



ASSOCIATION  
OF PEDIATRIC  
PROGRAM  
DIRECTORS

**HANDBOOK FOR  
PEDIATRIC FELLOWSHIP  
PROGRAM DIRECTORS**

**APPD FELLOWSHIP DIRECTORS' EXECUTIVE COMMITTEE**

**Updated September 2018**

Dear Fellowship Program Directors,

We know the roles and responsibilities of a Fellowship Program Director can be both exciting and daunting. The APPD Fellowship Directors' Executive Committee has created a handbook for our community of pediatric Fellowship Program Directors (FPD) to help navigate the various administrative and teaching responsibilities. We used other handbooks created within APPD as our models which we then adapted to better reflect the tasks most salient to the fellowship setting. Throughout this virtual text we provide links to connect you to the most up-to-date information about running a Fellowship Program.

Our executive committee and collaborating FPD developed the content for each of the sections, with review and feedback provided by the APPD Board and APPD Faculty and Professional Development Learning Community. We hope this handbook will serve as a valuable resource to support not only FPD but also Associate FPD, Vice Chairs of Education, Super-fellowship Directors and Fellowship Coordinators in their work in graduate medical education, as we all focus on training the next generation of subspecialists to take outstanding care of children.

We expect this handbook to continue to evolve to best meet your needs. Please feel free to suggest revisions. We hope that you find this helpful.

Sincerely,

Your APPD Fellowship Directors' Executive Committee

Pnina Weiss  
Yale University School of Medicine  
pnina.weiss@yale.edu

Jennifer Kesselheim  
Harvard Medical School  
Jennifer\_kesselheim@dfci.harvard.edu

Angela Myers  
Children's Mercy, Kansas City  
amyers@cmh.edu

Christine Barron  
The Warren Alpert Medical School at Brown  
University  
cbarron1@lifespan.org

Kathleen McGann  
Duke University Medical Center  
kathleen.mcgann@duke.edu

Collaborator:

Kathy Mason  
Warren Alpert Medical School at Brown  
University  
Katherine\_mason1@Brown.edu

Meredith Bone  
Lurie Children's Hospital  
mbone@lurie.childrens.org

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## PROGRAM ADMINISTRATION

### Important Organizations

**APPD (Association of Pediatric Program Directors):** Provides a supportive network for pediatric residency and fellowship program directors and coordinators. Membership is through pediatric residency programs. <https://www.appd.org>

#### APPD conferences:

- Fall Meeting
- Spring Meeting
- Forum for Fellowship Directors at PAS (Friday before PAS starts)

#### APPD resources:

APPD Share Warehouse: allows for collective sharing of pediatric educational materials with acknowledgement of scholarly activity.

<https://www.appd.org/shareWarehouse/index.cfm>

APPD LEARN (Longitudinal Educational Assessment Research Network). This research network provides support for multi-centered, collaborative investigation and a centralized data collection system. <http://learn.appd.org/>

APPD LEAD (Leadership in Educational Academic Development). This is a nationally recognized program with a curriculum that focuses on organizational leadership, competency-based curriculum development, faculty development, residency and fellowship program administration, scholarship and career development.

[https://www.appd.org/ed\\_res/LEAD.cfm](https://www.appd.org/ed_res/LEAD.cfm)

The APPD has a helpful Glossary of Pediatric Organizations and Acronyms: [APPD Glossary of Pediatric Organizations and Acronyms \(pdf\)](#)

**ACGME (Accreditation Council for Graduate Medical Education):** Accredits sponsoring institutions and residency/fellowship programs\*. FPD and fellowship program coordinators should be aware of and maintain program compliance with all Common Program Requirements and Subspecialty Program Requirements. <http://www.acgme.org/>

ACGME gathers accreditation information on programs through the following:

- Annual Accreditation Data System (ADS) report. This report is typically due in August or September through the ACGME website. Programs may update ADS data at any time throughout the year. Remember to update Program Director CV section regularly to reflect scholarly activities.
- Annual surveys of core faculty and all fellows, typically in February or March (Fellow ACGME Survey results available to FPD if completed by  $\geq 5$  trainees)
- Self-Study and 10-year site visit
- ACGME has discretion to make impromptu accreditation site visits based on ADS data or survey results

ACGME also visits sponsoring institutions through Clinical Learning Environment Review (CLER) with focus on patient safety; health care quality; care transitions; supervision; fatigue management and mitigation; and professionalism.

Programs are required to report Milestone assessments of the 21 sub-competencies semi-annually for every fellow in a pediatric subspecialty training program.

To find descriptions of accreditation, program requirements and to access the ADS system, [www.acgme.org](http://www.acgme.org)

**ABP (The American Board of Pediatrics):** Certifies individuals\* in general pediatrics and recognized pediatric subspecialties. The ABP website has specific information regarding the core curriculum for fellows, scholarly activity requirements, an evaluation and tracking program for fellows, entrustable professional activities for subspecialties, Subspecialty In-Training Examinations (SITE), content outlines for board examinations, and maintenance of certification (MOC).

