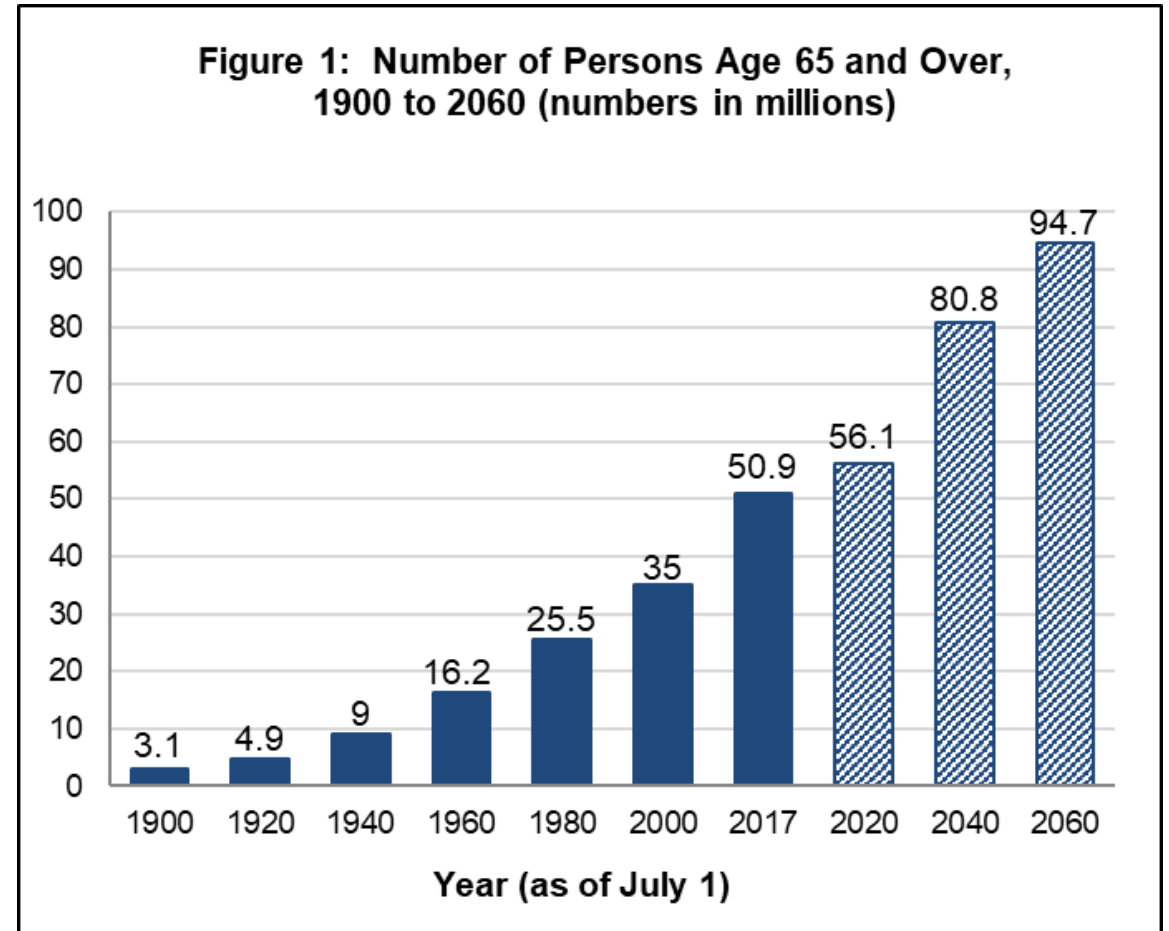


DEVELOPMENT OF A NATIONAL MEDICINE-GERIATRICS TEMPLATE

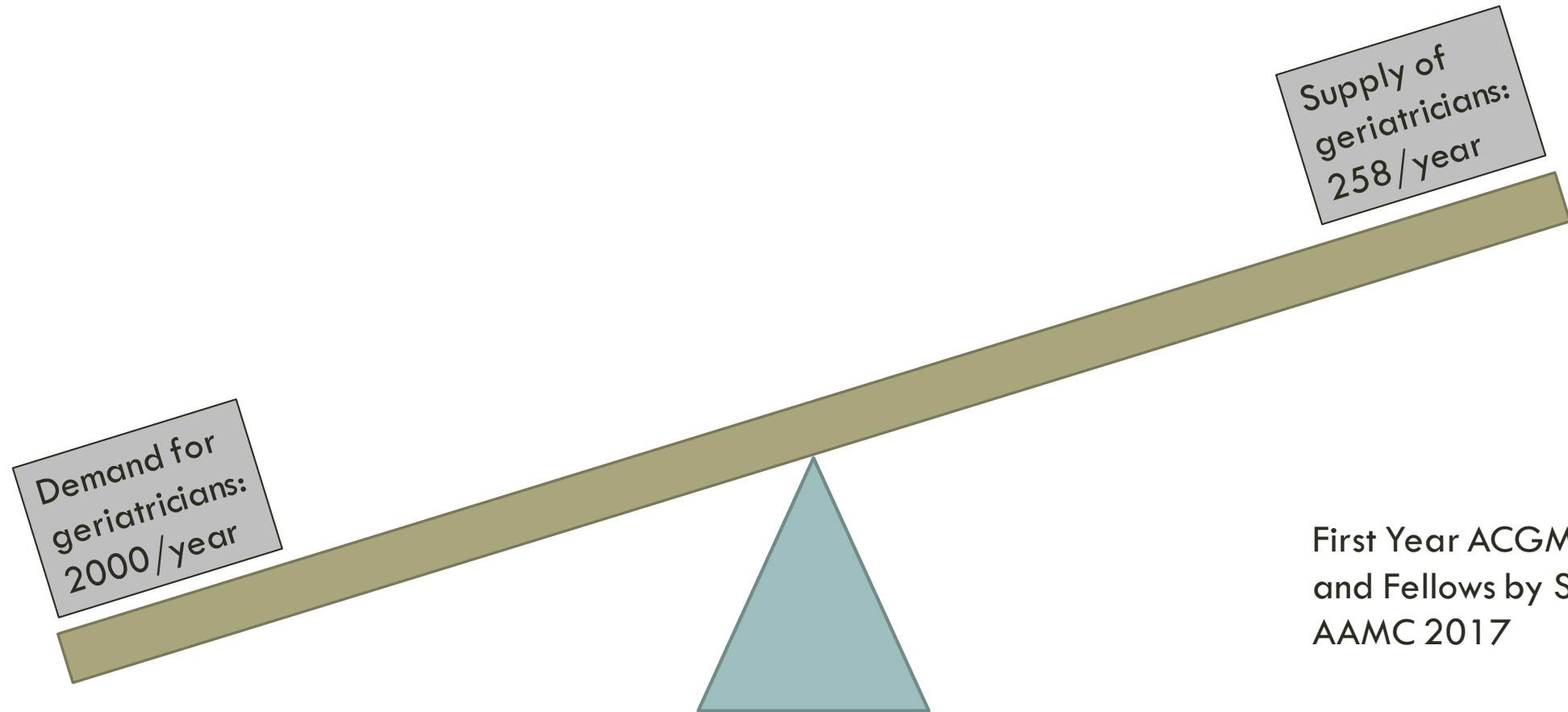
ANGELA BECKERT MD, DEPT OF
MEDICINE, MCW, BROOKE SALZMAN
MD, JEFFERSON UNIVERSITY , SONICA
BHATIA MD, MOUNT SINAI SCHOOL
OF MEDICINE, KATHRYN DENSON MD
& EDMUND DUTHIE MD

The number of older adults in the US is increasing rapidly.



