2025 COMSEP Annual Meeting Workshop List

Thursday, April 3
Workshop Session #1 | 9:45 – 11:15 am

5: Brave Spaces: Teaching in Times of Controversy

Veronica Gonzalez, MD; Molly Rideout, MD; Abena Knight, MD; Amalia Guardiola, MD; Margaret Huntwork, MD; Lavjay Butani, MD; Deborah Rana, MD; Molly Wyman, MD

Primary Topic: Diversity, Equity & Inclusion
Secondary Topic: Faculty and Resident Development
Target Audience: Early Career |Mid Career |Late Career
Keywords: DEI, Health Disparities, Brave Spaces, Legislative Barriers

Overview:

This workshop was previously presented at the APPD 2024 Annual Spring Meeting and the APPD 2024 Medical Education Conference. Pediatric medical educators play a crucial role in equipping students with the foundational clinical knowledge and skills to become competent physicians while addressing health disparities and promoting social responsibility. Recent legislation, however, has significantly restricted their ability to provide care for marginalized populations, limiting medical students' opportunities to learn about and from these communities. For example, laws prohibiting care for transgender adolescents have led to the closure of gender-affirming centers, and some states have banned teaching subjects like anti-racism in publicly funded institutions. These restrictions increase moral distress among pediatricians and contradict policies from organizations such as the American Academy of Pediatrics.

As pediatric medical education evolves, educators must facilitate open conversations that help students navigate the shifting medical and legal landscape, particularly around social justice and health equity. Instead of relying solely on traditional "safe spaces," educators should adopt "brave spaces," where a diversity of voices can engage in discussions on complex and divisive issues, while recognizing the ethical challenges students face.

In these brave spaces, there is a focus on trainees understanding both the best evidence and unresolved questions that will drive future scholarship. When legislation precludes comprehensive training, creative and alternative educational strategies are essential to ensure all students receive the necessary education, regardless of geography or training site. Medical students must develop communication and awareness of ethical concerns that embrace a diversity of opinions, and they need support to reduce moral distress and promote resiliency. Ultimately, this shared responsibility to train students requires collaboration, communication, and courage. Educators must empower learners to practice with compassion, humility, and advocacy, aiming to reduce healthcare disparities for all children.

Objectives:

1. Discuss the impact recent legislation has had on pediatric medical education.
2. Strategize means of fostering brave spaces to discuss controversial issues.
3. Develop interventions to ensure pediatric curricula promote inclusive learning environments and recognize the burden of moral trauma created by restrictive legislation.

Methods:

This interactive workshop will begin with an overview of current challenges and a framing discussion on brave spaces. Small group activities will allow participants to practice applying the six pillars of brave spaces to different cases. Facilitated large group discussions will focus on how to support educational content, teach communication and professionalism in difficult discussions, and promote learner and faculty well-being amidst moral distress.

6: Together for Tomorrow: Interprofessional Strategies in Pediatric Education

Samrat Das, MD; Sanghamitra Misra, MD; Jessica Tomaszewski, MD; Catherine Soprano, MD; Julpohng Vilai, MD

Primary Topic: Faculty and Resident Development
Secondary Topic: Diversity, Equity & Inclusion
Target Audience: Early Career |Mid Career |Late Career
Keywords: Interprofessional Education, Professional Development

Overview:

The workshop will provide comprehensive IPE training through both didactic and interactive components. Participants will engage in activities to identify collaborators, develop engagement strategies, and examine successful IPE case studies. This approach will empower educators to create robust IPE programs that enhance collaborative care, improve patient outcomes, and foster teamwork within healthcare settings.

Objectives:

1. Upon completion, participants will be able to define interprofessional education and understand the essential elements of a competency-based IPE curriculum.
2. Upon completion, participants will be able to design strategies to identify and engage potential collaborators for IPE.

3. Upon completion, participants will be able to recognize challenges and develop strategies for implementing a competency-based IPE curriculum.

Methods:

Interactive Discussions: Participants will discuss their current understanding of IPE and share experiences, fostering collaboration.

Brainstorming Activities: Attendees will identify potential collaborators for IPE initiatives, promoting teamwork and creativity.

Small Group Discussions: Participants will analyze successful IPE projects in small groups, exploring effective strategies collaboratively.

Guided Planning Sessions: In groups, attendees will draft actionable plans for implementing IPE, receiving real-time feedback from facilitators

7: Turbocharge the Next Lap of Your Career with Effective Mentorship

Alexandra Comfort, MD; Melissa Baranay, MD; Helen Wang, MD; Jenn Horton, MD; Chris Peltier, MD; Rebecca Tenney-Soeiro, MD; Ovini Rodrigo, MD; Marieka Helou, MD, MPH; Joseph Gigante, MD

Primary Topic: Supports Annual Meeting Theme

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career |Mid Career |Late Career

Keywords: mentorship, career development, pediatric workforce

Overview:

Have you struggled to find a mentor, someone to learn from and help you realize your goals? As a mentor, have you had difficulty managing multiple mentees with differing expectations? If your answer to these or similar questions is yes, this workshop is for you!

Workshop attendees will first explore the different types of support available within academic pediatrics, from mentors and sponsors, to coaches and connectors. The focus will then turn towards the benefits of a mentor/mentee relationship in career trajectory and job satisfaction, as well as the impact of mentorship on the future of the pediatric workforce. Lastly, participants will have time to reflect on current and desired mentorship relationships. Attendees will be provided with a mentor mosaic for them to complete, where they will identify goals for their careers and personal lives, and determine which mentors can help them get these goals across the finish line.

Our workshop facilitators - trainees and seasoned faculty - will share their own insights, including the common pitfalls and shortcomings we've seen (or experienced) in mentorship pairings. Whether you identify as a mentee or mentor, a trainee or a professor, all participants will leave this workshop with new skills for an effective mentorship relationship.

Objectives:

1. Explore major benefits of the mentor/mentee relationship on career trajectory and job satisfaction
2. Discuss the characteristics that lead to a successful mentor/mentee relationship
3. Map out professional and personal goals while identifying which mentors will help you reach the finish line

Methods:

This workshop will involve a didactic portion, large and small group discussions, and self-reflection time to develop a mentor mosaic for each of their personal and professional goals.

8: Beyond Jeopardy – Bring joy and engagement by incorporating games into the classroom and clinical learning environment!

Anne Frank; Alison Riese, MD, MPH; Jeffrey Riese; Paige Romer, MD; Jennifer Soep, MD; Erica Chung, MD; Colin Fisher, MD

Primary Topic: Pediatric Clerkship

Secondary Topic: Wellness

Target Audience: Early Career |Mid Career |Late Career

Keywords: Game-Based Learning, gamification, wellness, collaboration

Overview:

Game-based learning (GBL) is rapidly developing as an innovative approach to teaching in medical education. Games have been noted to enhance student engagement in learning through a variety of mechanisms including enjoyment, active participation and collaboration, immediate feedback, practical application and problem solving. Studies also suggest that incorporating games can lead to improved learning outcomes.

There are multiple ways to incorporate games into our teaching repertoire. Games can be used in multiple settings and a variety of formats. For example, a short and simple game can be used to introduce a topic or test knowledge in the clinical setting, or multiple formal didactic sessions can be converted into an exciting escape room activity.

This workshop will begin with an introduction of what game-based learning involves and a brief review of the advantages to this pedagogy. Next, we will provide samples of a variety of game formats and review how to generate them. We will ask participants to identify a session or circumstance when they could incorporate gamification or Game-based learning and start planning how they will create a game and how to include it in their teaching activity. Ultimately, we will develop a tool kit of Pediatric Education games and game modalities to share with participants after the workshop. Throughout the session, we will incorporate different games to allow for a hands-on metacognitive experience.

