

17th Annual

Family Medicine

Residency Program Administrators/Coordinators Workshop

with special sessions for subspecialty programs in Geriatric Medicine,
Sports Medicine and Hospice and Palliative Care

**April 12-14, 2010
Holiday Inn Historic District
Charleston, South Carolina**

New Administrator/Coordinator Sessions
Monday, April 12, 8 a.m. to noon



**National Center for Evaluation
of Residency Programs**

WORKSHOP DESCRIPTIONS

Monday, April 12, 2010

New Administrator /Coordinator Sessions

8-10 a.m. Accreditation Overview
Star Andrews, Donald A. Bosshart, Ed.D.
An introduction to the ACGME, RC, and institutional and board requirements. What is a PIF, and how is it completed? What is an internal review, and what is an ACGME site visit? Session is an overview of the accreditation process.

10:15-12 p.m. The ACGME Competencies and Evaluation Requirements
Donald A. Bosshart, Ed.D.
The RCs and the Institutional Requirements mandate that programs teach and evaluate general competencies in the following areas: patient care (PC), medical knowledge (MK), interpersonal and communication skills (IPS), professionalism (P), practice-based learning and improvement (PBL&I), and systems-based practice (SBP). Provides overview of these required educational objectives and competency-based evaluation.

12:30-1 p.m. Workshop Registration

1-2 The Quick Change Artist
Star Andrews
Most program administrators/coordinators play a variety of different roles in their job—administrator, counselor, resident advocate, organizer, teacher, recruiter, social director, alumni affairs officer, compliance officer, accountant, coach and strategic planner—and role changes are many and frequent. As healthcare, technology and the ACGME change, how can you gain control and have fun in your roles?

2-2:45 How Does Your Family Medicine Program Measure Up?
Mary Zaglifa, M.S.T.
What constitutes an excellent Family Medicine Residency Program? The ACGME's Family Medicine Review Committee has published standards. Your sponsoring institution has expectations, policies, and procedures related to its multiple missions. Your hospital has expectations about its patient volume, financial performance, teamwork and relationships among the various departments and/or programs, and the community's healthcare needs. A program's reputation is intertwined with the images and quality of care delivered at its hospital and/or sponsoring institution. As the specialty of Family Medicine re-defines itself in a highly complex and rapidly changing environment, to what extent is your program "on board"? Resistant? Identify/discuss key points at which program, institution and productivity dovetail. What tools are out there to help programs step up?

3-3:45 The ACGME's Evolving Approach to Accreditation - What Now and What Next
Donald A. Bosshart, Ed.D.
The ACGME's mission is to "improve healthcare by assessing and advancing the quality of resident physicians' education through accreditation." Residency programs should be role models for the delivery of excellent patient care and provide leadership in quality improvement (QI). The American Board of Medical Specialties (ABMS) mandated in 2009 that all of its board-certified physicians are expected to understand quality improvement and know how to document that they have made improvements to their patients' healthcare outcomes. What is the ACGME Milestone Project, and how will it improve patient safety and perhaps improve the quality of the care delivered by your residents and graduates? What other changes are coming?

3:45-5 Family Medicine RC Requirements, ADS and the PIF
Donald A. Bosshart, Ed.D., Mary Zaglifa, M.S.T.
Highlights of the Family Medicine Requirements and FAQs, ADS reporting obligations and how to respond to key FM PIF questions. Session is for both core and subspecialty programs.

5:30 Optional Dutch-treat Dine-out
Participants and their guests will depart the hotel lobby at walk to one of the city's fine dining establishments.

7-8:15 p.m. Haunted Historic District Walking Tour
See page 5 for more information.

