JOSIAH MACY JR. FOUNDATION

MACY FACULTY SCHOLARS PROGRAM ANNUAL MEETING

ATLANTA, GA JUNE 11–13, 2024





CONTENTS



- **INTRODUCTION** 2
 - AGENDA 5
- MACY FACULTY SCHOLARS FAMILY 6
 - **GUEST SPEAKER BIOGRAPHIES** 8
- 2024 MACY FACULTY SCHOLARS' BIOGRAPHIES 10
- 2024 MACY FACULTY SCHOLARS' PROJECT SUMMARIES 12
 - Sneha Mantri 12
 - Christopher Martin 13
 - Rebecca Philipsborn 14
 - Teresa Schiff-Elfalan 15
 - Philip Solomon 16
 - 2023 MACY FACULTY SCHOLARS' PROJECT UPDATES 18
 - Sara Arter 18
 - Andrew Dwyer 20
 - Lanre Falusi 24
 - Brenessa Lindeman 26
 - Geoff Stetson 30
 - Rahul Vanjani 32
- SMALL GROUP DISCUSSION SUMMARIES: MINI THINK TANKS 34
 - Promoting Diversity, Equity, and Belonging 34
 - Navigating Ethical Dilemmas 36
 - Increasing Collaboration 38
- SMALL GROUP DISCUSSION SUMMARIES: CAREER DEVELOPMENT TOPICS 41
 - Critical Conversations 41
 - Grantsmanship / Finding Funding 42
 - Career Transitions 43
 - 2011–2021 MACY FACULTY SCHOLARS' CAREER UPDATES 44

INTRODUCTION



The thoughtful input of our 2024 Annual Meeting advisory group—composed of 10 Scholars across many cohorts—guided us to an overarching theme for our gathering: humanity in health professions education. What a fitting—and powerful—theme.

One of our invited guest speakers, Dr. Kimberly Manning from Emory University School of Medicine, is a widely known and sought after speaker and writer on topics related to humanity. The reflections and insights she shared during her plenary talk and fireside chat resonated deeply with all in the room. Her words and wisdom continue to reverberate with me, as I suspect they do with many of you.

Dr. Valerie Montgomery Rice, a member of the Macy Foundation's Board of Directors and President/CEO of Morehouse School of Medicine, also joined us to share powerful insights on leadership, inclusion, and finding common ground as a tool to advance one's vision. She imbued her personal stories and professional journey with humanism and a clarity of spirit and self.

By moving our meeting from its historic location in New York City to Atlanta, we also had the chance to visit the National Center for Civil and Human Rights—an experience that took on a particular resonance given the backdrop of our current social and political landscape.

But as always, it was you—our Scholar family--who infused the meeting with inspiration and ideas. We create the Annual Meeting Report each year to capture the scholarship and creative thoughts shared during the meeting, although it would be impossible to articulate the volume and nuance of each presentation and conversation. We continue to look for ways to bring this extraordinary group together to share knowledge and inspiration, empowering one another to advance health professions education and to stay connected to the humanity in our patients, our learners, and ourselves.

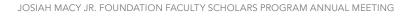
HOLLY J. HUMPHREY, MD, MACP President, Josiah Macy Jr. Foundation











AGENDA

TUESDAY, JUNE 11, 2024

2024 SCHOLAR AND MENTOR MEET-AND-GREET

OPENING RECEPTION & 2023 SCHOLAR COHORT POSTER PRESENTATIONS

WEDNESDAY, JUNE 12, 2024

Breakfast

WELCOMING REMARKS

Holly J. Humphrey, MD, MACP

CULTIVATING MEANINGFUL CONNECTIONS IN HEALTH CARE: SEEING PAST THE DIAGNOSIS – DELVE DECK ICE BREAKER

Facilitated by Sara Arter, PhD, RN

2024 MACY FACULTY SCHOLARS' PANEL PRESENTATION

Sneha Mantri, MD, MS Christopher Martin, PhD, RN Rebecca Philipsborn, MD, MPA Teresa Schiff-Elfalan, MD Philip Solomon, MD

2024 SCHOLARS' SMALL GROUP SESSIONS

PLENARY PRESENTATION – #HUMANISMALWAYS: REMEMBERING THE PERSON IN FRONT OF YOU

Kimberly D. Manning, MD

Lunch

SMALL GROUP DISCUSSIONS – MINI THINK TANKS

Promoting Diversity, Equity, and Belonging Facilitated by Jennifer Best, MD, and Richard Greene, MD, MHPE

Preparing Future Health Professionals to Navigate Ethical Dilemmas Facilitated by Deepu Gowda, MD, MPH, MS, and Sarah Peyre, EdD

Increasing Collaboration Among Future Health Professionals Facilitated by Matt Rustici, MD, and Meg Zomorodi, PhD, RN

FIRESIDE CHAT

Holly J. Humphrey, MD, and Kimberly D. Manning, MD

Reception and Dinner National Center for Civil and Human Rights

THURSDAY, JUNE 13, 2024

Breakfast

CULTIVATING MEANINGFUL CONNECTIONS: CHECK-IN

Facilitated by Sara Arter, PhD, RN

2023 SCHOLAR PRESENTATIONS

Brenessa Lindeman, MD, MEHP Rahul Vanjani, MD, MSc Andrew Dwyer, PhD, FNP-BC Geoff Stetson, MD Lanre Falusi, MD, MEd Sara Arter, PhD, RN

SMALL GROUP DISCUSSIONS – CAREER DEVELOPMENT TOPICS

Critical Conversations Facilitated by Cheryl Woods Giscombé, PhD, MSN, RN, PMHNP, and Barret Michalec, PhD

Grantsmanship / Finding Funding Facilitated by Cindy Foronda, PhD, RN, CNE, CHSE, and Bridget O'Brien, PhD

Career Transitions Facilitated by Cristina Gonzalez, MD, MEd, and Lisa Kitko, PhD, RN

LUNCH AND FIRESIDE CHAT

Holly J. Humphrey, MD, and Valerie Montgomery Rice, MD, FACOG

MACY FACULTY SCHOLARS FAMILY

2011 SCHOLARS

Eve R. Colson, MD, MHPE Alan Dow, MD, MSHA Dena H. Hassouneh, PhD, RN, ANP, PMHNP, FAAN Jennifer S. Myers, MD Roberta Waite, EdD, RN, PMHCNS, ANEF, FAAN

2012 SCHOLARS

Kenya V. Beard, EdD, AGACNP-BC, ANEF, FAAN, FADLN Ted James, MD, MS, FACS Wrenetha Julion, PhD, MPH, RN, CNL, FAAN Wendy S. Madigosky, MD, MSPH Sandrijn van Schaik, MD, PhD

2013 SCHOLARS

Lisa Day, PhD, RN, CNE, ANEF, FAAN Memoona Hasnain, MD, MHPE, PhD Kelly Karpa, PhD, RPh Lauren Meade, MD, FACP Mayumi Willgerodt, PhD, MPH, RN, FAAN, FNASN

2014 SCHOLARS

Laura A. Hanyok, MD Douglas P. Larsen, MD, MEd Sarah E. Peyre, EdD Deanna L. Reising, PhD, RN, ACNS-BC, FAAN, FNAP, ANEF Charles Vega Jr., MD Meg Zomorodi, PhD, RN, ANEF, FAAN

2015 SCHOLARS

Lauren Collins, MD Cheryl L. Woods Giscombé, PhD, RN, PMHNP-BC, FAAN, FABMR Deepthiman Gowda, MD, MPH, MS Lisa Kitko, RN, PhD, FAHA, FAAN Bridget O'Brien, PhD

2016 SCHOLARS

DorAnne Donesky, PhD, ANP-BC, ACHPN Cristina M. Gonzalez, MD, MEd Temple Ratcliffe, MD, MS-HPEd, FACP Tyler Reimschisel, MD, MHPE Jing Wang, PhD, MPH, MSN, RN, FAAN

2017 SCHOLARS

Ashley Darcy-Mahoney, PhD, NNP, FAAN Maja Djukic, PhD, RN, FAAN Jed Gonzalo, MD, MSc Jennifer Kesselheim, MD, EdM Jeanette M. Tetrault, MD, FACP, FASAM

2018 SCHOLARS

Vineet Arora, MD, MAPP C. Jessica Dine, MD, MSHP Cynthia Foronda, PhD, RN, CNE, CHSE, ANEF, FAAN Coretta Jenerette, PhD, RN, AOCN, ANEF, FAAN Daniel J. Schumacher, MD, PhD, MEd

2019 SCHOLARS

Richard E. Greene, MD, MHPE, FACP Amanda Kirkpatrick, PhD, RN, FAAN, FNAP Barret Michalec, PhD Rachel Marie E. Salas, MD, MEd, FAAN, FANA Michael Westerhaus, MD, MA

2020 SCHOLARS

John Burkhardt, MD, PhD Benjamin Kinnear, MD, MEd Dimitri Papanagnou, MD, EdD, MPH Tatiana Sadak, PhD, PMHNP, RN, FAAN, FGSA Danica Fulbright Sumpter, PhD, RN

2021 SCHOLARS

Jennifer Best, MD Jessica Devido, PhD, CPNP David Diller, MD, MHPE Sunny Hallowell, PhD, RN, PPCNP-BC Matthew Rustici, MD

2023 SCHOLARS

Sara Arter, PhD, RN Andrew Dwyer, PhD, FNP-BC, FNAP, FAAN Olanrewaju Falusi, MD, MEd Brenessa Lindeman, MD, MEHP Geoff Stetson, MD Rahul Vanjani, MD, MSc

2024 SCHOLARS

Sneha Mantri, MD, MS Christopher Martin, PhD, RN Rebecca Philipsborn, MD, MPA Teresa Schiff-Elfalan, MD Philip Solomon, MD

NATIONAL ADVISORY COMMITTEE

Holly J. Humphrey, MD, MACP – President Larry D. Gruppen, PhD Eve J. Higginbotham, SM, MD, ML Afaf I. Meleis, PhD, FAAN, LL Carmen Portillo, PhD, RN, FAAN Kelley M. Skeff, MD, PhD

MACY FOUNDATION STAFF

Holly J. Humphrey, MD, MACP Peter Goodwin, MBA Dana Levinson, MPH Caroline Pounds, MA



GUEST SPEAKER BIOGRAPHIES

KIMBERLY D. MANNING, MD, FACP, FAAP

Professor of Medicine Vice Chair RYSE (DEI) Initiatives Emory University Department of Medicine



Kimberly D. Manning, MD, FACP, FAAP, is a Professor of Medicine in the Division of General Internal Medicine for Emory School of Medicine. She earned her BS at Tuskegee University, her MD at Meharry School of Medicine, and she completed her residency in combined internal medicine/pediatrics at Case Western Reserve University/ MetroHealth. Dr. Manning is known for her innovative approach to medical education and has been recognized nationally for her mentorship and teaching, as well as her blogging and public speaking. She received the 2019 Lifetime Achievement Award by the Association of Black Women Physicians and the 2022 AAMC Group on Diversity and Inclusion Exemplary Leadership Award alongside her mentor, Dr. Bussey-Jones. Dr. Manning was also awarded the ACGME Parker J. Palmer Courage to Teach Award in 2018 and the Emory School of Medicine's Evangeline Papageorge Distinguished Teaching Award in 2012. Her work has been published in such prestigious journals as JAMA, The Annals of Internal Medicine, and The Lancet. In addition, her blog-Reflections of a Grady Doctor—was named one of the top four medical blogs by O the Oprah Magazine. She can be found on Twitter @gradydoctor where she has over 100,000 followers.

Dr. Manning is one of 32 School of Medicine faculty appointed as smallgroup advisors for the undergraduate medical curriculum. She leads the Distinction in Teaching and Leadership for the Internal Medicine residency program and is a past chair of the Department of Medicine Academy of Medical Educators. Dr. Manning also recently chaired the Diversity, Equity, and Inclusion Task Force in the School of Medicine. As associate vice chair, Dr. Manning leads the RYSE Virtual Visiting Clerkship and the RYSE Fellowship Applicant Experience Program, both of which have been extremely successful in recruiting more diverse classes of trainees to the Department.





VALERIE MONTGOMERY RICE, MD, FACOG

President and CEO Morehouse School of Medicine



Valerie Montgomery Rice, MD, FACOG, provides a valuable combination of experience at the highest levels of patient care and medical research, as well as organizational management and public health policy. Marrying her transformational leadership acumen and strategic thinking to tackle challenging management issues, she has a track record of redesigning complex organizations' infrastructures to reflect the needs of evolving strategic environments and position the organization for success through sustainability tactics.

The sixth president of Morehouse School of Medicine (MSM) and the first woman to lead the freestanding medical institution, Dr. Montgomery Rice serves as both the president and CEO. A renowned infertility specialist and researcher, she most recently served as dean and executive vice president of MSM, where she has served since 2011.

Prior to joining MSM, Dr. Montgomery Rice held faculty positions and leadership roles at various health centers, including academic health centers. Most notably, she was the founding director of the Center for Women's Health Research at Meharry Medical College, one of the nation's first research centers devoted to studying diseases that disproportionately impact women of color.

Dedicated to the creation and advancement of health equity. Dr. Montgomery Rice lends her vast experience and talents to programs that enhance pipeline opportunities for academically diverse learners, diversifies the physician and scientific workforce, and fosters equity in health care access and health outcomes. To this end, she holds memberships in various organizations and participates on a number of boards, such as the following: member, National Academy of Medicine, the Association of American Medical Colleges Council of Deans, and the Horatio Alger Association; and board of directors for The Metro Atlanta Chamber, Kaiser Permanente School of Medicine, The Nemours Foundation, UnitedHealth Group, Westside Future Fund, Josiah Macy Jr. Foundation, Headspace, Wellpath, and CARE.

Dr. Montgomery Rice has received numerous accolades and honors. She was named to the Horatio Alger Association of Distinguished Americans and received the 2017 Horatio Alger Award. For three consecutive years (2016–2018), *Georgia Trend Magazine* selected Dr. Montgomery Rice as one of the 100 Most Influential Georgians.

Other honors include the following: The Dean Griffin Community Service Award from the Georgia Institute of Technology; Girls Inc. 2019 Smart Award; National Medical Association OB/GYN 2019 Legend of the Section Award; The Turknett Leadership Character Award (2018); Visions of Excellence Award, Atlanta Business League (2018); Links Incorporated Co-Founders Award (2018); Trumpet Vanguard Award (2015); The Dorothy I. Height Crystal Stair Award (2014); National Coalition of 100 Black Women – Women of Impact (2014); YWCA – Women of Achievement of Atlanta (2014) and Nashville (2007); American Medical Women's Association Elizabeth Blackwell Medal (2011); and Working Mother Media Multicultural Women's Legacy Award (2011).

