

average improvement of 1.9 points on a 0-10 scale on perceived overall well-being after course completion. 86% of residents stated they were satisfied with the program and 88% would recommend the program to fellow residents. 88% would continue to participate in the program. Based on our pilot year data, our methods appear to be very effective at promoting well-being. Our program could be used as a model for any residency program.

44 Who's the Boss? In-situ Inter-Professional Assessment of Resident Leadership Skills

Hitchner L, Sawtelle Vohra S / UCSF Fresno

Learning Objective: To provide real-time inter-professional assessment of resident leadership skills and to use this assessment to better inform individual progress on the ACGME Team Management milestone.

Abstract: The ACGME requires that residents are evaluated on their ability to effectively lead patient-centered care teams. Timely feedback is critical for practice improvement and yet residents don't often receive this formative information during shifts. Standardized direct observation tools have proven valuable for assessment of Emergency Medicine (EM) residents and who better to provide feedback on team management skills than the actual team? We standardized our critical event debriefing process to enable the inter-professional care team to provide direct feedback on resident leadership.

In the winter of 2017, we implemented a critical event debriefing program. EM residents, faculty, EMS personnel, nurses, techs, respiratory therapists, social workers, pharmacists, and consultants are asked to participate in the debriefings. During a session, the inter-professional group is asked, "Was the Physician Team Leader (PTL) the only doctor calling out medication orders?" and "Was anyone confused at any time during the resuscitation about who was the PTL?" Residents receive the direct real-time feedback and this data is collected and reviewed by residency leadership.

The first critical event debriefing session was completed in March of 2018 and 38 forms have been completed to date. Eighteen residents have been the PTL. In three cases, the team concluded that the PTL was not the only doctor calling out orders and that someone was confused at who the PTL was during the event. As we collect more data, we will compare these responses to the current ACGME Team Management milestone evaluations and use this data to inform

future assessments. This innovation leverages a debriefing documentation tool to provide real-time inter-professional assessment of resident leadership skills. This can be applied to other milestones and easily implemented at EM programs around the country.

45 Women Trainees Experience Improved Residency Satisfaction Through Women Faculty and Resident Professional Development Sessions

Hosmer K / Wake Forest University

Introduction/Background: The experience of women residents in emergency medicine differs from those of their male counterparts. Women residents feel there is a deficit in topics specific to women in EM. Women residents are seeking mentoring, networking, peer support and professional development opportunities specific to them. Providing an established program to support these needs can improve the residency experience for women residents.

Learning Objective:

- Provide peer support, networking opportunities, and advising for women residents.
- Improve residency/career satisfaction through an established community of women EM physicians.
- Develop a variety of career skills to help women residents reach their career goals.

Curricular Design: A survey of all women residents in a single EM residency program was performed to determine the need for education and discussion of professional development topics specific to women in EM. The survey identified top areas of interest for discussion which included work-life balance, leadership skills, advice for the new attending, contract negotiations, and burnout/job satisfaction. A group of women faculty and residents meets every two months to discuss the assigned professional development topic with a faculty facilitator. Women residents are scheduled off from the ED during these meetings to allow for attendance. Small group discussions led by a faculty facilitator with specific discussion questions initially occurs, with a larger group discussion afterward.

Impact/Effectiveness: Women trainees have noted an improvement in morale, peer support, confidence and residency satisfaction through these sessions. Trainees and faculty have also identified specific areas for improvement within the program and department which have initiated changes.