

References

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NEW IDEAS

A GME Wearable Breast Pump Program: An Innovative Method to Meet ACGME Requirements and Federal Law

Setting and Problem

Lactation facilities can be expensive to build and maintain, and space is often limited in clinical learning environments. Even if the spaces are available and unoccupied, they may not be conveniently located to resident work areas.

To meet the Accreditation Council for Graduate Medical Education (ACGME) requirement I.D.2.c) and the Fair Labor Standards Act (FLSA), Kansas University Graduate Medical Education (KUGME) interviewed female resident physicians and practicing physicians in December 2019 who were either actively or previously expressing milk while providing patient care. Barriers around expressing milk were identified to be time, physical space, clinical work productivity, and milk production. Although both the University of Kansas and the University of Kansas Health System maintain spaces to accommodate lactating individuals, these may be difficult to schedule, may not be close to resident work areas, may require interruption of clinical activities to utilize, and may not provide secure storage for the expressed milk.

Intervention

During the interviews it was suggested that a wearable breast pump could eliminate many of the barriers identified above. A wearable breast pump is discreet and fits into a standard nursing bra, providing wireless and hands-free expressing. Added benefits are that they are lightweight, portable, easy to clean and assemble, quiet, and managed through a smartphone app.

KUGME reviewed our FMLA data and found that on average, 8 female residents experience childbirth per year.

Because wearable breast pumps are not currently covered by health insurance and could be cost prohibitive for residents who live on a tight budget (approximately \$500 per unit), KUGME purchased 3 Elvie wearable pumps in December 2019 to provide female residents a convenient option to express milk while fulfilling educational and clinical training expectations. KUGME also purchased 5 mini fridges to loan to residents so they can securely store their milk close to their clinical space if they desire (examples shown in FIGURE).

Both were provided on loan for up to 1 year. KUGME asks residents to purchase their own accessories (supply bags, bottles, seals, shields, valves, portable cold transport containers, and support bras).

We updated our FMLA checklist and policy and procedure manual, and we notify residents semiannually of the benefit.

Outcomes to Date

Demand has greatly exceeded expectation and KUGME has now purchased a total of 9 wearable breast pumps and 7 mini fridges. Additional requests are evaluated as they arise.

Early resident feedback is uniformly positive, and it appears that most residents prefer the wearable breast pumps option over a fixed space lactation facility because wearable breast pumps:

- Increase the length of time a mother can more easily provide breast milk to their infant
- Increase milk supply
- Increase satisfaction, reducing stress
- Require less setup and expression time than standalone breast pump models, increasing the number of opportunities for expression sessions
- Allow mothers to express milk inconspicuously while working, commuting, or moving around their clinical sites, which can create more efficient time management and eventuate leaving

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FIGURE
Examples of Wearable Breast Pumps and Fridge^a

^a 2019–2020 Kansas University Medical Center Neurology Residents Yana Nesterenko, MD, and Shweta Goswami, MD, are shown in photo.

the clinical setting earlier, thereby creating more time spent with their infant

KUGME believes purchasing wearable breast pumps for resident use is an innovative, cost-effective initiative that meets both ACGME requirements and the FLSA. Wearable breast pumps and personal mini fridges provide maximum choice and flexibility, increased autonomy, and more control in their roles as new mothers and hardworking resident physicians in an increasingly busy clinical environment. This innovation appears to improve work-life balance during a challenging time.

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NEW IDEAS

Using Speed Mentoring to Expand Scholarship Perspectives and Opportunities for Fellows

Setting and Problem

Definitions of scholarship in academia have expanded beyond the historical areas of basic science and clinical research. These realms do not capture the full scope of scholarship, especially in growth fields in medicine. Faculty at our institution are involved in varied scholarly projects; however, fellows are often only encouraged to explore scholarship in their subspecialty division. Meanwhile, many of our incoming fellows express interest in pursuing broad avenues of scholarship, such as improvement science, medical education, and global health. To expose our fellows to a more comprehensive view of scholarship and the full scope of options available at our institution, we developed a toolkit and implemented a speed mentoring event to break down some of the institutional silos for our pediatrics fellows.

Intervention

Using Kern's 6 steps of curriculum development, we created an online "Scholarship Toolkit," including a timeline, mentoring guide, and information on 9 scholarship areas (advocacy and community engagement, basic science, biotechnology and pharmaceutical industry research, clinical research, global health, health services research, health technology innovations, improvement science, and medical education).¹ Each scholarship section includes information on primary journals, online resources, academic conferences, courses and other continuing education, funding opportunities, examples of fellow projects, and faculty researchers at our institution. The Scholarship Toolkit was shared with all first-year fellows in advance of the "Scholarship Round Robin."

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