Tuesday, April 13, 2010

8-8:40 a.m. Patient Safety, Quality of Care, Quality Improvement and Residency Education
Donald A. Bosshart, Ed.D., Mary Zaglifa, M.S.T.
The ACGME and the ABFM have mandated that residents, fellows, faculty and program leaders must understand and apply the key principles of quality improvement (QI) to their practices. Maintenance of Certification in Family Medicine now requires successful completion of a Performance in Practice Module over a three- to six-month period. This is an assessment of patient care outcomes, a systems-based practice and/or practice-based learning and improvement intervention, and then a re-assessment to document improvement. The ACGME also expects these QI principles to be applied to improve the outcomes of residency education. The federal Medicare Physician Quality Reporting Initiative from the Center for Medicare and Medicaid Services (CMS) and the AAFP METRIC program for residencies may be useful tools. Get the "Big Picture" about how QI indicators are important to your program.

8:40-9 The ACGME Resident Surveys
Donald A. Bosshart, Ed.D.
How to prepare for the 2010 ACGME resident surveys and how to respond to "flags" and survey related citations.

9:15-10 A Concurrent Sessions
The Art of Speaking For Your Boss
Lois Shuman
Most managers and all administrators encounter situations in which they must fill in for their director in communications with faculty, residents, and hospital and central GME staff. Being able to explain established policies and procedures and facilitate problem resolution at lower levels of the organization can save your director time and energy. Session will provide insight into when and how this is best accomplished, and when it is not appropriate to speak on behalf of your boss.

B Subspecialty Accreditation Requirements
Donald A. Bosshart, Ed.D.
Review of the common requirements that are or will soon be in effect for all one-year accredited fellowship programs in Family Medicine (Sports Medicine, Geriatric Medicine, and Hospice and Palliative Care). Discussion of challenges faced by all subspecialty program administrators. Builds upon new administrator sessions and session, "Family Medicine RC Requirements, ADS, and the PIF."

WORKSHOP DESCRIPTIONS

Concurrent Sessions

10:15-11:15 C **Preparing for a Site Visit or Internal Review** *Lois Shuman*

Important issues addressed on a continuing basis can reduce the time required to prepare the PIF and documents for a site visit or internal review. This decreases the stress of the site visit. Session reviews site-visit preparation, setting priorities, interfacing with your program director, common site-visit pitfalls, and important procedural issues. While the specific procedures and processes for internal reviews are set by each program's sponsoring institution, the key elements required by the ACGME for an internal review are explained, as are the steps for thorough preparation.

D **Hospice and Palliative Care Fellowship Requirements and PIF** *Donald A. Bosshart, Ed.D.*

This important new interdisciplinary fellowship program demands attention to detailed requirements and a prescriptive curriculum document. The curriculum varies depending on the specialty board of the fellow. This session builds on plenary session "Family Medicine Program Requirements, ADS and the PIF" and session "B-Subspecialty Accreditation Requirements."

Concurrent Sessions

11:15-12:15 E **Sharpen Your ERAS® Skills** *Lois Shuman*

Session builds upon a working knowledge of the fundamentals of ERAS® operations. Provides encouragement and insight to overcome obstacles to mastering helpful, but less frequently used, program components. Addresses issues such as encouraging faculty to view and evaluate candidates in ERAS®, manipulating the ratings and scores, constructing your own filter/sorts, exporting ERAS® data, and using data in other Microsoft Office programs. A time to ask questions and explore possibilities.

E **Sports Medicine Requirements and PIF** *Lisa Marquise, Donald A. Bosshart, Ed.D.*

Session will review the RC requirements that are specific to sports medicine and include a discussion of how to complete the PIF. Issues with program implementation, curriculum, goals and objectives, evaluation methods and program management will be discussed. Builds on information presented in plenary session, "Family Medicine Program Requirements, ADS and the PIF" and session "B-Subspecialty Accreditation Requirements."