A Georgia native, Dr. Montgomery Rice holds a bachelor's degree in chemistry from the Georgia Institute of Technology, a medical degree from Harvard Medical School, an honorary degree from the University of Massachusetts Medical School, and a Doctor of Humane Letters honorary degree from Rush University. All reflect her lifetime commitment to education, service, and the advancement of health equity. She completed her residency in obstetrics and gynecology at Emory University School of Medicine and her fellowship in reproductive endocrinology and infertility at Hutzel Hospital.

Dr. Montgomery Rice is married to her fellow Georgia Institute of Technology alumnus, Melvin Rice Jr., and they have two children: Jayne and Melvin III.

2024 MACY FACULTY SCHOLARS' BIOGRAPHIES



SNEHA MANTRI, MD, MS Duke University School of Medicine

Dr. Mantri is an Associate Professor of Neurology and Director of Medical Humanities at Duke University, where she leads interprofessional programming in narrative medicine, arts, and wellbeing across the health system. Her academic interests include the imaginative and moral formation of health professional learners as they prepare to care for a diverse patient population.

In 2020–2021, Dr. Mantri initiated the Moral Movements in Medicine interprofessional elective for preclinical learners at Duke University Schools of Medicine and Nursing, which has grown into a four-year longitudinal track for medical students interested in health humanities and ethics as a force for health justice. As a Macy Faculty Scholar, Dr. Mantri proposes to expand this longitudinal track to include clinical-phase learners in advance practice nursing, physical and occupational therapy, and the physician assistant program, with an explicit focus on social justice and community-engaged practice. Drawing on collaborative resources across the professions, the project would give students the theoretical and practical skills needed to thrive in modern healthcare.



CHRISTOPHER MARTIN, PHD, RN

Auburn University College of Nursing

Dr. Martin serves as an Assistant Clinical Professor in the Auburn University College of Nursing (AUCON). His career focuses on developing professionalism in undergraduate nursing students while promoting diversity, equity, inclusion, and belonging. Dr. Martin serves as Chair of the AUCON Diversity and Inclusion Committee and oversaw the inaugural AUCON Diversity Day. He also acts as the AUCON representative to the Auburn University Senate and the Diversity Leader's Roundtable. Dr. Martin serves in the uniformed services as an Assistant Nurse Officer in the United States Public Health Service Commissioned Corps Reserves.

Dr. Martin's Macy Faculty Scholars project, Active Community Engagement for Teaching Equity and Collaboration in Healthcare (ACE-TEACH), will develop a blueprint for the use of community engagement as a teaching strategy for advancing equity, diversity, and belonging; enhancing interprofessional education; and exposing underrepresented groups to the field of nursing as a viable career option.



REBECCA PHILIPSBORN, MD, MPA

Emory University School of Medicine

Dr. Philipsborn is an Associate Professor of Pediatrics at Emory University School of Medicine where she cares for children from birth through adolescence. As Director of both the Pediatrics Clerkship and the Climate Change and Environmental Health Thread for medical students, she aspires to train future leaders to recognize environmental influences on health, embrace interprofessional solutions, and envision healthcare transformation towards enhanced disease prevention and greener care delivery.

As a Macy Faculty Scholar, Dr. Philipsborn will prepare learners to address the influences of climate change on human health and health equity. Her Macy Faculty Scholars project will develop, implement, and disseminate a longitudinal and interprofessional climate change and environmental health curriculum for the clinical years. The curriculum will be co-created with students and promote adaptive expertise, applying the climate crisis as a model paradigm through which to hone this skill.



TERESA SCHIFF-ELFALAN, MD

University of Hawai'i John A. Burns School of Medicine

Dr. Schiff-Elfalan is a Family Medicine physician and Assistant Professor in the Office of Medical Education at the University of Hawai'i John A. Burns School of Medicine. She serves as the inaugural Director of Diversity, Equity, and Inclusion, Social Justice, and Underserved Care and is the Medical Director of the Hawai'i HOME Project, a studentled outreach clinic for individuals experiencing houselessness. Her work focuses on teaching skills for patient empowerment and promotion of health equity, which includes anti-racism training, trauma-informed care, and cultural humility.

As a Macy Faculty Scholar, Dr. Schiff-Elfalan will coordinate and create assessments for an integrated *place-based* health equity curriculum that invites selfcompassion, builds connection, and provides skills for transformative change in critically conscious medicine. In developing graduates equipped with skills to be advocates for their patients and ready to challenge the status quo, she hopes this will be one step toward redefining culturally-grounded healthcare delivery.



PHILIP SOLOMON, MD

Zucker School of Medicine at Hofstra/Northwell

Dr. Solomon is an Assistant Professor of Medicine at the Donald and Barbara Zucker School of Medicine at Hofstra/Northwell—an internist and Geriatrics physician with education and leadership experience. He is currently Program Director for the Geriatrics Fellowship Program and Director of Geriatric Education and Clinical Integration at Northwell Health. Dr. Solomon also serves as President of the New York Metropolitan Area Geriatrics Society.

Dr. Solomon's educational focus is expanding the field of Geriatrics through the lens of health system optimization and aligning care priorities with older adult patients. His Macy Faculty Scholars project aims to develop and implement Geriatrics curricula across the interprofessional clinical spectrum of a large health system. Overall project goals are to foster interprofessional education and collaborative clinical practice amongst learners to optimize care for older adults and drive interest towards the field of Geriatrics.



2024 MACY FACULTY SCHOLARS' PROJECT SUMMARIES



SNEHA MANTRI, MD, MS

Duke University School of Medicine

HEALTH HUMANITIES TO BUILD INTERDISCIPLINARY COMMUNITIES OF HEALTH PROFESSIONAL LEARNERS

Modern healthcare practice is increasingly team-based, yet we continue to teach in siloed professional programs, often co-located but with differing academic schedules and modes of assessment that can stymie efforts at interprofessional education. Simultaneously, health professional students and new graduates report alarming rates of isolation, moral injury, and burnout, which are strongly associated with desire to leave professional practice. These concerns were magnified by the coronavirus pandemic and the associated reckoning on structural racism in healthcare. My Macy Faculty Scholars project, Health Humanities to Build Interdisciplinary Communities of Health Professional Learners, addresses this critical need by bringing the pedagogical power of humanities and ethics to interprofessional education. As a "third space" in which people of varied professional backgrounds and personal perspectives can come together, the humanities challenge students with a different way of knowing, less centered on the achievement of specific technical skills or medical knowledge, and more reflective of the manner in which that knowledge and those skills are implemented in daily practice. The project would bring social constructivist and transformative learning theories into dialogue as students shape one another, and themselves, in their own professional development.

The project grows out of a preclinical interprofessional elective seminar, Moral Movements in Medicine (MMM), which explores social and structural determinants of health. Over 200 students at Duke (MD, PA, BSN, PT, OT) have taken MMM since it started in 2020; my Macy Faculty Scholars project would allow clinical phase students to continue developing these skills through interdisciplinary student-faculty learning groups, incorporating principles of interprofessional values, social justice ethics, and community-engaged practice. Specific project aims include (1) convening an organizing committee with representation from each health professional School/Program at Duke; (2) developing a semester-long curriculum with reflective writing workshops, ethics seminars, history/advocacy project work, and community conversations; (3) implement the curriculum starting in Spring 2025. Some challenges I foresee, and would like to discuss, include (1) mode of instruction (virtual vs in-person); (2) evaluation and assessment; (3) logistical hurdles to interprofessional course development.

CHRISTOPHER MARTIN, PHD, RN

Auburn University College of Nursing

ACTIVE COMMUNITY ENGAGEMENT FOR TEACHING EQUITY AND COLLABORATION IN HEALTHCARE (ACE-TEACH)

This project aims to develop a blueprint for the use of community engagement as a teaching strategy for advancing equity and belonging; enhancing collaboration among health professions and communities; and exposing underrepresented groups to nursing to further diversify the nursing workforce. Further, the ACE-TEACH project to aims to serve as an exemplar for the facilitation of stronger relationships between pre-licensure nursing programs and minority communities.

THEORETICAL FRAMEWORK

The ACE-TEACH program borrows from social capital theory, specifically the concepts of bridging and linking. In social capital theory, bridging relationships involve the building of respect and mutuality between people with different social identities but similar status or power. Bridging social capital is created across groups, where individuals collaborate on shared goals and interests. The ACE-TEACH program will work to build relationship across healthcare disciplines through meaningful community engagement. Linking relationships are those that involve building respect and trusting connections between people who interact across power or authority gradients. Linking social capital is created across groups of differing social status. The ACT-TEACH program aims to build these relationships between those in the academic space and the members of an underserved community.

PROJECT GOALS

- 1. Community engagement as a teaching strategy for advancing equity, diversity, and belonging.
- 2. Interprofessional collaboration.
- 3. Leveraging partnership with youth services at the Boykin Center to promote awareness of healthcare professions with the end goal of diversifying healthcare workforce.



2024 MACY FACULTY SCHOLARS' PROJECT SUMMARIES



REBECCA PHILIPSBORN, MD, MPA

Emory University School of Medicine

CLINICAL CLIMATE AND HEALTH EDUCATION: TOWARDS HEALTH, HEALTH EQUITY, AND SYSTEMS CHANGE IN THE CLIMATE CRISIS

RATIONALE

Educating learners about the effects of climate change, including those stemming from healthcare itself, will prepare them to conceptualize and navigate this "wicked challenge" and meet the needs of patients and society.

THEORETICAL FRAMEWORK

My project leverages frameworks of adaptive expertise and professional identify formation. Climate and health education emerges as a paradigm-shifting subject uniquely suited to adaptive expertise as a theoretical framework. As content is incorporated into the curriculum, environmental health is retained as a core value for learners: part of their professional values, practice, and priorities.

GOALS OR OBJECTIVES

The primary aim of my educational project is the development of a climate change and clinical medicine curriculum co-created with students and disseminated in clinical clerkships at Emory School of Medicine (SOM). Secondary aims (1) embedding clinicallyoriented climate change and environmental justice challenges in Emory's Interprofessional Education (IPE) program, (2) convening stakeholders at Emory's Nell Hodgson Woodruff School of Nursing to map adaptation of SOM climate and health materials for nursing students, and (3) distilling the model of clinical climate and health education into a strategic framework through which learners contribute to Emory SOM's transformation in education process and transformations toward sustainable, just, and resilient healthcare.

TERESA SCHIFF-ELFALAN, MD

University of Hawai'i John A. Burns School of Medicine

A.L.O.H.A.: TRAINING HAWAI'I'S MEDICAL STUDENTS WITH ALOHA TO ATTAIN LASTING OPTIMAL HEALTH FOR ALL

We are united by an innate human desire to belong. From the outside, Hawai'i is an idyllic paradise, a place that transcends racism through its diversity and aloha spirit. Yet as one learns more about Hawai'i's complex history of overthrow and illegal occupation; impacts of big business, militarism, and tourism; and struggles for critical resources, one learns about a different reality of a place that was not so long ago a land of abundance, inclusion, and reciprocity.

To achieve our school's mission of A.L.O.H.A., I propose a place-based health equity curriculum guided by principles of aloha 'āina (loosely translated to a love of the land and its people) and rooted in the promotion of belongingness and skills for transformative change. Like all things done well, this is the work of many hands. I hope my contribution will unite our work through clearly articulated shared objectives and new tools for assessing learners in their ability to apply these concepts to medical practice.

This curriculum utilizes the theoretical framework of critical consciousness to teach skills in advocacy, reflection, and critique of systems of inequity. This is situated within the social constructivist model upon which our school's curriculum is based, which emphasizes the learner's self-discovery through personal experience anchored in applied contexts and collaboration. As our University moves to become a Native Hawaiian Place of Learning, I also hope to design curricula that will allow us to move through the health world with a two-eyed seeing approach that draws upon the wisdom of our ancestors while we simultaneously learn western concepts of health and healing. Using these frameworks, we invite all participants to reflect on our role in returning Hawai'i to a place of abundance where all are welcome and cared for.



2024 MACY FACULTY SCHOLARS' PROJECT SUMMARIES



PHILIP SOLOMON, MD

Zucker School of Medicine at Hofstra/Northwell

ADVANCING GERIATRICS EDUCATION WITH AN INTERPROFESSIONAL APPROACH TO EDUCATION AND CARE DELIVERY

The proportion of the United States population over the age of 65 has grown exponentially while the number of geriatricians has declined in the past few decades. The lack of geriatrics clinicians and educators has magnified the gaps in knowledge and skills for the care of older adults, directly impacting all interprofessional members of the health care team.

The overarching goal of my project is to align geriatrics curricula across the interprofessional clinical spectrum of a large, integrated academic health system. Aims are to foster interprofessional education and collaborative clinical practice among diverse learners across all developmental stages of their education, heighten awareness and knowledge of complex illness to optimize care for older adults in diverse settings, and increase interest in the field of Geriatrics.

The plan is to formalize and pilot a revamped interprofessional geriatrics curriculum built around the 5M's conceptual framework: Mind, Mobility, Medications, Multi-complexity, and What Matters Most. The 5M's represent a more tangible frame for understanding the field of Geriatrics. The target audience will include internal and family medicine residents, nursing and nurse practitioner students, and social work and pharmacy trainees. Educational strategies will utilize multiple modalities: didactics, interactive workshops, self-directed learning, and potentially team-based simulations. The Kirkpatrick model will guide program evaluation.





17



SARA ARTER, PHD, RN

Miami University Department of Nursing

EDUCATIONAL INTERVENTION TO REDUCE STIGMA AND SUPPORT ETHICAL DECISION-MAKING OF PRE-LICENSURE NURSING STUDENTS CARING FOR MOTHERS WITH SUBSTANCE USE DISORDER AND THEIR CHILDREN

BACKGROUND

Drug addiction represents a growing U.S. health crisis. ¹ The national prevalence of maternal opioid use disorder more than quadrupled from 1999–2014.² Overdose ranks among the leading causes of maternal deaths nationally, with the majority occurring postpartum.³ Substance use disorder (SUD) stigma contributes significantly to poor outcomes for mothers and their children.⁴ Even more disconcerting, mothers with SUD experience stigma specifically from nurses, leading to fear of and limited access to services, as well as inconsistencies in care.⁵

An effective response requires minimizing nursing stigma while centering ethical considerations in decisions affecting the care of mothers with SUD and their children. Ethical dilemmas are ubiquitous in this population's care. Decisions related to drug screening, treatment recommendations, breastfeeding during medication-assisted therapy, or maintaining the mother-child dyad present instances in which nurses can affect the trajectory of care. An educational intervention for pre-licensure nursing students tailored to reducing stigma and applying ethical decision-making could lead to improvements in care delivery and, ultimately, outcomes.

