

SUNY Downstate International/Global EM Mini-Fellowship

Director: Monalisa Muchatuta, MD MS

Background and Enrollment:

All residents in the International Mini-Fellowship (IMF) will apply to the director of the program at the beginning of the PGY2 year. The international mini-fellowship will be open to all residents and there is no limit on the number of mini-fellows per year.

IMF Portfolios:

All residents in the IMF will maintain a portfolio to collect their projects, lectures, publications, and evaluations. The portfolio will be kept by the resident and will be presented every 12 months to the Director of the IMF at annual evaluations. Each evaluation meeting will identify advances in the past 12 months and areas for future growth.

The IMF Portfolio will contain any material that the resident feels is demonstrative of education and/or experience in international medicine, public health, or grant-seeking.

Mini-Fellowship Goals

- Graduate residents that would make excellent fellows
- Increase cultural competence in Global/International Emergency Medicine

Completion Requirements

*Mini-fellows should complete **all the required bolded items** below in order to receive credit for completing the mini-fellowship. They should also complete **3 out of 5** of the other items below.*

- **Attend 1 international medicine/global health activity per year (conference, lecture, event, program)**
- **Attend at least 1 IMF lecture or journal club per year**
- **Contribute one educational article to global health journal club per year**
- **Contribute to at least one active project in the International Division (this may include data analysis, project planning/design, materials development, project implementation, publication) over the course of residency **note each month-worth of contribution counts for 1 credit**
- **Mini Fellowship yearly evaluation with Director and portfolio review using CUGH/ACGME milestone progression to minimum Level 2-3 in mini-fellowship priority areas**
- Plan and complete international elective(s) for PGY4/5
- Lead one journal club/small group discussion session or help run the mini-fellowship
- Mentor visiting international observer residents and/or students

Annual Mini-Fellowship Evaluation Milestones

** Adapted from CUGH and ACGME. The number preceding the milestone indicates the level.

Level 1 = novice (no GH experience at all)

Level 5 = expert/international leader

***** Residents graduating in the mini-fellowship should be at least level 2-3 in all mini-fellowship priorities by graduation ******

** **Bold** – Mini-fellowship priorities

** *Italics* – crossover into ACGME milestones/other tracks

1. **Travel Safety and skills**

- a. 1: Demonstrate understanding of food safety, vaccine readiness, basic first aid and hygiene, and travel basics.

2. **Research**

- a. 1: Demonstrate understanding on how to critically analyze publications
- b. 1: Demonstrate familiarity with the working body of global health literature and current issues
- c. 2: Publish/present a scholarly work

3. **Professional practice**

- a. **3: demonstrates the ability to adapt clinical practice or discipline-specific skills in a resource limited setting**
- b. **3: acknowledges one's limitations in skills, knowledge, and abilities**
- c. **3: contributes to or participates in interventions, quality assurance, or educational projects**

4. **Ethics**

- a. **2: acts in accordance with basic principles of medical ethics when participating in global health experiences**
- b. **2: demonstrates an ability to resolve common ethical issues and challenges that arise when working within global health experiences, with vulnerable populations, and/or in low-resource settings**
- c. 3: thinks critically about ethical and professional issues that arise in responding to humanitarian emergencies
- d. **3: Understands the ethical issues surrounding research in international settings**

5. **Capacity strengthening**

- a. **2: participates in host/partner organization's program and can articulate capacity at the level they are working**
- b. **2: understands and communicates the status of community capabilities and current health assets and disparities within the community**
- c. **2: participates in activities that facilitate the host/partner organization to utilize the community assets to benefit the population**
- d. 3: identifies features that will make programs sustainable within their community and participate in activities that facilitate program sustainability