FPD should go to the “FOR PROGRAM DIRECTORS” tab, <https://www.abp.org/content/program-directors>

In addition, there are several useful resources including: Fellowship Program Director’s Guidebook to the ABP: <https://www.abp.org/sites/abp/files/pdf/fellowspguide17.pdf> and APPD/ABP Guide to Professionalism: <https://www.abp.org/professionalism-guide>

**\*Note: ACGME accredits programs; ABP certifies individuals.**

**AAP (American Academy of Pediatrics):** This national organization of pediatricians offers numerous resources related to training. <https://www.aap.org>

FPD may choose to use AAP Pedialink (online learning center) and/or EQUIPP (Quality Improvement course) available on [www.pedialink.aap.org](http://www.pedialink.aap.org)

**CoPS (Council for Pediatric Subspecialties):** This organization’s purpose is to communicate and collaborate across pediatric subspecialties and stakeholder organizations, such as AAP, ABP and APPD. Council members each represent a subspecialty or allied pediatric organization. Past initiatives led or supported by CoPS include the change in fellowship start date and moving to a common fall Match date for all pediatric subspecialties. Recent activities may be found on the website, which also includes subspecialty descriptions and a list of advisors for residents or trainees. [www.pedsubs.org](http://www.pedsubs.org)

**SPIN (Subspecialty Pediatrics Investigator Network):** a medical education research network created to evaluate the education and assessment of pediatric subspecialty fellows. It is a collaborative effort of the ABP, the APPD Fellowship Directors’ Executive Committee, the [APPD LEARN](#), CoPS, and each

pediatric subspecialty's program director network. Up to two representatives from each subspecialty serve on the SPIN Steering Committee and are responsible for recruitment and communication within their subspecialty [www.pedsubs.org/SPIN/index.cfm](http://www.pedsubs.org/SPIN/index.cfm)

**FREIDA (Fellowship and Residency Electronic Interactive Database):** This is an on-line database of graduate medical education training programs accredited by ACGME. Data are updated annually through the GME Track, but FPDs can provide additional updated information at any time. Website: [www.ama-assn.org/go/freida](http://www.ama-assn.org/go/freida)

**ERAS/NRMP (Electronic Residency Application Service/National Resident Matching Program):**

- AAMC (Association of American Medical Colleges) administers ERAS which is a service that transmits applications and documents to programs. Programs need to update their information for fellowship positions annually. [www.aamc.org](http://www.aamc.org)
- NRMP conducts the Match computation. Starting 2018, all pediatric subspecialties will be in the Pediatric Fall Subspecialty Match. Programs need to register annually and comply with set deadlines to confirm quotas and submit their rank lists. [www.nrmp.org](http://www.nrmp.org)

**Subspecialty Program Director organization:** In most subspecialties there is a fellowship program director organization or committee. It is recommended that each FPD seek out the leader of their subspecialty PD group and join its listserv. The Chair of the committee for subspecialty specific training programs often has advice to share, along with resources related to subspecialty specific programmatic questions. These subspecialty-specific groups often meet during their national subspecialty meetings.

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## [ACGME Program Requirements](#)

The Common Program Requirements document outlines expected competency skills, quality improvement education along with metrics, importance of a culture of safety, defines supervision levels, and discusses fatigue mitigation, well-being, transitions of care, clinical and educational work period limits, and differentiates between moonlighting, at home call, night float and in-house call. These requirements serve as a blueprint for the sponsoring institution or department, as well as providing guidance for program directors on multiple issues, from eligibility requirements to fellow transfers and educational programming.

<https://www.acgme.org/What-We-Do/Accreditation/Common-Program-Requirements>

**Revised ACGME Common Program Requirements for Fellowship Sections I-V, will go into effect July 1, 2019. They may be found here:**

<http://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRFellowship2019.pdf>

**A table of implementation dates for ACGME Common Program Requirements for Fellowship Sections I-V may be found here:**

<http://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRFellowshipImplementationTable.pdf>

**In 2017 changes were made to Section VI of the ACGME Common Program Requirements around the topics of:**

- VI.A. Patient Safety, Supervision, and Accountability
- VI.B. Professionalism
- VI.C. Well-Being
- VI.D. Fatigue Mitigation
- VI. E. Clinical Responsibilities, Teamwork, and Transitions of Care
- VI.F. Clinical Experience and Education (Formerly Duty Hours)

**A summary of changes to ACGME Common Program Requirements Section VI may be found here:**

<http://www.acgme.org/What-We-Do/Accreditation/Common-Program-Requirements/Summary-of-Proposed-Changes-to-ACGME-Common-Program-Requirements-Section-VI>

**Some of the Section VI program requirements went into effect July 1, 2017, but others are not subject to citation until July 1, 2019. The table of implementation dates may be found here:**

<http://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/2017CPRSectionVIImplementationTable.pdf>

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## Committees

**The following committees are required by the ACGME for each fellowship program:**

- The descriptions include new revisions effective July 2019

### **PEC: Program Evaluation Committee**

- Responsibilities of the PEC are outlined in the ACGME common program requirements (V.C)
- The PEC is composed of at least 2 faculty members, at least one of whom is core faculty, and at least 1 fellow. This PEC should review curriculum, outcomes from previous Annual Program Evaluations, ACGME letters of notification (including citations, areas for improvement), patient care quality and safety, aggregate fellow and faculty well-being, recruitment/retention, workforce diversity, engagement in QI/patient safety, scholarly activity, ACGME resident/faculty surveys, and program written evaluations. The PEC must evaluate the program's mission and aims, strengths, areas for improvement and threats. For fellow performance, the PEC should review aggregate milestone achievement, in-training exams, board pass rates and graduate performance. For faculty performance, it should assess aggregate faculty evaluation and professional development. The PEC must meet at least annually to systematically review the program and develop an action plan. Utilization of the annual program evaluations, completed annually by fellows and faculty, can help direct the PEC's action plan. In some programs, the PEC meets more frequently to address focused areas of the program. Minutes of the meeting(s) with the program goals and annual action plan must be documented, distributed and discussed with teaching faculty and fellows, and be available for ACGME review if requested.