This project seeks to develop and pilot an educational intervention preparing pre-licensure nursing students to navigate the ethical dilemmas and reduce stigma associated with caring for mothers with SUD and their children. This intervention applies the transformative learning (TL) theory, implementing weekly, online, case-based learning using cases co-developed with mothers with SUD.

PROJECT GOALS

- Development: Project learning outcomes will be aligned with accreditation competency requirements. Utilizing a constructivist, qualitative approach, we aim to collect the lived experiences of mothers with SUD and transform them into case studies. Case discussion questions will be developed through the lenses of ethical principles (beneficence, non-maleficence, justice, autonomy). Post-case reflection prompts will be guided by the stages of transformative learning theory with the intent to reduce stigmatizing attitudes towards mothers with SUD.
- **2.** Implement: Pre-licensure nursing students will be recruited as participants and the project will be piloted during the fall 2024 semester.
- **3.** Assessment: Evaluate the feasibility of the education and the learning outcomes of the participants.

PROGRESS TO DATE

Development

- IRB approval (Spring 2024)
- Completed 27 interviews with patient population (Spring 2024)
- Creating an initial codebook and applying it to all interviews (Current)
- Initial insights are being used to develop case studies (Current)
- Creating case discussion questions using TL theory as a guiding framework (Current)

Assessment

- Developed a plan of assessment aligned with American Association of Colleges of Nursing competencies and guided by the transformative learning theory
- Reduction in stigmatizing attitudes pre-post-education using the Opening Minds Provider Attitudes Towards Opioid-Use Scale

NEXT STEPS

Development

- Complete qualitative analysis (Summer 2024)
- Write and submit manuscripts: education as innovation, qualitative results (Summer 2024)
- Complete educational modules (Summer 2024)

Implement

- Submit IRB (May 2024)
- Recruit participants (August 2024)
- Implement project (September–October 2024)
- Data analysis (November–December 2024)

Dissemination

- Publish/Present feasibility results (Spring 2025)
- Publish/Present preliminary student learning results (Spring 2025)

ACKNOWLEDGEMENTS

Thank you to the Josiah Macy Jr. Foundation and Miami University Department of Nursing for their generous gifts of time, mentorship, and inspiration. I am also extremely grateful for the mentors who have helped me get to this point, including Jeanette Tetrault, Carmen Portillo, and Brooke Flinders. Lastly, none of this would be possible without the love, support, and patience of my family and friends, including my fellow MFS cohort members.

REFERENCES





ANDREW DWYER, PHD, FNP-BC, FNAP, FAAN

Boston College William F. Connell School of Nursing

DEVELOPING AND EVALUATING GENOMIC NURSING COMPETENCIES TO BRIDGE DISPARITIES IN GENOMIC HEALTHCARE

BACKGROUND

The 'genomic era' began in 2003 with the initial sequencing of the human genome. Genomics has transformed our understanding of health and illness and informs precision healthcare. Moreover, genomics is relevant across the lifespan, and can determine disease susceptibility, confirm diagnosis, indicate prognosis, and guide therapeutic decisions as well as monitoring for disease burden and recurrence. However, discoveries have not benefitted all people. There is evidence of significant disparities in genomic healthcare, and a 2018 report from the National Academies of Sciences, Engineering, and Medicine highlighted growing disparities in genomic healthcare (GHC). Thus, there is a critical need to address disparities so benefits of the 'genomic era' are equitable across all segments of the population.

Nurses are the most numerous of trained health professions numbering more than 29 million globally. Gallup polls for the last 20 years identify nurses as the most trusted and ethical of all professions. As such, nurses are well positioned to take a leading role in bridging GHC disparities. The project will develop, implement, and evaluate innovative educational approaches to develop genomic competencies for the next generation of nurses.

PROJECT GOALS

1. Develop a first-of-its-kind simulation to embed genomic nursing competencies into nurse practitioner (NP) education. The simulation will draw on Kolb's experiential learning model. Development will involve: i) a landscape needs assessment (scoping review); ii) curricular mapping of genomics content across the Boston College NP curricula; iii) identify a Tier 1 genetic condition (i.e., hereditary breast and ovarian cancer syndrome (HBOC)) from the Global Genetics and Genomics community (G3C) for modeling the simulation; iv) conduct qualitative interviews with patients of color affected by HBOC to understand person-centered aspects of genomic healthcare; v) conduct a focus group with NP students of color to understand experiences with assessment at Boston College; vi) create the standardized patient script and map to three guiding documents (AANC Essentials of Graduate Nursing Education, ANA Essentials of Genomic Nursing: Competencies and Outcome Indicators 3rd Ed., International Nursing Association for Clinical Simulation.

Implement and evaluate the genomics simulation in three cohorts of NP students. The pre/post-test will include baseline measurement, short-term evaluation (two weeks post-simulation) and long-term evaluation (one year into clinical practice post-graduation). We will employ a clinical trials-type design (i.e., stepped wedge) with three interventions groups: 1.) Control group [no simulation], 2. Intervention Group (education + simulation), 3. Intervention + 'booster' group (education + simulation + randomized 'booster'). Additional steps include: i) obtaining IRB approval; ii) recruiting the control group; iii) securing actors of color who are experienced in simulation to serve as standardized patients; iv) pilot

testing the simulation with an initial group of NP students; v) obtaining approval for a new course in the curriculum featuring simulation; vi) including the larger cohort for education and simulation.

3. To develop and implement a "train the trainer" model to increase capacity among nursing faculty. To develop capacity for integrating genomics into nursing education, a train the trainer model will be employed. This will include constructing a Canvas LMS page with resources, readings, active learning exercises, assessment questions, and videos and links to spark interest in incorporating genomics into courses. In parallel, the PI will provide individualized consultations with faculty to identify current understanding of genomics and interest in incorporating genomics content into their courses.

PROGRESS TO DATE

Aim 1: Develop novel simulation (6 publications)

- Conduct landscape needs assessment – two publications
 - Thomas, J., Keels, J., Calzone, K. A., Badzek, L., Dewell, S., Patch, C., Tonkin, E. T., & Dwyer, A. A. (2023). Current state of genomics in nursing: A scoping review of healthcare provider oriented (clinical and educational) outcomes (2012-2022). Genes. 14(11): 2013. doi: 10.3390/genes14112013
 - Katapodi, M. C., Pedrazzani, C. A., Fluri, M. Barnoy, S., Blazey-Underhill, M. I., Dagan, E., Jones, T., Kim, S., Uveges, M. K., & Dwyer, A. A. (2024). ACCESS: An empirically-based framework developed by the International Nursing CASCADE Consortium to address genomic disparities through the nursing workforce. *Frontiers in Genetics*. 14:1337366. doi: 10.3389/fgene.2023.1337366
- Curricular mapping across the Boston College NP curricula – completed
- Identify a Tier 1 genetic condition (HBOC) from G3C – completed
- Conduct qualitative interviews with patients of color affected by HBOC – three publications

- Adler, J. M., Hesse-Biber, S., Seven, M., &
 Dwyer, A. A. (2024). At the intersection of hereditary cancer risk and identity: Pathogenic BRCA variants and 'identify theft'. *Frontiers in Genetics* (revisions in review)
- Hesse-Biber, S., Seven, M., Shea, H., & Dwyer,
 A. A. (2024). Intersectionality, BRCA genetic testing, and intrafamilial communication of risk: A qualitative study. *Cancers* 2024, 16: 1766. doi: 10.3390/cancers16091766
- Hesse-Biber, S., Seven, M., Shea, H., Heaney, M., & Dwyer, A. A. (2023).
 Racial and Ethnic Disparities in Genomic Healthcare Utilization, Patient Activation, and Intrafamilial Communication of Risk among Females Tested for BRCA Variants: A Mixed Methods Study. Genes. 14(7):1450. doi: 10.3390/genes14071450.
- Conduct a focus group with NP students of color – completed
- Create the standardized patient script and map to three guiding documents – completed
 - AANC Essentials of Graduate Nursing Education
 - Publication: Walker, T., Ersig, A.,
 Dwyer, A., Kronk, R., Snyder, C.,
 Whitt, K., & Willis, V. (2024). Diving into Precision Health: A Guide for Nurse Practitioners. Journal of the American Association of Nurse Practitioners (in press)
 - ANA Essentials of Genomic Nursing: Competencies & Outcome Indicators
 - INACSL Standards & Best Practices
- Beta test the simulation completed

Aim 2: Implement simulation and evaluate

- Obtain IRB approval completed
- Recruit the control group completed (n=35)
- Secure actors of color (standardized patients)
 completed (community acting groups)

.....

- Pilot test the simulation with an initial group of NP students – completed (n=9)
- Obtain approval for a new course in the curriculum – completed (HLTH700 Genomics in Health Care and Society (offered Fall 2024))

Aim 3: Train the trainer

- Constructing a Canvas LMS page for faculty – completed
- Faculty consultations completed (n=9) including pediatric genomics simulation

NEXT STEPS

- including the larger cohort for education and simulation (HLTH700 – Fall 2024)
- Develop "Genomics Ethics Competencies" simulation (2024-2025)
- Continue faculty consultations and ongoing qualitative feedback
- Publish write-up of pediatric simulation form year 1 (Journal of Pediatric Nursing)
- Analyze data and prepare publication reporting stepped wedge design
- Disseminate and present findings at meetings (ISONG, INACSL, ANCC)

EXPAND REACH

- Work with ISCC-Peg to create a nursing educator toolkit and apply for NLN funding
- Expand catalog of genomic nursing simulations

ACKNOWLEDGEMENTS

I wish to express my gratitude to the Josiah Macy Jr. Foundation for their support. I greatly appreciate the mentoring, support, guidance, and encouragement from Dr. Afaf Meleis, Dr. Rachel Salas, and Dr. Chris Lee. I am blessed to have wonderful colleagues at Boston College School of Nursing, the best research assistant in the world Isabella McDonald, and amazing research collaborators. I am grateful for the students' enthusiasm and engagement as well as the local actors who help make the simulation a high fidelity learning experience. The enduring love and support from my wife Krista and teen daughters Julia and Mia remind me that courageous authenticity matters and that we can be the change we wish to see in the world. I am ever grateful for this opportunity.





23



OLANREWAJU (LANRE) FALUSI, MD, MED, FAAP

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FACE ALL: FAMILY AND COMMUNITY ENGAGEMENT IN THE ASSESSMENT OF LEARNERS AND LESSONS

BACKGROUND

Professional and educational organizations call for increased patient engagement within residency training on social determinants/drivers of health (SDH) and health equity.¹⁻³ In response, training programs have developed SDH curricula that have included patients, largely in the form of providing input on what and how to teach learners, talking directly with learners about their lived experiences, and participating in community-based activities with learners.⁴

Assessment strategies for SDH curricula in residency typically include knowledge tests, reflective writing, and clinical observation by faculty. However, feedback from patients—the true "end users" of SDH curricula—is rarely included in the assessment of learners. When it is sought, patient feedback about learners is typically accomplished through assessment tools (e.g., surveys) developed by educators. This highlights a gap in health professions education: patients and communities have been embraced as teachers and increasingly as assessment tools they are asked to complete about learners. Equity in the assessment of clinical skills regarding SDH requires the engagement of, and sharing of power with, patients, families, and communities.⁵

PROJECT GOALS

- To develop a process for patients (or parents/caregivers in the pediatric setting) to assess how a resident addressed SDH during a clinical visit; and
- To follow a community-engaged framework⁵ to develop the assessment process

PROGRESS TO DATE

The project consists of two approaches that will be integrated to determine the content and format of the assessment tool: a **scoping review** of the literature and **focus groups and interviews** of relevant stakeholders.

SCOPING REVIEW

We are undertaking a scoping review of the literature following the five-stage framework described by Arksey and O'Malley.⁶ The research question is: What published examples exist regarding patient/family/community engagement in developing a tool to assess health professions trainees or clinicians? Over 100 terms were searched across 9 databases with health professions education, medical, nursing, and public health sources, resulting in 2518 abstracts. All have been screened for eligibility, and 99 have been included for full text review that is currently ongoing.

FOCUS GROUPS AND INTERVIEWS

Co-led with two community-based leaders/consultants, focus groups have been completed with the following stakeholders: parents/caregivers of patients, local community members, and learners (pediatric residents). The aim of the focus groups is to obtain the perspective of participants' experiences with discussing SDH in clinical visits; their interest, experience, and comfort with assessment; and recommendations for the logistics on how to obtain patient/family feedback. A final focus group with parents and community members who prefer Spanish is currently being scheduled. Emerging themes from the focus groups are described below.

COMMUNITY MEMBERS:

- Want to develop a relationship with a healthcare provider before delving into issues related to SDH
- Interested in assessing learners regarding their SDH discussion and would prefer to do so via a survey sent by email after the visit

PARENTS/CAREGIVERS:

- Comfortable talking about SDH only with clinicians who are friendly and attentive to their needs and explain what they will do with the information they provide about SDH
- Prefer not spend time on surveys; in their experience, no changes take place after completing surveys

PEDIATRIC RESIDENTS:

- Value informal feedback directly from parents over formal feedback obtained through surveys
- Some would want to see written feedback from parents, some do not

NEXT STEPS

Upon completion of thematic analyses of the focus group transcripts and review of the scoping review findings, an initial draft of the assessment process will be developed. Key informant 1:1 interviews with learners, health professions education leaders, and national and local leaders in community health and patient advocacy will further refine the assessment process and help to reconcile differing opinions across the focus groups. The next phase of the project will include piloting the tool in a primary care setting, then eventually embedding the assessment within my residency program's SDH curriculum evaluation plan. We anticipate disseminating the best practices for community-engaged assessment, and the assessment tool itself, beyond the residency arena and into other health professions education.

Several interesting findings from the focus groups have sparked additional questions that we would like to investigate, such as the nuances of the parent/community expectations regarding SDH discussions, which has been less studied in the pediatric settings. Further exploration may also clarify the tension that residents describe with being assessed by patients or their family members around SDH.

ACKNOWLEDGMENTS

I have deep gratitude for the generosity of the Josiah Macy Jr. Foundation and the Macy Faculty Scholars Program; the friendships and peer guidance of my MFS cohort; the transformative teaching of the Harvard Macy Institute; the partnerships with Ms. Gail Avent, Ms. Toniah Harrison, and Dr. Maranda Ward; the mentorship of Drs. Afaf Meleis, Cristina Gonzalez, and Aisha Barber; the dedication of the trainees and faculty involved in the scoping review; and the thoughtfulness of the focus group participants.

