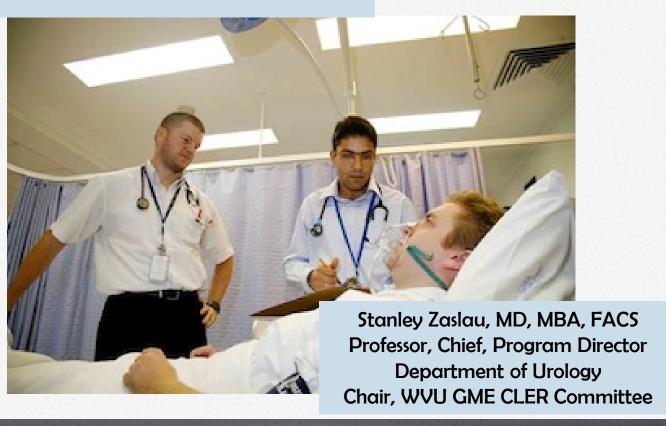
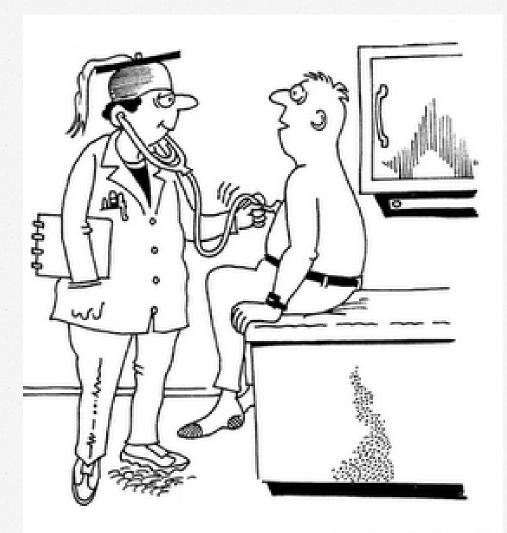
# **SUPERVISION**





"How long out of medical school, doc?"





# WVU GME Supervision Policy

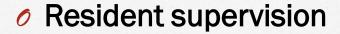
- Supervising faculty, and senior-level residents, will provide appropriate levels of clinical supervision in a supportive, and non-retaliatory manner.
  - Your department will provide you with guidelines, based on ACGME & Joint Commission requirements, for requesting supervision
  - Your first 6 months will be carefully supervised. Following that, you will receive progressive independence based off past performance.



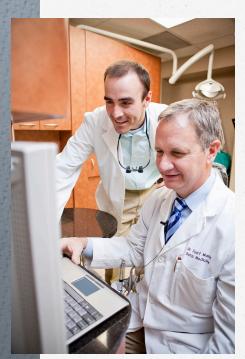




# WVU GME Supervision Policy



- Notify attending if patient is being discharged, transferred to the ICU, dies, leaves AMA, etc – any major or unexpected change in status.
- Calling for supervision is NOT a sign of weakness – it shows that you place the safety of your patient above all else.
- Mistreatment from an attending is NOT acceptable. Speak with your PD, or submit a Mistreatment report via The Button, and GME will get involved.





- Supervision
  - By teaching staff and senior/chief residents
  - Faculty call schedules are organized such that support is readily available
  - Quality of supervision monitored by annual surveys (WVU GME, ACGME resident survey and ACGME faculty survey)
  - If surveys are concerning, PD sends plan to GMEC for remediation as needed. PD submits monthly progress reports until resolved.







Accreditation Council for Graduate Medical Education

# **ACGME CLER Expectations:**

- S Pathway 1) Education on supervision
- S Pathway 2) Resident/fellow perception of the adequacy of supervision
- S Pathway 3) Faculty member perception of the adequacy of resident/fellow supervision
- S Pathway 4) Roles of clinical staff members other than physicians in resident/fellow supervision
- S Pathway 5) Patients and families, and GME supervision
- S Pathway 6) Clinical site monitoring of resident/fellow supervision and workload



- Assigned semi-annually, in early November, and May, via E-Value
- Short & concise please complete as soon as you receive the notification
- Data is important to help GME keep tabs on Supervision issues throughout the learning environment

# 0

### 8. Supervision-Education

Do you feel you have been adequately educated on the ACGME Supervision policies?

Answer Choices	Percent of All Answers	Benchmark
1.Yes	95.86%	100%
2 . No	4.14%	0%



# 9

### 9. Supervision-Button

Are you aware of the Supervision Reporting "Button" on the GME Web Page (http://medicine.hsc.wvu.edu/gme)?