### **CCC: Clinical Competency Committee**

- Responsibilities of the CCC are outlined in the ACGME common program requirements (V.A), and include decisions related to Subcompetency/Milestone reporting for each fellow, remediation, advancement to the next year, readiness for independent practice & graduation.
- The CCC is composed of at least three members; at least one should be core, while others may be faculty from the same or other programs, or other health professionals with extensive experience with the fellows. This committee must review all evaluations at least semiannually, complete milestone evaluations and advise the program director regarding each fellow's progress. The FPD should use this information during required semi-annual meetings with each fellow. Milestone levels for 21 fellow Sub-competencies are determined by the CCC and reported to ACGME semiannually.
- ACGME CCC Guidebook:  
<http://www.acgme.org/Portals/0/ACGMEClinicalCompetencyCommitteeGuidebook.pdf?ver=2017-10-18-141730-107>

### **SOC: Scholarship Oversight Committee**

- Responsibilities of the SOC are outlined in ACGME specialty-specific program requirements (IV.B) and are outlined by ABP. <https://www.abp.org/content/scholarly-activity#oversight>
- The SOC for each fellow is composed of 3 or more individuals (one member from outside the subspecialty discipline; the PD may attend meetings but cannot be a voting member). The SOC provides ongoing review of the scholarly project and signs off on the fellows' work product and personal statement which are submitted to the ABP.

## FPD Year at a Glance

Common to all programs	Specific to your program:
<ul style="list-style-type: none"> <li>• Recruitment</li> <li>• Orientation</li> <li>• Evaluations - based on Objectives, Competencies, Subcompetencies/"Milestones"               <ul style="list-style-type: none"> <li>○ Faculty of Fellow</li> <li>○ Trainee Self-Assessment</li> <li>○ Multi-Rater (AKA 360°, e.g. social workers, nurses, RTs, NPs, HUC, administrative staff)</li> <li>○ Patient/ Parent/ Caregiver</li> <li>○ Annual Fellow Evaluation of Faculty (confidential)</li> <li>○ Evaluation of Presentations</li> <li>○ Evaluation of Procedure(s)</li> <li>○ Final Summative Evaluation of Trainee</li> </ul> </li> <li>• Graduation</li> <li>• Official paperwork</li> <li>• Budgets</li> <li>• CCC</li> <li>• PEC</li> <li>• SOC</li> <li>• Semi-annual reviews with each fellow</li> <li>• Core curriculum (if present)</li> <li>• Semi-Annual meetings with Core Program leadership, 'Super' FPD, or Vice Chair of Education</li> </ul>	<ul style="list-style-type: none"> <li>• Subspecialty curriculum: conferences, simulation, procedures, projects</li> <li>• Meetings: GME, Chair, Division chief, Fellows</li> <li>• Retreats</li> <li>• Hospital committees</li> <li>• Block schedules</li> <li>• Program orientation</li> <li>• QI projects – involving each fellow</li> <li>• Annual ILP for each fellow</li> </ul>

### **SAMPLE of YEARLY SCHEDULE for FPD**

Here is a **representative** example from a few of our institutions and is meant as a guide. Some programs may vary the activities and timing.

#### JULY

- GME orientation, details provided by GME office (typically 1-2 days; recommended no earlier than July 5)
- Fellowship begins (recommended no earlier than July 7)
- Second week in July – Program orientation (include program expectations/ guidebook/policies/curriculum/goals and objectives)
- Mid-July reporting to ABP on all new and continuing fellows (add new fellow and ensure info on the others is correct)
- Individualized Learning Plan/Milestone Self-Assessment

## JULY (cont)

- Obtain residency ITE scores for incoming fellow, if not done already (to help guide pediatric board preparation)
- Obtain residency milestone results for 1<sup>st</sup> year fellow (ACGME website)
- Mid-July review applications on ERAS
- Meet with program coordinator to develop interview structure/plan (e.g. days of the week, who to interview with, meals, information to provide applicants, schedule ranking meeting(s))
- Fellowship applicant screening and invitations to interview
- Meet with new fellow(s) to discuss study schedule for the general pediatrics exam and potential research projects

## AUGUST

- Meet with coordinator to review the ADS Annual Program Update (ACGME)
- Activate program in NRMP
- Meet with 3<sup>rd</sup> year fellow(s) to strategize their job search/ write LOR as needed
- Fellow applicant interviewing (through November)

## SEPTEMBER

- Mid-September ACGME ADS annual program update due
- Fellowship applicant Interviews
- Annual internal program review due to GME office
- Review 3<sup>rd</sup> year fellow(s)' CV and cover letter

## OCTOBER

- Fellowship applicant interviews
- First year fellow sits for general pediatric certifying exam
- First rank meeting
- Meet with first year fellow(s) to follow up discussion on research projects and SOC

## NOVEMBER

- Fellowship applicant interviews
- Final rank meeting
- Early-November send out 360° evaluations (patients/families, peer, nursing, SW, etc.)
- Early-November rank list for next AY opens (NRMP)
- Mid-Late November rank list for next AY is due (NRMP)
- Schedule Scholarly Oversight Committee (SOC) meetings

## DECEMBER

- Review 360 fellow evaluations & self-assessment
- Clinical Competency Committee (CCC) Meetings
- Scholarly Oversight Committee (SOC) Meetings
- Mid-December Match Day – Welcome Letters
- ACGME Milestone Reporting following CCC meeting
- Remind incoming Fellows to apply for state license for July start
- Program Evaluation Committee (PEC) Meeting (if done biannually)