REFERENCES





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ENTRUSTABLE PROFESSIONAL ACTIVITIES TO DEFINE GAPS IN GENERAL SURGERY TRAINING

BACKGROUND

In 2016, the American Board of Surgery began to move toward an Entrustable Professional Activities (EPAs) framework to help to address concerns about the preparedness of general surgery graduates for unsupervised practice. Following a two-year feasibility trial of 5 pilot EPAs and drafting the remaining set, 18 EPAs for General Surgery (GS) were implemented nationally for all general surgery training programs in July 2023.

Entrustable Professional Activities (EPAs) are essential tasks of a discipline that an individual can be trusted to perform independently in a given context, and 18 have been defined for general surgery. They are assessed across pre-, intra-, and post-operative phases of care, utilizing a prospective single-item entrustment scale with corresponding behavioral anchors derived from mapped critical competencies.

Similar to other broad initiatives, initial uptake can be variable. Technological challenges with the ABS-provided app led to most programs not beginning to collect data until near the end of 2023, and the strategy for Year 1 was branded as "Progressive Engagement." Moving forward, ABS is now focused on data quality and the opportunity for national data that can be used to define the breadth of experiences of GS residents from the beginning of their training forward to understand where gaps and opportunities lie in surgical training.

PROJECT GOALS

- 1. Identify entrustment levels of general surgery residents longitudinally across their first year.
- 2. Identify variables that predict entrustment in entering general surgery residents.
- 3. Identify differences in EPA assessment scores based on gender, race, and ethnicity.

PROGRESS TO DATE

Programmatic Support

Given challenges with the early EPA rollout, shifted focus to coalition-building and supporting programs in the midst of their EPA rollout.

- Conducted a total of 23 visiting professor engagements over the past 24 months
- 12 since being named a Macy Faculty Scholar, including two internationally
- Continuing program support via workshops or as a visiting professor, with 5 scheduled so far in Fall 2024

National-Level Research Efforts

Focused on smaller projects that could support the above project goals while continuing to build the necessary infrastructure to complete them, including:

- Co-led an ABS working group to define a national research agenda for EPAs in surgical disciplines
 - Under review at Annals of Surgery
- Co-wrote a review article with a mentee about the use of EPAs in general surgery residency programs
 - Published in JAMA Surgery
- Meeting weekly with ABS project mentors to define national-level data collection strategies
 - Defined the variables that would need to be collected in addition to those currently part of the EPA dataset
 - Met with several stakeholders to explore potential data collection methodologies including:
 - Association of Program Directors in Surgery (APDS) Education Quality Improvement Project (EQIP) – primary source data collection from multiple stakeholders including ABS & ACGME, but limited to approximately 15 programs
 - SIMPL current data home for EPA data, unknown cost structure or timeline to collect additional data points or link together existing data sets
 - Academic medical center clinical trials network – experience linking data sets with defined cost structure, time efficient, requires ongoing investment from PI or ABS
 - Close to finalizing plan for data collection, anticipated to begin in August 2024
 - May be limited to Goals 1 & part of 3 initially as necessary variables for these analyses are currently collected in the SIMPL dataset

Smaller-Scale Research Efforts

- Mentored a resident in a project examining inter-rater reliability of the EPA entrustment scale using videos of standardized patient care scenarios (one pre-operative, one intra-operative)
 - Oral presentation in April, manuscript in revision at the *Journal of Surgical Education*
- Conducting a qualitative study of faculty and residents' perceptions of the benefits and challenges of EPAs
 - 5 faculty interviews conducted so far, resident focus group scheduled for mid-June
- Mentoring an undergraduate summer student to investigate the relationship between quality of narrative EPA feedback comments between high- and low-volume EPA assessors in our single-institution experience

NEXT STEPS

Programmatic Support

- Continue to build a brand as an expert in competency-based assessment and EPAs
- Seek opportunities to cross-pollinate in other disciplines including Pediatrics and Family Medicine

National-Level Research Efforts

- Finalize plan for a national EPA research data set
- Build consortium to collect additional variables needed for Project Goal 2
 - Considering partnership with EQIP vs building an independent consortium depending on the outcome of the national EPA dataset discussion
- If chosen as PI for a coordinating center, begin collection of Data Use Agreements from participating sites

SMALLER-SCALE RESEARCH EFFORTS

- Qualitative analysis of resident and faculty experiences with EPAs
 - Complete faculty interviews and focus groups

- Conduct thematic analysis of comments using an inductive grounded theory approach
- Write abstract and submit for presentation at Academic Surgical Congress
- Write manuscript and submit for publication
- Narrative EPA comments comparison between high- and low-volume faculty assessors
 - Quantitative comparison of narrative feedback completion percentage and comment length
 - Qualitative review of narrative feedback using defined themes
 - Write abstract and submit for presentation at Academic Surgical Congress
 - Write manuscript and submit for publication

ACKNOWLEDGEMENTS

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29



GEOFF STETSON, MD

University of Illinois Chicago College of Medicine

THE MENTOR PROJECT AND MEDEDMENTOR.ORG: A SYNERGISTIC APPROACH TO PROMOTING DIVERSE VOICES IN HEALTH PROFESSIONS EDUCATION

BACKGROUND

Health Professions Education (HPE) scholarship is a challenging and diverse field, integrating various disciplines, many of which align closely with the social sciences. These disciplines utilize theories and frameworks as tools to examine educational problems and contexts. This approach can be particularly foreign to educators with biomedical backgrounds, such as clinicians and basic scientists.

Given these challenges, the most productive and influential institutions in HPE are those that can invest significant resources into experts for research and mentorship. Nearly all these organizations are in English-speaking countries and/or the Global North. This unequal distribution of resources results in a lack of diverse voices in the field. To address this disparity and increase participation from historically underrepresented groups, the MedEdMentor initiative was launched.

PROJECT GOALS

- 1. Define Roles and Strategies of Expert Mentors: Utilizing a constructivist grounded-theory methodology applied to semi-structured interviews, we aim to delineate how expert mentors conceptualize their roles, resulting in a unified model of HPE mentoring.
- 2. Replicate Mentor Functions and Approaches: Through a universally accessible website, mededmentor.org, we aim to provide crucial support to anyone engaging in HPE projects and scholarship.
- 3. Assess Impact and Reach: Evaluate the reach and impact of MedEdMentor as its awareness and efficacy grow.

PROGRESS TO DATE

Qualitative Research

- Completed nine interviews with expert HPE research mentors.
- Finalized an initial codebook; applying it to all interviews.
- Initial insights are being used to guide website development.
- Anticipate further interviews post-initial coding.

MedEdMentor

- Established MedEdMentor LLC on September 15, 2023, to consolidate intellectual property.
- Officially launched mededmentor.org in September 2023. In its initial six weeks, the platform logged over 15,000 page views and attracted more than 550 registered users from 42 countries across six continents. At that time, the

site consisted of a handful of essays describing some fundamental aspects of HPE scholarship, summaries of over 230 theories and frameworks relevant to the field, and a glossary of key terms.

- Since that time, the scope and function of the site has grown considerably.
 - More lessons have been published to expand the knowledge base of our users.
 - The first, and only, medical education-specific literature search launched in November 2023.
 This produces highly specific results that are often more relevant when compared to Google Scholar. However, the searches are not comprehensive and should be supplemented by another general search engine.
 - The first medical education-specific custom-GPT (MedEdMentor AI) was launched in November 2023 to provide specific guidance to user questions. This tool consists of the most up-to-date version of ChatGPT-4 that has been given instructions and context that allow it to act as a ready and willing mentor for HPE scholarly projects.
 - A pivotal assessment of MedEdMentor AI involved its comparison against six months of qualitative research from the MEJ-24. Tasked with recommending theoretical constructs for given study phenomena in a blinded format, the AI recommended the actual theories used in these studies at an impressive rate of 55% (29 of 53). A manuscript is under review.
 - The Theory Suggester was launched in January 2024 to facilitate targeted investigation of possible theories to use for a given project. This tool provides the names of 5–20 theories by comparing the description of the phenomenon under investigation against a database of abstracts from 50,000 medical education research manuscripts.
- MedEdMentor has been invited to be discussed 27 times at meetings held by regional, national, and international groups, as well as individual institutions.
- As of May 1, 2024, MedEdMentor has over 1350 registered users with individuals from 80 different countries visiting the site during the month of April. In total, users have spent nearly 10,000 minutes (166 hours) on the site

over the course of 42,000 visits, highlighting global demand for accessible HPE resources.

NEXT STEPS

Qualitative Research

- Complete coding of initial set of interviews.
- Conduct further interviews as needed.
- Write and submit manuscript.

Resource Improvements

- A revamped literature search tool with more Al integration—initial results suggest superiority to best practices using MESH filters.
- More lessons to improve users' foundational knowledge.
- A social networking feature to allow mentors and mentees, or scholars with shared interests, to find one another.
- Tools to support users in writing research questions and selecting appropriate methodologies.
- Redesigned database of theories and frameworks to improve relevancy and interconnectedness.

Expand Reach

- Share MedEdMentor with broader HPE communities, including nursing, dentistry, and pharmacy.
- Potentially rebranding (HealthEdMentor?) to reflect the universal applicability of our tools.

ACKNOWLEDGEMENTS

Three groups/people need to be thanked first. Thank you to the Josiah Macy Jr. Foundation for their generous gifts of time, mentorship, and inspiration. Equally important is my collaborator, and co-founder, Greg Ow. Lastly, none of this would be possible without the love, support, and patience of my family.

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RAHUL VANJANI, MD, MSC

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BUILDING AND EXPANDING SOCIAL MEDICINE EDUCATION AND PRACTICE IN RHODE ISLAND

BACKGROUND

Social medicine focuses on understanding and addressing the social, economic, and environmental determinants of health, aiming to promote health equity and improve the overall well-being of populations. The incorporation of social medicine into health professions education has generally taken the form of critical theory and engaged discussion in the absence of practical application. While learning theory is an important first step, it is equally important to teach students how to engage in direct application of theory via immersion in the practical day-to-day work of social medicine (i.e., constructivist theory). Otherwise, learners are left wondering how to translate classroom-based discussion into practice.

PROJECT

This project will increase knowledge and sense of empowerment among health professionals around addressing patients' social needs in the context of interprofessional care teams. There are three main components to the project: research, education, and practice.

Research: Social and environmental conditions determine the majority of health outcomes. Yet, only 16% of physician practices and 24% of hospitals screen for social needs. Although health professionals increasingly understand that addressing patients' social needs is as important as addressing medical needs, they often avoid screening for social needs, worried that answers provided might highlight problems they feel unequipped to address. In my work this past year, I sought to address this gap by highlighting the unique ways in which social care can be provided within the healthcare system. This entailed interprofessional collaborations with lawyers, social workers, and public health experts to produce research on the 'screen and intervene' approach to social care, the medical-legal partnership model, and the role of community health workers and peer recovery specialists in the healthcare system.

Education: Beginning in September 2023, I partnered with America's Essential Hospitals to host a one-year learning collaborative to train an interprofessional group of health professionals from 10 public hospitals around the country on practical applications to integrating social care into the clinical encounter. This consisted of twelve monthly learning collaborative sessions on topics at the intersection of health and social care and a full-day retreat, which was hosted at Amos House in Providence, RI. During the retreat, a diverse group of health professionals from around the country participated in street medicine outreach, sat in on a District Court hearing followed by a Q&A with a federal judge, and listened to an interactive panel discussion on the topic of mothers, children, substance use, and child protective services involvement.

Practice: The goal of this component was to bring together learners from medicine, nursing, and law to participate in a one-month, full-time clinical elective entitled 'Social Medicine." Coordinating schedules of the various health professions students proved difficult. I was unable to recruit a nursing or law faculty member to co-teach with me. After

hosting two nursing students and one medical student in October 2023, I paused the elective to consider whether there may be a more effective and efficient way to scale the curriculum. Discussions with my MFS mentors and others led me down the path of technology as a tool to scale this work.

ADAPTATION

Over the past seven years, I developed a free academic platform designed to address social needs within clinical settings, providing both tools and case-use guidance. Annually, the platform engages over 9,000 health professionals. Through user testing, I discovered that although the platform was widely used, many did not fully understand the available solutions or the specific questions necessary to activate point-of-care interventions. In other words, the platform was facilitating the delivery of care, but failing to function as an educational tool that could level up health professionals.

Realizing the need for features like a screening tool and outcome tracking, I pivoted my MFS project to create a tool that could simultaneously improve the health and well-being of individuals while empowering health professionals with the knowledge and tools to intervene on social needs at the point of care. The result is Docs for Health, a HIPAA-compliant SaaS platform that offers a comprehensive patient screener, identifies and automates the best evidence-based interventions using local expertise combined with artificial intelligence, and includes integrated documentation with follow-up outcome tracking.

NEXT STEPS

I am currently enrolled in the Social Enterprise Greenhouse Accelerator Program, an impact program for entrepreneurs committed to positive societal and economic change. Over the next year, I hope to leverage the skills I am learning to scale Docs for Health. While developing and implementing a business model is one aspect of this work, research, education and practice remain important components. To that end, I am centering the following research question over the second year of MFS:

How does utilization of technology as the foundation of a constructivist learning theory influence 1) knowledge acquisition; 2) sense of empowerment; and, 3) interprofessional collaboration among health professionals addressing patients' social needs? In addition, I will spend the next year working with a survey methodologist to evaluate the psychometric properties of a solution-oriented, prospective social needs screening tool that enables the deployment of point-of-care solutions.

ACKNOWLEDGEMENTS

I am grateful for the opportunity to serve as a Macy Faculty Scholar. The support provided by the Josiah Macy Jr. Foundation has afforded me the time and space to pivot my career. As I have transitioned from a full-time academic to a community-based physician and social entrepreneur, the Foundation's leadership and my mentors—Kelley Skeff, Barret Michalec, and Eileen Hayes— have provided me with invaluable support and wisdom. All three of my mentors help me question my assumptions and inspire me to ask different questions and take different approaches.

SMALL GROUP DISCUSSION SUMMARIES: MINI THINK TANKS

PROMOTING DIVERSITY, EQUITY, AND BELONGING

FACILITATED BY JENNIFER BEST, MD, AND RICHARD GREENE, MD, MHPE

The session began with introductions (name, role, and personal motivation for attendance) and establishment of group roles and expectations for psychological safety and confidentiality. We also agreed to remain mindful of inclusion of both nursing and medicine in our language and conversation. Jennifer Best presented the modes and mindsets of Liberatory Design (National Equity Project) as a foundation for creating new HPE learning environments that fully embody the principles of diversity, equity, and belonging. Key framing questions led by Richard Greene included:

- How are institutions navigating the implications of recent Supreme Court decision about affirmative action?
- 2. How are folks addressing issues of inclusion in the current climate given the rise of anti-Semitism and Islamophobia while maintaining an eye on those who are underrepresented in medicine?

