

# SI 2025 – Changes are on the Horizon

## Is Your GME Organization Ready?



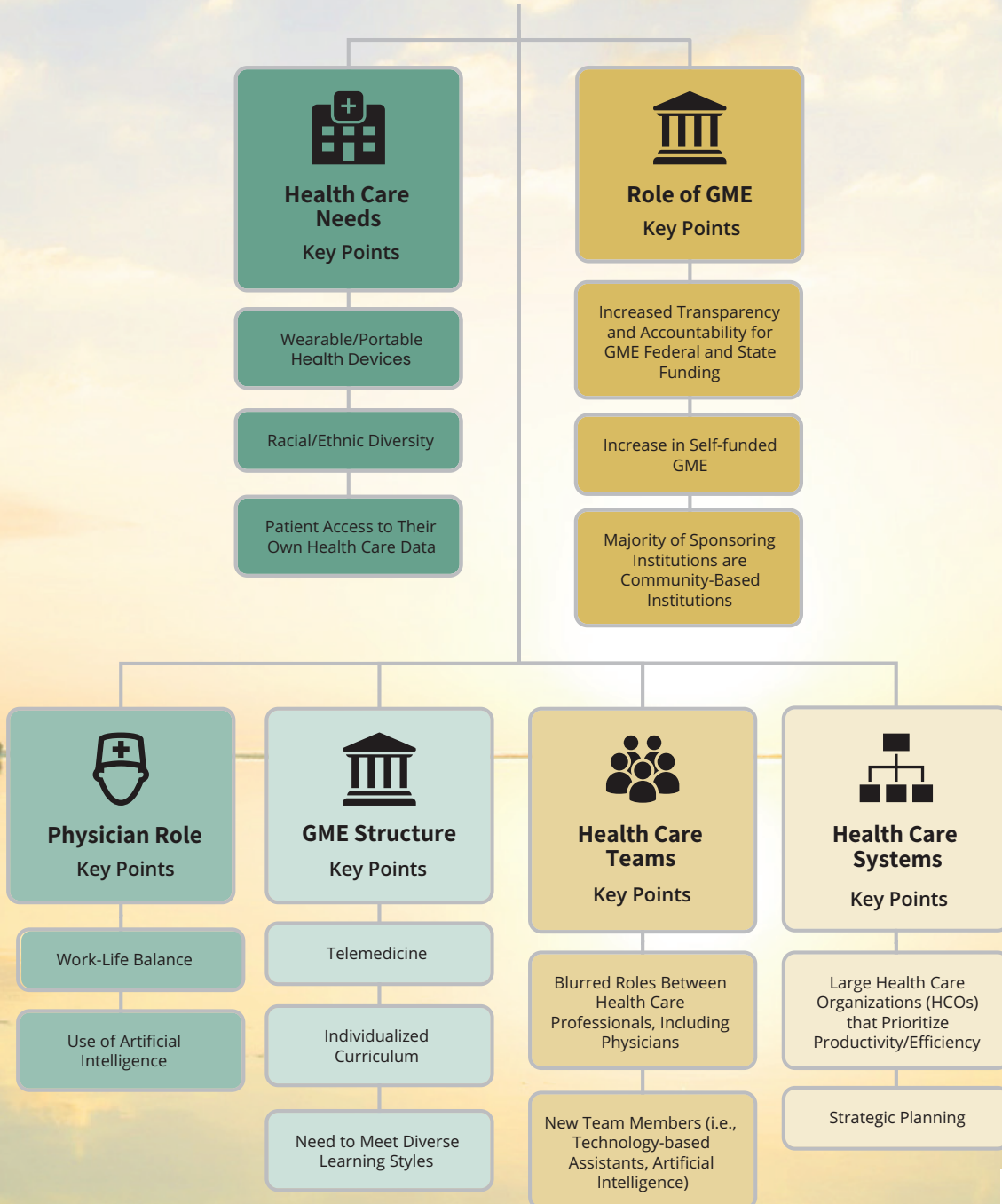
**Partners®**  
in Medical Education Inc.

Full Accreditation,  
Excellent Outcomes,  
Innovative GME.

CUSTOMIZED SOLUTIONS TO GET YOU THERE

## Partners® can help your institution plan for the future!

Contact us for assessment, planning and a customized roadmap to meet SI 2025.



