



QUARTERLY FEEDBACK REPORT

June - October 2024

The Office of Graduate Medical Education (GME) at the University of Arizona College of Medicine – Phoenix and Banner University Medicine are your partner in fostering a respectful and inclusive clinical learning environment. We take your feedback very seriously.

This is the first quarterly newsletter of Academic Year 2024 to update you on the status of the reports that have been received and provide reminders.

Data about received submissions

Your feedback leads to action

Of the 7 reports received this quarter, action has been taken on all of them with 30% already having the action plan implemented. Some examples include:

1. Direct conversations with faculty regarding the impact of their words/actions and expectations
2. Revised program policies
3. Feedback provided was used in GMEC special review process.
4. Quarterly reports were distributed to House staff work rooms and a flyer for the feedback form was designed to encourage feedback.
5. Obtaining lead for fellows in the cardiac cath lab.

“You said, we did”:

- A pledge card was created and distributed to incoming house staff this quarter. "The University of Arizona College of Medicine - Phoenix is committed to a culture of professionalism and continuous improvement. You reporting positive and negative experiences helps us to achieve that goal" The pledge card has a QR code that links to the feedback submission form.

- A "send an MVP" button was added to the feedback form. This gives the submitter the option of using Banners MVP function to recognize the person they are submitting positive feedback on.

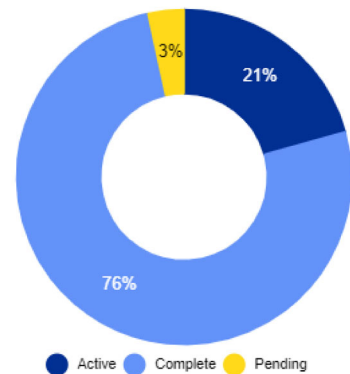
- A new UME-GME Learning Environment Taskforce has been created to connect the efforts that are happening on both fronts.



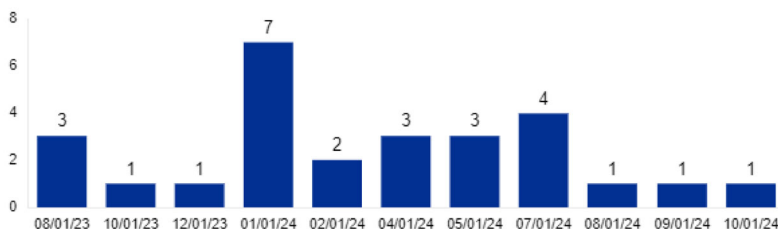
PHX GME Feedback Dashboard

Submission Number	Status
2024	Report received
202412342	Report received
202412341	Report received
04271992	Report received
072392	Gathering additional information
4887	Faculty tiered intervention
1169	PD developing action plan Faculty tiered intervention DIO developing action plan
11690	PD developing action plan Faculty tiered intervention DIO developing action plan
0513	Gathering additional information
1107	Gathering additional information
000	Gathering additional information

What's the Status?



How many reports are being submitted each month?



What type of feedback is being received?



The number of Submissions has decreased.

FAQ: Does this mean that rates of negative experiences/ concerns are decreasing? We don't know. It might be that at the start of the form being released, there were some older events that were submitted. It also might be because there has been less discussion after the initial roll out. We are hoping that this quarterly newsletter serves as a reminder. We hope to ensure **greater awareness of the [PHX GME Feedback form](#)** and trust in our process.

Addressing Feedback

What happens after submission?

Every situation is different, and we take every feedback form entry seriously. Positive learning experience reports and exemplary teaching reports are handled with the standard faculty feedback flow. Mistreatment and negative learning experience reports are addressed urgently unless the reporter selects an alternate time frame.

In most cases, the process is as follows:

[Standard Process Flow](#)

[Mistreatment Process flow](#)

[Negative Learning Experience Process flow](#)

How do we provide feedback to faculty

Part of a healthy learning environment
Feedback Smoothie

NEW INNOVATIONS
INDIRECT TO PD
DIRECT TO FACULTY
CONCERN FORM
MEDICAL FORM

More anonymous

Faculty Feedback is Collected and Shared with Purpose:

- PD reviews non-urgent evaluations twice yearly:
 - May review to assess trends and inform program improvement plans
 - Dec review to provide faculty with feedback that spans two academic years
- Faculty data is combined from multiple sources and includes two academic years for maximal anonymity, shared with faculty in Jan
- Feedback designated with "urgent" label will be acted upon immediately

Feedback improves performance!