12:15-1:30 **Select Lunch on Your Own or session G below**

G **Geriatric Medicine Fellowship Requirements and PIF** *Star Andrews*

Session will review the RC requirements that are specific to geriatric medicine and include a discussion of how to complete the PIF. Issues with program implementation, curriculum, goals and objectives, evaluation methods and program management will also be discussed. Builds on information presented in the plenary session, "Family Medicine RC Requirements, ADS and the PIF" and session "B-Subspecialty Accreditation Requirements." *Advanced registration required for lunch.*

Concurrent Sessions

1:30-2:30 H **Understanding the Common Requirements and How to Answer the Common PIF Questions** *Donald A. Bosshart, Ed.D.*

Completion of "Common PIF Questions" is required for all programs. Do you understand the requirements, the intent of the questions, as well as what your program must do to report and document compliance? How does your program document its formal, systematic evaluation of its curriculum? Practical tips on how to correctly answer the Common PIF questions will be provided. Session is an in-depth analysis and interpretation of the requirements and the *Program Director Guide to the Common Requirements*. Session offers practical ideas for what programs should do and is important for administrators in core and fellowship programs.

I **Using the Six Competencies as a Framework to Select the Best Candidates** *Lois Shuman, Mary Zaglifa, M.S.T.*

Session will present six easy steps for how to use different types of information in ERAS® to screen candidates and select them for an interview. How can program administrators and interviewers use behavioral interview techniques and performance patterns to assess aspects of candidate interpersonal and communication skills, professionalism, practice-based learning and improvement and system-based practice during the interview day? Practical tips about how to select the best will be offered.

Concurrent Sessions

2:30-3:30 J **Orienting and Working With Your Residents** *Elizabeth Westfall, Lisa Marquise, Janie Trevino, Star Andrews*

An effective orientation to the program's written goals and objectives as well as the program's and institution's written policies and procedures is now required by the ACGME. As a part of orientation, many programs and institutions assess the basic clinical skills of incoming residents to identify deficiencies and improve patient safety. An orientation to the family medicine center and for each rotation must also take place. Integrating international medical graduates with diverse experiences, values and expectations into your educational and patient care systems helps to set the tone for program. Getting residents on the "same page" and tuned in to shared professional values is critical to resident morale and the development of a strong sense of *esprit de corps*. Orientation should involve residents in the process working together to meet the needs of your patients and your program's business objectives. Are your residents serving as role models for each other in terms of professionalism, practice-based learning and improvement, and systems-based practice?

K **Organizing and Auditing Your Files: Are You Ready?** *Lois Shuman*

Internal reviews, site visits, Medicare audits by CMS, fair hearings, and the yearly program reviews require that you maintain a number of different types of documents, records, data and minutes of meetings. Are your electronic and paper files complete? Are the files of other administrators complete? This session provides a checklist and guidelines for assessing the adequacy of your files.



National Center for Evaluation
of Residency Programs
Phone: 330-678-2011
FAX: 330-678-9199
dbosshart@ncerp.com
www.ncerp.com

WORKSHOP DESCRIPTIONS

Concurrent Sessions

3:30-4:30 **L** **You and Your Job: Descriptions, Reviews and Reclassifications**
Lois Shuman, Mary Zaglifa, M.S.T.

Does your job description accurately capture all that you do? What key phrases better communicate your skills and activities? How can you change your role, enhance your image and position in the organization, and capitalize on your strengths? How do you make the transition from secretary to program administrator/coordinator to program manager? Session includes key points to remember when undergoing a job review or requesting a reclassification. Bring your current job description.

M **Designing Measurement Tools to Assess the ACGME Competencies**
Donald A. Bosshart, Ed.D.

What are the key steps involved in the creation of measurement tools used to assess resident knowledge, attitudes, skills or the performance of complex tasks that demonstrate a range of ACGME competencies? The principles behind and processes to use to construct measurement tools, such as rating scales, checklists, questionnaires or different types of performance tests, will be described. The process used in scoring and interpretation of results and the indicators of validity and reliability will be discussed.

4:30-5:30 **Managing AOA- and ACGME-Accredited Programs**
Star Andrews, Donald A. Bosshart, Ed.D.