Mindset Shifts Needed and Suggested Curriculum Components to Meet the Expectations of SI 2025 Table Included on the Back

724.864.7320 | [PartnersInMedEd.com](http://PartnersInMedEd.com) | Contact Us: [Info@PartnersInMedEd.com](mailto:Info@PartnersInMedEd.com)



\*Disclaimer – while Partners® makes every effort to ensure the material here is accurate and up to date, you should exercise your own independent skill and judgement before relying on it to ensure it is still accurate as requirements change frequently. Created January 2023.

# Mindset Shifts Needed and Suggested Curriculum Components to Meet the Expectations of SI 2025

Areas of Change	Mindset Shifts	Curricular Components Integrated into the GME curriculum
Health Care Needs	<ul style="list-style-type: none"> <li>Millennials care for patients with different expectations and desires from themselves (i.e., millennial physician providing care for an aging baby boomer who prefers in-person visits)</li> <li>Increased expectations for training physicians to operate as part of a team</li> <li>Comfort level with patients who have most of their patient data available to them in real-time</li> <li>Not all patients will have access to technology to be equally health care data savvy</li> </ul>	<ul style="list-style-type: none"> <li>How to integrate wearable/portable devices into the health care workflow</li> <li>Geriatrics: remote care, home care, community-based care</li> <li>“Consumer-oriented” Health Care: Urgent Care and Retail-based Health Care</li> <li>Technical proficiency (internet usage; virtual visits)</li> <li>Providing care for different cultures and how to practice inclusive medicine</li> <li>Quality metrics</li> <li>How to mine big data for patient care management decisions</li> </ul>
Physician Role	<ul style="list-style-type: none"> <li>Artificial intelligence needs to be trustworthy and safe. AI will need to be appropriately vetted (topic for Journal Clubs)</li> <li>Transition from specialization departments to service lines</li> <li>HCOs will be highly involved in compensation plans for physicians</li> <li>Electronic, self-directed, and individual approaches to accessing and incorporating medical literature</li> </ul>	<ul style="list-style-type: none"> <li>Health care financial systems</li> <li>Core principles of cost-conscious practice</li> <li>Role of value in health care decision-making</li> <li>Function and documentation of care processes</li> <li>How to use AI effectively</li> <li>How to function as part of a health care team</li> <li>Critical thinking skills to evaluate AI/health care technology</li> </ul>
Health Care Systems	<ul style="list-style-type: none"> <li>Health care will be provided in community settings, retail outlets, and homes</li> <li>Urgent care centers, pharmacies, and big-box stores will provide emergency care; chronic care, and disease management (asthma, hypertension, and CHR) with limited physicians providing the care</li> <li>Large Health Care Organizations (HCOs) will be the norm</li> </ul>	<ul style="list-style-type: none"> <li>How to develop/evaluate clinical care pathways</li> <li>How to integrate AI into health care management</li> </ul>
Health Care Teams	<ul style="list-style-type: none"> <li>Health care teams will not be hierarchical</li> <li>Communication and professionalism will need additional and specific assessment tools</li> <li>Artificial Intelligence (AI) is part of the health care team practice, including a) diagnoses; b) managing care, and c) care coordination</li> </ul>	<ul style="list-style-type: none"> <li>“Teaming” and interprofessional education</li> <li>Communication skills for 21st-century physicians</li> </ul>
GME Structure	<ul style="list-style-type: none"> <li>Learning environment must be aligned with the learner’s individual learning expectations/needs, including a) interactive; b) web-based; c) self-directed; d) just-in-time learning; and e) individualized based on needs/experience (pandemic-created lapses in training)</li> <li>Longitudinal experiences allow trainees to better develop skills needed for newer health care delivery models</li> <li>GME will be asked to quantify the value of educational efforts, align strategically with the goals of the organization</li> <li>Greater focus on interprofessional education and team-based care which are led by non-physicians</li> </ul>	<ul style="list-style-type: none"> <li>How to function as part of a health care team</li> <li>Providing care for different cultures and how to practice inclusive medicine</li> <li>Technical proficiency (internet usage; virtual visits)</li> </ul>
Role of GME	<ul style="list-style-type: none"> <li>Frequent audits and a higher level of documentation will be required by state and federal funding entities</li> <li>Recruitment strategies to increase assessment of diverse academic and personal backgrounds, and the multicultural nature of patient populations</li> </ul>	<ul style="list-style-type: none"> <li>“Boot Camp” sessions during orientation and/or the beginning of the first year of training to build clinical skills and prepare PGY-1s to provide safe care to patients</li> <li>Resiliency skills for 21st-century physicians</li> </ul>