Objectives:

1. Describe current evidence behind use of game-based learning [GBL] and gamification in Medical Education

2. Explore types of games and consider factors in choosing a game type
3. Brainstorm opportunities for game-based learning and gamification in participants' educational milieu
4. Build a personal repertoire of games for participants' particular learning contexts, including quick on-the-go teaching and more formal educational sessions

Methods:

Large group didactic, large group discussion, Game-based learning, gamification, small group discussion

9: Full Throttle Teaching: Driving Student Engagement Through Technology

Aleisha Nabower, MD, UNMC; Kirstin Nackers, MD; Stephanie Berger, MD; Vallent Lee, MD, PhD; Kanika Gupta, MD; Charles Hannum, MD; Drew Galligan, MD; Ataya Spears, MS

Primary Topic: Innovative Uses of Technology
Secondary Topic: Supports Annual Meeting Theme
Target Audience: Early Career |Mid Career |Late Career
Keywords: technology, learner engagement, simulation

Overview:

Medical students' exposure to pediatrics is limited, making it critical that their pediatric experiences are highly engaging, creative, and memorable. Transitioning away from traditional lecture-style teaching methods, be it in-person or virtual, can be difficult for medical educators. There is a wide array of technology tools available to facilitate learner engagement, allowing medical educators to move beyond conventional didactic practices. It can be overwhelming to keep up with the speed of technological advances, and time-consuming to try them out only to find that they don't fit your learning objectives. This workshop will do the trial and error for you, highlighting a range of resources for various objectives and comparing the diverse options available so you can find what best meets your needs.

Objectives:

1. Explore technology tools to enhance active participation across different learning settings
2. Demonstrate how to implement technology resources to make didactics and case discussions more dynamic
3. Generate ideas of how to engage learners with pediatrics using technology

Methods:

This workshop will introduce several widely available technological tools and demonstrate how they can be utilized to facilitate active learning. We will start with a brief didactic session highlighting the SAMR model and examine important considerations when adopting a new technology. Next, we will divide into small groups for interactive experiences to showcase different devices and platforms centered around a function that the instructor wants to incorporate into their teaching. Participants can trial the technologies while brainstorming ideas to incorporate them into their teaching. Finally, attendees will return to the large group for a discussion on how technological advancements may enhance engagement of learners in pediatrics, whether in didactic or simulation sessions. At the conclusion of the workshop, facilitators will share a toolkit including all the presented resources to help participants launch their own implementation when they return to their own institutions.

10: 8 Steps to Teach with Impact

Lawrence Ma, MD; Jeremy Middleton, MD; Anna Suessman, DO; Kristine Gibson, MD; Erica Chung, MD; Nicole Johnson, MD, FRCPC; Larrie Greenberg, MD; Amy Creel, MD; Anne-Marie Kaulfers, MD; Indu Gupta, MD; Regina Macatangay, MD

Primary Topic: Faculty and Resident Development
Primary Topic: Faculty and Resident Development
Secondary Topic: Pediatric Clerkship
Target Audience: Early Career |Mid Career
Keywords: precepting model, bedside teaching, case-based learning

Overview:

Case-based learning remains foundational to teaching learners how to practice clinical medicine. In the current medical landscape, with an increased emphasis on clinical efficiency and productivity, there is a risk that effective teaching can be compromised. Traditional precepting models focus on preceptors gathering and verifying information with little time dedicated to discussion or feedback. The One-Minute Preceptor (OMP) model was intentionally designed to prioritize the learners' needs with clear directives to assess their knowledge and clinical reasoning while providing specific feedback. While studies have shown improved targeted teaching and quality of feedback given with the OMP model, they have not shown convincing improvements in teaching effectiveness or self-directed learning. Dr. Greenberg and his colleagues created the Eight-Step Preceptor (ESP) model with the addition of micro-skills on establishing a safe-learning environment, assessing the learner's prior clinical experiences, and asking the learner to identify their own learning goals. This workshop will educate faculty on the ESP model and on how to train others to use it. Participants will leave with the skills and toolkit to teach and promote the use of this precepting model in their home institutions.

Objectives:

1. Analyze different precepting models and compare their effectiveness in addressing the learner's needs
2. Describe the components of the 8-step precepting model and its unique aspects
3. Demonstrate the 8-step precepting model through role play and use of a facilitated observer

4. Develop strategies to promote the 8-step precepting model to colleagues at their own academic institution

Methods:

This workshop will use a mixture of brief didactic sessions and small and large group discussions to cover the stated objectives. The session will start with pre-recorded videos that attendees critically evaluate and discuss in small groups. This will be followed by a brief didactic session on the specific components of the ESP model. Attendees will subsequently divide into groups of 3 to actively practice using the ESP model via role-play as a preceptor, trainee, and facilitated observer. At the end of the workshop, attendees will receive workshop resources and discuss strategies in a large group debrief on how to introduce this precepting model to colleagues at their home institution.

11: Roots to branches: Cultivating a growth mindset in our learners

Karen Forbes, MD, MEd, FRCPC; Preetha Krishnamoorthy, MCDM, FRCPC

Primary Topic: Faculty and Resident Development

Secondary Topic: Feedback

Target Audience: Early Career |Mid Career |Late Career

Keywords: growth mindset, competency based education, feedback, coaching

Overview:

Medical learners train in a culture where there is discord between personal growth and assessment; often, learners focus on performance-based assessment expectations and perfectionism, resulting in fear of failure or exposure of weaknesses at the expense of personal growth. Even with competency based education, tension may exist as learners strive to progress in performance of entrustable professional activities. Growth mindset, on the other hand, helps learners view vulnerabilities as opportunities for improvement and focus on developing skills for reflection and self-assessment. The benefits of a growth mindset include positive effects on resilience, commitment to lifelong learning, and persistence in pursuance of mastery. This workshop will provide clinical educators a deeper understanding of, and threats to, growth mindset, and equip them to implement strategies such as learner-centric coaching to foster growth mindset in their learners.

Objectives:

By the end of this workshop, participants will be able to:

1. Compare and contrast the characteristics of fixed mindset and growth mindset in the context of medical learners
2. Explain the role of the hidden curriculum on mindset
3. Describe the concept of the "false growth mindset" and threats to growth mindset
4. Identify ways to implement growth mindset principles to your educational context

Methods:

This highly interactive workshop will allow participants to explore the concept of the growth mindset and its application to medical education through a series of activities, including discussion around vignettes, video with reflection, and role plays, using both smaller and large groups. We will begin with an engaging ice-breaker activity related to mindset that will allow participants to gain comfort with colleagues as we further explore the topic of growth mindset. After a short plenary session, participants will divide into small groups to consider case vignettes that highlight the impact of the hidden curriculum on mindset. Worksheets with probing questions will allow participants to reflect on the cases in pairs, then returning to the large group to discuss their ideas. Next we will explore the concept of the "false growth mindset" and how that threatens growth mindset. Role play scenarios will be presented, where participants will have a chance to analyze and apply learner-centric coaching. The final activity will be a brainstorm as a large group, where we explore ways to enact a growth mindset as part of an institutional culture. We will wrap up and leave time for feedback and evaluation.

