All Resident Meeting Minutes 6/21/13

**1. CHO**: Please get your badge renewed by the end of July.

**New expectations**: No planned absences other than those scheduled by the Residency. You are not excused to leave/miss a shift for continuity deliveries. If you are covering another CCRMC resident's shift, you must fill out a Check In sheet for that day (available in the CHO ED and Residency Coordinator's office).

**Medical Records**: While CHO still has paper charts, please call the Medical Records office weekly during your CHO rotation to check for incomplete charts. All incomplete charts must be signed/completed by the end of your rotation. The Medical Records office keeps regular office hours (M-F, 9-5ish), so plan ahead.

**2. Support groups**: These will be held during morning lecture on the last Tuesday of inpatient rotations, as well as a few PBLs throughout the year. If you feel the PBL support groups are too many, please give us that feedback!

**3. Epic templates**: See the emails from Dr. Haglund and Erin regarding new templates to use for your notes.

**4. Scheduling announcements:**

**Jeopardy rules**: You must be called prior to 1pm the day before you are needed to work. The 24-hour warning rule no longer applies. Therefore you must be able to get to work in 18 hours any given day on jeopardy. You may not schedule yourself to take someone else's shift while on jeopardy, because you would then not be available to be jeopardized if needed.

**Callback hours**: 5pm-8am on weekdays, 8am-8am on weekends and holidays

**Weekend admit changes**: Night admit will start at 8pm EVERY NIGHT. This is a change for the Saturday night admit shift, which previously start at 10pm. Day admit shifts on the weekends will cover 9am-8pm (extended one hour). This will eliminate the awful 3-hour gap Saturday evenings when there used to be no admit person.

**Night team hours**: All three members of the night team (ICU, NA, NHO) are expected to be in the hospital until 8am (except NHO on Fridays is excused at 7am). If the ICU senior wants to be kind, he/she can offer to hold the HO and admit pager and let those residents go home early. However the ICU resident must be in the hospital, the HO pager, and the admit pager must be on and answered until 8am for patient safety reasons.

**5. AAFP membership**: All residents have been signed up!

**6. PBL Update**: Significant efforts are being put forth to improve PBL and the didactic teaching at our program. To make presenters more accountable for quality sessions, residents will now be accountable for attendance. A sign in sheet will be utilized to track attendance, and any resident with TWO or more absences will have to make up a SHO/SA shift. The schedule of topics is being finalized, as well as an alternate activity for R2s and R3s who will have a couple of weeks when they would see repeated PBL topics. More info on this coming soon.

**7. FMC/PCMH rotation update**: Drs Solomon, McNeil, and Jessica Selvin gave us an overview of this exciting new rotation. The schedule has been thoughtfully created by a group of residents and attendings, and includes a PCMH lab, didactics, and shadowing opportunities on top of your FMC's each week to further our outpatient primary care training. Feedback will be very important for making this rotation great!

**8. Inpatient Task Force Update**: The summer inpatient trial is starting now. It will run through blocks 1-4. It involves two teams, one medicine and one FMS, and a hard cap on all services for the first time in CCRMC history. Feedback for this will be crucial as well, so feel free to email Abby R, Sergio Urcuyo, or Rebecca Lee with your constructive criticism and thoughts. We will continue to reflect upon our common priority of patient care and patient safety, as we evaluate this and consider future trials for our inpatient services.

Next All Resident Meetings: July 19th and September 13th

Happy Block!

- Your Chiefs