Introduction

The University Of Illinois College Of Medicine and the University of Illinois Hospital and Health Sciences System (UI Health) are pleased to present this annual report on graduate medical education to the University Of Illinois Board Of Trustees. Such reporting is in accordance with the accreditation standards of the Accreditation Council for Graduate Medical Education (ACGME). The College of Medicine in Chicago is the ACGME Institutional Sponsor for all graduate medical education programs based at the Chicago Campus. Graduate Medical Education programs at Peoria, Rockford and Urbana are separately accredited through those campuses respectively and are not included in this report.

Graduate Medical Education, or GME, involves the post-medical school training of physicians, under supervision, in preparation for independent practice. Through residency and fellowship training programs, learners participate in advanced training that leads to skills, knowledge and professional attitude acquisitions that ultimately lead to eligibility for board certification in specific specialty areas of medicine. The programs sponsored by the Chicago Campus provide clinical experiences within the University of Illinois Hospital and Health Sciences System (UI Health), the Jesse Brown Veterans Affairs Hospital, and affiliated institutions across the metropolitan Chicago area; most notably Advocate Christ Medical Center, Advocate Illinois Masonic Medical Center, Advocate Lutheran General Hospital, Mercy Hospital, McNeal Hospital, Rush Medical Center, John J. Stroger Hospital and Mount Sinai Hospital.

Sponsorships and Accreditation

The Graduate Medical Education Committee (GMEC) at Chicago oversees a total of 149 residency and fellowship programs across the Chicago campus and its affiliated institutions. The total number of learners enrolled during 2016-2017 was 821.

During 2016-2017, 61 of the 149 programs were accredited by the Accreditation Council for Graduate Medical Education (ACGME). The other 88 programs are institutionally sponsored with oversight and approval from the GMEC. Nineteen of the 88 GMEC-sponsored programs were active during 2016-2017. All active non-ACGME accredited programs are held by the GMEC to the same general education standards as the ACGME approved programs. All active GMEC-approved programs would qualify for accreditation if accreditation were offered by the ACGME or other accrediting bodies.

During 2016-2017, three programs – Surgical Pathology, Maternal-Fetal Medicine, and Reproductive Endocrinology and Infertility – were awarded initial ACGME accreditation, and three new GMEC approved programs – Infectious Disease Research Track, Global Women’s Health, and Reconstructive Urology – were started. All are included in the above ACGME-accredited and GMEC-sponsored program counts.
As of June 30, 2017 all ACGME-accredited programs are participating in the ACGME “Next Accreditation System” (NAS) or under guidelines informed by its standards. Through the NAS, programs may be accredited for as long as ten years, provided that annual resident surveys and other outcome measures regularly uploaded to the ACGME data systems are in compliance with ACGME Resident Review Committee standards.

Outcomes for 2016-17

The National Resident Matching Program (NRMP) is the principal source for recruitment of trainees. During the 2016-2017 recruitment cycle, UI (Chicago) filled 186 out of 190 positions offered in the NRMP Main Match. The four unmatched positions are accounted for by a program that participated in the match but chose to rank fewer candidates than available slots in the program. Those positions were subsequently filled outside of the match. Of matched positions, 14% were from UI College of Medicine campuses (10% Chicago, 1% Peoria, and 3% Rockford). Eighteen percent of entering trainees were graduates from other Illinois medical schools. The largest proportion of entering trainees (59%) was from U.S. medical schools outside of Illinois, and 10% were graduates of international medical schools. The demographics of matched individuals and the successful benchmarking of matched individuals against program-specific selection metrics deemed this a successful match for the 2017 recruitment cycle.

The University of Illinois (Chicago Campus) has full ACGME accreditation at the institutional level, with a ten-year accreditation review cycle under the NAS. The first mandated accreditation self-study visit is tentatively scheduled for April 2018. The 2015 annual review update resulted in the Institution receiving continued full accreditation with a commendation for having resolved all citations. During the 2016 and 2017 annual review updates, the Institution maintained the status of full accreditation with commendation for receiving no new citations during either review cycle.

Three training programs were reviewed by the ACGME during 2016-2017: Dermatology, Internal Medicine/Transplant Hepatology, and Pathology/Clinical Informatics. Each program received maximum accreditation.

Currently, one fellowship program, Hematopathology, has the status of “Continued Full Accreditation with Warning.” The warning status stems from concerns by the ACGME Review Committee that there is a lack of adequate case volumes for trainees to have proper exposure to requisite cases essential to achieving competency. The GMEC and Designated Institutional Officer have worked with the program to develop an action plan intended to reverse the aforementioned issues. As part of the plan, a new program director was appointed in August 2017, with a promise of sufficient protected time to devote to program administration. The GMEC is actively monitoring the action plan and its implementation to ensure that the program will be restored to “Continued Full Accreditation” status at the time of its next annual documents review in the Spring of 2018.