Thursday, April 3
Workshop Session #2 | 1:00 – 2:30 pm

12: Admissions after SCOTUS: Getting URIM Learners to the Checkered Flag While (NOT) Reflecting on the Race

Lynn Batten, MD; Melissa Smith-Phillips, MD, PhD; Latasha Bogues, MD; Megan Rashid, MD; Gayani Silva, MD; Deborah Rana, MD; Franklin Trimm, MD; LouAnn Crosby; Ayanna Muhammad

Primary Topic: Diversity, Equity & Inclusion

Secondary Topic: Supports Annual Meeting Theme

Target Audience: Early Career |Mid Career |Late Career

Keywords: Pathway programs, admissions, diversity/equity

Overview:

A diverse healthcare workforce is essential to improving health equity and reducing health disparities.(1) Only 5% of US physicians are Black or African American despite 12% of the US population being Black or African American, and only 7% of US physicians are Hispanic despite Hispanics comprising 18% of the US population.(2) Diversity in medicine starts with recruiting a diverse medical school class. Pathway (pipeline) programs are a tool that many medical schools utilize to increase their enrollment of underrepresented in medicine (URiM) students. Recent legal

challenges including the 2023 Supreme Court decision to end race-conscious admissions programs as well as numerous state laws targeting DEI initiatives have endangered pathway programs at many medical universities.(3, 4) This workshop will briefly review the many bills being introduced and passed across the US and offer alternative approaches to admissions and pathway programs, allowing schools to continue to promote diversity while complying with a changing legal landscape.

Objectives:

1. Describe the impact of the SCOTUS 2023 ruling on medical school admissions.
2. Compare a sampling of DEI focused bills proposed or passed by US states.
3. Evaluate alternative approaches to achieving diversity in undergraduate medical education.
4. Explore how pathway programs can remain effective at encouraging diversity in medicine while complying with state and federal laws.

Methods:

After brief introductions, we will use Kahoot to quiz the participants on their knowledge of current laws regarding URiM admission policies. We will then review the 2023 SCOTUS decision and a sample of DEI bills that have been passed. Small groups will discuss strategies they're employing at their own institutions and their experiences with these, then report out to the large group for further discussion. After a review of best practices, small groups will discuss ways to implement new strategies at their home institutions and action plans to overcome barriers they foresee.

13: Igniting Passion: Enhancing Interest in Pediatrics Among Medical Students

Jennifer DeCoste, MD; Samrat Das, MD; Sanghamitra Misra, MD, MEd; Erin McMaster, MD; Gal Barak, MD, MEd

Primary Topic: Post-Clerkship

Secondary Topic: Pre-Clerkship

Target Audience: Early Career | Mid Career | Late Career

Keywords: pipeline, mentorship, advising, career choice

Overview:

Interest in pediatric residency training is declining, threatening a future critical shortage of pediatricians and pediatric subspecialists. According to the 2024 National Resident Matching Program data, the percentage of allopathic medical school seniors matching into pediatrics has decreased by 22% since 2015, with 8% of all U.S. pediatric residency positions going unfilled in 2024.[1] Early exposure to pediatrics, high-quality pediatric clinical experiences, and targeted mentorship are modifiable factors that have been shown to influence students' likelihood to pursue pediatrics.[2] In this workshop, participants will explore feasible, effective strategies to implement at their home institutions to foster medical student engagement and interest in pediatric careers.

Objectives:

By the end of this workshop, participants will be able to:

1. Describe factors that influence medical students' specialty selection for residency training.
2. Identify successful strategies to increase interest in pediatrics among medical students.
3. Develop actionable plans to increase medical student engagement in pediatrics at their institutions.

Methods:

Interactive polling to elicit group knowledge and experience on the topic, brief didactic reviewing factors identified in the literature, and a small group activity to focus on modifiable and impactful factors.

Small group discussion for idea generation and sharing of experiences.

Leaders from three institutions each present their longitudinal programs for medical student engagement in pediatrics, followed by a large group discussion to consider broader applicability of these and other strategies.

Individual guided worksheets, followed by small group work for feedback and refinement.

Large group discussion to encourage sharing of insights, commitments, and opportunities for collaboration.

14: Full Speed Ahead: Coaching Post-Clerkship Students through Reflective Practice

Lori Singleton, MD; Jake Deines, MD; Joan Connell, MD; Amy Gonzalez, MD; Patricia McBurney, MD,MS; Rae Taylor-Childress, MD; Lindsay Koressel, MD, MEd

Primary Topic: Post-Clerkship

Secondary Topic: Feedback

Target Audience: Early Career | Mid Career | Late Career

Keywords: coaching, reflective practice, growth mindset

Overview:

Many faculty members take on the role of coaching students, but often do so without a structured framework or resources to assist. This can limit the effectiveness of their coaching and impact student development. The post-clerkship phase presents a valuable opportunity for coaching and encouraging growth mindset in students as they prepare to transition to residency. Students are often required to complete Individualized Learning Plans (ILPs) at different times in medical school, but these could have additional benefits from coaching (or a coach approach) to help identify learning gaps and opportunities for improvement. This workshop will provide faculty with coaching frameworks as well as tools that can be used to drive feedback conversations and continuous student improvement during the post-clerkship phase.

Objectives:

1. Leverage innovative tools to enhance individualized learning plans (ILP's) that address students' specific knowledge gaps and clinical skills development needs
2. Cultivate a growth mindset in students by facilitating reflective practices that promote continuous self-improvement
3. Understand how a structured coaching framework can effectively support medical students' professional growth and development
4. Develop a strategy and timeline for implementing coaching frameworks and reflection at your home institution

Methods:

Utilizing small group activities and large group discussion, participants will learn strategies for using reflection and coaching frameworks to promote growth mindset in post-clerkship students. Facilitators will discuss approaches for reflective writing and explore the use of Aquifer Calibrate for individualized learning plans, allowing participants to practice reflective writing and using Aquifer Calibrate results to coach a student. Workshop facilitators will discuss coaching vs traditional advising, key coaching principles, and present different coaching frameworks. Participants will practice through role playing scenarios, then share as a larger group opportunities and challenges for implementation.

15: Promoting Discussions in Diversity through Narrative Medicine

Meghan Treitz, MD; Peyton Boyd; Lavjay Butani, MD; Wesley Gallegos, PA-C; TJ Jirasevijinda, MD; Margie Rodgers, MA; Jennifer Soep, MD; Amy Grover, MD

Primary Topic: Diversity, Equity & Inclusion
Secondary Topic: Pediatric Clerkship
Target Audience: Early Career |Mid Career |Late Career
Keywords: Narrative Medicine, Diversity, Reflection

Overview:

Narrative medicine is a practice that combines the art of storytelling with clinical care. By allowing healthcare professionals to better understand patients' perspectives and values, narrative medicine provides a unique model for approaching discussions around diversity topics in medicine. While many medical educators are familiar with reflective practice and/or narrative medicine there have been requests to focus on more diverse literature and to provide instruction on using these works as a basis for discussion of DEI concepts. Literature can serve as a window to others' experiences or a mirror of our own experience. As such, drawing from diverse writers and stories is important. Reading literature to gain perspective into other points of view can help physicians and other healthcare professionals recognize our patients' varied identities and help mitigate biases. Facilitators for this workshop include pediatric providers, medical educators, administrators, and students with interest and experience in narrative medicine, reflective practices, and DEI work.

Objectives:

1. Describe Narrative Medicine as a teaching strategy
2. List considerations for structuring a Narrative Medicine session
3. Create a writing prompt from a literary selection to encourage reflection on a DEI issue
4. Develop a Narrative Medicine session using a DEI lens

Methods:

This workshop will begin with a review of narrative medicine as a pedagogical strategy. To practice narrative medicine, participants will then read a brief selection and discuss in small groups. Next, participants will write a short reflective piece using a provided prompt from the reading with a focus on diversity with sharing in small groups.