Answer Choices	Percent of All Answers	Benchmark
1.Yes	91.42%	100%
2 . No	8.58%	0%



- How do you influence perception?
  - With communication
  - With consistency
  - With a supportive and non-retaliatory learning environment
  - We can't fix problems if we don't know about them. ("The Button")



- O Go to <a href="http://medicine.hsc.wvu.edu/gme">http://medicine.hsc.wvu.edu/gme</a>
- Scroll down towards the bottom, and you will see:

## **ADDITIONAL RESOURCES**

- Mistreatment Form
- People
- Physician Wellness
- ECFMG

- Professionalism Form
- Resident and Fellow Scholarly Activity
- Contact Us
- ✓ ERAS | AAMC

- About Us
- Specialty Boards and Their Websites
- ACGME
- NRMP

- News and Events
- Photo Galleries
- SOLE Learning Management System



Submit



# How does "the Button" work?

- Click on the "Mistreatment Button"
- The next screen allows you to type out what happened:

# Explanation If you are a resident who has experienced mistreatment; if you have been demeaned for requesting, or been denied, adequate supervision; or if you have witnessed any of these things happening to a resident, please click 'The Button' and make a report. Help us stop mistreatment and create and promote a safe learning environment. I would like to report an episode of resident physician \* Mistreatment Lack of Supervision Please describe the details of the incident. \* Optional: if you want to be contacted please leave your email



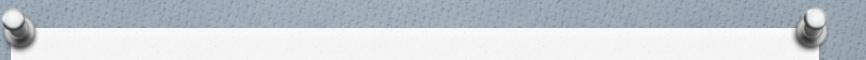
- Sent directly to the GME Office
- GME Office decides who will receive the report for investigation, and follows up until the issue is resolved
- If you include an email address, the GME Office will contact you
- Not a perfect tool, but does put the information into the hands of people who have the potential to affect change





The GME's Supervision Survey also helps us track where problems exist, or are developing

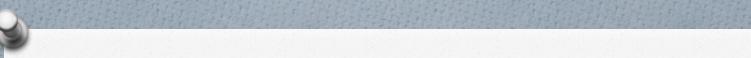




### 1. Supervision-Lack of Supervision

Have you witnessed or been involved in an incident where you felt patient care was compromised due to a lack of supervision?

Answer Choices	Percent of All Answers	Benchmark
1. Never	69.82%	80%
2 . Rarely (once or twice)	26.04%	15%





### 2. Supervision-Procedures

Do you feel that you were asked to perform a procedure, unsupervised, with which you were not proficient?

Answer Choices	Percent of All Answers	Benchmark
1. Never	89.64%	80%
2. Rarely (once or twice)	8.88%	15%



### 3. Supervision-Faculty Availability

Were faculty available to you at all times via phone/pager?

Answer Choices	Percent of All Answers	Benchmark
1 . Always	83.43%	80%
2. Most of the Time (10 times/month)	12.13%	15%



Were faculty present to directly supervise when you felt it was necessary?

Answer Choices	Percent of All Answers	Benchmark
1 . Always	76.63%	80%
2 . Most of the Time (10 times/month)	18.64%	15%

# 9

### 5. Supervision-Senior Level Residents

If applicable, was there a senior level resident available to provide supervision as needed?

Answer Choices	Percent of All Answers	Benchmark ( + N/A)
1. Always	53.25%	80%
2 . Most of the Time (10 times/month)	14.79%	15%
3. N/A	28.11%	N/A

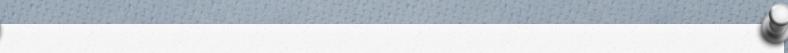




### 6. Supervision-Autonomy

Do you feel you were given the proper amount of autonomy for your current skill level?

Answer Choices	Percent of All Answers	Benchmark
1 . Always	50.30%	80%
2 . Most of the Time (10 times/month)	41.42%	10%



### 7. Supervision-Over-Supervised

Did you feel "over-supervised" at any point?

Answer Choices	Percent of All Answers	Benchmark
1. Never	27.81%	
2 . Rarely (once or twice)	43.49%	



- Annual ACGME Resident & Faculty Surveys
- Other staff & colleagues











# Strategies to Help Patients Understand the Supervision Hierarchy

- Keeping dry erase board updated in patient's room, with physician staff caring for that patient
- ID card that is visible requirement for all employees
- Always tell the patient who you are, and what role you play in their care