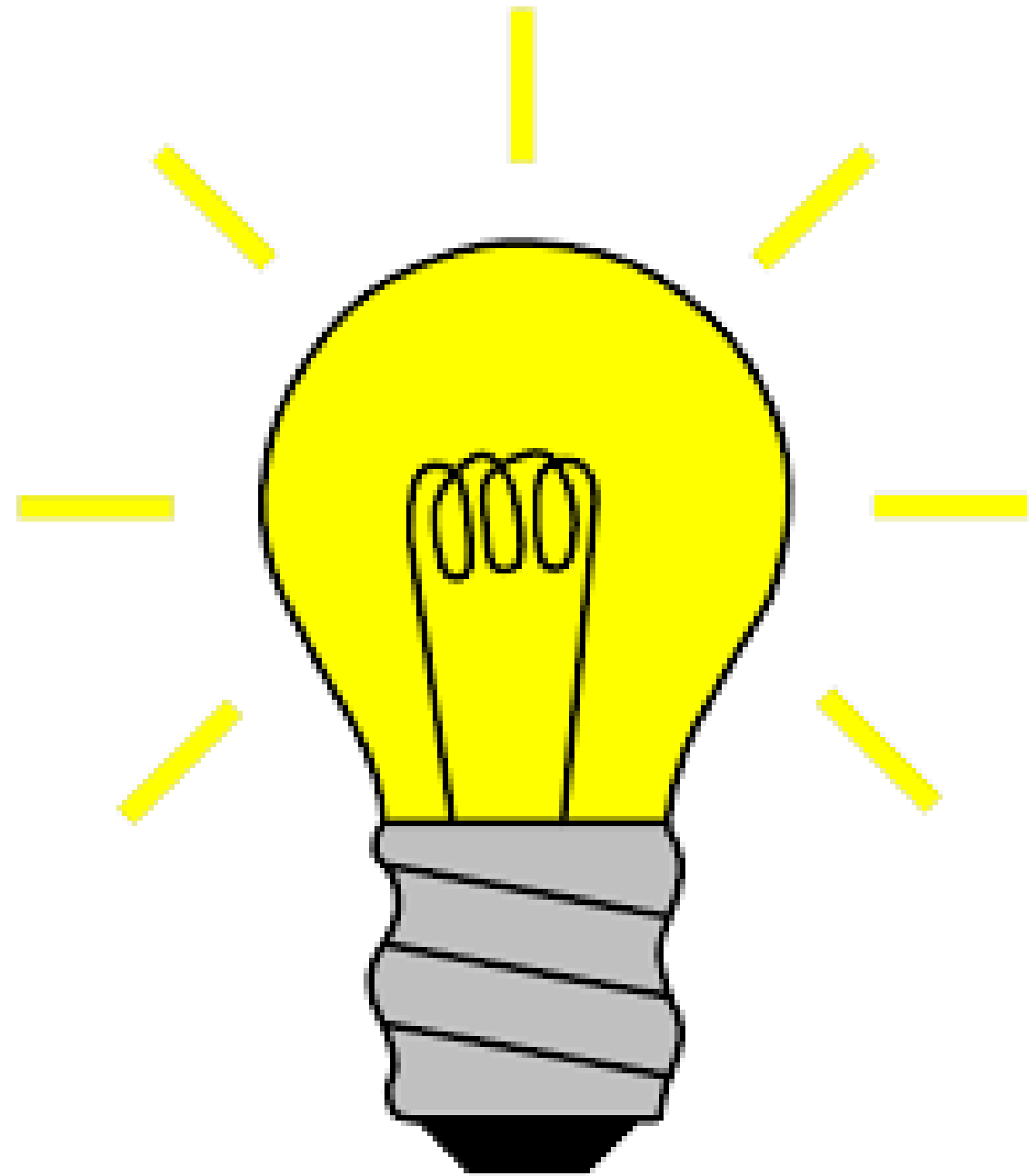
2017 Profile of Older Americans, Administration for Community Living, Administration on Aging, U.S. Department of Health and Human Services, 2018

THERE IS A MISMATCH BETWEEN THE DEMAND AND SUPPLY OF GERIATRICIANS



First Year ACGME Residents
and Fellows by Specialty,
AAMC 2017

NOW WHAT?



Innovation!

THE DIRECTIVE

Work with key stakeholders to create a national medicine-geriatrics training template.

METHODS/FINDINGS

Reviewed available data from existing medicine/geriatrics programs and ACGME Program Requirements (identify training synergies).