## JANUARY

- Semi-Annual Review Meetings between FPD and each fellow (review evaluations, ILP, QI plans, In-training exam results; global mentoring / career advising; document meeting with FPD and trainee signatures/date)
- SOC Meetings

## FEBRUARY

- Develop fellows' schedule for July-December for next academic year
- Abstract deadline for Resident/Fellows research day
- ACGME Annual Faculty and Fellow Survey sent out

## MARCH

- Internal Program Evaluation sent to faculty and fellows (if done annually)

## APRIL

- ACGME Annual Faculty and Fellow Survey Due – send reminders to complete
- Internal program evaluations from faculty and fellows (due April/May)
- Email/Conference call with incoming fellow(s) regarding vacation/rotation requests
- Work with Coordinator to assure all requirements for incoming fellows (documentation, state license, etc.) progressing to assure an on-time start in July

## MAY

- Late-May Scholarly Research Symposium (varies with institution)
- Meetings: CCC, PEC, SOC
- Prepare draft Annual Program Evaluation (APE)
- Prepare Didactic/Conference Schedule for next year
- Update FREIDA and setup ERAS for next academic year

## JUNE

- Meetings: PEC, SOC
  - Semi-Annual Reviews by FPD with each fellow
  - ACGME Milestones Reporting
  - Graduation Ceremony and/or Party (Department & Division)
  - Complete APE
  - Prepare Orientation Schedule
  - Recruitment Committee Meeting
  - Review/update program policies, program aims, competency-based goals and objectives for all educational experiences
-

## Core Curriculum

The ACGME requires programs to develop and offer core curricula for subspecialty trainees, and the ABP requires trainees to participate in these programs and develop an in-depth understanding of the topics that are relevant to all pediatric subspecialty fellows. The core curriculum requirements established by the ABP and the ACGME are listed below.

**Scholarly activities required by the ACGME and ABP:** <https://www.abp.org/content/scholarly-activity#core>

1. Biostatistics
2. Clinical and laboratory research methodology
3. Study design
4. Preparation of applications for funding and/or approval of clinical or research protocols,
5. Critical literature review
6. Principles of evidence-based medicine
7. Ethical principles involving clinical research
8. Teaching individuals & groups in various settings/modalities, utilizing principles of adult learning
9. Skills in curriculum development and delivery of information
10. Provision of feedback to learners
11. Quality Improvement training

For further detail on ABP curricular requirements click this link:

<https://www.abp.org/sites/abp/files/pdf/saccoutline.pdf>

### **Additional ACGME required core curricular elements**

1. Patient Safety
2. Quality Improvement
3. Professionalism
4. Well Being
5. Fatigue mitigation

For further detail on ACGME curricular requirements (effective July 1, 2019) click this link:

<http://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRFellowship2019.pdf>

### **Resources**

#### **Association for Pediatric Program Directors (APPD)**

One of the ideal places to seek out already developed core and subspecialty curricula is via the APPD Share Warehouse which provides curricula that have been submitted by members and often peer reviewed before publication on the website. <https://www.appd.org/shareWarehouse/index.cfm>

Another potentially useful reference are the resources of the *Enhanced Learning Session #18, Developing a Core curriculum for Pediatric Subspecialty Fellowships* of the APPD 2018 Annual Spring Meeting - see link here: <https://www.appd.org/meetings/2018SpringMeetingPres.cfm>

Examples include:

1. Resources for Education in Culturally Effective Care
2. Problem-based learning curriculum for personal and system QI
3. Professionalism curricula
4. Systems-based practice curricula
5. Resident and Physician Burnout, Resilience and Self-Care
6. Career Development

### **Pediatric Academic Societies (PAS) Fellows Core Curriculum**

The core curriculum series at the PAS meeting, sponsored by the APPD and PAS, is presented as workshops which focus on gaining skills and knowledge and may serve as a foundation for fellows with limited or no exposure to some of the required topics. Fellows who complete the series receive a certificate of completion. There is a fee required to take the course. <https://www.pas-meeting.org/program/>

### **APA Core Curriculum**

The APA is developing a National Fellows Core Curriculum (NFCC), a free online training curriculum for fellows of all disciplines. This curriculum is focused on the required core content for all subspecialty fellows. This curriculum is peer reviewed and endorsed by the Council of Pediatric Subspecialties. The first offering will consist of mini-courses which focus on basic research training including:

1. Responsible conduct of research
2. Biostatistics
3. Epidemiology of clinical studies
4. Writing skills

### **Other topics that should be considered in the core curriculum for subspecialty fellows include:**

1. Professionalism and Ethics
2. Resilience and Wellbeing
3. Constructing your CV (and possibly an educator's portfolio)
4. QI and research manuscript writing
5. Grant writing
6. How and where to find funding opportunities
7. Navigating the IRB
8. Developing an analysis plan for a research project
9. Reading and reviewing journal articles
10. Receiving feedback and turning it into achievable goals
11. Clinical reasoning
12. Balancing autonomy and supervision
13. Leadership (e.g. personality inventories, leadership styles, change management)
14. Job negotiation and writing a cover letter
15. Communication skills and conflict resolution
16. Protection of Human Subjects (e.g. Citi training)
17. Social determinants of health
18. Program funding (e.g. CHGME, Department, T32, other grants/foundations)
19. Current health policy and health systems and departmental funding (reimbursement, billing, etc.)
20. Transition from residency to fellow and then from fellow to faculty
21. Cultural Competency

### **Departmental-based core curriculum**

Many institutions bring all pediatric subspecialty fellows together for didactics and other experiential learning opportunities to cover the topics universal to all trainees. Trainees outside the department may be included.