Next, we will describe considerations for structuring a narrative medicine session to use at their institution. After narrowing to the intended audience (learners, faculty, coordinators, staff, interprofessional teams, or any combination), participants will plan a narrative medicine session to promote discussion of DEI issues. Participants will consider a variety of provided readings covering identity, belonging, racism/anti-racism, gender, sexual orientation, disability, socioeconomic, and others, then choose one around which to structure their narrative medicine session plan. Facilitators will help participants identify an appropriate prompt within their chosen piece to frame the session around a particular area or issue within DEI. Participants will develop an outline for a session using a structure described in the workshop. An annotated bibliography with fiction, poetry, and nonfiction will be provided to support planning additional sessions.

16: Climb Every Mountain: Navigating the Academic Career Path for Medical Educators

Alanna Higgins Joyce, MD, MPH, MS; Robyn Bockrath, MD; Abena Knight, MD; Meg Keeley, MD; Joseph Gigante, MD; Joseph Jackson, MD; Jennifer Trainor, MD

Primary Topic: Faculty and Resident Development
Secondary Topic: Diversity, Equity & Inclusion
Target Audience: Early Career |Mid Career
Keywords: promotion, medical education, mentoring, strategy, career

Overview:

Talented medical educators often follow a career trajectory toward leadership positions within academic medicine. While this progression is sometimes purposeful, many medical educators find themselves presented with unexpected opportunities without prior reflection on the impact these career choices may have on their ultimate career goals. Professional development planning is an important skill to successfully navigate the pathway towards productive careers in academic medicine.

Objectives:

Upon completion of this workshop, participants will be able to:

1. Recognize the diverse career opportunities available to medical educators and reflect on personal career goals and skills.
2. Identify tools, purposeful skills and develop an outline a plan to successfully navigate a career in medical education
3. Discuss ways to establish effective mentorship for academic career progression and promotion
4. Become aware of your own career goals to best consider "career fit," recommending/sponsoring others, and when to say "No" or "Stop"

Methods:

A diverse group of educators representing leaders in medical student education, advising, student affairs, graduate medical education, and healthcare administration will lead this workshop. Facilitators will guide participants in identifying the wide range of career opportunities available within academic medicine and the essential tools to pursue those careers.

Participants will explore their own career goals and skills, and then map these to qualities needed for successful leadership roles within academic medicine. Workshop participants will then work in teams to categorize the common challenges and mistakes to avoid while navigating academic career advancement.

Working in small groups based on mutual academic career interests, and led by a facilitator with expertise within this area, participants will develop an outline for implementing purposeful career development plans. Deeper exploration on mentoring will occur in 1:1 paired discussions, and the workshop will finish with an expert panel discussion reflecting on personal experiences. Participants will leave the workshop with an action plan for maximizing career opportunities using mentorship from within their own institution and from academic leaders nationally.

17: OSCE turned OSTE! : Teaching Residents to Excel as Educators

Natalia Kellam; Neha Kuderu, BA; Elizabeth Goodman, MD; Adam Halpern, DO; George Ye, MD

Primary Topic: Feedback

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career |Mid Career |Late Career

Keywords: Teaching, Feedback, OSTE, Residents-As-Teachers

Overview:

Resident teaching significantly shapes medical student learning, yet assessing the quality of their teaching skills remains a problem for clerkship and residency program directors. Although ACGME requirements mandate a residents-as-teachers (RAT) curricula, half of pediatric residency programs dedicate 10 hours or less to RAT (Fromme et. al, 2011). With the time constraints of residency, there remains a need to create quality educational programming to assess and improve resident teaching skills. Our solution is the Objective Standardized Teaching Experience (OSTE): a structured, simulated encounter in which residents are evaluated on their teaching interactions with standardized medical students. This workshop aims to demonstrate the utility of the OSTE and teach participants how to design and successfully implement OSTEs at their home programs. This workshop is ideal for clerkship directors, residency program directors, and educators interested in assessing and enhancing resident teaching skills.

Objectives:

1. To understand the utility of Objective Standardized Teaching Experiences (OSTE) to assess teaching and feedback skills.
2. To assess the quality of resident clinical teaching skills with a standardized OSTE rubric.
3. To discuss implementation strategies for conducting OSTEs for various learners at your home institution.

Methods:

This workshop will utilize a mix of teaching modalities, including large and small group discussion, role play, guided worksheets, and reflection. Facilitators will begin with icebreakers and an introduction to OSTEs. Participants will then familiarize themselves with OSTE grading rubrics by grading a mock OSTE demonstrated live by the facilitators. Small groups will then develop personalized OSTE implementation strategies with the assistance of facilitators and a guided worksheet. The session will close with a review of key learning objectives and course evaluation. Participants will leave the workshop with knowledge of the utility of OSTEs, access to our example OSTE materials, and a roadmap to implement OSTE programming at their institution.

18: Buckle Up: How to Overcome Obstacles and Detours on the Path to Publication

Lesley Gardiner, MD, PhD; Helen Wang, MD; Veronica Gonzalez, MD; April Buchanan, MD; Melissa Baranay, MD

Primary Topic: Clerkship Curriculum Research

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career |Mid Career |Late Career

Keywords: publication, scholarly work, research, curriculum

Overview:

Scholarly work is a key element to a successful academic career; it can enhance curriculum and assessment and contribute to the greater good when disseminated. However, many find the task of translating a curricular project into a publication challenging. By adjusting one's practice

and framework, the likelihood of a project's potential for publication can be enhanced. This workshop will provide participants with skills and a toolkit to help translate a project into a publication.

In this workshop, participants will explore common challenges and pitfalls that they have encountered to publishing their work and discuss ways to overcome these challenges. Participants will consider example scenarios of a projects in different phases, and through interactive small groups, participants will devise how the projects could best be developed for publication. This will include identifying where the project is situation in a scholarly process, ideal places to publish the project, future directions, and what elements could be reflected on prior to the project to strengthen and extend its reach. With the guidance of facilitators, participants will discuss generated ideas with the larger group for additional reflection and review. Participants will be given the opportunity to discuss their personal projects and strategize in small groups with facilitators about how to move their current projects forward toward publication. Lastly, participants will be given a toolkit and framework with a process that can be initiated with future projects to inform a scholarly approach from the outset.

Objectives:
1. Assess educational theories and their value in educational scholarship.
2. Discuss common pitfalls/ challenges to publishing medical education innovations.
3. Apply a scholarly approach to your own project.
4. Delineate a step-by-step process for translating an idea into a project ready for publication

Methods:
Attendees will engage in a large group icebreaker designed to acknowledge the challenges and pitfalls that participants face to accomplishing scholarly work. This will be followed by a brief didactic centering on the types of scholarship, the general steps for publication of a project, and an ideal framework for project to publication. Individual reflections on different project scenarios will prepare learners for active participation in pair sharing of these scenarios. Large group debriefings and discussion will support dissemination of gained insights. Next participants will engage in small groups with facilitators, which will allow the participants to work through their own project and how to prepare it for publication or strategize for an alternative if publication is unreasonable.

