

Requests for Resident and Fellow Education at Barnes Jewish West County

Barnes Jewish Hospital (BJH) is committed to preserving the clinical and operational strengths of Barnes Jewish West County (BJWC) including ease of patient access, efficient use of resources, patient-centered environment, direct attending physician involvement in and timeliness of patient care. The educational mission (particularly in graduate medical education) of BJH will continue to remain centered on the Kingshighway campus. In light of this commitment to BJWC, as well as the commitment of BJH and WUSM to comply with all regulatory and accreditation standards and to provide the highest quality resident education, any and all proposed resident education at BJWC must be evaluated and approved.

In addition to the potential impact of resident education on service at BJWC, the sponsoring Department must evaluate:

- CMS reimbursement for direct and indirect medical education from resident-to-bed ratio changes;
- GME committee consideration of impact on existing BJH resident education and adequacy of BJWC educational resources;
- Impact on resident education of medical students;
- Logistic considerations related to travel between the two campuses;
- Cost incurred at BJWC related in support of residents on that campus;
- Patient expectations at BJWC that resident education will not routinely be part of their care
- Adverse impact on patient care at BJH from the loss of service-related resident activities, e.g. night call

For these reasons, during the initial 12 months of the transition BJH discourages addition of residents, or migration from BJH, to the BJWC campus. Consideration for such changes will require

1. Demonstration that clinical experiences *required* by the residency program are uniquely or preferentially available at BJWC;
2. Approval by the GME Committee for educational appropriateness
3. Approval by BJH President and WUSM Dean
4. Approval by CMO and CFO for financial appropriateness based on impact on DGME and IGME reimbursement
5. Assessment of potential impact by the department on effectiveness and efficiency of care at BJWC and BJH
6. Acknowledgement that no additional resources (i.e. mid-level practitioners) will be automatically provided to accommodate shift of resident service component from BJH to BJWC

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