Departments have developed educational sessions in a variety of formats. Some options are:

1. Weekly or monthly sessions for an hour (early in the morning, over lunch, end of the day)
  2. Quarterly ½ day sessions
  3. Fellows' college or boot camp for 1-2 weeks at the onset of training
  4. Intermittent full day sessions
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## Assessment of Fellows

In 2012-2013, the ACGME paradigm for assessment of residents and fellows in pediatrics shifted to a milestone-based approach in an effort called the “Next Accreditation System” (NAS). The Pediatrics Milestone Project was initiated by several leaders within the pediatric GME community whose efforts have been summarized in Academic Pediatrics (Hicks et al. J Grad Med Ed 2010 <https://www.ncbi.nlm.nih.gov/pubmed/21976091>). Based on this work, assessment for fellows moved away from attempting to evaluate fellows’ knowledge, skills, and attitudes with regards to the 6 broad domains of Competence (Patient care, Medical knowledge, Systems-based practice, Practice-based learning and improvement, Communication and interpersonal skills, and Professionalism). Instead, pediatric educators developed 51 subcompetencies, each mapped to one or more of the 6 large domains of competence, which together must be achieved to successfully complete training. Accompanying each competency is a scale with descriptive anchors that conveys the developmental trajectory for that competency, from novice to expert, and these developmental stages are called milestones. Twenty-one of these subcompetencies were chosen to be reported to the ACGME every 6 months for pediatric subspecialty fellows.

The ACGME website provides full details of the requirements, including specifics on the 21 pediatric specific milestones to be reported semi-annually on each fellow. Please see:

<http://acgme.org/Portals/0/PDFs/Milestones/PediatricsMilestones.pdf?ver=2017-07-24-124802-340>

*In addition, answers to Frequently Asked Questions about the Milestones are available on the Milestones web page: <https://www.acgme.org/Portals/0/MilestonesFAQ.pdf>*

*A full report on the Pediatrics Milestone Project, including background information on each set of Milestones, is located at*

[http://www.acgme.org/Portals/0/PDFs/Milestones/320\\_PedsMilestonesProject.pdf](http://www.acgme.org/Portals/0/PDFs/Milestones/320_PedsMilestonesProject.pdf).

Each fellow’s milestone ratings and results of individual evaluation should be summarized and discussed in the CCC. Program directors are often interested in seeing examples of assessment instruments that have been successfully integrated into fellowship training programs. Most FPD are happy to share upon request. APPD Share Warehouse also contains some models to follow. <https://www.appd.org/shareWarehouse/index.cfm>

In addition, the CoPS website provides examples available at:

[http://pedsubs.org/issues/pedmile\\_AbbreviatedMilestonesVersions\\_and\\_EvaluationTools.cfm](http://pedsubs.org/issues/pedmile_AbbreviatedMilestonesVersions_and_EvaluationTools.cfm)

FPD are often in the position to provide ongoing faculty development to the teaching faculty tasked with supervision and assessment of fellows. These efforts involve training faculty about how and when to complete the evaluation instruments, the importance of timeliness, and how to avoid some of the

common pitfalls of assessment such as “grade inflation” and the halo effect. In addition, fellows must not only receive high quality assessments but should benefit from frequent high-quality feedback. However, many members of the teaching faculty do not feel confident or are lacking a consistent approach to giving feedback to fellows. Again, FPD need to educate their faculty as needed to optimize feedback to their fellows, and much has been published in the medical literature regarding best practices in feedback. A helpful publication is here (Ramani and Krackov, Med Teach 2012) <https://www.ncbi.nlm.nih.gov/pubmed/?term=Twelve+tips+for+giving+feedback+effectively+in+the+clinical+environment>.

Entrustable professional activities have been developed for each of the pediatric subspecialties and should provide a framework to help supervisors decide when trainees are ready for unsupervised practice. They are the important, everyday “professional activities” that a physician may be “entrusted” to perform without supervision. They provide a practical context for the competencies and milestones.

Information about the subspecialty EPAs may be found on the CoPS and ABP websites.

<http://pedsubs.org/issues/EPAs.cfm>

<https://www.abp.org/subspecialty-epas>

This is an excellent article about EPAs: Gilhooly et al, Pediatrics 2014  
[http://pediatrics.aappublications.org/content/133/Supplement\\_2/S78](http://pediatrics.aappublications.org/content/133/Supplement_2/S78)

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## Program Assessment and Self Study

Longitudinal, comprehensive evaluation of the fellowship program is critical to maintaining a high-quality educational environment.

The ACGME requires that the program be evaluated in a formal, systematic manner by a Program Evaluation Committee (PEC) at least annually. The Committee should generate a written annual Program Evaluation. Areas that must be tracked include resident performance, faculty development, graduate performance, program quality and progress on action plans. Potential sources of data are listed below.

### **Fellow Performance**

- Evaluations of fellows
- In-training examinations

### **Graduate Performance**

- Board certification examination (% taken / % passed)
- Graduate surveys

### **Faculty Development**

- Faculty or leadership development programs
- Fellows' evaluations of faculty

### **Program Quality**

- ACGME citations or areas for improvement
- Previous Annual Program Evaluation data, including action plans and outcomes data for improvements made
- Fellows' and faculty evaluations of the program
- ACGME Fellow and Faculty Surveys
- Goals and Objectives
- Case Log and clinical experience data

The fellows and faculty must have an opportunity to evaluate the program confidentially and in writing at least annually.

However, more frequent evaluation of the program is beneficial as it allows more timely feedback.

