



# AHME ACADEMY

THURSDAY, MARCH 5, 2015  
BANNER GOOD SAMARITAN  
MEDICAL CENTER

Sandstone Conference Rooms  
1111 E. McDowell Road ~ Phoenix, AZ 85006

7:45 **Registration & Continental Breakfast**

8:15 **Welcome/Introductions**

8:30 **Milestones/CCCs**

**Alex C McLaren MD**

Program Director, Banner Orthopaedic Residency  
University of Arizona College of Medicine  
Phoenix, AZ

By the end of this session, the learner will be able to:

- Discuss the use of management systems to prepare for CCCs
- Discuss the challenges in keeping faculty on track
- Identify potential changes to improve the process

9:30 **Program Evaluation Committees:  
Tracking Plans and Prep for Self-Studies**

**Marilane B. Bond, EdD, MBA**

Assistant Dean for Graduate Medical Education  
Emory University School of Medicine  
Atlanta, GA

By the end of this session, the learner will be able to:

- Discuss the scope and expectation of the PEC
- Discuss the use of templates to complete the Annual Program Evaluation
- Discuss the use of templates to track plans for program improvement
- Discuss the role of the APE in preparing for Self-Study

10:30 **Break**

10:45 **A Whole New World: Institutional and Program  
Accreditation Oversight Under NAS**

**Carrie Eckart, MBA**

Executive Director, GME & Associate DIO  
Stony Brook Medicine  
Stony Brook, NY

By the end of this session, the learner will be able to understand:

*Annual Institutional Review*

- What is expected of the GME Office under NAS
- Partnering with programs on oversight
- Use of templates to assure program and institutional oversight compliance

*Annual Program Review*

- The use of anonymous Resident and Faculty survey information
- Citations vs. Concerning Trends and other new ACGME language
- Documentation and Special Reviews of Underperforming Programs

12:00 **Networking Lunch - One copy of AHME's Guide to Medical Education in the Teaching Hospital and one copy of Remediation of the Struggling Medical Learner will be given away!**

12:45 **Incorporating Patient Safety/Quality Improvement into GME**

**Fred Schiavone, MD, FACEP**  
Vice Dean for GME/DIO  
Stony Brook Medicine  
Stony Brook, NY

By the end of this session, the learner will be able to:

- Conduct a needs assessment of institutional and program patient safety and quality improvement learning opportunities
- Identify resident learning venues and activities that should incorporate safety and quality data and personnel
- Consider establishment of "patient safety resident" role in each program, including specific expectations and deliverables

1:45 **Break**

2:00 **Special Reviews**

**Tia O. Drake**  
Director, GME  
Washington University School of Medicine  
St. Louis, MO

By the end of this session, the learner will:

- Identify when a Special Review should be done
- Identify key elements that should be included in every Special Review
- Discuss ways to track plans for program improvement

3:00 **Orientation Redesign**

**Carrie Eckart, MBA**  
Executive Director, GME & Associate DIO  
Stony Brook Medicine  
Stony Brook, NY

**Fred Schiavone, MD, FACEP**  
Vice Dean for GME/DIO  
Stony Brook Medicine  
Stony Brook, NY

By the end of this session, the learner will be able to:

- Identify how CLER focus areas can be incorporated into residency training, beginning with New Resident Orientation
- Design an outcomes-based evaluation of resident behavior related to some or all of the "CLER Pathways to Excellence"
- Begin to change culture as new residents start training with experientially-derived behaviors

4:00 **"Happy Hour"**

**The Integrated Accreditation System: Q&A about the marriage of AOA & ACGME**

**WITH OUR TIERED PRICING, ALL OF YOUR STAFF CAN ATTEND!**

**Up to 5 people: \$275 (members)/\$350 (non-members)**

**6-10 people: \$225 (members)/\$300 (non-members)**

**11 or more people: \$175 (members)/\$250 (non-members)**

**REGISTER ON-LINE AT [WWW.AHME.ORG](http://WWW.AHME.ORG)**

### Hotel Information

Sleeping rooms are available for March 5 and March 6 at the Fairfield Inn at a rate of \$154 a night plus tax. Be sure to mention the "Banner Good Samaritan Rate" when you make your reservation.