Friday, April 4
Workshop Session #3 | 1:30 – 3:00 pm

19: The Pressure to be Positive: Unraveling Toxic Positivity in Our Lives

Karen Webster; Tiffany Swain, AA; Malissa Edwards; Latasha Bogues, MD; Winnie Yu, MPH

Primary Topic: Wellness

Target Audience: Early Career |Mid Career |Late Career

Keywords: emotional resilience, toxic positivity, emotional validation, authenticity, relationships

Overview:
In a culture that often promotes constant positivity, many people struggle to express genuine emotions, leading to emotional suppression and disconnection. This workshop explores the concept of toxic positivity—the tendency to enforce happiness and dismiss negative feelings—and its impact on mental well-being. Participants will learn how to recognize toxic positivity in themselves and others, differentiate between healthy optimism and harmful positivity, and embrace a more authentic emotional approach. Through interactive activities such as role-playing, self-reflection journaling, and group discussions, attendees will develop empathy and emotional awareness, equipping them to create more supportive and emotionally honest environments in both their personal and professional lives. This session will provide tools and strategies for validating emotions, managing difficult conversations, and fostering a balanced, inclusive culture where all emotions are welcome.

Objectives:
1. Recognize the Concept of Toxic Positivity
2. Understand the Impact of Toxic Positivity on Mental Health
3. Develop Skills to Foster Authentic Emotional Support
4. Build Emotional Resilience Through Acceptance of All Emotions

Methods:
This workshop on toxic positivity begins with a welcoming icebreaker, where participants introduce themselves and share one word that reflects how they're feeling. The session then delves into defining toxic positivity—highlighting the distinction between genuine positivity and its toxic counterpart, with examples from both personal and professional settings.

Participants will engage in small group discussions to identify situations where they've experienced or exhibited toxic positivity, sharing the impact these moments had on themselves or others. The workshop will also explore the negative effects of toxic positivity on mental health, relationships, and workplace culture, emphasizing the importance of emotional validation.

To practice avoiding toxic positivity, participants will engage in role-playing exercises, where they reframe dismissive, overly positive responses into empathetic, validating ones. This is followed by a group reflection on how these language shifts can foster better emotional connections

In the final segment, participants will brainstorm ways to create emotionally authentic environments in their lives, focusing on promoting emotional honesty and space for both positive and negative emotions. The session wraps up with a summary of key takeaways, providing

actionable steps and resources for further learning. A brief feedback session allows participants to share thoughts on the workshop's effectiveness.

Throughout, participants will be encouraged to develop emotional awareness, create healthier conversations, and avoid the pitfalls of toxic positivity.

20: Moving Beyond Yes And...Using Medical Improv to Navigate Difficult Conversations

Drew Galligan, MD; Briana Tierno, DMH; Vinita Kiluk, MD; Amy Weiss, MD, MPH; Jean-Claude Guidi, DO; Stephanie Kukora, MD

Primary Topic: Faculty and Resident Development
Secondary Topic: Diversity, Equity & Inclusion
Target Audience: Early Career |Mid Career |Late Career
Keywords: Medical improv, breaking bad news, difficult conversations, communication skills

Overview:

Medical improv, an innovative educational approach, has gained traction in pediatric medical education, in a variety of contexts, particularly in breaking bad news and navigating difficult conversations. This method leverages improvisational theater techniques to enhance communication skills, empathy, and adaptability among healthcare professionals. The dynamic and unpredictable nature of engaging in improv exercises mirrors real-life medical scenarios, providing a safe and supportive environment for practitioners to develop and refine their interpersonal and communication skills.

In pediatric settings, breaking bad news and managing difficult conversations are critical yet challenging tasks. These interactions require not only clinical knowledge but also a high degree of emotional intelligence and sensitivity. Medical improv addresses these needs by fostering a culture of active listening, presence, and responsiveness. Through role-playing and spontaneous scenarios, participants learn to navigate the complexities of patient and family interactions, improving their ability to convey empathy and support.

To bridge the gaps in training pediatric healthcare professionals on breaking bad news and managing difficult conversations, we have developed a medical improv workshop. This workshop aims to teach participants how to effectively communicate in challenging situations by focusing on recognizing and acknowledging emotions, fostering and expressing empathy, and choosing words thoughtfully when interacting with patients and their families.

Objectives:

1. Examine the communication challenges between providers, patients, and families in pediatric healthcare.
2. Explore how improvisational exercises can equip pediatric medical professionals with skills for effective patient communication, including breaking bad news.
3. Demonstrate effective communication and interpersonal skills through improvisational exercises.
4. Demonstrate key interpersonal communication skills such as empathy, patient engagement, adaptability, and active listening.

Methods:

Our highly engaging and interactive workshop aims to define medical improv and highlight examples of its use in pediatric practice, specifically related to breaking bad news and difficult conversations. Workshop participants will participate in standard and adapted improvisation activities followed by facilitated debriefs and individual/group reflection. We will focus on the lessons learned regarding communication techniques, interpersonal interaction, and how to potentially use medical improv skills in future pediatric encounters.

21: Writing Wrongs: Using AI to Ensure Fairness and Impact in Letters or Recommendation

Seetal Mishra, MD; Lisa Cheng, MD; Sarah Klein, DO; Sanaa Qamar, MD; Elizabeth Henschen, DO

Primary Topic: Innovative Uses of Technology
Secondary Topic: Faculty and Resident Development
Target Audience: Early Career |Mid Career |Late Career
Keywords: Mitigating Bias, Letters of Recommendation, Artificial Intelligence (AI), Equity, Faculty Development

Overview:

In this 90-minute workshop, "Writing Wrongs: Using AI to Ensure Fairness and Impact in Letters or Recommendation," medical student educators will explore how artificial intelligence (AI) can elevate the quality and equity of letters of recommendation. As residencies increase emphasis on holistic review and the interview process evolves, it is increasingly crucial to support our students with letters that set them apart from other applicants.

By equipping attendees with AI-driven skills, they will be able to efficiently enhance their impact and improve skills of letter writing with minimal bias and avoiding common pitfalls. Participants will learn to use AI tools to assess letters for gender bias, address repetitive language, identify and thoughtfully replace passive language, and identify and avoid use of "red flag" phrases. Participants will also as well as consider the ethical implications and limitations of AI. By integrating AI into the letter-writing process, educators can produce more balanced and compelling assessments, ultimately benefiting their students' professional advancement and enriching their own professional satisfaction. Attendees are encouraged to bring examples of their own letters and a computer for hands-on activities and real-time analysis.

Objectives:

1. Describe AI's role and capabilities in letter writing and the ethical considerations involved
2. Apply AI tools to foster equitable letter writing that avoids gender bias, passive language and "red flag" phrases.

3. Practice leveraging AI to strengthen letter quality by creating individualized summative feedback that highlight each students' unique traits rather than repetitive language commonly used in feedback.
4. Identify AI tools and resources for ongoing exploration and application in their own writing practices.

Methods:

Teaching Methods: Interactive Polling, brief didactic, Large group discussion, Pair & Share, reflections, report out.

22: Beyond the beside: Harnessing the expertise of Patient Partners to enhance your educational program.

Marc Zucker, MD; Hosanna Au, MD DipMEd; Julian Midgley, BM BCh, FRCPC, DCH; Lynn Ashdown, MD; Darren Lauscher; Melanie Clement

Primary Topic: Pediatric Clerkship
Secondary Topic: Pre-Clerkship
Target Audience: Early Career |Mid Career |Late Career
Keywords: Patient Partners, medical education, interprofessional education

Overview:

Active involvement of patients, i.e., Patient/Caregiver Partners, in medical education recognizes that patients are experts in their lived experiences. Patient partnerships enhance learner empathy, understanding of illness as experienced by patients, communication with patients and understanding of patient-centered care. Patient partnerships are important in enriching educational programs and fostering interprofessional relationships. There have been calls for the formal inclusion of Patient Partners in all levels of the medical education system, including institutional involvement. This exciting, interactive workshop will allow the participant to learn about patient partnerships while working directly with Patient Partners. Several Patient Partners will join the team presenting this workshop via videoconferencing. This format recognizes and addresses the barriers that Patient Partners experience when attempting to work with educational organizations.