The ACGME reviews programs in a "continuous" manner based on annual resident and faculty surveys and updates to the web-based Accreditation Data System (ADS).

The ACGME self-study is required every 10 years, which is followed by a full accreditation site visit 18-24 months later. The self-study is a comprehensive assessment of the program which includes program aims (<http://www.acgme.org/Portals/0/PDFs/SelfStudy/SSAimsIPLK.pdf>) and environment. It incorporates a SWOT (strengths, weaknesses, opportunities and threats) analysis, the self-study is done in conjunction with the core residency program. Details on the self-study process may be found at (<http://www.acgme.org/What-We-Do/Accreditation/Self-Study>)

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# PROFESSIONAL DEVELOPMENT

## Educational and Professional Development Opportunities

### 1. AAMC Programs

The AAMC offers a number of faculty development programs for faculty at different stages of their career. For a full listing, please refer to their website for academic faculty development:

<http://www.aamc.org/meetings/>. We have highlighted some of the AAMC Programs below (<https://www.aamc.org/professional-development/>):

- a. Early Career Women Faculty Professional Development Seminar: Three and a half day seminar provides women at the assistant professor or instructor level with the knowledge and skills required to navigate the academic medicine enterprise, as well as continue on the path to leadership for those in the early stages of leadership positions within their discipline, department or institution. Attendees develop academic medicine career building skills such as communication, conflict management, and financial acumen, plus employ strategic thinking about their career and leadership development.
- b. Mid-Career Women Faculty Professional Development Seminar: Five-day professional development seminar focuses on women physicians and scientists holding medical school appointments at the associate professor level, and holding leadership positions within their discipline, department or institution. Designed to provide mid-career faculty with the knowledge and skills required for advancement to leadership roles in academic medicine; covers a variety of leadership topics, emphasizes skills needed to advance to senior roles within academic medicine, and provides time for participants to strategically reinvest and realign their career with their goals.
- c. Medical Education Research Certificate (MERC) program: Intended to provide the knowledge necessary to understand the purposes and processes of medical education research, to become informed consumers of medical education research literature, and to be effective collaborators in medical education research. Improve educational research skills for those with a medical education background but less experience conducting educational research. Program consists of nine workshops, all of which must be taken for the certificate; offered on a rotating basis at the Annual AAMC meeting and each Regional GEA meetings. *More information at* <http://www.aamc.org/members/gea/merc.htm>
- d. Minority Faculty Career Development Seminar: Three-day seminar designed for junior faculty (senior clinical and research fellows, instructors, and assistant professors) and post docs (MDs, MD/PhDs and PhDs) who aspire to leadership positions in academic medicine. Addresses the specific needs of faculty from a culturally responsive approach, offering skill building and strategies for pursuing career advancement in academic medicine. Provides real-world guidance and tools for pursuing academic career advancement, developing key professional competencies, building skills in grant writing and communications, and expanding the network of colleagues and role models.
- e. Minority Faculty Career Development Seminar- Leadership: To develop academic medicine's leadership pipeline, designed for junior faculty who are members of underrepresented racial and ethnic minority groups aspiring to leadership positions.

Three-day seminar provides participants with real-world guidance and tools for pursuing career advancement in academic medicine.

- f. AAMC Leadership Education and Development (LEAD) Certificate Program: designed for early to mid-career faculty, LEAD is a cohort-based program that provides a firm foundation in leadership best practices and recognized theoretical models that are key to advancing as an educational leader within academic medicine.

## **2. Executive Leadership in Academic Medicine (ELAM) for Women Fellowship**

An intense course, offered over several sessions of 9-10 days about 6 months apart. This is for women who are in or looking to enter leadership roles and requires nomination from your Dean. SELAM (Society for Executive Leadership in Academic Medicine) has further carried on the work of ELAM. <http://drexel.edu/medicine/academics/womens-health-and-leadership/elam/>

## **3. APPD Leadership in Educational Academic Development (APPD LEAD)**

Provides a unique opportunity for pediatric academic leaders in medical education to engage and learn from seasoned program directors, pediatric educators, and other national leaders in pediatrics. The LEAD curriculum focuses on organizational leadership, competency-based curriculum development, faculty development, residency and fellowship program administration, scholarship and career development. The curriculum occurs over three educational conferences, with additional group activities, readings and project work expected between conferences. [https://www.appd.org/ed\\_res/LEAD.cfm](https://www.appd.org/ed_res/LEAD.cfm)

## **4. American Academy of Pediatrics – Pedialink module**

The Pediatric Leadership Alliance (PLA) module is based on a live seminar given annually to leaders in pediatrics. The module contains real-world case studies along with theoretical models and tools that can assist you in becoming a more effective pediatric leader. [http://www.pedialink.org/cme\\_coursefinder/CMEdetail.cfm?aid=23290](http://www.pedialink.org/cme_coursefinder/CMEdetail.cfm?aid=23290)

## **5. APA Educational Scholars Program**

Targets present or future faculty in academic pediatrics who wish to build skills in educational scholarship. Pediatric generalists, hospitalists, and subspecialty faculty are welcome. Conduct a mentored educational project and provide evidence of a successfully peer reviewed presentation or publication related to the project. Applicants must be or become a member of the Academic Pediatric Association. [http://www.ambpeds.org/education/educational\\_scholars\\_program\\_description.cfm](http://www.ambpeds.org/education/educational_scholars_program_description.cfm)

## **6. Harvard Macy Institute Faculty and Fellow Courses Programs**

Offers five professional development courses yearly in Boston.

