarter”

“In residency, we had Feedback Friday with on-service attending to review our strengths and weaknesses, and what we hope to improve”
What is so difficult about giving/receiving Feedback?
Feedback Challenges

- Need standards of competence
- (Perceived) Time constraints
- Receptiveness to feedback
- Hurt feelings
- Damage reputation
- Damage relationship
- “Vanishing Feedback”
Models in Feedback: the Classic
Feedback Model 2.0: 
*Gourmet Sandwich*

**Ask**
- Learner as active participant

**Tell**
- Report observations (positive & negative)
- Relate to shared goals

**Ask**
- Generate ideas together
- Gauge acceptance
- Commit to shared follow-up
Redefine Yourself as a Coach:

How do good coaches make their players/teams better?
Teacher as Coach

Knows the team
Demonstrates skills
Role Models desired behavior
Supports team members
Motivates: Push & Inspire
Focus on Essentials
Identify Next Step in Development
Repetitive Practice
Ongoing Assessment

Dudas RA and Bannister SL. It’s not just what you know: the non-cognitive attributes of great clinical teachers. Pediatrics 2014;134;852
Time to Practice
Dilemma #1

- You are teaching on the inpatient wards and notice that when you are bedside, one of your interns is pulling out his/her phone and looking at it. You find this disrespectful as you are taking time out to teach and you have even noticed patients taking note of this behavior.

- Give the learner some feedback.
Dilemma #2

You are covering two hospitals and efficiency is paramount for you to get your work done and get home to your family. You have been rounding with your resident on the inpatient consult service and feel that rounds are not efficient mostly because your resident does not pre-round.

Give your resident some feedback
Frame-based feedback
Crucial to diagnose “frames” (thought processes that drive actions)

Feedback by phase
Med students/Interns: Directive feedback
Fellows/Faculty: Facilitative feedback

**R2C2 Model:** Evidence-Informed Facilitated Feedback in Residency Education

- Relationship building
- Exploring reactions to feedback
- Exploring understanding of feedback content
- Coaching for performance change
Receiver can draw value out of any feedback – goal is to improve.

Building resilience: Getting better at receiving feedback reduces stress.

Feedback is learning something about yourself that maybe you appreciate or understand before.
The Power of PEER Feedback

<table>
<thead>
<tr>
<th>Self-Improvement</th>
<th>Learning from our peers</th>
</tr>
</thead>
<tbody>
<tr>
<td>To give is to receive</td>
<td>Get better at PROVIDING feedback</td>
</tr>
<tr>
<td>Facts</td>
<td>Use hard evidence</td>
</tr>
<tr>
<td>Depersonalize</td>
<td>Approach from perspective of curiosity</td>
</tr>
<tr>
<td>Honesty</td>
<td>Share information</td>
</tr>
<tr>
<td>Coping skills</td>
<td>Handle emotions</td>
</tr>
</tbody>
</table>

Thomas Gallagher, MD, SGIM President. SGIM Forum 2018;41(1)
EFFECTIVE FEEDBACK IS...

- Given to improve learner’s performance
- Expected
- Well-timed
- Specific
- Limited: quantity, remediable behaviors
- ASK-TELL-ASK
The Power of POSITIVE Feedback

- Generates a sense of *accomplishment and motivation*

- Call out team members for their strengths when you see them in the moment

- Be specific!

- The more you notice what’s meaningful to a person, the greater your potential impact will be
WHAT IS ONE CHANGE YOU ARE GOING TO MAKE IN GIVING FEEDBACK?
Thank You!
Strategies to improve feedback

❖ Create a **CULTURE OF FEEDBACK**
❖ **Incorporate** it into your routine
❖ Think of it as individualized **Coaching** (share a **common goal**)
❖ **Don’t assume** intentions/interpretations
❖ **Don’t underestimate the power of positive feedback**
ASK #1: Questions for Self-Assessment

► APPRECIATION:
  ► Where were they most successful?

► COACHING (FORMATIVE):
  ► How can knowledge/skill expand?
  ► What skills need to be fine-tuned?

► FEED FORWARD:
  ► How can experience inform decision-making?
  ► What needs to change/stay to be successful?

Triggers when Receiving Feedback

- **TRUTH**
  - Wrong, off-target, based on incomplete info, unfair

- **RELATIONSHIP**
  - Don’t trust giver’s expertise
  - Giver doesn’t appreciate what you do well

- **IDENTITY**
  - Undermines how your see yourself
  - Threatens your sense of well-being

TELL: Feedback should be...

- Expected
- Well-timed, in an appropriate setting
- Limited in scope
- Based on first-hand data
- Limited to remediable behaviors and specific performances
- Phrased in nonjudgmental language

TELL what you have observed: R.E.P.P.