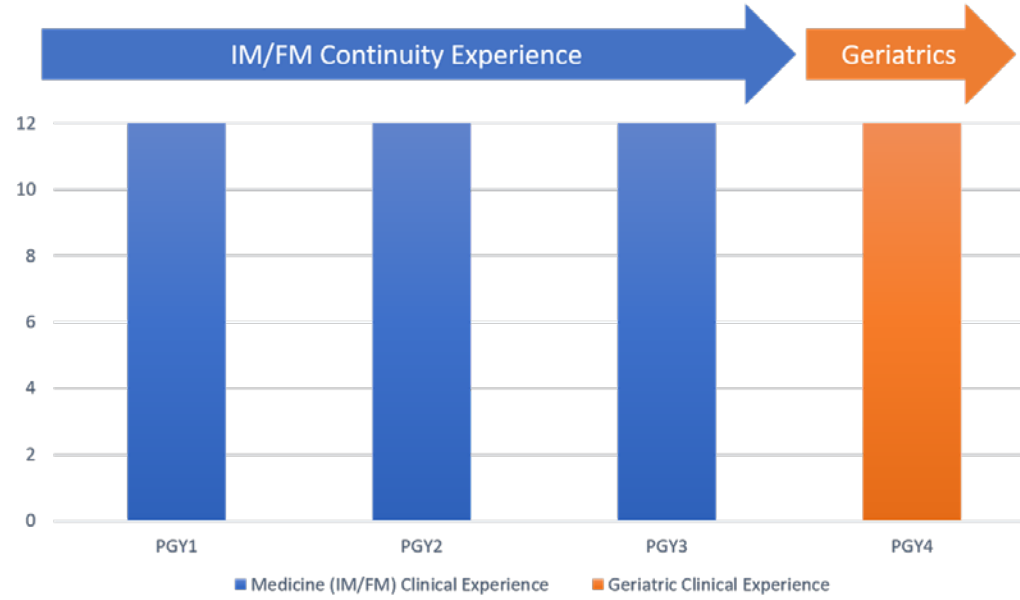
Engaged important stakeholders

- American Geriatrics Society (AGS)
- Association of Directors Geriatric Academic Programs (ADGAP)
- ABIM
- ABFM
- ACGME
- Geriatrics Fellowship PDs
- Students, residents, geriatrics fellows

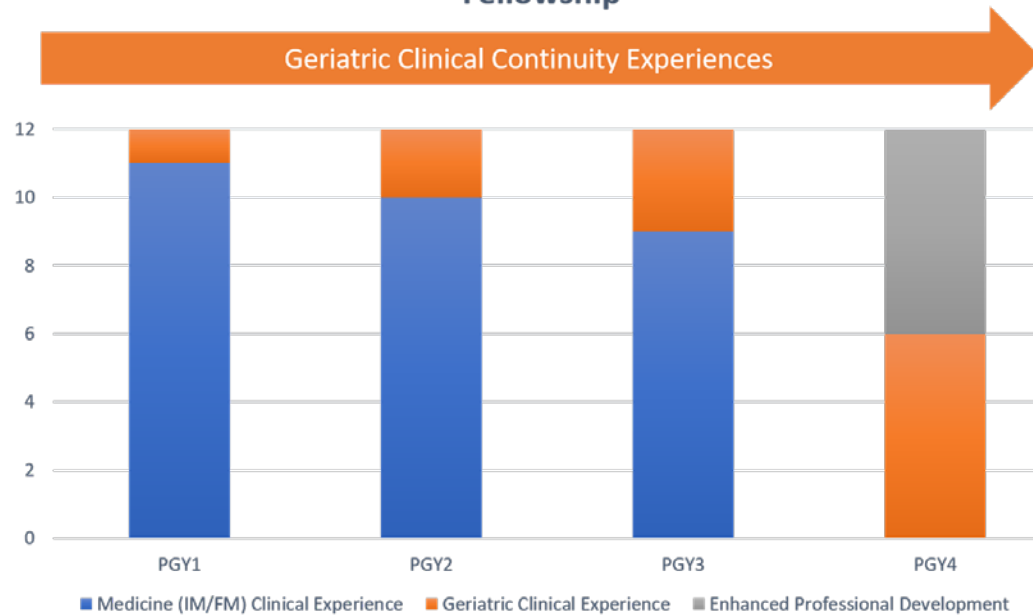
THE PROPOSAL

An integrated 48-month medicine-geriatrics curriculum with competency-based assessment that allows for increased training flexibility and potential pursuit of advanced skills and scholarship.

Traditional Geriatrics Training Model



Proposed Medicine Geriatrics Integrated Residency and Fellowship



ASSESSMENT MEASURES

- Also integrated.
- Competency “handoff” between residency and fellowship.
- Creation of an individualized learning plans throughout training.

HOW DOES THIS MEET OUR NEEDS?

Early exposure and mentorship may capture and foster early interest in geriatrics.

Potential flexibility in fourth year will allow trainees to gain enhanced skills.

Increasing #s of med-ger programs may enhance geriatrics visibility throughout programs and institutions.

(1) More fellowship trained geriatricians

(2) Geriatricians that can reach a larger number of older adults

(3) Non-geriatricians that are more capable in utilizing geriatric care principles

SUMMARY

Residency and Fellowship training synergies and competency -based medical education allow for a learner-centered approach to increase training flexibility → leveraged to meet physician training, patient, and population needs.

NEXT STEPS

This has been approved as an AIRE (Advancing Innovation in Residency Education) ACGME pilot program.

Three programs have been recruited to participate: MCW, Nebraska, Mount Sinai

Recruitment occurs this Fall of 2020 and first trainees will matriculate July 2021.

QUESTIONS / COMMENTS?