Objectives:

At the end of this workshop, attendees will be able to:

1. Describe the principles of patient partnership
2. Analyze learning materials using best practices in patient partnership
3. Compare and contrast different models of patient partnerships including the benefits and challenges of each model
4. Collaborate with patient partners to create a plan for patient partnership opportunities in their home institution

Methods:

This workshop is designed to be valuable to all education community members including learners, coordinators, faculty, and Patient Partners. Teaching and learning modalities will include small and large group work, reflective activities, panel discussions and group brainstorming to engage the participant. The workshop will start with an introduction to the history and principles of patient partnerships. These principles will then be used in active small and large group work to analyze teaching materials, demonstrating how patient partnerships can lead to better learning materials. Patient Partner facilitators will then lead a session on different models of patient partnerships that can directly enhance medical education programs and improve student learning. With these different models in mind, participants will break off into small groups to create new patient partnership ideas, enhance their own existing educational activities using principles of patient partnerships, address their local barriers to using patient partnerships and identify research opportunities around the use of patient partnerships tailored to their own institutions. The workshop will wrap up with suggested approaches to faculty development that support the integration of Patient Partners into educational programs. Resources will be provided to help with integrating Patient Partners into the participants' home institutions.

23: Your Pit Crew Chief (Clerkship Administrator) is retiring! Succession planning for a vital role!

Donnita Pelser, BA; Gary Beck Dallaghan, PhD

Primary Topic: Administration of the Pediatric Clerkship
Secondary Topic: Pediatric Clerkship
Target Audience: Early Career |Mid Career |Late Career
Keywords: Succession, Planning, Administrator, Director, LCME

Overview:

Over the next five years, many Clerkship Administrators (CA) will retire, causing concern for some clerkship directors and medical educators. Although challenging and complex, succession planning necessitates time and effort (1). Given the CA's vital role managing day-to-day operations of the clerkship and collecting accreditation information, succession planning is even more important than it was 10 years ago. Responsibilities of CAs have increased exponentially due in part to the increased accreditation standards from the Liaison Committee for Medical Education (LCME) (2). For the CA aka "Pit Crew Chief" (PCC) to be filled successfully, there are many tools to utilize and strategies with to select the "winning Pit Crew Chief".

Objectives:

1. Create strategies for successful succession planning, emphasizing teamwork, communication, and problem-solving.
2. Compare and contrast strategies, identifying key factors that impact performance.
3. Reflect on succession planning elements of strategy, leadership, and adaptability.

4. Synthesize workshop experiences and insights, effectively communicating the key takeaways from the workshop.

Methods:

The session begins with an introduction to the core topic, setting the stage much like a driver's meeting before a big race. During this brief didactic session, participants will be introduced to the key principles that will guide them through the workshop, ensuring everyone understands the "rules of the race" and what it takes to succeed.

Participants will be divided into small "race teams," working together to strategize and develop their best plan for succession planning. Teams will think critically and creatively, much like a pit crew and driver coordinating for the best race outcome. Potential obstacles will need to be considered.

Each team will then role play both a "losing" and a "winning" team. This exercise allows participants to explore not only the behaviors, decisions, and attitudes that can lead to failure but also those that drive success. Through this role play, the teams will gain insight into key factors impacting outcomes.

Participants will shift into a reflective space called the "Winner's Circle." They will analyze what made the winning teams successful. Was it teamwork, clear communication, or perhaps a well-constructed strategy? This reflection provides an opportunity to synthesize lessons learned and explore how these insights can be applied to real-world scenarios.

Finally, a "press conference" will be held allowing participants the opportunity to field questions from their peers.

By the end of this racing-themed workshop, participants will gain practical insights into strategic thinking, collaboration, and performance improvement.

24: Life in the Fast Lane: How to Approach Scholarship as an Everyday Activity

Lesley Gardiner, MD, PhD; Veronica Gonzalez, MD; April Buchanan, MD; Helen Wang, MD; Melissa Baranay, MD

Primary Topic: Clerkship Curriculum Research

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career |Mid Career |Late Career

Keywords: scholarly work, scholarship, professional activities

Overview:

Scholarly work is a key element to a successful academic career; it can enhance curriculum and assessment and advance the science of medical education through dissemination. However, many find integrating scholarly work within the daily demands and responsibilities of their professional positions challenging. By adjusting one's paradigm to see scholarship as an everyday activity and integrating steps to promote scholarship in daily activities, one can be successful. This workshop will provide participants with skills and a toolkit to incorporate scholarly work into projects and responsibilities they are already undertaking.

In this workshop, participants will explore the question of "how scholarship can be an everyday activity?" through self-reflection and small group activities. They will troubleshoot some of the challenges that prevent incorporating scholarship into daily work with the assistance of experienced facilitators. Participants will first consider example scenarios of projects in different phases. Through interactive small groups, participants will devise how projects could best be developed to be scholarly work, including identifying the type of scholarly work, best way to disseminate it, future directions, and what elements could be reflected on prior to the project to strengthen and extend its reach. Participants will be given the opportunity to discuss their personal projects and strategize in small groups with facilitators about how to move their current projects forward as scholarly products. Lastly, participants will be given a framework with a step-by-step process that can be initiated with future projects to inform a scholarly approach from the outset.

Objectives:

1. Identify how scholarship can be an everyday activity.
2. Discuss common pitfalls/ challenges to incorporating scholarship into daily professional activities.
3. Apply a scholarly approach to your own project.
4. Analyze a five-step method that can be utilized in the future to ensure a scholarly approach is taken from the initial design of a project.

Methods:

First, attendees will participate in a large group icebreaker designed to acknowledge the daily work and roles of participants and challenges that participants face to accomplishing scholarly work. A brief didactic centering on the types of scholarship and how scholarship can be an everyday activity, highlighting approachable examples will be given. Individual reflections on different project scenarios will prepare learners for active participation in pair sharing of these scenarios. Large group debriefings and discussion will support dissemination of gained insights. Participants will engage in small groups with facilitators, allowing the participants to consider their own project and how to transform it into scholarship.

25: Incorporating Debriefing into Everyday Clinical Teaching

Maya Neeley, MD; Joe Gigante, MD; Erica Chung, MD; Diana Metropulos, MD; Walter Dehority, MD

Primary Topic: Faculty and Resident Development

Secondary Topic: Feedback

Target Audience: Early Career |Mid Career |Late Career

Keywords: clinical debriefing, feedback

Overview:

Debriefing is often viewed as a tool for high-risk endeavors (e.g. military proceedings and following critical incidents in medicine), and for group settings. However, it may also be used in daily interactions pediatricians have with medical students at an individual level, including ambulatory and non-emergent inpatient settings (e.g. to improve communication with parents). Debriefing is a powerful teaching tool, and may be done in a timely and efficient fashion with assistance of practice and specific methods. Our team has published on the use of this approach in non-emergent situations and at the individual level (PMID 37551525).

This proposed workshop will provide a framework for providing rapid and effective feedback in a variety of clinical settings and scenarios. Participants will have an opportunity to practice these skills in a small group, hands-on format.

Objectives:

1. Identify 4 components of effective debriefing in clinical settings (selection of an appropriate clinical encounter, creation of a safe learning environment, reflective learning and feedback).
2. Identify one method to assist with each component of effective debriefing.
3. Model effective debriefing in a small group format with simulated clinical encounters.

