Partners in Medical Education Inc.

Resident GMEC CLER Report Template

CLER Pathway Theme: *Patient Safety* **Challenges and Opportunities from CLER National Report of Findings** *CLE – Clinical Learning Environment	How is the Institution incorporating education about the topic?	How is the Institution monitoring resident involvement?	What are opportunities in this area?
1. While many CLEs* provided didactic training in patient safety, it was uncommon for CLEs to provide residents, fellows, and faculty members with opportunities for experiential learning.			
2. In general, residents and fellows lacked clarity and awareness of the range of conditions that define patient safety events and were unaware of how CLEs use the reporting of adverse events and near misses/close calls to improve systems of care, both broadly and at the individual departmental level.			
3. Though most residents and fellows were aware of their CLEs process for reporting patient safety events, few of them appeared to have used it themselves to report events. When residents or fellows did file a report, or have others file it for them, many received little or no feedback from the CLE.			
4. Across CLEs, a limited number of residents, fellows, and faculty members participated in a interprofessional, interdisciplinary, systems-based improvement efforts, such as patient safety event reviews and analyses.			
5. In many of the CLEs that serve as training sites for residents and fellows on short rotations from other Sponsoring Institutions, this subset of residents and fellows was reported to receive different, often less comprehensive, orientation and training in patient safety than the residents and fellows who spent longer rotations there or whose programs are formally sponsoring by that CLE.			
6. Across CLEs, executive leadership varied in their awareness of resident/fellow integration into their hospital or medical center's patient safety initiatives.			

7. In many CLEs, GME leaders were aware of patient safety events related to resident/fellow supervision or fatigue. For many of these CLEs, the patient safety and quality leaders were not aware of these events.			

Provide space in the meeting to discuss other issues, but try to keep the focus on the CLER pathway

Other Issues/Comments	What is going well?	What is an opportunity for improvement?

Please discuss this and provide a completed report by ____, 2019.

Suggested text for email to GMEC Resident Representatives

(Best Practice: cc Coordinators and Program Directors)

Dear GMEC Resident Representatives:

At each GMEC meeting this coming year, there will be a single focus for your report. This will allow for a focused discussion on a specific topic. This GMEC meeting topic for November: **PATIENT SAFETY**

Before each GMEC meeting, ____ will send the report form for the upcoming GMEC meeting.

It will take some time to gather trends in the specific topic across your programs and then create a combined report.

Here is a suggested method for gathering this information:

1. Have a discussion within your own program to gather initial data
2. Then meet with the other GMEC representatives and compare reports to see emerging trends across programs

Please send your combined report to _____ by _____.

Attached you will see 2 documents:

1. Report template for resident report – the challenges and opportunities are listed at the top of the document and then you provide details for the 2 charts from your discussions with your colleagues and across the programs
2. Patient Safety Report from ACGME discussing trends in the Patient Safety CLER visits – use this report to guide your data gathering – chances are good your own programs will have similar experiences as are discussed in the report (see Challenges and Opportunities, pp. 6-10).

In the months to come, you will be a very important conduit of information about each of the CLER pathways so thank you in advance for your part in the CLER education of the GMEC.