- a. Program for Post-Graduate Trainees: Future Academic Clinician-Educators
- b. Program for Educators in Health Professions: Designed to enhance the development of physicians, basic scientists, and other healthcare professionals as educators. The program is built around 6 major themes: teaching & learning, curriculum, evaluation, leadership, educational research and information technology. Two weeks in January and one week in May.
- c. A Systems Approach to Assessment in Health Professions Education
- d. Leading Innovations in Health Care & Education

e. Health Care Education 2.0: Transforming your teaching for the digital age.

<http://www.harvardmacy.org/>

### **7. The Division of Medical Education, University of Southern California**

Offers four different programs for Faculty Development, open to faculty members from any University:

- a. Fellowship in Teaching and Learning – nine-month program, offered as six separate weekend workshops designed to provide a comprehensive educational approach to teaching, learning and evaluation in medical education.
- b. Fellowship in Educational Leadership – similar format to above but focused on professional effectiveness in an educational setting.
- c. Master’s Degree in Medical Education – a two-year Master’s Degree Program for faculty in health professions. The program combines 3-day workshops with additional training using distance education methods, faculty mentoring, and homesite projects. These educational programs focus on developing skills in teaching and learning, evaluation, information management, professional development, and academic leadership.
- d. Individual Workshops and Conferences – offered in a weekend format  
<http://mededonline.hsc.usc.edu> - “Faculty Development”

### **8. The Primary Care Faculty Development Program at Michigan State University**

One-year program at MSU, divided into 1- and 2-week blocks over the year.

<http://omerad.msu.edu/>

### **9. The University of Illinois at Chicago (UIC)**

Two-year program that can be done onsite or online to achieve a Master of Health Professions Education (MHPE). Run by highly respected individuals, such as Georges Bordage and Alan Schwartz, to name a few.

<http://www.uic.edu/com/meme/mhpeweb>

### **10. Faculty Development Program at Cincinnati Children’s Hospital Medical Center**

The MEDALS program (Medical Educator Development and Learning Studies) offers faculty development in teaching to all levels of learners and educators, to all medical disciplines, including residents, fellows, junior faculty and medical educators in faculty development. At the completion of the program, participants receive a Master’s Degree in Education (MEd). The program involves two years of part-time coursework. An online Master’s Degree program is also offered.

<http://www.cincinnatichildrens.org/ed/clinical/grad/faculty/>

### **11. CCHMC Quality Scholars Program**

The Quality Scholars Program in the Anderson Center is developing researchers and leaders who will transform pediatric health and healthcare delivery. Program goals include developing faculty to create effective healthcare delivery system interventions that can be disseminated into real-world practice settings, directly resulting in improved health outcomes.

<http://www.cincinnatichildrens.org/service/i/anderson-center/education/quality-scholars/default/>

## 12. Participation in National Pediatric Educator Societies

Meetings often include workshops directed toward career development or professional development of educators):

- a. Council on Medical Student Education in Pediatrics (COMSEP)
- b. Association for Pediatric Program Directors (APPD) - see details below
- c. Subspecialty Societies – Fellowship Program Director Groups

## 13. Master's in Medical Education / Health Professions Education:

As the number of master's programs in health professions education increases globally and interest in these programs increases, FAIMER created a centralized resource for program information. Below is a list of Master's programs in Health Professions education located in the United

States:<https://www.faimer.org/resources/mastersmeded.html> (refer to this link for updated information)

Cincinnati Children's Hospital Medical Center / University of Cincinnati College of Education, Criminal Justice and Human Services**	<a href="#">Masters Degree in Education</a>
Cleveland Clinic / Cleveland State University***	<a href="#">Master of Adult Education and Development (emphasis on Health Professions Education)</a>
Duke University School of Medicine***	<a href="#">Master of Health Sciences in Clinical Leadership Program</a>
Eastern Virginia Medical School**	<a href="#">Master of Medical and Health Professions Education</a>
Excelsior College**	<a href="#">Master of Science in Health Sciences (Health Professions Education)</a>
FAIMER / Keele University***	<a href="#">Master's in Health Professions Education: Accreditation and Assessment</a>
Fischler School of Education, Nova Southeastern University**	<a href="#">Master of Science in Medical Education</a>
Florida Gulf Coast University**	<a href="#">Master of Science in Health Science (Health Professions Education Concentration)</a>
Harvard Medical School*	<a href="#">Master's in Medical Sciences</a>
Hofstra University***	<a href="#">Master of Science in Health Professions Pedagogy and Leadership</a>
Johns Hopkins University**	<a href="#">Master of Education in the Health Professions</a>
Lake Erie College of Osteopathic Medicine (LECOM)***	<a href="#">Master of Science in Medical Education</a>
Loma Linda University***	<a href="#">Master's in Health Professions Education</a>