Methods:

There will be a brief didactic for overview purposes but the primary teaching method will be small-group, case-based facilitated learning; where each person brings in their own unique expertise to contribute to group learning as a whole.

Saturday, April 5
Workshop Session #4 | 8:00 – 9:30 am

26: This Little PIGgy Went Into Pediatrics: Maximizing the Effectiveness of Your Pediatric Interest Group (PIG)

Jeremy Middleton, MD; Lolita (Maria) Alkureishi, MD; Lynn Batten, MD; Lavjay Butani, MD; Katherine Donowitz, MD; Jennifer Duma, BA; Leslie Farrell, MD; Jonathan Gold, MD; Nicole Johnson, MD; Courtney Judd, MD, MPH; Indu Gupta, MD; Lawrence Ma, MD; Regina Macatangay, MD

Primary Topic: Pre-clerkship

Secondary Topic: Post-Clerkship

Target Audience: Early Career |Mid Career |Late Career

Keywords: Specialty Interest Group, Workforce, Pediatric Interest Group

Overview:

The pediatric medical workforce faces ongoing challenges, including a shortage of physicians and fewer medical students choosing pediatric specialties. Most medical schools provide few opportunities for exposure to pediatrics in the preclinical years so Pediatric Interest Groups (PIGs) play a vital role in introducing students early on to the field of pediatrics and fostering enthusiasm for this career path. Optimizing PIGs provides an opportunity to shape students' perceptions of pediatrics early in their education, enhance exposure, and cultivate strong leadership skills among future pediatricians. This workshop aims to support pediatric educators in revitalizing PIGs by focusing on strategies for optimal exposure, enhancing visibility and involvement, and advocating effectively within medical schools. By utilizing reflective exercises, small and large group discussions, didactic content, and interactive methods like think/pair/share, participants will have the opportunity to discuss and share innovative approaches and ideas, develop practical skills to energize PIGs, and ultimately leave prepared to utilize these strategies to help strengthen the pediatric workforce pipeline. Additionally, ideas from this workshop will provide content for an upcoming PIG needs assessment.

Objectives:

1. Define what makes for a successful Pediatric Interest Group
2. Describe current barriers and challenges to implementing a successful PIG
3. Design an ideal Pediatric Interest Group structure to:
    a. optimize exposure of learners to pediatric mentors and pediatrics as a career path
    b. increase the profile to attract early student involvement in the interest group
    c. promote student leadership and engagement with near peer teaching/mentoring, community advocacy, and curricular involvement
    d. improve recruitment into pediatric residency
4. Construct a compelling proposal to school and departmental leadership advocating for support for Pediatric Interest Group administration and activities

Methods:

We will be using a combination of large group discussion, reflection, think/pair/share, didactics and guided small group activities to accomplish our learning objectives.

27: Building Trust: Foundational skills to improve your leadership and life!

Sherilyn Smith, MD; Michael Barone, MD, MPH; Joseph Gigante, MD; Susan Bannister, MD, MEd

Primary Topic: Faculty and Resident Development
Secondary Topic: Supports Annual Meeting Theme
Target Audience: Early Career |Mid Career |Late Career
Keywords: leadership, trust, team building,

Overview:

Trust is defined by organizational psychologists as the willingness to be vulnerable to the actions of others because believe they have good intentions and will be behave well toward us. Each leader has strengths that they can leverage when building trust with others as well as areas where they can develop their trust skills. Building teams based on trust enhances engagement, productivity and satisfaction with one's profession and in the case of medical education has the potential to optimize learning outcomes.

Objectives:

1. Describe the elements of frameworks for building trust at work
2. Identify an area for personal growth within a trust frameworks
3. Create actionable approaches to foster trust as a team leader
4. Commit to 1-2 steps to foster personal growth in building trust with teams

Methods:

Participants in this workshop will be introduced to two frameworks to build trust in teams: 1) Care, Reliability, Sincerity & Competence and 2) the Trust Triangle- Logic, Empathy and Authenticity through a didactic overview and stories shared by workshop facilitators. Participants will the complete an individual self-assessment to identify an area for personal growth in building trust within teams and self-sort into small groups for further work. Small group work will include writing, reflection and facilitated sharing to create and commit to concreate steps to grow their capacity to build trust within teams at their own institutions.

28: AI on the Fast Track: Driving Assessment Innovation in Pediatrics

Jennifer Thompson, MD; Tosin Adeyanju, MD; Lisa Cheng, MD; Jill Forbess, MD; Veronica Gonzalez, MD; Kanika Gupta, MD; Chas Hannum, MD; Chrisia Noulas, MD; Stacey Rose, MD, MSEd; Theresa Scott, DO; Janet Schairer, MD

Primary Topic: Assessment
Secondary Topic: Innovative Uses of Technology
Target Audience: Early Career |Mid Career |Late Career
Keywords: Assessment, Artificial intelligence, Narratives

Overview:

Assessment is vital to medical education because it helps gauge students' knowledge and skills to ensure they are meeting the desired learning objectives and competencies necessary to deliver safe and effective patient care. A high-quality narrative assessment should be equitable, unbiased, and reflective of students' overall performance. Generative artificial intelligence (AI) can be used, in conjunction with other assessment methods, to improve quality and objectivity, and minimize bias for both individual faculty and overall narrative assessments. However, many educators are unfamiliar with or uncomfortable using this emerging tool. This workshop will allow participants to engage with generative AI to create and strengthen narrative assessments, while also identifying and mitigating potential risks associated with its use.

Objectives:

At the end of the workshop, participants will be able to:

1. Explain ways to use generative artificial intelligence (AI) in pediatric medical education narrative assessments.
2. Assess benefits and risks of using generative AI, as related to bias, student confidentiality and ethical considerations.
3. Differentiate high-quality from low-quality narrative comments.
4. Create high-quality summative narrative assessments using AI.

Methods:

We will begin with a broad overview of the utilization of artificial intelligence in medical education, and then specifically focus on generative AI use in learner assessment. After a brief refresher on the use of generative AI, sample student comments will be provided to small groups, and participants will be asked to create a summative assessment narrative using generative AI, followed by large-group discussion. The workshop will also discuss positives (time, objectivity) and negatives (risk of bias, ethical considerations) of using AI in assessment. Participants will work in their small groups to modify, strengthen and reduce bias in their existing summatives.

29: Supporting the Neuroatypical Student in the clinical years: from clerkships to career advising

Melissa Brannen, MD; Jamie Fey, MD; Helen Wang, MD; Stacy Ellen, DO; Molly Wyman, MD

Primary Topic: Diversity, Equity & Inclusion
Secondary Topic: Faculty and Resident Development
Target Audience: Early Career |Mid Career |Late Career
Keywords: Inclusion, Neurodiversity, Faculty Development

Overview:

Students with disabilities represent 5.9% of students who matriculated into medical school in 2021. This data is limited by students' self-reporting the disability to their medical school and likely underrepresents the population. Of the disabilities most reported, attention deficit

hyperactivity disorder (ADHD), mental health, and chronic medical conditions were the top three. Data shows that only 1/5 of students with disabilities requested accommodations with the majority having chronic health related conditions. Students with cognitive disabilities and neurodiversity like ADHD were less likely to request. Neurodiversity often includes alternative thinking styles, including ADHD, autism, dyslexia, or dyspraxia. It is estimated that 15-20 percent of the population are neurodiverse with 10%-15% having dyslexia, 5%-8 % with ADHD and 2 percent with autism. As these students are supported better in K-12 education and undergraduate education, it is suspected that more neurodiverse students are entering medicine. The AAMC Graduate Questionnaire was enhanced in 2024 to capture UME institutional and national graduate data on both existence of a disability as well as further delineating its type yet matriculation and progression statistics are still difficult to accurately obtain.