Step 1: Add meaningful feedback from various sources

Step 2: Blend and serve for faculty and program to learn and grow

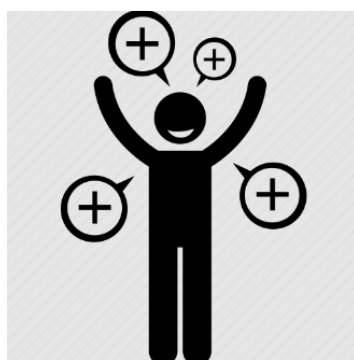
The Value of Standard Process Across Programs:

The benefits of a standard process:

- Increased useful feedback from house staff because of their trust in the process
- Ability to merge feedback from different learner types into one report
- Operational efficiencies
- Ensure that it is happening in all programs

The standard Process:

The Program Director reviews non urgent evaluations twice yearly to reduce the ability to identify who provided the feedback based on timing and rotation schedules. In May they review to assess trends and inform program improvements plans. In December, the GME office compiles a report for each faculty member which combines feedback from all GME learners (those in the primary program plus rotating residents/fellows) and spans the calendar year (2 academic years). The program director most closely aligned with the faculty member's main clinical program reviews and distributes the feedback. This design enhances the consistency of distribution in a way that maximizes anonymity. AY 2024-2025, The GME office is exploring standardizing the faculty evaluation forms using one studied for reliability and to further enhance the process's value.



Exemplary Teaching?

Tell us about your positive experience!!

We are looking forward to providing this feedback to faculty in January!

[Leave positive feedback HERE](#)

Addressing Mistreatment

Another component of creating a respectful learning environment is responding to abuse, harassment, mistreatment, discrimination, or coercion in a consistent and effective way.

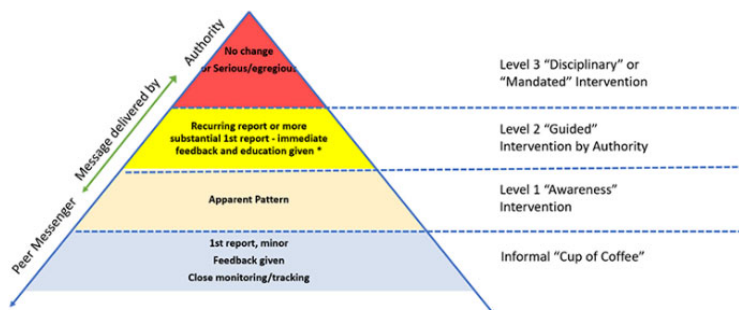
We can't address it if we don't know that it is happening. Reporting mistreatment outside of the program ensures consistent responses.

Can I report anonymously?

All reports will be confidential with only the necessary individuals being aware of the report. Anonymous reports are ones where the identity of the reporter is unknown. You can report anonymously, and we understand this might be the most comfortable way of reporting. However, we want to make sure you know that the more information we have, the better we are equipped to respond.

FAQ: We realize reporting a concern can be a difficult and uneasy situation. GME is your partner and will do our best to honor your boundaries and work with you on how to proceed in a way that is safe and comfortable. If you're still uncertain about reporting, please review the other ways you can [report mistreatment](#).

Will my report result in disciplinary action?



Who will see my report?

FAQ: Feedback form entries are sent directly to the GME staff ombuds and Wendy Hylton, the accreditation consultant. Wendy is the only person with access to the full database. Wendy will review and share relevant information with appropriate contacts (i.e. program director, chair, Learning Environment Committee, DIO/associate dean of GME, Wellness director, Department educational lead, GME diversity director) based on the type of feedback.

What to provide feedback about?

We want to recognize what is going well, as well as identify areas for improvement. The [PHX GME feedback form](#) can be used for reporting exemplary teaching and positive experiences and reporting concerns like negative learning experiences (i.e. sleep rooms, duty hours, teaching etc.) and mistreatment. **The more you provide feedback, the better we can make your experience and the experiences of your peers.** Making us aware allows us to advocate on your behalf and make changes.

What is Mistreatment?

FAQ: Per the AAMC, mistreatment arises when behavior shows disrespect for the dignity of others and unreasonably interferes with the learning process. It can take the form of **physical punishment, sexual harassment, psychological cruelty and discrimination based on race, religion, ethnicity, sex, age or sexual orientation.**

For more information, please review the [Reporting Mistreatment or Harassment of Medical Students Policy](#).