MGH Institute of Health Professions***	<a href="#">Master of Science in Health Professions Education</a>
Michigan State University College of Osteopathic Medicine / College of Education**	<a href="#">Master of Arts in Health Professions Education</a>
North Carolina State University*	<a href="#">MS in Adult Education (specialization in Health Professions Education)</a>
Nova Southeastern University***	<a href="#">Master of Science in Medical Education</a>
Rosalind Franklin University of Medicine and Science**	<a href="#">Master of Science in Health Professions Education</a>
Rutgers School of Health Professions**	<a href="#">Master of Science in Health Sciences, Health Professions Education</a>
Texas A&M University***	<a href="#">Master of Science in Education for Healthcare Professionals</a>
Uniformed Services University of Health Sciences*	<a href="#">Masters in Health Professions Education</a>
University of Georgia College of Education**	<a href="#">Master of Education in Adult Education (M.Ed.) for Health Professionals</a>
University of Houston College of Education***	<a href="#">Master's of Education for Health Science Professionals</a>
University of Illinois at Chicago***	<a href="#">Master of Health Professions Education</a>
University of Illinois at Urbana-Champaign College of Education**	<a href="#">Master of Education with a Concentration in Human Resource Development and an Emphasis in Health Profession Education</a>
University of Iowa*	<a href="#">Master in Medical Education</a>
University of Louisville College of Education and Human Development / School of Medicine***	<a href="#">Master of Science in Human Resources and Organization Development (concentration in Health Professions Education)</a>
University of Michigan Medical School***	<a href="#">Master of Health Professions Education</a>
University of Missouri - Kansas City School of Medicine***	<a href="#">Master of Health Professions Education</a>
University of Nebraska Medical Center, College of Allied Health Professions**	<a href="#">Master of Health Professions Teaching and Technology</a>
University of New England College of Osteopathic Medicine / Maine Medical Center Office of Medical Education**	<a href="#">Master of Science in Medical Education Leadership</a>

University of Pennsylvania Graduate School of Education***	<a href="#">Master of Education</a>
University of Pittsburgh Institute for Clinical Research Education*	<a href="#">Masters of Science in Medical Education</a>
University of Rochester Warner School of Education*	<a href="#">Master of Science in Health Professions Education</a>
University of Southern California Keck School of Medicine***	<a href="#">Master of Academic Medicine</a>
Vanderbilt University School of Medicine / Vanderbilt University School of Nursing / Peabody College of Education and Human Development*	<a href="#">Master of Health Professions Education</a>
Western University of Health Sciences***	<a href="#">Master of Science in Health Sciences (Health Professions Education)</a>

\* face-to-face only    \*\* distance/online only    \*\*\* both face-to-face and distance/online

Source: Tekian A, Harris I. [Preparing health professions education leaders worldwide: A description of masters-level programs](#). Medical Teacher. 2012; 34(1):52-58

## APPD Meetings

**APPD Meetings** are a foundational cornerstone of membership. APPD Spring and Fall Meetings and the APPD Forum for Fellowship Directors at PAS serve as opportunities for Pediatric Subspecialty Medical Educators to collaborate, innovate and celebrate our roles as learners and leaders in medical education. Content for these meetings is reviewed and revised each year using feedback collected from participants, but general descriptions of what to expect from the meetings is below.

### APPD Fall Meeting:

*Logistics:* Generally Mid-September to Early October

*Content:* This meeting has excellent information for both the novice and expert FPD or Coordinator. Sessions such as Program Organization 101 and Welcome to the APPD is balanced by “Hot Topic” presentations about evolving challenges and solutions in medical education. Networking opportunities, small group break-out sessions and fellowship specific programming make for an interactive and dynamic conference with lots of opportunities for building a national presence and learning and collaborating with your MedEd colleagues from around the country.

*Opportunities for Scholarship:* Join a learning community, seek out a presenter, network with other educators, and plan a project with colleagues from other institutions.

*Opportunities for Career Development:* APPD sponsors numerous sessions that promote career development for FPD, Associate FPD and fellowship coordinators. At this meeting, APPD-sponsored programs like LEAD and LEARN are described. Join a learning community, come to a Fellowship Grassroots Session and meet colleagues from around the country. Great venue to make connections, create collaborations, find a mentor or coach, or serve as one. Informal discussions during networking times have yielded many multicenter collaborations, scholarly projects and publications. Build your national presence with an open supportive group of passionate medical educators.

### APPD Annual Spring Meeting:

*Logistics:* Generally late March/Early April.

*Content:* Highly interactive with multiple workshops or Enhanced Learning Sessions, informal and facilitated networking sessions to stimulate collaborations and career development, and breakout into smaller learning communities based upon geography or academic interest. High yield presentations by key stakeholders in medical education (ACGME, NRMP, ABP, AAP, CoPS and others) are well organized and a time-efficient way to obtain up to date information on current requirements and opportunities, as well as anticipated changes.

*Opportunities for Scholarship:* Submit your MedEd research, best practices and innovations as an Enhanced Learning Session/Workshop (submissions due December 4) or an abstract (submissions due January 10).

*Opportunities for Career Development:* APPD sponsors numerous sessions that promote career development for FPD, Associate FPD and Coordinators. Join a learning community, an interest group, come to a Fellowship Grassroots Session and meet your colleagues from around the country. Make connections, create collaborations and find mentors and coaches, or become one. Informal discussions during networking times have yielded many multicenter collaborations, scholarly projects and

publications. Build your national presence with an open supportive group of passionate medical educators.

APPD Forum for Fellowship Directors at PAS:

*Logistics:* A one day conference for FPD on the day preceding PAS, generally in late April - early May.

*Content:* Interactive workshops on high yield topics for Fellowship Directors along with updates from key stakeholders in medical education (ACGME, NRMP, ABP, AAP, CoPS and others) provide a balanced day-long program that provides new insights, skills, and resources for Fellowship Directors.

*Opportunities for Scholarship:* FPD are encouraged to submit workshops for presentation at this conference.

*Opportunities for Career Development:* Workshops include Faculty and Career Development topics for FPD, along with sessions on how to enhance fellowship training. Opportunities to expand your national involvement and build teams of collaborators and peer mentors in medical education are an important part of this conference.

**To review content from past meetings click here:** <http://www.appd.org/meetings/previous.cfm>

We look forward to seeing you at a future APPD Meeting!

Your APPD Fellowship Directors' Executive Committee