What are the advantages of offering a joint AOA- and ACGME-accredited program? What are the AOA requirements? How do you abide by them? Session includes discussion of meeting the challenges of the AOA match, lecture and supervision requirements. What is required to participate with an AOA Post-Graduate Training Institution (OPTI)? Session will include time for discussion on how to meet both sets of requirements and recruitment issues.

6 p.m. **Optional Dutch-treat Dine out**
Participants and their guests will depart the hotel lobby at walk to one of the city's fine dining establishments.

Wednesday, April 14, 2010

7:30-8:15 a.m. **Ask the Experts Roundtable Discussion**
Conference faculty and participants

Small-group sessions to discuss program management issues of general concern to program administrators/coordinators.

8:15-8:45 **Using Resident Work Products to Assess the Six Competencies**
Mary Zaglifa, M.S.T., Donald A. Bosshart, Ed.D.

The Family Medicine Review Committee requires that, at least each quarter, each resident receive reports of individual and practice productivity, financial performance, patient satisfaction and clinical quality. These also include patient no-show reports and performance with respect to business and service goals, practice efficiency and quality. In addition to performance in the Family Medicine Center, other productivity measures can be provided with the goal that residents will have a clearer sense of their practice and will develop the attitudes and skills of PBL&I and SBP. Session will also include a discussion of important positive and negative work products that measure the competencies.

8:45-9:45 **Case Study: Enhancing Your Resident Evaluation System**
Brenda Mueller

All programs now have educational objectives that may guide resident learning, but are infrequently integrated in the resident and curriculum evaluation process. Today's faculty provide global evaluations of the six competencies, but seldom on anchored scales. The University of Minnesota Program at Methodist Hospital incorporated revised educational objectives into an online evaluation form for each rotation. Forms are completed and process, and both the residents and program receive feedback to monitor performance and subsequent curricular evaluation.

10-10:30 **Case Study: Rethinking the Recruitment Process**
Diana Davila

The UT Southwestern Residency carefully examined its mission, recruitment strategies, selection methods, and key performance indicators with the goal improving results. Discussion of marketing strategies, outcomes and lessons learned.

10:30-11 **Recruiting Residents for the Transformed Practice of Family Medicine**
Jan Schaper, Sharon Tennant, Mary Zaglifa, M.S.T.

It is best if your program can recruit residents who understand the idea of the patient-centered medical home (PCMH) and want to develop their performance with respect to the six ACGME competencies. What can your program do to attract top-quality AMGs and IMGs who will embrace these new ideas and provide important leadership? How can a program use the six competencies and behavioral interviewing approaches to identify these individuals?

11-11:30 **Frequently Asked Questions About Recruitment**
Conference Faculty and Participants

Answers to frequently asked questions about recruitment issues and challenges.

11:30-12:30 p.m. **NCERP Residency Program Administrator/Coordinator Self-Assessment Quiz**

The successful residency program administrator has a working knowledge of the ACGME general and specialty-specific requirements, the ACGME competencies and the basics of how they are appropriately role modeled and measured. Knowledge of federal employment and immigration laws and procedures as well as key principles of personnel and organizational management are also important. The ability to use ERAS® and other programs to summarize ratings and performance measures into tables, charts, or graphs can help you apply the principles of quality and process improvement to residency education and patient care. Test your knowledge and comprehension and receive feedback

12:30-1:30 **N** **Lunch and Discussion of Quiz Results**
Over a limited lunch, score your quiz and discuss the answers to the quiz questions. Lunch fee \$8.86, including tax and gratuity. Order and pay for lunch by 9 a.m. Wednesday.

1:30-2:45 **Responding to Citations, Reconsideration Requests or Rebuttals, and Appeals of RC Adverse Actions**

Donald A. Bosshart, Ed.D., Mary Zaglifa, M.S.T.
Discussion of what to do when you receive an unfair or inaccurate citation or are faced with a proposed adverse action such as reduction in your resident complement, elimination of a teaching site, proposed probation or probation. Changes to ACGME policies and procedures related to probation and program closures will be discussed.