**Relate**
Try to identify with the recipient

**Explore**
Explore reactions

**Partner**
Identify shared goals

**Plan**
Focus on the future: Specify what you want them to start, stop, and continue doing…and FOLLOW UP

https://hbr.org/2016/10/give-your-team-more-effective-positive-feedback
ASK #2: Wrap Up

- Explore understanding
- Coaching
  - Generate ideas together
  - Gauge acceptance
- Commit to shared follow-up
OPPORTUNITIES for FACULTY INVOLVEMENT
Undergraduate (Medical Student) Medical Education

Volunteer for a SOM or Departmental Education Committee:
  Curriculum Committee Subcommittees
  Medical Education Day Planning Committee
  Interviewer for Admissions Committee
  Department Committee

Task Forces:
  Ad Hoc charged by Executive Curriculum Committee

*Discovery* Mentor (M3 research)

Small Group Advisor – Application process

M2 or M4 Elective Director

OPEX (*Out-Patient Experience*) Preceptor for M1/M2 students

Bedside Teaching:
  Preceptor in *Essentials of Patient Care* (Pt-Doctor Communication & Physical Exam)
  Inpatient Ward Attending (one of the most important venues for teaching MD students)

Course/Module/Clerkship Directors

Module teaching: didactics; other sessions (Module Directors select Module faculty)

Clerkship teaching: didactics; skill labs; other sessions (Clerkship Directors select clinical faculty)

Course teaching:
  Instructor in *Clinical Ethics*
  Instructor in *Essentials of Patient Care* (Pt-Doctor Communication & Physical Exam)
  Instructor in *Community Learning and Social Medicine Course* (M1/M2 year)
  Instructor in *Integration* (during the clinical clerkship year – Application Phase)

*Capstone Course:* Selective directors and teachers (Capstone Directors select faculty)

Clinical Academic Advisor – advise 3rd and 4th year students about senior schedules, Residency process (as an additional resource to what is already provided to students through the SOM)

Emory DOCS (*Emory Development of Careers and Specialty Choice*) – advise/assist students about career opportunities

*Speak with your Department’s Vice Chair or Leader for Medical Education***
## TERMS OF SERVICE, CONTACT PERSON, other INFO

<table>
<thead>
<tr>
<th>Opportunity</th>
<th>Service Term</th>
<th>Method of Selection</th>
<th>Contact Person if Interested</th>
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<tbody>
<tr>
<td>Curriculum Committee Subcommittees</td>
<td>3-years</td>
<td>Appointed, Elected and Ex-Officio Members</td>
<td>Dr. Erica Brownfield</td>
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<tr>
<td>Medical Education Day Planning Committee</td>
<td>No set term limits</td>
<td>Invited by Committee from interested faculty and staff</td>
<td>Dr. Maha Lund (PA Program)</td>
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<tr>
<td>Admissions Committee</td>
<td>3-years</td>
<td>Appointed and Elected</td>
<td>Dr. Ira Schwartz</td>
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<tr>
<td>Ad Hoc Task Forces charged by the Executive Curriculum Committee</td>
<td>Variable terms set by specific charge to ad hoc group; typically several months</td>
<td>Invited by ECC from interested faculty</td>
<td>Dr. Erica Brownfield</td>
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<td>Small Group Advisor</td>
<td>No set term limits</td>
<td>Appointed</td>
<td>Dr. Mary Jo Lechowicz</td>
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<td>Dr. Ira Schwartz</td>
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<td>Discovery Mentor</td>
<td>No set term limits</td>
<td>Invited by Discovery director from interested faculty</td>
<td>Dr. Maureen Powers</td>
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<td>Elective course/clinical rotation director</td>
<td>No set term limits</td>
<td>Invited by Electives and Capstone Subcommittee from interested faculty</td>
<td>Dr. Jason Liebzeit</td>
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<tr>
<td>OPEX preceptor</td>
<td>No set term limits</td>
<td>Invited by OPEX director from interested faculty</td>
<td>Dr. Pamela Vohra-Khullar</td>
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<td>Emory DOCS (Development of Career and Specialty Choice)</td>
<td>No set term limits</td>
<td>Endorsed by Department</td>
<td>Dr. Mary Dolan</td>
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<td>Course/module director</td>
<td>No set term limits</td>
<td>Appointed</td>
<td>Dr. Erica Brownfield</td>
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<tr>
<td></td>
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<td>Dr. David Schulman</td>
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<tr>
<td>Clerkship director</td>
<td>No set term limits</td>
<td>Appointed</td>
<td>Department Vice Chairs for Education or Chair</td>
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<td>Course/module teaching</td>
<td>No set term limits</td>
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OPPORTUNITIES for FACULTY INVOLVEMENT
Graduate (Resident/Fellow) Medical Education

A. Departmental Opportunities:

Clinical or surgical teaching faculty
Lectures to residents/fellows
Mentor research projects
Be involved in diversity/equity/inclusion or wellness projects
Serve as Program Director or Associate Program Director

Serve on Departmental Education Committees:
• Program Evaluation Committee
• Clinical Competency Committee

B. GME Opportunities

• Core Curriculum Roadshow
  http://med.emory.edu/gme/housestaff/curriculum_roadshow1/index.html
  – Patient Safety
  – Adverse Events & Near Misses
  – Quality Improvement
  – Care Transitions
  – Professionalism
  – Physician Well-Being
  – Clinical Teaching
  – Assessment
  – Recognizing & Assisting the Struggling Student

• Residency Tracks
  – Global Health, Ethics, Quality Improvement/Patient Safety
  – Medical Education, Hospital Administrative
  – Biomedical Innovation, Simulation

• Wellness Initiatives
• Diversity, Equity, Inclusion Initiatives