OBSERVATIONS

Observations shared highlighted a loss of trust among learners in systems and institutions, a potential neglect of gender equity, and the value of restorative practices for community building. Structural racism continues to stifle these conversations through its influence on people, policies, and leadership. Participants highlighted the leadership dilemma faced by underrepresented individuals in medicine, who struggle between wanting to be on the right side of history and managing their self-presentation. The significance of allyship and the complexity of intersectionality were also noted as crucial factors in these discussions.

RECOMMENDATIONS

Recommendations from the session included establishing clear ground rules for conversations, shifting projectframing from "DEI" to desired outcomes, and consistently reviewing organizational power dynamics. The session underscored the importance of self-advocacy aligned with institutional DEIB goals, and urged rethinking leadership pathways in DEIB. Participants advocated for a shift from diversity and inclusion rhetoric to that of inclusive excellence, while reminding faculty and learners who are URIM that DEIB need not be their sole focus. The session encouraged a culture of openness to correction, mitigation of isolation for those in minority roles ("onlys"), and the creation of affinity groups for support and collaboration. Finally, it called for intentional representation of other professions as leaders in HPE to foster inclusivity and equity across disciplines.

RESOURCES OFFERED

National Equity Project: Liberatory Design

Camara Jones, "Toward the Science and Practice of Anti-Racism: Launching a National Campaign Against Racism"





SMALL GROUP DISCUSSION SUMMARIES: MINI THINK TANKS

PREPARING FUTURE HEALTH PROFESSIONALS TO NAVIGATE ETHICAL DILEMMAS: NAVIGATING THE ETHICS OF AI IN HEALTH SCIENCES EDUCATION AND HEALTHCARE

FACILITATED BY DEEPU GOWDA, MD, MPH, MS, AND SARAH PEYRE, EDD

The utilization of AI in healthcare and health science education presents several challenges and ethical concerns. This report summarizes the discussion generated by Macy Faculty Scholars on June 12, 2024, at the Macy Faculty Scholars Annual Meeting in Atlanta, GA.

CHALLENGES:

1. Accuracy and Reliability:

- Al can provide good but not the best answers. Determining when Al's responses are good enough is difficult.
- Error detection remains a critical issue. It is unclear how well humans or AI can identify AI's mistakes.
- Garbage in, garbage out: the quality of Al output is only as good as the input data, which can be hard to judge.

2. Technology Adoption:

- Technology is not uniformly adopted (e.g., varying EHRs), raising concerns about becoming overly dependent on AI.
- Al implementation can be disruptive, affecting existing expertise areas and potentially leading to job displacement for providers.

3. Education and Training:

- Ensuring that healthcare providers and educators are adequately trained to use AI effectively and ethically.
- Originality in academic writing and the impact of AI on original thinking and development.

4. Authority and Disputes:

 Resolving disagreements between patients and clinicians when AI provides conflicting advice.

5. Privacy and Compliance:

 Addressing privacy concerns, especially with the use of ambient listening and compliance with regulations like HIPAA.

6. Access to Technology:

- Ensuring equitable access to AI technology.

7. Energy Needed to Power AI:

 The energy required to create and maintain AI infrastructure is considerable and will grow with the expansion of AI.

ETHICAL CONCERNS:

1. Transparency:

 Being clear about how and when AI is used, and ensuring transparency about AI's limitations and uncertainties.

2. Ethical Use and Boundaries:

- Identifying acceptable uses of AI and ensuring it does not replace critical human judgment.
- Addressing the ethical implications of potentially undertraining healthcare providers in the effective use of AI tools.
- 3. Impact on Jobs and Reimbursement:
 - Concerns about job displacement and changes in insurance reimbursement if AI can diagnose as accurately as human providers. An ethical concern is whether healthcare professionals should argue for the survival of their professions or for benefit of overall healthcare, even if it means loss of jobs.

4. Privacy and Security:

 Ensuring data privacy and compliance with regulations like FERPA and HIPAA when using AI.

5. Disparities and Biases:

 Unequal access to AI in education and practice could deepen health care disparities.

6. Climate and Environment:

 Increased adoption of AI in healthcare will drive demands on energy. Fossil fuels use and heat production may worsen climate change concerns.

STRATEGIES FOR NAVIGATING CHALLENGES AND ETHICAL CONCERNS:

1. Policy Development:

- Developing policies around privacy, security, and transparency in AI use.
- Mandating training for continuing medical education (CME) and maintenance of certification (MOC) in AI use.

2. Teaching Discernment:

- Educating healthcare providers and students on differentiating between accurate and misleading information, leveraging AI to teach these skills.
- Creating clear educational policies so students know when AI use is permitted, along with pedagogical rationale for such decisions.

3. Infrastructure and Environmental Impact:

 Addressing the technological and environmental impacts of AI, such as server heat and noise, to mitigate global warming concerns.

4. Embracing Change:

 Encouraging the healthcare community to embrace Al's potential benefits, such as freeing up time for better patient communication and care.

By addressing these challenges and ethical concerns through careful policy-making, education, and transparency, the healthcare and health science education fields can better integrate AI while safeguarding patient care and professional integrity.

SMALL GROUP DISCUSSION SUMMARIES: MINI THINK TANKS

DEFINING COLLABORATION AMONG FUTURE HEALTHCARE PROFESSIONALS IN A POST-COVID WORLD

FACILITATED BY MATT RUSTICI, MD, AND MEG ZOMORODI, PHD, RN

This mini think-tank began with a discussion on redefining collaboration in healthcare, particularly in the context of post-pandemic changes. In health professions education, we often discuss the need for collaborative skills without having a clearly adopted definition of collaboration. Through group discussion, participants identified the following key aspects of collaboration in health professions education:

- Involves two or more people with a common goal
- Acknowledges that collaborative work is greater than the added contribution of the individuals
- Should be strength-focused related to participants
- Is key in future-oriented activities
- Can be defined as co-creation of work
- Participants work at the top of their scope

Participants utilized the SOARR framework (S – strengths, O – opportunities, A – aspirations, R – risks, R – results) to encourage a wide range of perspectives and ideas. Participants divided into five groups, each focusing on one SOARR category and organizing into themes:

STRENGTHS:

- Innovation and opportunity for growth
- Fosters teaming and supportive culture
- Collaboration begets collaboration across sectors and settings
- Diversity of perspectives and roles
- Enhances meaning in and of work (and increased outcomes for patients and practitioners)

OPPORTUNITIES:

- Personal growth/relationship building across professions
- Curricular needs that differ between different professions
- Funding and scholarship

- Technology to innovate and facilitate logistics collaboration
- Locations for implementation

ASPIRATIONS:

- Quality, safety, and improved patient outcomes
- Financial and other sustainability
- Leaving the world a better place
- Improving equity and access
- Respect, trust-building, and belonging
- Having fun, adding meaning and satisfaction
- Improve teaching and learning (opportunities and outcomes)
- Increase reach and dissemination

RESULTS:

- Structural outcomes
- Student/learner outcomes
- Generates next steps
- Plans/goals achieved
- Positive perception of all parties
- Personal satisfaction or growth and having everyone feel respected
- All engaged and respected
- Positive patient outcomes
- Publications

REPRODUCIBLE/SUSTAINABLE RESOURCES:

- National entities share common policies and expectations (accreditation, Medicare, government)
- Health system-level culture that prioritizes collaboration and has funding
- Senior leadership buy-in and champions (time allocation, scheduling)
- Faculty (ownership and professional development)
- Staff support and logistical/infrastructure support
- Student interest and availability, physically and mentally

- Evidence-based best practices and common competencies
- Patients and families

Using these session outputs, facilitators used a generative AI to draft three mission statements (from Strengths and Opportunities), three vision statements (from Aspirations), and six next steps (from Results and Resources) to identify actionable next steps. Participants discussed each mission and vision statement and selected one they found most appropriate via consensus discussion.

MISSION STATEMENT:

"To cultivate a culture of innovation, teamwork, and collaboration that spans across sectors and settings. By fostering diverse perspectives, building strong interprofessional relationships, and leveraging technology and strategic locations, we aim to enhance the meaning of work and achieve superior outcomes for patients and healthcare professionals."

VISION STATEMENT:

"To inspire and develop future health professionals who collaborate to enhance patient outcomes, ensure sustainability, and improve equity and access. We envision a healthcare community built on respect, trust, and belonging, where teaching and learning are continually improved, satisfaction is high, and our impact extends far and wide, leaving a positive mark on the world."

NEXT STEPS:

- Develop and Implement Structured Collaboration Frameworks: Create frameworks based on best practices and common competencies to foster engagement and respect, achieving positive patient outcomes and sustainable practices.
- 2. Secure Senior Leadership Buy-in and Champions: Engage senior leadership to champion collaborative training initiatives, providing time allocation and scheduling, and aligning health system culture and priorities with collaborative goals.
- 3. Enhance Faculty Development and Ownership: Invest in professional development for faculty to cultivate ownership and expertise in collaborative

teaching methods, positively influencing student outcomes and achieving plans and goals.

- 4. Strengthen Logistical and Infrastructure Support: Enhance staff support and infrastructure, providing necessary resources and logistical support, and ensuring students are physically and mentally available.
- 5. Integrate Evidence-Based Best Practices and Common Competencies: Incorporate best practices and common competencies into the curriculum to ensure students are well prepared for collaborative work, resulting in positive patient outcomes and high-quality publications.
- 6. Foster Student Interest and Participation: Engage students by promoting the benefits of collaborative training, such as personal growth, respect, and positive patient outcomes, achieving positive perceptions, personal satisfaction, and respect among participants.

During the discussion of AI generated output, participants noted that alignment of resources is crucial but currently problematic, with rewards in clinical medicine not focused on collaboration. There is a need for a developmental trajectory of interprofessional education skills to better help align teaching to the needs of students at different points in their development. It was also noted that overcoming systemic and individual resistance to collaboration is essential and that academic rewards often focus on the individual rather than on collaborative efforts.

The session successfully redefined collaboration among future healthcare professionals using the SOARR method. Al was a useful tool to generate mission and vision statements as well as actionable next steps from the data for participants to refine further. As a result, a framework for improving collaboration in their clinical and educational settings was achieved.





40

SMALL GROUP DISCUSSION SUMMARIES: CAREER DEVELOPMENT TOPICS

CRITICAL CONVERSATIONS

FACILITATED BY CHERYL WOODS GISCOMBÉ, PHD, MSN, RN, PMHNP, AND BARRET MICHALEC, PHD

The session on "Critical Conversations" began with brief introductions of the presenters and all participants. Barret shared session handouts and provided an overview of the conceptualization of critical conversations. He introduced the three C's: Communicate Confidently, Communicate Clearly, and Control Your Responses. Cheryl followed with a description of the fishbowl exercise, distributing note cards for participants to write down their primary questions about critical conversations.

Cheryl shared professional examples of critical conversations, illustrating key strategies used and highlighting skills such as self-awareness, curiosity, and mutual compassion. Cheryl also described mindfulnessbased approaches to engaging in critical conversations. She also emphasized essential skills, including active listening, paraphrasing, nonverbal cues, emotional intelligence, effective questioning, clear communication, humility, assertiveness, and preparation. Participants were asked how to build these skills, leading to a discussion.

Barret then addressed the barriers to effective critical conversations, such as fear of conflict, lack of confidence, poor communication skills, emotional barriers, lack of trust, organizational culture issues, and inadequate preparation. Participants discussed ways to minimize these barriers.

The session returned to the fishbowl exercise, where participants read and addressed each other's questions. In the final segment, Barret guided participants in developing a personal action plan using the SMART goal framework, focusing on specific conversations they needed to have. The session concluded with personal examples from participants and the identification of key strategies for handling critical conversations. Cheryl shared QR codes with participants so they could access additional electronic resources related to successful engagement in critical conversations.

TAKE-HOME MESSAGES:

Enhanced Understanding of Critical Conversations: Participants gained a comprehensive understanding of what constitutes a critical conversation and its potential impact on personal and professional relationships. **Skill Development**: Attendees learned essential skills for effective communication, such as active listening, emotional intelligence, and effective questioning, which they could apply in various contexts.

Identification and Mitigation of Barriers: The session helped participants identify common barriers to critical conversations, and we discussed feasible strategies to minimize these obstacles, fostering a more open and effective communication environment.

Personal Action Plans: Each participant developed a personalized action plan, setting SMART goals for improving their skills in critical conversations, ensuring they left the session with actionable steps.

Improved Confidence and Preparedness: By discussing various scenarios, participants felt more confident and prepared to handle difficult conversations, leading to better outcomes in their personal and professional lives.

SMALL GROUP DISCUSSION SUMMARIES: CAREER DEVELOPMENT TOPICS

GRANTSMANSHIP / FINDING FUNDING

FACILITATED BY CINDY FORONDA, PHD, RN, CNE, CHSE, AND BRIDGET O'BRIEN, PHD

In this 90-minute session, Cindy, Bridget, and Peter Goodwin shared information, experiences, insights, and strategies to help Scholars identify and apply for funding opportunities. The objectives were to:

- Analyze the journey of grantsmanship
- Identify potential sources of funding
- Appreciate the value of perseverance in the context of successful scholarship
- Share our experiences and insights regarding seeking and obtaining funding

SOME KEY TAKEAWAYS FROM THE SESSION INCLUDED:

- Be strategic about grant writing: Rather than trying to create a project to fit each grant opportunity, focus on key areas and projects that align with your expertise and strengths; have proposals prepared so you can pull from them when you find funding opportunities that are a good fit; look for opportunities that align with your projects
- Applying to multiple funding sources at the same time is okay, especially if they have different focus areas, support different aspects of the project, or target different levels of impact (local vs. regional vs. national)—if you receive more than one you can offer to turn one down or propose an additional component of the project
- Applying to the same funding source multiple times is normal—just make sure to demonstrate progress and improvement from one submission to the next
- Know what funders are looking for:
 - Innovation—can be new to the field or new to your institution or specialty or clinical setting
 - Strong potential for success and impact based on strength of team members, evidence of previous success, support from leadership, institutional or program commitment to developing, implementing and/or sustaining the idea, collaboration across institutions, consider desired level of impact (local, regional, national)

- Support from other funders/partners—limits risk to any one funder; just make sure to describe how different funding sources are complementary rather than overlapping (e.g., funding from one source might cover items that another source will not fund); partners might also focus on different levels of impact (local vs. national)
- Address priority areas
- Tips for writing strong proposals (see slides 14 & 15 for complete list):
 - Provide a clear path of execution logic model can be helpful
 - Describe plans to evaluate outcomes, include measurable outcomes—top priority for funders (they want to see outcomes and impact)
 - Always seek feedback on your proposal
 - Consider overhead—foundations don't pay the federal overhead rate; bring your institution in early to discuss this
- Do not let overhead concerns discourage you from applying to private foundations and for small grants:
 - Institutions generally appreciate the prestige of obtaining funding from private foundations
 - Small grants—create accountability, connections with colleagues, recognition of your ability, which in turn demonstrates success; can lead to future projects and larger funding opportunities
- CV tip: Indicate how competitive the grant was (how many applied and how many received), especially if the amount of the grant is small (as many grants in health professions education are); this conveys the rigor and status

RESOURCES:

- <u>See PowerPoint presentation</u> from the session for specific funding opportunities.
- Foundation Directory: <u>Candid.org</u>
- Article: <u>Gruppen LD, Durning SJ. Needles and</u> <u>Haystacks: Finding funding for medical education</u> <u>research. Acad Med. 2016; 91(4):480-484.</u>

CAREER TRANSITIONS

FACILITATED BY CRISTINA GONZALEZ, MD, MED AND LISA KITKO, PHD, RN

Our discussion began with the facilitators providing an overview of their own career trajectories. The facilitators then asked each participant why they were interested in this specific session from the perspective of their own career goals.