The Office of Graduate Medical Education, in collaboration with the Office of Undergraduate Medical Education, was selected in a highly competitive process to represent the University of Illinois COM for a second sequential year at the Shapiro Institute’s Millennium Conference held in Boston, Massachusetts under the auspices of the Harvard School of Medicine. This was a collaborative endeavor with representation from the University of Illinois’ Chicago, Peoria, and Rockford medical campuses. The focus of the UI selected submission was centered on finding pathways to bridge and
amplify Entrustable Professional Activities (EPAs) over the continuum of medical education by aligning undergraduate EPAs outcomes with those of graduate medical education outcomes as measured by ACGME Milestones.

In January of 2017, UI Health, as the primary learning environment for all UI-Chicago GME programs, had its second ACGME Clinical Learning Environment Review (CLER) site visit. The site visit is intended to explore the six focus areas of the CLER program which are patient safety, health care quality (with special attention paid to health care disparities), resident supervision, transitions of care within the learning environment, resident duty hours/fatigue mitigation and management, and professionalism. These visits are scheduled by the ACGME approximately every 18 months. The next CLER visit is anticipated during the summer or fall of 2018.

While the site visitors noted significant improvements in each of the six focus areas for review when compared to the prior CLER site visit in 2014, the overall findings indicate a need for ongoing engagement of leadership at UI Health and the College of Medicine in continuous quality improvement processes to mitigate issues as they arise. Areas identified for continued improvements include the need to engage in a process that will lead to the continuous expansion of our efforts to involve more trainees in patient safety reporting initiatives and quality improvement projects; identifying variability in the care provided to known vulnerable patient populations; creating a standardized, system-wide approach for managing patient hand-offs; creating a system by which nurses and others can identify an individual resident’s competency to perform clinical procedures; addressing issues related to fatigue management and mitigation not caused by duty hour violations; and professionalism issues related to feedback between faculty and learners in the work environment and documentation issues related to the electronic medical record. Program directors, Department Heads and the Graduate Medical Education Committee work collaboratively with the GME administration/leadership, UI Health leadership, and the Dean’s Office to mitigate all areas of concern in the work environment through continuous quality improvement initiatives.

Areas of Focus for the Upcoming Year (2017-18)

- GME will continue to support programs in their continued implementation of the ACGME Next Accreditation System, with its emphasis on monitoring trainee achievement of specified competencies in clinical training as determined by achievement of specialty-specific milestones as trainees progress through their program-specific curricula.
- GME will work collaboratively with Undergraduate Medical Education across all campuses to define and align Entrustable Professional Activities (EPAs) from the undergraduate medical student curriculum with those in residency education in order to prepare learners for lifelong professional development. This work will be made easier by virtue of our recent participation in the Millennium Conference referenced above.
• GME will work to further enhance our footprint in Global Health educational initiatives. Currently we have successfully collaborated with the Department of Obstetrics and Gynecology to start a GMEC-sponsored fellowship and elective experience for residents in women’s health at the Mekelle University in Mekelle, Ethiopia. This program is looking to expand beyond its current single fellow as additional funding is secured.

• We are actively working with the Division of Cardiology to build an educational program that will allow foreign medical graduates sponsored by their home institutions to train in the Clinical Cardiac Electrophysiology fellowship. We anticipate having this training track ready for admission of its first trainees by July 2018.

• The GMEC is in the process of evaluating and implementing a new curriculum for all trainees in Patient Safety and Quality Improvement. This curriculum will provide all trainees the knowledge and skills to promote patient well-being and continuous quality improvement in the work environment. The anticipated implementation date is January 2018.

• The GMEC is in the process of implementing a new online “Core Curriculum” for all residents that will focus on requisite skills, knowledge and professionalism competencies essential to the trainee’s successful transition to the next phase of their careers. The anticipated implementation date is January 2018.

• GME is engaged in a process to recruit a new Assistant Dean of Graduate Medical Education who will have as part of their duties the responsibility to spearhead collaborative initiatives between all learning environment stakeholders to better effect change in the ACGME six focus areas of CLER.

• GME, in conjunction with the Department of Medical Education, is expanding our efforts to provide faculty and resident teaching development opportunities. Consultations (individual and programmatic) and certificate programming for participation in yearlong teaching development activities are being developed and/or expanded for implementation during the current academic year.

• GME is working collaboratively with the College of Medicine’s Graham Clinical Performance Center to expand the use of standardized patient and high fidelity simulation into our teaching and assessment methodologies available to GME programs. To date the vast majority of our trainees participate in at least two simulation training or assessment activities.

Graduate Medical Education programs are essential to the educational, clinical and service missions of the College of Medicine, UI Health, and the University of Illinois. The College of Medicine and UI Health share strategic alignment in promoting and continually improving the University’s GME programs. We are committed to the work of transforming our GME programs to serve as destination sites for future learners.

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