3-4 **Tour of Aiken Rhett House**

CONFERENCE FACULTY

Donald A. Bosshart, Ed.D.

Chairman and CEO, NCERP, Kent, Ohio

Dr. Bosshart received his doctorate in educational psychology in 1972 from the University of Illinois in Champaign, Ill., with a focus on educational measurement and evaluation. He began his career in medical education at the University of Texas Medical Branch at Galveston, where he spearheaded changes to the undergraduate medical curriculum and the evaluation process. His work with standardized patients, standards-based feedback systems and clinical skills received national recognition.



In 1977, Dr. Bosshart joined the newly created Northeastern Ohio Universities College of Medicine at which he played a key role in planning, developing, implementing and evaluating the six-year B.S./M.D. curriculum. In addition to his work with curriculum and evaluation, he was administrative director and chairman of the Principles of Ambulatory Care Course from 1978 to 1982. In 1984, he was also appointed special assistant to the president and worked with 45 graduate medical education programs in the eight affiliated community teaching hospitals.

In 1992, he founded the National Center for Evaluation of Residency Programs, which delivers educational and evaluation services to residency programs throughout the country and has organized and conducted more than 200 major faculty development seminars for more than 3,000 representatives of 2,000 residency programs. He twice chaired the Annual AAFP-STFM Conference on Patient Education. In 2003, Dr. Bosshart received the John H. Renner, M.D. Memorial Award of Excellence for his contributions to the field of patient education. Dr. Bosshart is a licensed psychologist in the state of Ohio, serves on the board of directors of Portage Path Behavioral Health in Akron, Ohio, and is board chairman of the Northeastern Ohio Psychiatric Institute.

Star Andrews

Program Coordinator, Family Medicine/Geriatric Residency, Carle Foundation Hospital, Urbana, Illinois

Ms. Andrews has worked in healthcare administration at Carle Clinic Association and Carle Foundation Hospital, in Urbana, Ill., for over 20 years. She began her career in 1985 as the branch supervisor at one of the Carle Clinic satellite sites. She began working for the family medicine residency program as an office coordinator in 1995. In 2006, Ms. Andrews was promoted to program coordinator for the geriatric fellowship and osteopathic residency program. She is an active member in all geriatric fellowship and osteopathic residency committees, as well as, the progress and promotions committee for the family medicine residency program. Ms. Andrews is also an active member of the Association of Family Medicine Administration (AFMA).

Diana Davila, C-TAGME

Diana Davila, Program Coordinator, Family Medicine Residency, University of Texas Southwestern Medical Center, Dallas, Texas

After five years as a loan officer and bill collector for American General Finance, Ms. Davila worked for 10 years as store manager for Vanhusen and Levi's Outlets. In 2000, she joined the UT Southwestern working at the front desk of the family medicine center. In 2003, she assumed her current duties.

Lisa Marquise

Graduate Medical Education Coordinator, Family Medicine Residency, Christus Santa Rosa Healthcare, San Antonio, Texas

Ms. Marquise received a bachelor of arts degree in interdisciplinary studies from the University of the Incarnate Word in May 2008 and joined the CHRISTUS Santa Rosa Family Medicine Department as the program coordinator during this time. She worked at the University of Texas Health Science Center at San Antonio from 1998 to 2008, where her last position was as the graduate medical education coordinator. At UTHSC, she had supervisory duties, worked closely with the coordinators of 50 residencies, and coordinated central GME office educational activities for all residents. She is currently pursuing a master's degree in education with a focus on organizational leadership and development at the University of the Incarnate Word.