An essential part of the discussion included defining how career transitions would help faculty meet their own career goals.

Our thoughtful conversation regarding career transitions included some of the factors that participants thought about in terms of deciding about a career transition. There was also a focus on how one's current role would influence the decision for regarding a transition. Some identified factors included:

- How would a transition impact the next five years
- When should a role just turn over (including timeframe)
- We should always be looking for transitions, always looking ahead 4–5 years
- Too many roles "added on" if you stay in a position for too long
- How do you anticipate changes and politics at higher levels
- Being able to define what you do and do not want to do
- Role of non-traditional positions
- How to make informed decisions
- Options if you are in a position with not much room for growth
- Arriving at a point in your career when you want to focus on what you like, how to craft that position, and how to negotiate
- The role of transition theory
- Collaboration between academia and industry and how to maximize that for your role
- Looking toward leadership—what does that look like, what is the process, and determining best fit

The facilitators framed the group discussion on how to define your current role, how that may influence your need for a transition, and how to plan and evaluate a transition based on your career goals. The group shared some steps to negotiate for your current role and what to consider before moving to a new institution. The group also discussed the role of formal and informal mentors on career transitions.

The group shifted to a robust discussion of current roles and how to maximize one's role at the home institution/ system. We discussed several areas that had an impact on current roles and how these areas would lead to success for a transition. Some of the factors in current roles that might influence a need/want for a transition included:

- If you are in a position without authority how to influence your lead
- Lack of role clarity
- Be in touch with your own values—value conflict will cause dissonance

Several areas were discussed that were critical in evaluating a transition to a new position. Some of the identified factors included:

- Before applying
 - Don't put all your eggs in one basket; always try to get interviews from different places
 - Know your market
 - Do not jump to leadership early
 - Know your passions—what is meaningful
- Before accepting a new position
 - What resources and budget do you or would you have
 - What can you say no to
 - The organizational chart
 - How is the role evaluated, how often, and by whom

The facilitators then wrapped up the discussion. A recurring theme was creating a legacy for future generations creating and supporting a pathway for junior clinicians, academics, and researchers to succeed in their careers and making a meaningful impact.

Please note: the career updates that appear in the following pages reflect information received by the Macy Foundation during the registration process for the 2024 Annual Meeting and through an open invitation to submit updates.

2011



EVE R. COLSON, MD, MHPE

Washington University in St. Louis

Titles/Positions: Associate Dean, Program Evaluation and Continuous Quality Improvement; Professor of Pediatrics

2023-2024 Publications:

- Breastfeeding Decision-Making Among Mothers with Opioid Use Disorder: A Qualitative Study, Breastfeeding Medicine
- Student and Teacher Perspectives on Equity in Clinical Feedback: A Qualitative Study Using a Critical Race Theory Lens, Academic Medicine
- Understanding and Addressing Bias in Grading: Progress at Washington University School of Medicine, Academic Medicine
- Drivers of decision-making_ regarding infant sleep practices among mothers with opioid_ use disorder, Journal of Perinatology
- <u>Understanding cigarette</u> smoking among mothers with

opioid use disorder, Journal of Substance Use and Addiction <u>Treatment</u>

- <u>COVID-19 pandemic impacts</u> on kindergarteners' mental health: A qualitative study of perspectives of U.S. mothers with low income, *Infant and Child Development*
- <u>The importance of community</u> resources for breastfeeding, <u>International Breastfeeding</u> Journal
- Maternal Education and Child Self-Regulation: Do Maternal Self-Regulation and Responsiveness Mediate the Association?, Academic Pediatrics
- <u>Reimagining the Psychiatry</u> <u>Clerkship: The Washington</u> <u>University School of Medicine</u> <u>Story, Academic Psychiatry</u>

providers. Their passion and energy for patient care, education, and quality improvement inspire him as he works to help them further their goals. In addition, he expanded his work on social connection and wellbeing in the non-healthcare space by working with state governments, companies, and non-profits to navigate the challenges of loneliness and isolation prevalent in our society. The government work is particularly fulfilling because these leaders often have the ability to implement public health strategies that can improve social connection across communities. Meanwhile, he continues to publish and work on innovative projects in areas ranging from AI-driven, educational simulations to hospital at home.

2012



KENYA V. BEARD, EDD, AGACNP-BC, ANEF, FAAN, FADLN

Mercy College

Dr. Kenya Beard is the inaugural Dean and Chief Nursing Officer at Mercy University's School of Nursing and a past chair of the New York State Board of Nursing. She serves on the board of Public Health Solutions, overseeing the largest nongovernmental nonprofit organization in the U.S. that provides essential



ALAN DOW, MD, MSHA

Virginia Commonwealth University

In September of 2023, Alan Dow transitioned from interim to permanent division chief of hospital medicine at his institution. In this role, he oversees a group of about 100 physicians and advanced practice services to families and communities in under-resourced areas.

Dr. Beard established the national Health Equity Influencers Program for Nurse Educators, aimed at equipping nurse leaders with the skills to identify, address, and mitigate upstream factors that hinder the delivery of high-quality healthcare. Recently, she collaborated with Harlem Hospital to enhance patient outcomes by addressing implicit bias and improving unit safety metrics. She serves on the editorial board of the American Journal of Nursing and the American Academy of Nursing's Institute for Nursing Leadership. Additionally, she is a luminary fellow of the Academy of Diversity Leaders in Nursing and serves as the inaugural president of their board. She provides leadership sessions for the Harvard Macy Institute's Program for Educators and Leading Innovations courses. She has provided numerous keynotes, and recent publications include:

- Leading Through Difficult <u>Times: The Oral Histories</u> of Drs. Barbara Nichols, Beverly Malone, and Ernest Grant, Nursing Outlook
- Analysis of Social Mission at Associate Degree Nursing Programs in the United States, Teaching and Learning in Nursing
- <u>Anti-Black Racism and Nursing</u>
 <u>Leadership, Nurse Leader</u>
- <u>Using EquityXDesign to</u> <u>Develop Nursing Curricula,</u> <u>Nurse Educator</u>



WENDY S. MADIGOSKY MD, MSPH

Kaiser Permanente Bernard J. Tyson School of Medicine

At KPSOM, I now serve as the HSS Education Director and am gradually guiding departmental curricular aspects. I also continue to develop the Interprofessional Collaboration curriculum and its relationships internally and externally. Enjoyable grant-based projects include the American Medical Association ChangeMedEd Consortium's "Assessment of Health Systems Science in Clinical Environments" Groundwork Team and American Board of Medical Specialties Foundation's "Building Trustworthiness by Addressing Uncertainty in Medicine" grant. At University of Colorado School of Medicine, I care for a panel of family medicine patients and enjoy my role as Professionalism Assessment Champion and Chair of the Medical Student Professionalism Committee. Recent presentations were at the following venues: Directors of Clinical Skills Webinar, Academy for Emerging Leaders in Patient Safety, Health Professions Educators Summer Symposium, Collaboration Across Borders, and National Interprofessional Practice and Education Nexus Summit. Publications include an article on Team Effectiveness in HSS in Academic Medicine. New National Positions: Chair-Elect of the National Academies of Practice Physician Academy, Health Professions Educators Summer Symposium Medicine Lead beginning July 2024.



SANDRIJN VAN SCHAIK MD, PHD

University of California, San Francisco

Positions: Education Director for the UCSF Kanbar Center for Simulation and Clinical Skills, Vice Chair for Education in the Department of Pediatrics, and Director of Faculty Development in the Center for Faculty Educators in the School of Medicine at UCSF.

Major publications:

- Bochatay N, Ju M, Appelbaum N, van Schaik S. <u>Towards equitable learning</u> <u>environments for medical</u> <u>education: Bias and the</u> <u>intersection of social identities</u>. Med Educ 2022 Jan;56(1):82-90. doi: 10.1111/medu.14602. Top 10 cited articles in Medical Education in 2022-2023.
- Edwell A, van Schaik S, Teherani A. <u>URM: Under-</u> represented or Underrecognized? A Case Study of Black Pediatric Critical <u>Care Physicians.</u> Acad Med 2023, Nov 1;98(11S):S50-S57. Recognized with a RIME award.
- Daya S, Illangasekare T, Tahir P, Bochatay N, Essakow J, Ju M,

van Schaik S. <u>Using Simulation</u> to Teach Learners in Health <u>Care Behavioral Skills Related</u> to Diversity, Equity, and <u>Inclusion: A Scoping Review.</u> Simul Healthc. 2023 Oct 1;18(5):312-320

- Robinson M, Bowen J, Aylor M, van Schaik S. <u>Having a</u> <u>Voice: Resident Perceptions</u> <u>of Supervision, Decision-</u> <u>Making and Patient Care</u> <u>Ownership</u>. Acad Pediatr. 2024 Apr;24(3):519-526.
- Bochatay N, Ju M, O'Brien B, van Schaik S. <u>A scoping review</u> of interprofessional simulationbased team training programs. Simulation in Healthcare
 2024, epub before print, March 25, 2024

2013



MEMOONA HASNAIN, MD, MHPE, PHD

University of Illinois Chicago

Dr. Hasnain continues her multifaceted work at the intersection of medicine and public health, emphasizing transforming health disparities and advancing health equity and social justice through interprofessional education, service, and scholarship. She is the lead editor of the book <u>Health of South</u> <u>Asians in the United States: An</u> <u>Evidence-based Guide for Policy</u> and Program Development. Dr. Hasnain is PI on an HRSA-funded Geriatrics Workforce Enhancement Program <u>ENGAGE-IL.</u> She continues to provide leadership for UIC College of Medicine's longitudinal Patientcentered Medicine Scholars Program, which has a particular emphasis on vulnerable populations in six thematic areas: Geriatrics, Homelessness, HIV-AIDS, Immigrant & Refugee Health, Incarcerated Populations, and Intimate Partner Violence. Dr. Hasnain's Macy Foundation-funded Interprofessional Approaches to Health Disparities (IAHD) course received UIC's Inaugural 2021 I-TEAM Award for excellence in interprofessional education. Dr. Hasnain's key priorities remain to build the health workforce pipeline and faculty development, focusing on advancing diversity, equity, well-being, and work-life balance. Dr. Hasnain has received many accolades for her work on developing, implementing, and strengthening transformative educational programs and leading collaborative, synergistic teams. She received the 2022 UIC Award for Excellence in Teaching (AET), the highest institutional award recognizing outstanding commitment to teaching and learning excellence; awardees are selected from across the University of Illinois system.



KELLY KARPA, PHD, RPH

East Tennessee State University

Dr. Karpa is currently a Professor in the Departments of Medical Education & Family Medicine and Associate Dean of Institutional Effectiveness and Innovation at East Tennessee State University, Quillen College of Medicine. Locally, Dr. Karpa oversees evaluation efforts for a new TBL-based medical education curriculum, and she also created two new interprofessional pathway programs for students. Last summer, she was invited to present three workshops at the International Union of Basic and Clinical Pharmacology (IUPHAR) meeting in Glasgow, Scotland, as well as several invited lectures at medical schools in the United States. Nationally, she coleads the Membership Committee for the American Interprofessional Health Collaborative and serves on committees for the National Academies of Practice and NEXUS Summit 2024. Her work with interprofessional education and IUPHAR led to publications in the following journals last year: Academic Psychiatry, Journal of Interprofessional Education and Practice, British Journal of Clinical Pharmacology, Creighton Journal of Collaborative Practice and Education, Pharmacology Research and Perspectives, and Interdisciplinary Journal of Virtual Learning in Medical Sciences.



MAYUMI WILLGERODT, PHD, MPH, RN, FAAN, FNASN

University of Washington

Dr. Willgerodt is the Mary S. Tschudin Endowed Professor of Nursing Education at the University of Washington and, in 2024, published the National School Nurse Workforce Study 2.0. Dr. Willgerodt cochaired "Sharing and Exchanging Ideas and Global Experiences on Community-engaged approaches to Oral Health: A Workshop of the Global Forum on Innovation in Health Professional Education," hosted by the National Academies of Sciences, Engineering and Medicine (NASEM). Dr. Willgerodt is currently working on the NASEM consensus study on learning and development of lowincome youth in out-of-school time settings across the K-12 age span. In the past two years, she has been invited to present on the role of school nurses in behavioral health interventions in rural Alaska, trained interprofessional health professionals on collaborative practice in Kenya, and led several search committees in the School of Nursing. In the spring of 2024, Dr. Willgerodt was member of the management bargaining team for the UW academic student employees. Dr. Willgerodt continues to mentor and coach junior faculty in their professional development.

2014



LAURA HANYOK, MD

Johns Hopkins University

Dr. Laura Hanyok continues to work as an Associate Professor at the Johns Hopkins School of Medicine with a joint appointment in the School of Nursing. Her current leadership roles include serving as the Assistant Dean for Graduate Medical Education. In the last year, she was selected to participate in the yearlong Johns Hopkins Mary Elizabeth Garrett Executive Leadership Program for Women Faculty. She published two articles, including one in the Journal of Graduate Medical Education with fellow Macy Faculty Scholars Drs. Jennifer Best and Brenessa Lindeman titled "The DIO Needs a Cabinet: Identifying and Supporting Designated Institutional "Others" in Graduate Medical Education." Dr. Hanyok is in her fifth-year writing for <u>CLOSLER.org</u> on topics related to clinical excellence and clinician wellbeing. She presented two workshops at the ACGME 2024 Annual Educational Conference in Orlando. Dr. Hanyok continues to work as a primary care general internist, seeing her own patients and supervising internal medicine residents. Lastly, she was awarded the Johns Hopkins Institute for Excellence in Education's 2024 Teaching Award for those on Faculty Over 10 Years.