6. **Social and environmental determinants of health**

- a. **2: describes how cultural context influences perceptions of health and disease (eg cultural beliefs about basis of and remedies for disease, etc)**
 - b. **2: recognizes how bias impacts the way patients think about health and disease**
 - c. **2: demonstrates understanding of the major causes of morbidity and mortality between and within countries and identifies contributing social/environmental factors**
 - d. 3: synthesizes available data to identify social, economic, and environmental determinants of health
7. Collaboration, partnering, and communication
- a. **2: communicates with all members of the team in a respectful & cultural appropriate manner**
 - b. 2: participates in observational experiences with focus on partnership and relationship building
 - c. 3: participates in and contributes to advancing a long-term collaborative project
 - d. **3: recognizes how own personal beliefs and values affect interactions and manages them appropriately**
 - e. **3: demonstrates an understanding of the importance of compassion, integrity, respect, sensitivity, and responsiveness and exhibits these attitudes consistently in complicated situations**
8. **Health equity and social justice**
- a. **2: Demonstrates a basic understanding of the relationships between health, human rights, and global inequities**
 - b. **2: develops an awareness of the healthcare system and barriers to care in the developing world, and the factors that contribute to this**
 - c. 2: participates in observational experiences with a focus on cultural understanding
 - d. **3: demonstrates a commitment to social responsibility**
9. **Sociocultural and political awareness**
- a. **2: performs self-assessment of one's own potential biases**
 - b. **2: articulates anticipated barriers that may arise while working in new cultural context**
 - c. 3: critically analyzes a program or intervention for potential socio-cultural or political conflicts
 - d. **3: adopts tools to mitigate cultural barriers.**
 - e. **3: Recognizes own biases**
10. Global burden of disease
- a. 2: understands historical context of health disparities and burden of disease
 - b. **2: Describes major current and historical public health efforts to reduce disparities in global public health**
11. Globalization of health & health care
- a. **2: Describes how different health care systems impact health care outcomes and expenditures**
 - b. 2: describes how global political and cultural events, commerce, and trade contribute to the spread of communicable and chronic diseases
 - c. 3: describes general trends and influences in the global availability and movement of health care workers

12. Strategic analysis

- a. 2: demonstrates the ability to apply a planning framework to a disease issue or situation

13. Program management

- a. 2: Describes some pitfalls of ineffective programs
- b. 2: describes features of effective programs and the characteristics that lead to efficacy in policy, practice, and health outcomes

Relevant ACGME Milestones:

1. Professional values: Demonstrates compassion, integrity, and respect for others as well as adherence to the ethical principles relevant to the practice of medicine.
 - a. 3: Recognizes how own personal beliefs and values impact medical care; consistently manages own values and beliefs to optimize relationships and medical care
 - b. 3: Develops alternate care plans when patients' personal decisions/beliefs preclude the use of commonly accepted practices
 - c. 4: Develops and applies a consistent and appropriate approach to evaluating appropriate care, possible barriers and strategies to intervene that consistently prioritizes the patient's best interest in all relationships and situations
 - d. 4: Effectively analyzes and manages ethical issues in complicated and challenging clinical situations
2. Patient Centered Communication: Demonstrates interpersonal and communication skills that result in the effective exchange of information and collaboration with patients and their families.
 - a. 3: Effectively communicates with vulnerable populations, including both patients at risk and their families
 - b. 4: Uses flexible communication strategies and adjusts them based on the clinical situation to resolve specific ED challenges, such as drug seeking behavior, delivering bad news, unexpected outcomes, medical errors, and high-risk refusal-of-care patients
3. Team Management: Leads patient-centered care teams, ensuring effective communication and mutual respect among members of the team.
 - a. 3: Develops working relationships across specialties and with ancillary staff
 - b. 3: Ensures transitions of care are accurately and efficiently communicated
 - c. 3: Ensures clear communication and respect among team members
 - d. 4: Uses flexible communication strategies to resolve specific ED challenges such as difficulties with consultants and other health care providers
 - e. 4: Communicates with out-of-hospital and non-medical personnel, such as police, media, and hospital administrators