Brenda Mueller

Program Coordinator, University of Minnesota/Methodist Hospital Family Medicine Residency, St. Louis Park, Minnesota

Ms. Mueller began her career in the outpatient setting, first as a trained medical assistant and subsequently as office manager. In 1995, she joined ProStaff Personnel Services, serving as the primary interviewer and then becoming a supervisor responsible for the orientation and management of over 300 temporary employees. In 2000, she joined the University of Minnesota/St Joseph's Hospital Family Medicine program as the residency coordinator, and moved in 2003 to her current position with the University of Minnesota/Methodist Hospital Family Medicine program. She has worked to improve the scheduling processes and update the Web site and resident recruitment efforts, and has participated in major curriculum review and resident well-being initiatives. Her most recent project involved the transition to a web-based evaluation system and the redesign of the rotation evaluations to be based on course objectives and on the ACGME core competencies.

Jan Schaper

Administrative Manager, Caney Valley Medical Clinic (FMC), Ramona, Oklahoma

After working for two years at Loma Linda Medical Center in medical insurance and billing, in 1995 she joined Caney Valley Medical Center as an administrator. In 1998, she was involved in starting the residency and was promoted to her current position. For the last six years, she has served on the city council for the town of Ramona.

Lois Shuman

Educational Coordinator, Department of Radiology, Indiana University School of Medicine, Indianapolis, Indiana

Ms. Shuman has given presentations at national meetings since 1994, speaking to physicians and coordinators in all specialties. She has worked with residents, fellows, medical students, and applicants for over 20 years. Ms. Shuman served as senior executive secretary to the chairman of the radiology department from 1982 to 1989, when she was appointed educational coordinator of one of the largest radiology programs in the United States. She is a founding member of the Association of Program Coordinators in Radiology and served as its past president for 2006-07. In 1993, she was a copy editor, typist and co-illustrator for the book, *The Country Preacher*, by H. Shuman. She is co-author of a publication in *Academic Radiology* regarding online evaluation of residents.

Sharon Tennant

Program Coordinator, Family Practice Residency Program, University of Oklahoma, College of Medicine-Tulsa Rural Program, Ramona, Oklahoma

Ms. Tennant taught pre-school children from 1986 to 1993. From 1993 to 2000, she held secretary/receptionist positions with Wesleyan Christian School, Lewar Agency in Bartlesville, Okla., and the Tulsa Rural Program. She started in her current position in 2000.



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CONFERENCE FACULTY

Juanita (Janie) Trevino

Academic Coordinator, Family Medicine Residency Program, University of Texas Health Sciences Center, San Antonio, Texas
Ms. Trevino has been with the Family Medicine Department at UTHSC at San Antonio for 21 years, starting in 1987 as a senior secretary. She has been promoted several times and in 2002, was promoted to her current position as academic coordinator. Ms. Trevino has received several recognition awards within the department. She has served as a volunteer at several shelters in San Antonio.

Elizabeth Westfall, C-TAGME

Program Coordinator, Family Medicine Residency Program, West Virginia University, Charleston Division, Charleston, West Virginia
Ms. Westfall began her career in education working in admissions, marketing and recruiting for West Virginia University in Morgantown. In 1990, she joined WV University Charleston Division, where she worked within the AHEC office coordinating third and fourth year medical students on rural rotations. In 1993, she joined the department of psychiatry where she served as the coordinator for the consultation and liaison psychiatry service team. In this role she worked with residents rotating on this service. In 2003, she joined the family medicine residency in her current position.

Mary Zaglifa, M.S.T.

Director of Educational Programs, University of Wisconsin Medical School -Wausau Program, Wausau, Wisconsin
From 1979 to 1983, Ms. Zaglifa was editor and research assistant for the Center for Family Studies at Northwestern University Medical School. After six years at the University of Chicago as lecturer and managing editor of the *Social Service Review*, she became a communications instructor at Northcentral Technical College in Wausau, Wis. In 1994, she joined the Family Medicine Residency Program as education coordinator. In 1999, she completed a master of science in teaching degree from the University of Wisconsin - Stevens Point. In 2002, she was recognized with the University of Wisconsin Department of Family Medicine Academic Staff Award for Excellence in Education. Ms. Zaglifa has been on the faculty of the National Center's coordinators workshops since 1995.

