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#### **29** February Teach-Off Competition: A \$60 Teaching Intervention to Beat the Winter Blues

#### McGrath M / Boston Medical Center, Boston, Massachusetts

**Background:** Bedside teaching is an important aspect of resident education. Demands on faculty time with rising patient volume, emergency department crowding, and charting can threaten teaching. Academic centers have seasonal flow; in summer we focus on interns assuming new roles and in spring on residents preparing for the next stages of training. For many of us, the winter brings role fatigue and loss of focus on teaching. This is also when the residents take the annual ACGME survey, which measures resident perception of faculty teaching. We piloted a February Teach-Off Competition in 2018 to address this need and boost our teaching.

**Educational Objectives:** We aimed to 1) increase participation in on-shift teaching; 2) recognize teaching excellence; and 3) improve ACGME resident survey responses of faculty interest in teaching.

**Curricular Design:** In January 2018, we promoted the competition in conference, e-mails and posters. The goal was to encourage resident and faculty participation in morning teaching rounds and change-of-shift teaching. All teaching counted: ultrasound, electrocardiogram, radiology, critical care, advances in literature, etc. We tracked rounds and reminded those responsible via e-mail. At the end of February, residents voted anonymously on-line for the best resident and faculty teacher. All nominees were recognized at conference and their names given to the residency program director and chair. The winners received a framed certificate, a coffee mug and gift card to a local café. The total program cost \$60.

Impact/Effectiveness: We expanded morning teaching rounds to six days per week and residents reported an increase in change-of-shift teaching. Fifteen residents and faculty were formally recognized for teaching. Our efforts did not lead to measurable improvements on the ACGME survey questions "faculty are interested in residency education" and "create environment of inquiry." Mean scores were 4.0 and 3.7 in 2018, respectively ,and 4.1 and 4.0 in 2017. This blunt survey may not be the correct tool to measure impact of this project. This program is applicable to any residency suffering from seasonal slumps in teaching enthusiasm. It is low cost and easy to implement. Many residents and faculty who were not nominated this year asked how they could "make the winner list" next year. The award ceremony was met with cheers and was a fun celebration. It recognizes those who are dedicated to teaching and encourages others to compete for the same.

#### **30** Building Interest in Emergency Medicine Through a Cadaver-Based Procedural Skills Workshop

Parekh K, Brumfield E, Lei C /Vanderbilt University Medical Center, Nashville, TN

**Background:** Emergency medicine (EM) is often not a required course for medical students; thus, they may have limited exposure to EM in the pre-clinical curriculum. To promote early exposure to EM and to provide extracurricular opportunities for procedural skills practice, the EM Interest Group at Vanderbilt University School of Medicine developed and hosted two cadaver-based, procedural skills workshops.

**Educational Objectives:** The objectives of the workshop were to increase interest in EM and to increase confidence in performing procedures.

**Curricular Design:** Each workshop consisted of 1) a didactic session, and 2) a cadaver-based procedural session. Senior students planning careers in EM led the didactic session, reviewing the indications, contraindications, methods, and complications of each procedure. The cadaver-based session was conducted by EM faculty and residents who facilitated deliberate procedural practice. Included procedures were airway management, intraosseous and central venous catheter placement, tube thoracostomy, pericardiocentesis, and laceration repair. At the end of the cadaver-based session, participants completed anonymous paper evaluations consisting of a five-point Likert scale and two open-ended questions. Participant confidence in performing procedures was assessed using a five-point Likert scale. We compared pre- and post-workshop confidence using a Wilcoxon signed-rank test.

**Impact/Effectiveness:** Of the 28 students who participated, all (28/28) completed an evaluation; 67.9% of participants (19/28) were first- or second-year students. The evaluation indicated that 75% (21/28) of participants reported increased interest in EM, and 25% (7/28) reported that their interest in EM did not change. Confidence in performing procedures significantly increased for all procedures. The most significant increase in confidence was for endotracheal intubation (pre-workshop median = 2; post-workshop median = 3.

#### **31** Academic Promotion Workshop Series Enhances Emergency Physicians' Knowledge of and Experience with the Promotion Process

# MacVane C, Strout T, Baumann M / Maine Medical Center, Portland, Maine

**Background:** Academic promotion is important for emergency physicians, but the lack of formal guidance in navigating complex systems can present a challenge. Our Institutional transition in university partners left our faculty with little understanding of the new promotions process and required dossier.

**Educational Objectives:** We sought to develop a structured, mentored academic promotion workshop series.