DOUGLAS P. LARSEN, MD, MED Washington University in St. Louis

Dr. Larsen serves as the Vice Chair for Education for the Department of Neurology at the Washington University in St. Louis School of Medicine. In that role, his work focuses on the development and building of a strong education culture while overseeing two residency programs, 15 fellowships, medical student education, and the work of nine education staff members. Dr. Larsen also serves as the clerkship director for the neurology clerkship. His work over the last year has focused on the development and implementation of robust faculty feedback, coaching, orientation to develop faculty actions, and behaviors aligned with the department's mission and culture. He has continued to publish and have abstracts presented on learning and memory as well as the professional identity formation associated with early immersion in clinical work by medical students. Dr. Larsen serves on the editorial board of the journal Neurology: Education.

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SARAH E. PEYRE, EDD University of Rochester

I am currently the Dean and Professor of Warner School of Education and Human Development at the University of Rochester. On July 1, 2024, I will be transitioning back to the medical center as the Vice Dean for Education at the School of Medicine and Dentistry and the Associate Vice President for Clinical Education for Strong Memorial Hospital and the University of Rochester affiliates.



MEG ZOMORODI, PHD, RN, ANEF, FAAN

University of North Carolina at Chapel Hill

This year, I was inducted in to the Order of the Golden Fleece, our University's top service and honor society. This was such a cool experience and I am only one of two nurses ever inducted! I was invited to serve on the NC Institute of Medicine Taskforce for Nursing, serving on the workgroups for Nursing Education and Value Based Care. In May 2024, the NC Medical Journal will host a special issue on IPE and I am the guest editor, along with three publications in the issue. This work highlights the "state of the state of IPE in NC." In June 2023, we received the IPEC Award for Excellence in Interprofessional Education and Collaborative Practice for our rural and service work. We hosted two national webinars with IPEC on this work, and I will also present in May 2024 on institutional assessment. I have presented four sessions at the National Center Nexus Summit, and our work on assessment won "top session," so we will present a webinar in June 2024. I serve as Associate Editor for the Journal of Interprofessional Education and Practice and am a consultant and speaker for IPE and IPP across the nation. I have had two publications this year in the Journal of Interprofessional Education and Practice and The Online Journal of Issues in Nursing.

2015



CHERYL L. WOODS GISCOMBÉ, PHD, RN, PMHNP-BC, FAAN, FABMR

University of North Carolina at Chapel Hill

Dr. Giscombé was elected as a member of the National Academy of Medicine. The official induction ceremony will take place in Washington, DC in October 2024. She continues to be a fellow of the American Academy of Nursing, the Academy of Behavioral Medicine, and the Mind & Life Institute. Dr. Giscombé also published a book, The Black Woman's Guide to Coping with Stress: Mindfulness and Self-Compassion Skills to Create a Life of Joy and Well-Being (New Harbinger, 2024), which is based on her research. She recently completed her service as Interim Senior Associate Dean for the Office of Academic Affairs and is now Senior Associate Dean and Chief Wellness Officer. She will continue her faculty appointment as a tenured Distinguished Professor in the School of Nursing with a secondary appointment in the School of Medicine/Department of Social Medicine. As a founding Executive Committee Member and Director of Clinical Sciences for the International Society of Contemplative Research (ISCR), Dr. Giscombé served as

a member of the international conference planning committee for their 2024 ISCR conference in Padua, Italy. Dr. Giscombé continues to be Principal Investigator of an NIH R01 randomized-clinical trial, The Harmony Study, which is focused on reducing cardiometabolic risk in African American women and funded by the National Center on Minority Health and Health Disparities. Over the past year, she started her role as one of three collaborative Principal Investigators for the National Center of Complementary and Integrative Health's T32 predoctoral and postdoctoral Training Program in Integrative Health at the UNC Chapel Hill School of Medicine. She was also appointed by the NIH as Chair and Standing Committee member of the Biobehavioral Mechanisms of Emotions, Stress, and Health Study Section of the NIH. She was appointed to the National Academy of Sciences, Engineering, and Medicine's Standing Committee on Primary Care. Lastly, as an Inaugural Fellow/Design Partner for the Harvard Macy Institute's Art Museum-based Health Professions Education Fellowship, Dr. Giscombé started a new role as lecturer for the Harvard Medical School continuing medical education course "Training Our Eyes, Hearts, and Minds: Visual Thinking Strategies (VTS) for Healthcare Professionals," which is focused on art-based practices to promote resilience and well-being. Dr. Giscombé continues to publish and present her research broadly. She currently serves as primary mentor for 10 predoctoral, postdoctoral, and early career scientists.



DEEPTHIMAN GOWDA, MD, MPH, MS

Kaiser Permanente Bernard J. Tyson School of Medicine

As Assistant Dean for Medical Education and Lead for Narrative Medicine at the Kaiser Permanente Bernard J. Tyson School of Medicine (KPSOM) in Pasadena, California, Dr. Gowda helped to graduate the inaugural class in May 2024. Dr. Gowda currently serves as the President of Directors of Clinical Skills Education (DOCS). He received an innovation award at the Innovations in Medical Education Conference on a music-based narrative medicine curriculum. This past year, he published in the field of narrative medicine including papers on review of visual arts and its effect on burnout and an evaluation of narrative medicine in a pediatrics residency. He also presented at several conferences this year, co-developed a narrative medicine based inclusive leadership training for KP Georgia, implemented the first in-person narrative medicine workshop in Malaysia, and delivered the keynote address at an in-person international medical humanities conference in Bengaluru, India.



LISA KITKO, RN, PHD, FAHA, FAAN University of Rochester

Dr. Kitko is currently the Dean of the University of Rochester School of Nursing, Professor of Nursing and Geriatric Medicine, and Vice President of the University of Rochester Medical Center. Dr. Kitko was appointed as the Independence Foundation Chair in Nursing Education. She was also appointed as chair-elect of the American Heart Association Council on Cardiovascular and Stroke Nursing. Dr. Kitko, alongside fellow Scholar DorAnne Donesky as editor, co-authored a chapter in the book Intentionally Interprofessional Palliative Care. Amanda Kirkpatrick, another fellow Scholar, also contributed to the text.



BRIDGET O'BRIEN, PHD University of California, San Francisco

I am a Professor in the Department of Medicine and education researcher in the Center for Faculty Educators at UCSF. I direct a fellowship in health professions education evaluation and research, co-direct a yearlong faculty development program (Teaching Scholars Program) and co-direct an HPE doctoral program. I mentor and collaborate with learners and faculty on many education research projects. In the past year, I organized a symposium for the American Education Research Association on anti-oppressive educational practice in health professions education and co-authored several papers with mentees. Two of these mentees won awards for their excellent work!

2016



DORANNE DONESKY, PHD, ANP-BC, ACHPN

University of California, San Francisco (Emeritus faculty)

DorAnne Donesky owns/manages a sober living home for nine previously unhoused residents who are living with substance use disorder and serious mental illness, and she works part-time as a nurse practitioner on the inpatient palliative care team at Queen of the Valley Medical Center in Napa, CA. In collaboration with a social worker, chaplain, and physician, she is first author of the book Intentionally Interprofessional Palliative Care, which was published by Oxford University Press on April 26, 2024. She has been selected for the 2024–26 Edward A. Dickson Emerita Professorship Award in support of the sustainability of her initial Macy project-the Practice-PC interprofessional palliative care continuing education course. She chairs the Patient and Family Education Committee for the American Thoracic Society and she chairs the Fellows Selection and Engagement Committee for the Hospice and Palliative Nurses Association.



CRISTINA M. GONZALEZ, MD, MED New York University

I am Professor of Medicine and Population Health and Associate Director (Medical Education) for the Institute for Excellence in Health Equity at NYU Grossman School of Medicine. In the latter position, I oversee health equity education across the entire health system. In the last year, I have been fortunate to present my research at AMEE, Society for General Internal Medicine, and National Academy of Medicine. A few papers came out of my lab, most notably in JAMA Network Open. I submitted an R01 to the NIH and have another Foundation award under review.



TEMPLE RATCLIFFE, MD, MS-HPED, FACP

University of Texas Health Science Center at San Antonio

Dr. Ratcliffe is an Associate Professor/

Clinical of Medicine at the Joe R. and Teresa Lozano Long School of Medicine, University of Texas Health San Antonio, where he serves as Director of Student Education and Internal Medicine Clerkship Director. Dr. Ratcliffe is also the School of Medicine's council member on UT Health San Antonio's Interprofessional Education Council. Dr. Ratcliffe's scholarship focuses on education in interprofessional collaborative practice settings, clinical reasoning, and Internal Medicine Clerkships. Over the past year, Dr. Ratcliffe has co-authored four publications and led workshops at national meetings covering these areas. This past year, he also served as Chair for the Clerkship Directors in Internal Medicine (CDIM) Survey and Scholarship committee and served on the CDIM Council.



TYLER REIMSCHISEL, MD, MHPE

Case Western Reserve University and Cleveland Clinic

Dr. Reimschisel is the Founding Associate Provost of Interprofessional and Interdisciplinary Education and Research at Case Western Reserve University. This year Dr. Reimschisel and collaborators at MetroHealth System in Cleveland were awarded a Macy Foundation Catalyst Grant for an interprofessional teaming initiative entitled "Clinical Teaming Project (CTP): Co-design, Training, and Implementation of a Teamwork Curriculum to Enhance Interprofessional Collaboration in the Clinical Learning Environment." He also presented interprofessional education papers or led workshops at several conferences, including The International Network for the Science of Team Science Annual Meeting, Collaborative Across Borders VIII Conference, and the Nexus Summit 2023. With colleagues in the State of Ohio, Dr. Reimschisel founded the Ohio Interprofessional Consortium and currently serves as the Treasurer on the Consortium Board.



JING WANG, PHD, MPH, MSN, RN, FAAN

Florida State University

Jing Wang is Dean and Professor at the Florida State University (FSU) College of Nursing, where she leads the Boldly Rising Strategic Plan which, to date, has quadrupled undergraduate enrollment and attracted more than \$100 million in research funding. In 2023, she took on the role of FSU site PI for the University of Florida + FSU Clinical and Translational Science Award. She recently served as planning committee chair for the National Academy of Medicine's 2024 Forum for Emerging Leaders in Health and Medicine, as well as on its Strategic

Planning committee, contributing to the strategic plan for 2024–2028. She delivered the keynote on "Nursing-Driven Disruptive Innovation in Healthcare: Digital Precision Health for Everyone" at the NurseTRUST 2024 Annual Summit and "Nurse-inthe-Loop Artificial Intelligence: Digital Twin Research Promoting Health for All" at the National Coalition of Ethnic Minority Nurses Association's 2024 annual policy summit. She recently published in the JAMA Network Open "Addressing Bias and Racism Against Asian American, Native Hawaiian, and Pacific Islander Individuals: A Call to Action to Advance Health Equity and Leadership."

2017



MAJA DJUKIC, PHD, RN, FAAN

University of Texas Health Science Center at Houston

I am a Professor in the Department of Research at University of Texas Health Science Center in Houston. I serve as Assistant Dean for Research and PhD Program Co-Director

Publications:

 Owen, C. P., Djukic, M., Whisenant, M., & Lobiondo-Wood, G. (2023). Factors of maladaptive coping in emergency healthcare

professionals: A systematic review. Journal of nursing scholarship : an official publication of Sigma Theta Tau International Honor Society of Nursing, 55(2), 536–548. <u>https://doi.org/10.1111/</u> jnu.12848

- Djukic, M., Padhye, N., Ke, Z., Yu, E., McVey, C., Manuel, W., Short, Y., Pine, R., & Caligone, S. (2023). Associations Between the COVID-19 Pandemic and New Nurses' Transition to Practice Outcomes: A Multi-site, Longitudinal Study. Journal of nursing regulation, 14(1), 42–49. https://doi.org/10.1016/S2155-8256(23)00067-4
- Branson, S., LaMonica-Way, C., Krawtz, S., & Djukic, M. (2023). Student Nurses as Workforce Extenders: A Pandemic-Proof Education Innovation. The Journal of nursing education, 62(7), 416–419. <u>https://doi.</u> org/10.3928/01484834-20230530-01
- Djukic, M., McVey, C., Manuel, W., Azebe-Osime, I., & Cron, S. (2023). New nurses' quality and safety education: An analysis of the 2018 National Sample Survey of Registered Nurses. Journal of professional nursing : official journal of the American Association of Colleges of Nursing, 48, 71–76. <u>https://doi.org/10.1016/j. profnurs.2023.06.005</u>



JENNIFER KESSELHEIM, MD, EDM

Harvard University

Dr. Kesselheim continues her clinical practice in pediatric hematologyoncology at the Dana-Farber/ Boston Children's Cancer and Blood Disorders Center where her focus is on hematologic malignancies and where she directs the Fellowship in Pediatric Hematology-Oncology. Dr. Kesselheim also serves as Director of Graduate Medical Education (DIO) for Boston Children's Hospital, where recent accomplishments have included expanding benefits for residents and fellows, optimizing resident and fellow access to mental health services, and empowering residents and fellows to respond to mistreatment from patients and family members. The latter formed the basis of a novel interprofessional workshop, funded by a Catalyst Award for Transformation in Graduate Medical Education, for which Dr. Kesselheim is PI and in which early career nurses and residents learn together about mistreatment at the beside and cultivate allyship across professions. She is also serving as PI for a study entitled "Is Blinding Best: Working to Mitigate Unconscious Bias in Pediatric Residency Selection," funded by the Association of Pediatric Program Directors. This past spring, that organization honored Dr. Kesselheim with their Robert S. Holm Award for Leadership. Dr. Kesselheim just

completed her term as Vice Chair of the Pediatrics Review Committee for the ACGME. Salient to this role was her co-authorship of revised Pediatric Residency Program Requirements. At Harvard Medical School, Dr. Kesselheim co-leads curriculum development about Interprofessional Collaborative Practice and has several scholarly projects within interprofessional education in medical school.



