The Scholarship Round Robin was designed as a speed mentoring event for all first-year pediatrics fellows and was offered in September of their first year. The event included breakout groups, representing the 9 types of scholarship at our institution. Two faculty in each area of scholarship participated in this 1.5-hour event and led three 24-minute breakout sessions with fellows rotating into 3 different scholarship areas. During each session, faculty provided an overview of their area of scholarship and engaged in discussions with the fellows. During the transitions and at the end of the event, all fellows and faculty were brought together to share key takeaways and broader themes on best practices. Fellows' perspectives were measured using an anonymous, institutional review board-exempt post-event survey, with Likert and open-ended questions.

### **Outcomes to Date**

Twenty fellows from 13 different subspecialty programs and 19 faculty participated in the Scholarship Round Robin. All areas of scholarship had at least 1 fellow participating in a breakout group. Fellows found the event to be a valuable use of their time (mean = 4.7/5) and that the Round Robin exposed them to new areas of scholarship. Fellows felt the breakout sessions were very helpful (mean = 3.9/4), and 100% of fellows rated the breakout groups as helping them gain a better understanding of what careers in specific areas of scholarship entail. Open-ended comments from the fellows included the following:

"The most valuable aspect was thinking of my project from different angles and making connections with new faculty."

"The breakout rooms were a great opportunity to talk in smaller groups and get more personalized advice, and the large group parts in between were a great place to hear general advice on themes that were arising."

The Scholarship Toolkit and Round Robin event were an effective strategy to broaden our first-year fellows' perspectives on the range of scholarly areas available and to initiate faculty networking. The Scholarship Toolkit is an important resource they will be able to reference throughout their training. Next steps should explore if the Scholarship Toolkit and Round Robin change fellows' planned areas of scholarship and make the scholarship experience more effective.

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#### References

1. Thomas P, Kern D, Hughes M, Chen B. *Curriculum Development for Medical Education: A Six-Step Approach*. Baltimore, MD: Johns Hopkins University Press; 2015.

# NEW IDEAS

# Improving Pediatric Subspecialty Recruitment Using an Interdivisional Department Session

# **Setting and Problem**

The pediatric subspecialty fellowship pipeline across the United States varies from undersubscribed to very competitive (program fill rate for the 2020

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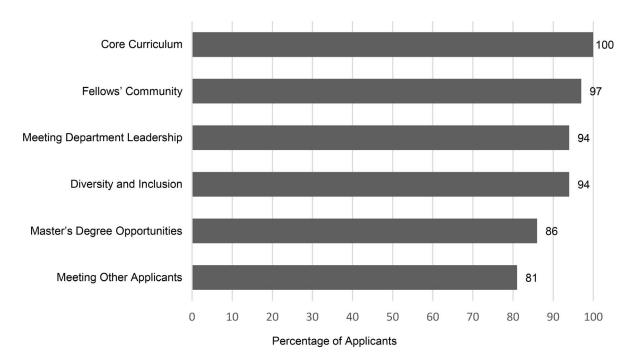


FIGURE
Applicant Attitudes to Recruitment Breakfast Session Content

Note: Shown are the percentages of applicants who rated each content area as important or very important.

appointment year ranged between 52% and 98%). For candidates to determine the best fit for their subspecialty training, programs must highlight their culture and unique features and showcase their department's training support. Interview strategies often lack the departmental components, representing a missed opportunity that may impact candidate program choice. Our goal was to create a novel recruitment session that allowed all subspecialty applicants to come together to learn about our department, to meet department-level leadership, and to experience the fellow learning community.

#### Intervention

To assist pediatric subspecialty programs with recruitment for the 2020 academic year, our department-hosted 19 breakfast sessions for applicants as part of their subspecialty interview days. These recruitment breakfasts were scheduled between September and November 2019, with a virtual option available for applicants unable to attend on their interview day. Program directors and coordinators were invited to attend.

All sessions were 60 minutes and began with introductions from key department leadership, including the department chair, associate chair of education, director of fellowship education, associate program director of recruitment, diversity, and

appointment year ranged between 52% and 98%). inclusion, and other department and division educa-For candidates to determine the best fit for their tional leaders.

> At the sessions, applicants learned about departmental programs and opportunities, including the Accreditation Council for Graduate Medical Education and American Board of Pediatrics subspecialty core curriculum, comprising content on leadership, teaching, well-being, quality improvement, professionalism, health disparities, and scholarship. A quarter of the session was devoted to the diversity, equity, and inclusion efforts occurring at all levels of the institution. Our fellow learning community was featured by sharing information on our unique Fellows' Council and the implementation of the core curriculum that brings all subspecialty trainees together to learn. Advanced degrees, grant writing resources, and compensation and benefits were presented, and applicants were provided a packet of information complementing the content of the session. Applicant attitudes were measured using a postrecruitment survey with a 3-point Likert-type scale and open-ended questions.

# **Outcomes to Date**

A total of 101 applicants from 14 subspecialties attended the breakfast sessions in person and 3 attended virtually, which represented 38% of all interviewed applicants. Of the 104 attendees, 99 were sent a survey about their experience, representing 12

subspecialties. Thirty-six percent (36 of 99) responded, of which 89% (32 of 36) indicated that the session positively influenced their ranking decision. Respondents also rated the importance of the program content areas on their impression of our institution as a training site (FIGURE).

In open-ended comments, applicants indicated they liked the academic opportunities, fellowship learning community, core curriculum, and the opportunity to meet with department leadership. Comments included:

- "Of the 7 programs I interviewed with, [your institution] offered the most structured, [thorough] fellows' curriculum which positively influenced my ranking decision."
- "Meeting the chair and all the other important faculty members, seeing the other fellow applicants..."
- "Learning about the other fellowships, fellowship bonding events, diversity and inclusion efforts across the campus..."

In conclusion, applicants reported that the department-hosted sessions had a positive impact on their ranking decisions, and 43% (19 of 44) of matched applicants attended the breakfasts. Key elements included demonstrating leadership commitment to trainee education, highlighting the core curriculum, and establishing an interdivisional community by bringing all subspecialty applicants together as a model for our learning community. These departmental sessions filled a recruitment gap and highlighted our institution's commitment to subspecialty training including diversity, equity, and inclusion. This session complemented divisional recruitment efforts and positively impacted recruitment at our institution. This recruitment strategy could easily be adapted at other institutions.

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# NEW IDEAS

# Advancing Complementary Resident and Fellow Education Through 8 Intraprofessional GME Tracks

# **Setting and Problem**

Increasingly, academic health centers are recognizing that residents and fellows are interested in gaining knowledge and skills in health care-related areas outside their normal residency program curriculum. Annually, Emory University School of Medicine's graduate medical education (GME) office educates more than 1300 trainees in 110 programs. While large specialty programs such as internal medicine can develop complementary pathways/tracks for their residents' education, smaller programs typically have limited resources. We anticipated that residency tracks developed and administered at the GME level and open to all residents and fellows could support complementary education in health care-related areas and help promote intraprofessional learning among trainees.1

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