Planned Optional Tourist and Social Activities

ABOUT CHARLESTON

Participants have a unique opportunity to enjoy the spectacular history and culture of Charleston during Historic Charleston Foundation's Annual Spring Festival of Houses and Gardens. The trees and flowers should be blooming so you may want to extend your visit to enjoy these annual tours of the city's elegant historic private homes and gardens. The following are the tours offered each day of the workshop from 2-5 p.m.:

- King Street-Sunday, April 11 & Tuesday, April 13
- South Battery-Monday, April 12 & Friday, April 16
- Anson Street -Wednesday, April 14 & Saturday, April 17
- Glorious Garden-Thursday, April 15

For more information on the tours and how to get tickets, please visit: www.historiccharleston.org/news_events/festival.html.

You can also visit Charleston's spectacular aquarium and nearby Ft. Sumter. There are 180 striking churches that give Charleston its nickname as "the Holy City." Enjoy the artistic beauty of the city's breathtaking architecture. For additional information about the city visit: <http://www.charlestoncvb.com>.

Haunted Historic District Walking Tour Monday, April 12, at 7 p.m.

The NCERP has contracted with Ed Macy Tours for a ghost walking tour. The tour is approximately 1 hour and 20 minutes, traverses about $\frac{3}{4}$ of a mile through the Old Citadel, the College of Charleston, and the oldest neighborhood in the city. There will be stories about real ghosts, not legends or tales. Cost \$15 per person, space limited, advance reservations required, no refunds. Depart from the lobby of the Holiday Inn Historic District promptly at 7 p.m. on April 12.



Aiken-Rhett House

Photo courtesy of the Historic Charleston Foundation

Aiken-Rhett House Wednesday, April 14, at 3 p.m.

Participants and their guests will depart the hotel lobby and walk to 48 Elizabeth Street. The Aiken-Rhett House offers a glimpse of life in the 19th Century unavailable anywhere else in Charleston. The Aiken-Rhett House was built by merchant John Robinson in 1818, was later expanded and redecorated by former governor William Aiken, Jr. and his wife in the 1830's and 1850's, but has survived virtually unaltered since 1858. Participants will tour the property's main and original outbuildings, such as the kitchens, slave quarters, stables, privies and cattle sheds. As an intact "urban plantation," the Aiken-Rhett property is an accurate depiction of the culture of early Charleston and reveals the interconnections among all members of the household. The tour is free for workshop participants and \$10 per guest. For more information, please visit: www.historiccharleston.org

HOTEL AND REGISTRATION INFORMATION

Accommodations:

Reservations should be made directly with the Holiday Inn Historic District located at 125 Calhoun Street, Charleston, South Carolina 29401. The hotel phone number is (843-805-7900). Tell them you are with the "National Center for Evaluation of Residency Programs." The room rate is \$159 for single or double occupancy.

Please make your reservations by March 12, 2010, to secure the group rate. Those wishing to arrive in Charleston early should be aware that hotels usually sell out on Friday and Saturday nights. Make your reservations early. The room rate at the conference hotel on the Saturday prior to the workshop is \$209. If you have difficulty obtaining a room at the Holiday Inn Historic District, please call NCERP for information on alternate lodging. This award-winning, full-service hotel features oversized rooms, an outdoor pool, fitness center and restaurant. Located in historic Charleston on the corner of Meeting and Calhoun Streets, the ambiance of the Old South is reflected in the hotel's original artwork, period antiques and furnishings. The hotel has been recognized as the best Holiday Inn in the world for the past several years. It is 20 minutes from the airport and only blocks away from King Street, the City Market, and the Battery. For more information about the hotel, please visit www.charlestonhotel.com.

Workshop Registration:

Complete the Registration Form and mail it in with your \$475 registration fee to the National Center for Evaluation of Residency Programs, 315 Elmwood Drive, Kent, Ohio 44240 by the registration deadline of **March 12, 2010**. You can also reserve your space now by faxing your form to 330-678-9199. Late registration requires telephone confirmation and payment of a \$25 late registration fee. No refunds for cancellation after the registration deadline.