JEANETTE M. TETRAULT, MD, FACP, FASAM

Yale University

Current Positions: Professor of Medicine and Public Health, Vice-Chief for Education for the Section of General Internal Medicine, Associate Director for the Program in Addiction Medicine, Fellowship Director for Addiction Medicine, Head of Orange College at Yale School of Medicine

Career development over the past year:

 Leading an international interprofessional addiction medicine training program with the University of Jordan Schools of Pharmacy, Medicine and Nursing resulting in several conference presentations, publications, and student rotations

- 2. Served as Associate Editor for 7th Edition of *Principles* of *Addiction Medicine* textbook
- Published eight peer review articles and gave six conference presentations
- Appointed Head of Orange College at Yale School of Medicine

2018



VINEET ARORA, MD, MAPP

University of Chicago

Dr. Vineet Arora finished her third year as Dean for Medical Education at the University of Chicago Pritzker School of Medicine. This year, she was also appointed Vice Dean for Education for the Biological Sciences Division. In this new role, she oversees overall strategy and mission alignment for educational programs in the Division. Dr. Arora is proud to highlight that their team recently described the successful integration and evaluation of a longitudinal immersive health systems science curriculum from 2016–2020 into the Pritzker medical school curriculum in Academic Medicine. This past spring, she was the commencement speaker

and received an honorary degree at the John C. Edwards Medical School at Marshall University, a missiondriven school that produces many physicians who serve West Virginian and Appalachian communities. She recently finished a nine-year term as an ABIM Board member. She serves on the Board of the Joint Commission and is the now Chair of the Board for Costs of Care, a nonprofit dedicated to cultivating change agents to create a more affordable and equitable health system.



CYNTHIA FORONDA, PHD, RN, CNE, CHSE, ANEF, FAAN

University of Miami

Dr. Foronda is a Professor of Clinical and the Assistant Dean for Innovation and Scholarship at the University of Miami School of Nursing and Health Studies. Dr. Foronda was an advisory work group member of the <u>culturally</u> and Linguistically Appropriate Services (CLAS) in Nursing, a free e-learning program developed by Think Cultural Health, a website of the U.S. Department of Health and Human Services Office of Minority Health. A member of the American Academy of Nursing, Dr. Foronda also serves on the Expert Panels for Information & Technology and Health Equity. Dr. Foronda published and presented extensively in 2023 regarding virtual reality, artificial

intelligence, and cultural humility. She recently developed new methods for Prebriefing and Debriefing for Cultural Humility that may be used to guide reflection in clinical education.



CORETTA JENERETTE, PHD, RN, AOCN, ANEF, FAAN

University of California, San Francisco

Dr. Coretta Jenerette is a Professor, Thelma Shobe Endowed Chair, Senior Health Equity Scholar, and Director of the Health Equity Pathways Program at the University of California, San Francisco (UCSF) School of Nursing. Dr. Jenerette's research continues to focus on improving health outcomes for individuals with chronic illnesses, particularly sickle cell disease, where she focuses on self-management and health-related quality of life. Her recent peer-reviewed publications focus on social determinants of health in graduate nursing simulation education, music therapy, and virtual reality in sickle cell disease. She remains actively involved in mentoring the next generation of nurse leaders and scholars, particularly those from underrepresented backgrounds, reflecting her ongoing commitment to fostering an inclusive academic environment. She was selected to the inaugural UCSF Advancing the Research Careers of Historically Excluded Scholars (ARCHES) 23

cohort. Dr. Jenerette is a servant leader, is the President of the Midlands of South Carolina Chapter of the National Black Nurses Association, and recently copresented two podium presentations at the annual conference.



DANIEL J. SCHUMACHER, MD, PHD, MED

Cincinnati Children's Hospital Medical Center

Dr. Daniel J. Schumacher is a tenured Professor of Pediatrics at Cincinnati Children's Hospital Medical Center. He continues to spend most of his time doing externally funded research focused on resident performance assessment. He is currently concluding a national study with more than 60 residency programs that seeks to further understand assessment using entrustable professional activities (EPAs) in pediatrics. This work, as well as other work being led by Dr. Schumacher, will inform the American Board of Pediatrics' plans to use EPAs in initial certification decisionmaking in the next few years. Dr. Schumacher continues to collaborate with and mentor medical education researchers from around the world and was recently awarded the Walter W. Tunnessen Award for Advancing Pediatric Resident Education from the Association of Pediatric Program Directors for work in his community in the U.S.

2019



RICHARD GREENE, MD, MHPE

New York University

I currently serve as the Faculty Director of Health Equity Education in the Office of Diversity Affairs, and in this role, I oversee the inclusion of bias, diversity, health disparities, and LGBTQ topics into the culture and curriculum of NYU's medical center and educational programs. In collaboration with Cristina Gonzalez, we have been implementing and publishing on novel implicit bias recognition and management (IBRM) and anti-racism curriculum. I am an Associate Program Director of the Primary Care Residency Program where I help to run the health equity curriculum. I am also the Director of LGBTQ+ Clinical Services at NYC H+H/Bellevue Hospital and have a podcast, Queer Health Podcast. I recently presented a Meet the Professor talk at ACP's Internal Medicine Conference 2024 on "What you're missing in the Sexual History".



AMANDA KIRKPATRICK, PHD, RN, FAAN, FNAP

Creighton University

Dr. Kirkpatrick was recently promoted to full professor and accepted the position of Associate Dean for Research and Innovation and the Criss Beirne Endowed Chair in Nursing at Creighton University College of Nursing. She also serves as Chair of the Healthcare Distance Simulation Collaborative, a global organization that seeks to advance the science of distance simulation. Within the past year, she was inducted as a Fellow into both the American Academy of Nursing and the National Academies of Practice. Recent publications include a chapter in the Oxford textbook Intentionally Interprofessional Palliative Care, a statewide survey report of key findings for the Nebraska Hospice and Palliative Care Association, and three peer-reviewed journal articles on the topics of interprofessional education and palliative care.



BARRET MICHALEC, PHD Arizona State University

In the last year, I have published six articles and two chapters/reports, submitted six grant proposals (two were funded), delivered three keynotes, and launched a new IPE eLearning course and our Learning Solutions Consulting initiative.



RACHEL SALAS, MD, MED, FAAN, FANA

Johns Hopkins University

As the Director of Post-graduate and Early Career Faculty Portfolio for the Johns Hopkins Provost's Office of Faculty Affairs L.A.D. Academy, a role I was recruited for last fall, I have spearheaded initiatives aimed at supporting the professional development of early career faculty members across the enterprise. Through mentorship, coaching, and leadership development programs, our goal is to cultivate a diverse and inclusive community of practice. Notably, I developed programs such as the Johns Hopkins Interprofessional Distinction Track, focusing on promoting health systems science and health humanities in araduate education for housestaff and DNP students. Additionally, last year, I launched the JH [PreCollege][^]: Voyage of Authentic Self-Discovery, a pilot program for high school students aimed at fostering inclusion and leadership development. Continuing this summer with increased participation from students nationwide, I curated a curriculum focusing on nurturing authenticity, curiosity, and inclusion excellence. Amidst these initiatives, I also co-authored five peerreviewed papers, contributing to the academic discourse on topics ranging from medical education to interprofessional collaboration in stroke care, further solidifying my commitment to advancing knowledge in the field. I also co-presented a coaching session for the AAMC's new deans and chairs and was invited to several grand rounds. Lastly, I directed my first Neurology Fashion Runway to showcase neurologists (promoting DEI and nursing our pipeline) at the American Academy of Neurology annual meeting.

2020



JOHN BURKHARDT, MD, PHD

University of Michigan

Dr. Burkhardt stepped away from his professional work in 2023–2024 as he was being treated for stage IV colorectal cancer. Following a yearplus of chemotherapy and multiple surgeries, including a liver transplant in May 2024, he is now believed to be in complete remission. He is currently in the process of returning to work, equipped with renewed focus and energy. He plans to concentrate this new phase of his career on his roles as an educator and director of Michigan's competency-based MHPE program and as a researcher focused on increasing fairness, equity, and ultimately addressing health care disparities through educational policy innovation and reform.



BENJAMIN KINNEAR, MD, MED

University of Cincinnati

I am currently Co-Program Director of the Med-Peds program in Cincinnati, and am continuing my PhD work related to validity argumentation. I have continued with research related to competencybased, time-variable medical education as well as competencybased assessment strategies.



DIMITRI PAPANAGNOU, MD, EDD, MPH

Thomas Jefferson University

Over the last year, Dr. Papanagnou completed his doctorate in education at Teachers College, Columbia University. His dissertation examined the interplay between medical students' perceived psychological safety of their clinical teams and their own self-efficacy on the trauma they experience as learners when working in the emergency department. At the 2023 AAMC Learn Serve Lead conference, Dr. Papanagnou was awarded the Alpha Omega Alpha Robert J. Glaser Distinguished Teacher Award for his work on advancing Health Systems Science in undergraduate medical education at the Sidney Kimmel Medical College at Thomas Jefferson University. Since 2023, he has published >15 manuscripts on topics that have addressed uncertainty in clinical practice, health systems science, advancing diagnosis in medicine, and communicating diagnostic uncertainty.



TATIANA SADAK, PHD, PMHNP, RN, FAAN, FGSA

Yale University

Dr. Tatiana Sadak is a Professor and Deputy Dean at the Yale School of Nursing and the Director of the Dementia Palliative Education Network (DPEN). Specializing in Geriatric Psychiatry and Neurodegenerative Disorders, Dr. Sadak is a Certified Psychiatric Mental Health Nurse Practitioner. Her research develops evidencebased interventions and tools to enhance care for individuals with dementia and their care partners. Notably, Dr. Sadak led the creation of the Managing Your Loved One's Health (MYLOH) measure, now a gold standard for evaluating dementia care partner activation. Her work aims to prevent avoidable health crises and empower care partners to support loved ones while maintaining their well-being. Dr. Sadak's contributions have earned her fellowships from the American Academy of Nursing and the Gerontological Society of America, recognizing her impact in the field. Additionally, she has been honored as a Distinguished Educator in Gerontological Nursing and recognized as a Top Doctor/Nurse Practitioner in Psychiatry.



DANICA FULBRIGHT SUMPTER, PHD, RN

CS Innovations (formerly at University of Texas at Austin)

As the Chief Education, Equity & Wellness Officer at CS Innovations, I am actively involved in two projects funded by the ANA/National Commission to Address Racism in Nursing. The first project, in collaboration with the American Association of Colleges of Nursing, involves revising their Diversity Toolkit to incorporate an antiracist perspective into the existing Inclusive Excellence Ecosystem model. The second project, launched in partnership with fellow Macy Scholar Kenya Beard, is the Health Equity Influencers Program (HEIP) for Nurse Educators. This six-session program is designed to enhance nurse educators' skills in applying pedagogical best practices through an antiracism lens to advance health equity. Additionally, I continue my work with the NLN Taking Aims committee and as a DEI consultant for the AACN. Over the past year, I have presented at various workshops, conferences, and meetings, and my efforts were recognized with my induction as a Distinguished Fellow into the Academy of Diversity Nurse Leaders this past July.

2021



JENNIFER BEST, MD

University of Washington

My role as Associate Dean for the eighth largest GME program in the country encompasses faculty development, accreditation, educational QI, remediation, wellness, human resources, and community engagement. I am currently pursuing a master's degree in medical education at Harvard Medical School. Presentation venues this year included AAMC, ACGME, AMA ChangeMedEd, AMEE, the Josiah Macy Foundation Catalyst Convening, SDRME, the University of Chicago, and Yale. I continue to write and publish in peer reviewed educational journals.



JESSICA DEVIDO, PHD, CPNP

Duquesne University

I am currently Associate Professor and Director of the MCH Equity Fellowship. This year, along with my team, I successfully deployed the second MCH Equity Fellowship. The Fellowship program engaged over 20 different MCH community-based organizations. Fellows worked with community health workers, doulas, lactation counselors, social workers, midwives, professional mental health counselors, physicians, and other community leaders and activists. Each Fellow completed: 24 hours of home visiting (fellows collectively learned from and cared for 25 total childbearing families through 50+ total home visits); 8 hours of immersion work and collaboration with community based organizations to complete a community-engaged mentored leadership project; 7 hours of direct mentoring with practicing MCH nurses; 4.5 hours of cognitive rehearsal; and 4.5 hours of simulation. I was invited to deliver seven presentations at peer reviewed regional and national conferences within and outside of my discipline. I published one manuscript, had another accepted, and have two additional manuscripts in process. In addition, I selected 16 students for the third MCH Equity Fellowship cohort. I secured funding for deployment of the 2024–2025 and

2025–2026 fellowship for integral team members and costs associated with the educational intervention. I mentored three nursing honors students whom I was able to work collaboratively with to take a community-engaged approach to carry out a full qualitative research study, which won three awards at the Undergraduate Research and Scholarship Symposium. I also applied for and received grant funding that supported this study.



DAVID DILLER, MD, MHPE University of Southern California

I continue to serve as Assistant Dean for Clinical Curriculum at the Keck School of Medicine of USC. In this role I oversee the clerkships, clinical transition courses, doctoring skills course, and electives. Additionally, I am helping lead preparations for our LCME site visit in 2025. Over the past year, I have given several presentations, both locally and nationally, related to my Macy Faculty Scholars Project. I will continue to expand upon this work with related scholarly projects over the next 18 months.

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MATTHEW RUSTICI, MD University of Colorado

I am currently President of the Transition to Residency Educators organization and Editor-in-Chief of the TTR Compendium, which is an open set of teaching materials that have been co-created amongst TTR educators across the country. After one year, the Compendium is being used by over 30% off all TTR courses in the United States and we currently have a five-year grant to expand offerings, increase adoptions and add assessments. We have published two foundational articles recently to help define TTR courses:

- Rustici, M., Mutter, M. K., Atkins, K. M., Holmboe, E., Morgan, H. K., Olson, A.
 P. J., Anderson, A., Zell, J., Roosevelt, G., & Brainard, J.
 (2024). Consensus-Derived Recommended Skills for Transition to Residency Courses. Academic medicine: journal of the Association of American Medical Colleges, 99(7), 764–770. https://doi.org/10.1097/ ACM.000000000005687
- Heidemann, L. A., Rustici, M., Buckvar-Keltz, L., Anderson, A., Plant, J., Morgan, H.
 K., Goforth, J., & Atkins,
 K. M. (2024). Transition

58

to Residency Courses: Recommendations for Creation and Implementation. *Journal* of medical education and curricular development, 11, 23821205231225009. https://doi.org/10.1177/238 21205231225009

We continue to lead an annual national TTR Symposium, TTR Grand Rounds, and a TTR website/listserv. We are working on a manuscript of a national landscape survey of TTR courses and a paper describing the educational impact of specialtyspecific teaching in TTR courses.





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