

YAHP Dinner Meeting
May 11, 2009
Hospital of St. Raphael

MEETING MINUTES

In attendance:

Yale School of Medicine/

Yale-New Haven Hospital

Tracy Crosby

Stephen Huot, MD, PhD

Silvio Inzucchi, MD

Asghar Rastegar, MD

Bridgeport Hospital

George Abdelsayed, MD

Danbury Hospital

Michael Schiffman, MD

Winston Shih, MD

Greenwich Hospital

Nimisha Kalia, MD

Kay Lovig, MD

Charles Seelig, MD

Griffin Hospital

Kenneth Dobuler, MD

Dorothea Wild, MD

Hospital of St. Raphael

Stephen Atlas, MD

Andrei Cepoi, MD

Aura Cernii, MD

Eileen Crozier

Alan Kliger, MD

Ernest Moritz, MD

Robert Nardino, MD

Bogdan Tiru, MD

Amelia Villagomez, MD

Barry Wu, MD

Ke Xu, MD

Jenny Zhan, MD

Norwalk Hospital

Joseph Cleary, MD

St Mary's Hospital

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Waterbury Hospital

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Dr. Alan Kliger, Chair of Medicine at the Hospital of St. Raphael and tonight's host, welcomed everyone to the Dinner Meeting. He began by introducing Dr. Silvio Inzucchi, YAHP Director, to deliver any announcements.

Dr. Inzucchi first spoke about the Faculty Development Seminar, which is scheduled for Monday, June 1 (6:00 PM), at the Yale School of Medicine campus. Dr. Jonathan Bogan will be presenting on "Molecular Biology Made Ridiculously Simple", geared for the clinician-educator. He encouraged everyone to come and to be sure that Chief Residents pass the invitations to other residents as well. Dinner will be provided, parking will be validated, and directions are forthcoming.

He then briefly explained the new E*Value electives process that is currently underway. Our hope is that it will be transparent and equitable, and much easier for everyone all around. Dr. Stephen Huot, Associate Chair for Academic Affairs for the Yale Department of Internal Medicine, emphasized the importance of the deadlines, which were in part created by E*Value. In order for our information to "get into the queue" at E*Value at the appropriate time – for our assignments to be made and schedules created on time – we absolutely have

Meeting Minutes, cont'd

to stick to the May 15 deadline. Dr. Inzucchi also reiterated the prevalence of 2-week block availability vs. 4-week blocks for resident rotations. Chances of 'matching' a specific rotation will be increased if residents include 2-week blocks in their choices.

Dr. Inzucchi then briefly talked about the 6 annual hours of curriculum consultation/faculty development, which are included as part of the Level 2 contracts. He passed around a mock-up of a *Course Catalogue* of sorts, which will be distributed soon to each Affiliate. This illustrates a collection of topics and programs that are readily available from the Yale full-time faculty.

Dr. Kliger then opened the main presentation, commenting that at each Dinner Meeting, the host Affiliated Hospital exhibits a part of their educational program that usually interfaces with clinical care. He proceeded to introduce Dr. Barry Wu from St. Raphael's.

Dr. Wu's presentation was entitled, "Developing a Residency Training Model in China"; the main objectives included reviewing the history of the Yale-China Association, and St. Raphael's recent exchange program with Chinese hospitals involving faculty, students, and residents.

The Yale-China Association began in 1901 and by 1915 had helped establish a hospital system in the Hunan province. This is now a 3-hospital system called Xiang Ya, each with over 2000 beds, affiliated with the Central South University School of Medicine in the capital of Changsha in Hunan Province. In 2007, the Hospital of St. Raphael began developing a relationship with this same hospital system, to develop a new residency-training model in China.

One of the most striking aspects of visiting China, hosting Chinese physicians, and exchanging information was the contrasting training models. Chinese physicians describe the United States training using words such as "conscientious and comprehensive", "critical-thinking", "voluntary", "objective" and "more likely to fix the system instead blaming an individual." They described their own training with words such as "natural" (akin to 'planting seed and watching it grow'), "limited", "memorization driven", "involuntary", "subjective" and "more likely to blame the individual rather than the system."

Within the last 2 years, one of the accomplishments of this program has been the development of core competencies for the Chinese educational system, based on our own ACGME competencies. They've also established corresponding behaviors to reflect those competencies, which are somewhat distinct from those in the U.S.

Dr. Wu described how the entire experience has been such a cross-cultural one – that as the Americans learn about the Chinese practices, the Americans realize and recognize and perceive their own learning processes in such a different way. To better demonstrate, he introduced 2 former St. Raphael residents who recently returned from a rotation in Changsha, to relate their experiences: Dr. Amelia Villagomez and Dr. Ke Xu. Each shared their own stories and revelations. Dr.

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Xu, in a touching moment, described her impact on a 7 year-old Chinese girl who had been suffering from separation anxiety after a recent earthquake in Sichuan Province one year ago.

Dr. Kliger proceeded to ask the three of them to describe any insights that this experience provided about how they evaluate and teach residents now – what was it about the experience which influences his/her teaching here and now?

Dr. Villagomez replied that she realizes that she takes a lot of things for granted – like working as a multidisciplinary team, having evidence-based information at your fingertips. She also stated she is learning to look at things differently – to question why we do things a certain way here, when the Chinese may have such a different approach which works quite well for them. For Dr. Xu, it was seeing how the family is very actively involved in a patient's care and in the decision-making.

Dr. Inzucchi asked if the adaptation of the core competencies is specific to this hospital or to the province? Dr. Wu explained that it is specific to this hospital system only and they are hoping to use it in other parts of the country. Each province is figuring out its own system, and part of that is recognizing the limited resources. Different provinces are more advanced in medical technology – the St. Raphael program's focus is more on clinical medicine and primary care in rural areas – and the larger, more urban areas, such as Beijing, have a more basic science focus in their emerging interactions with other parts of Yale University.

Dr. Kliger brought the meeting to close at 8:10pm