**HURRY! RESERVATIONS ARE AVAILABLE ON A FIRST-COME, FIRST-SERVED BASIS ONLY.**

**Call 1-800-228-2800.**



# AHME/MECAz Academy Registration Form

Banner Good Samaritan Medical Center ~ Sandstone Conference Rooms

1111 E. McDowell Road ~ Phoenix, AZ 85006

All payment options (including pay by check) are available on-line. Attendees are strongly encouraged to register electronically at [www.AHME.org](http://www.AHME.org).  
If that is not possible, please proceed with completing this form.

Institution Name \_\_\_\_\_

**Registrant #1: Main Contact for Registration**

Name \_\_\_\_\_ Degree \_\_\_\_\_

Title \_\_\_\_\_ Department \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Special physical or dietary needs: \_\_\_\_\_

**Registrant #2:**

Name \_\_\_\_\_ Degree \_\_\_\_\_

Title \_\_\_\_\_ Department \_\_\_\_\_

Email \_\_\_\_\_

Special physical or dietary needs: \_\_\_\_\_

**Registrant #3:**

Name \_\_\_\_\_ Degree \_\_\_\_\_

Title \_\_\_\_\_ Department \_\_\_\_\_

Email \_\_\_\_\_

Special physical or dietary needs: \_\_\_\_\_

**Registrant #4:**

Name \_\_\_\_\_ Degree \_\_\_\_\_

Title \_\_\_\_\_ Department \_\_\_\_\_

Email \_\_\_\_\_

Special physical or dietary needs: \_\_\_\_\_

**Registrant #5:**

Name \_\_\_\_\_ Degree \_\_\_\_\_

Title \_\_\_\_\_ Department \_\_\_\_\_

Email \_\_\_\_\_

Special physical or dietary needs: \_\_\_\_\_

~~ ADDITIONAL REGISTRANTS MAY BE SUBMITTED ON A SEPARATE SHEET ~~

**PAYMENT CALCULATION** - Registration fees apply to both members and non-members of AHME

*Up to 5 people:*

\_\_ member registrants X \$275 = \$ \_\_\_\_ (a) \_\_ non-member registrants X \$350 = \$ \_\_\_\_ (b) Total Due (a+b) = \_\_\_\_

*6-10 people:*

\_\_ member registrants X \$225 = \$ \_\_\_\_ (a) \_\_ non-member registrants X \$300 = \$ \_\_\_\_ (b) Total Due (a+b) = \_\_\_\_

*11 or more people:*

\_\_ member registrants X \$175 = \$ \_\_\_\_ (a) \_\_ non-member registrants X \$250 = \$ \_\_\_\_ (b) Total Due (a+b) = \_\_\_\_

~~ REGISTRATION DEADLINE: FEBRUARY 26, 2015 ~~

**METHOD OF PAYMENT** - NOTE: If registering by check/mail, be sure to fax your registration as well to 724-864-6153.

\_\_\_ Credit Card: \_\_\_ Visa \_\_\_ MasterCard \_\_\_ AMEX

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Total Cost to Charge to Card \_\_\_\_\_

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

\_\_\_ Check Enclosed: Made payable to **AHME** - mail to: **AHME, PO Box 725, Indiana, PA 15701**

\_\_\_ Check to Follow: Fax a copy of your internal check request to 724-864-6153

*Cancellation Policy: In the event of cancellation, a refund of the registration fee, less a 25% administration fee, may be obtained only by written request to the AHME Accountant ([tricia@ahme.org](mailto:tricia@ahme.org)) by February 26, 2015.*