Pediatricians are used to supporting their patients with neurodiversity and learning differences but may feel at a loss in supporting their own students. Leaders on pediatric clerkships have opportunities to create an inclusive environment and train faculty to accomplish the same. In this workshop, through case discussion and review of the literature, we will highlight several inclusive practices for clinical rotations that have been highlighted in the literature, as well as strategies highlighted from employment and labor resources. We will also review the Interactive Process for defining reasonable accommodations in the clinical environment defined by Meeks. Lastly, we will provide some guidance in advising students in career exploration in pediatrics, the interview season and preparation for intern year.

Objectives:

1. Apply 3 changes in their current clinical environment that would create an inclusive learning environment for all students, including those with neurodiversity.
2. Outline an Interactive Process to identify reasonable accommodations for a student with neurodiversity.
3. Describe an approach to career advising students with neurodiversity, residency selection, interview season, the match and preparation for intern year.

Methods:

We will use case based vignettes for small group work with report out, think pair, share activities and interactive didactics with guided analysis of the literature.

30: From Struggle to Strategy: Streamlining Direct Observation in Clinical Teaching

Marguerite Costich, MD; Nicole Meyers, MD; Katie ODonnell, MD; Hana Smith, MD

Primary Topic: Feedback

Secondary Topic: Faculty and Resident Development

Target Audience: Early Career |Mid Career |Late Career

Keywords: Direct observation, Workplace-based assessments, Feedback, Learner Assessment

Overview:

Direct observation and assessment of learners in authentic clinical settings is necessary in competency-based medical education. Frontline clinical educators have greater ability to assess multiple competency domains and provide actionable real-time feedback when regular direct observation is employed. Feedback from direct observation is also more specific, rooted in observed behaviors and actions, rather than inferred. However, clinical educators face significant challenges with direct observation implementation. Some common barriers include patient care demands, limited time, lack of faculty training, learner and faculty discomfort with direct observation, and availability of meaningful direct observation opportunities for learners with varying levels of clinical experience. During this workshop, we will present evidence-based tools and strategies to support direct observation in clinical teaching, including use of workplace-based assessments (WBAs) to supplement feedback in direct observation.

Objectives:

1. Identify the value of direct observation in learner feedback and assessment.
2. Practice using direct observation to give meaningful, actionable feedback on areas of strength and areas for growth
3. Recognize common challenges to successful direct observation
4. Formulate plans of action to create opportunities for direct observation in various clinical settings.

Methods:

The session will first start with an ice-breaker and workshop participants will be able to share experiences with direct observation and use of WBAs. After a brief orientation to the core principles of direct observation, workshop participants will then have an opportunity to provide feedback in a role-play exercise using a WBA. Attendees will then work in small groups to problem-solve and identify approaches to overcoming challenges with direct observation in various clinical environments, from findings ways to integrate direct observation into workflows to creating greater faculty, resident, and learner "buy-in." Each small group will focus on one challenging scenario and strategize approaches to implementing direct observation and use of WBAs to deliver meaningful and efficient feedback. This will be followed by a large group report back session during which participants will be able to reflect on lessons learned and pose questions on challenges faced in implementing direct observation in own their educational settings. Attendees will leave this workshop with a plan of action for creating opportunities for direct observation in their own clinical teaching practice as well as access to resources that can be shared with faculty and residents to support a culture of direct observation at their institutions.

31: Finding Joy in Pediatric Medical Education

Margie Rodgers, MA; Meghan Treitz, MD; Jennifer Soep, MD; Amy Grover, MD; Jean Petershack, MD; Deborah Rana, MD; Emma Greenberg, BA

Primary Topic: Wellness
Secondary Topic: Pediatric Clerkship
Target Audience: Early Career |Mid Career |Late Career
Keywords: Finding joy in work

Overview:

The world of medical education can be full of frustrations, from the constant need to find preceptors and an abundance of meetings filling time when tasks need to be completed, to burnout and systems issues, making it feel impossible to find the joy in work. This observation has been reflected in the medical literature as well.   In this workshop, we will consider the concept of joy: through exploration of teachings from spiritual leaders, authors, scientists and physicians; investigation of life factors which can promote or block joy; and a compilation of strategies to maximize joy in our personal and professional lives. We will discuss how joy relates to diversity, equity and inclusion, and how to incorporate joy into teaching medical students and supporting our medical education teams. At the end of the workshop, participants will leave with a collection of joy-making strategies, an initial plan for enhancing joy in their lives, and an extensive annotated list of resources.

Objectives:

By the end of the workshop participants will be able to:

1. Define and describe joy
2. Identify personal and professional sources of joy, and strategies to recognize and cultivate it despite obstacles
3. Create a plan to see and create joy in both personal and professional spheres
4. Propose ideas to integrate joy practices with learners and medical education teams

Methods:

After a brief introduction, participants will work individually and within pairs/groups to define joy, happiness, contentment and gratitude. This will be followed by an interactive presentation, informed by input from a diverse group of sources, describing key features of a joy-filled perspective as well as obstacles to cultivating it. Participants will then engage in an exercise to personalize these concepts for themselves. We will then introduce joy practices such as meditation, mindfulness, movement, journaling, finding beauty, laughter, and others, that participants can implement in their personal and professional lives. In light of their own unique barriers to joy identified earlier in the session, participants will individually select a personal joy practice to incorporate in the future. Subsequently, through small group reflection followed by large group debrief, participants will brainstorm how to incorporate joy practices into their roles as medical educators. Participants will leave with a resource-enriched plan to cultivate joy in their personal and professional lives and on their campuses. To end the workshop, we will lead the group in a mindfulness meditation to increase gratitude, and awareness of joy

32: Revving Up for Career Advising Success: Steering Towards a Clearer Understanding of ERAS Elements and Unique Student Scenarios

Erin Pete Devon, MD; Elisabeth Conser, MD; Maya Neeley, MD; Rachel Thompson, MD; Jennifer Soep, MD; Gwenevere McIntosh, MD, MPH; Abena Knight, MD; Jessica James, MD; Kanika Gupta, MD; Joanna Lewis, MD

Primary Topic: Faculty and Resident Development
Target Audience: Early Career |Mid Career |Late Career
Keywords: Career advising, Professional development

Overview:

Many elements of the Electronic Residency Application Service (ERAS) have changed over the past few years, including program signals, geographic preferences, and meaningful experiences. These elements have the potential to serve both applicants and programs by: 1) providing applicants a way to indicate their true preferences and 2) highlighting these preferences to program directors during their holistic review. In this workshop, participants will: 1) explore how career advisors counsel applicants on the use of these novel elements and how program directors utilize them and identify areas of misalignment and conflict and 2) create, through shared dialogue and collective wisdom across diverse student experiences, a shared model of how to employ these tools to support both student and residency program success. We will explore common situations and unique scenarios, such as couples matching and MSTP applicants. Our workshop will be facilitated by both career advisors and program directors to enhance understanding of the multiple perspectives involved in the application process and bring a balanced view.

Objectives:

1. Review and analyze the most recent AAMC ERAS data available on application elements.
2. Identify and compare discrepancies between advisor recommendations on these elements and the use by program directors.
3. Create a shared understanding of how to optimize the use of these elements to benefit students and programs.

Methods:

Brief didactics, Large group discussion, Panel discussion, Small group discussion