Air Travel Discounts:

Continental Airlines has special reduced fares for this meeting. For Continental, call MeetingWorks at 800-468-7022. Give them the agreement code C70M2E and Z code ZGMN to obtain the discount.



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dbosshart@ncerp.com
www.ncerp.com

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Credit Card Type (circle): MasterCard VISA American Express

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Signature _____ Amt. Charged _____

Billing Address for Credit Card:

City _____ State _____ Zip _____

Note: Receipt will be sent to the participant registered below.
If payment is for multiple participants, list names here:

Registration Form: **Family Medicine Residency Program Administrators/Coordinators Workshop** (Please print clearly.)

April 12-14, 2010, at the Holiday Inn Historic District in Charleston, South Carolina

Name _____ Title _____

Program Name _____ Please list any fellowships: _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ E-mail _____

Monday, April 12, Please select one session from each time period listed below

New Administrator/Coordinator Session: Accreditation Overview

New Administrator/Coordinator Session: The ACGME Competencies and Evaluation Requirements

Tuesday, April 13, Please select one session from each time period listed below

9:15-10 a.m. A or B

10:15-11:15 C or D

11:15-12:15 p.m. E or F

12:15-1:30 G

1:30-2:30 H or I

2:30-3:30 J or K

3:30-4:30 L or M

Wednesday, April 14, Please select the session below if you plan to attend

12:30-1:30 p.m. N

Optional Social Activities

Yes, I plan to take the Haunted Historic District Walking Tour Mon., April 12, 7-8:15 p.m. ___ guests, in addition to myself.

Yes, I plan to tour the Aiken-Rhett House on Wed., April 14, at 3-4 p.m. ___ guests, in addition to myself.

Payment Calculation Form:

___ people taking walking tour (# X \$15) _____

___ guests to Aiken-Rhett (# of guests X \$10) _____

Workshop Registration (\$475) _____

Total amount paid _____

National Center for Evaluation of Residency Programs

Our Services

We assist programs in obtaining and maintaining accreditation by the Accreditation Council for Graduate Medical Education. This may involve any or all of the following:

- ✓ Site visits to programs to assess compliance with ACGME requirements and/or sound educational principles.
- ✓ Site visits to programs to assess attractiveness to both high-quality AMGs and IMGs.
- ✓ Gather, assess, synthesize and evaluate information about the processes and outcomes of graduate medical education programs from applicants to GME programs, residents enrolled in the program, faculty teaching in the programs and program graduates. Confidential reports include clear recommendations and action plans.
- ✓ Assist programs with plans for outcome assessment required by the ACGME, the development and revision of measurement tools, advice on implementing evaluation tools, setting criteria or performance standards, interpreting evaluation results and recommending changes to the evaluation process, the educational program, or the context of the program.
- ✓ Provide training to faculty and program administrators about how to effectively manage and operate the program, market the program and recruit residents.

PIF Evaluation

- ✓ Review, critique and edit program information forms for clarity and compliance with ACGME program requirements.

Residency Program Survey Analysis

- ✓ Post-Match Survey
- ✓ Residency Assessment Form
- ✓ Survey of Graduates

Who We Are

An objective, independent and confidential source of professional information and expertise, the National Center assists program directors and institutions in enhancing residency programs. Through professional methods for collecting and interpreting assessments of program effectiveness by residents, program applicants, and graduates, the Center provides confidential evaluative feedback. The Center has evaluation methods to assess residents and curriculum quality, analyzes recruitment materials and plans, and offers consultation regarding RC and ACGME applications. The Center provides consultations, and conducts conferences, seminars, and speaking engagements on various topics, including educational methods.

Photo courtesy Charleston Convention and Visitors Bureau



Workshop focused on developing
excellence in Family Medicine Residency Education.

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Enhance Your Skills. Network with others.
Enjoy historic Charleston!

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