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## "There's a difference in practice when you have to make the decision": Autonomy in pediatric emergency medicine fellowship

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# "There's a difference in practice when you have to make the decision": Autonomy in pediatric emergency medicine

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### **BACKGROUND**

- The ACGME allows individual training programs to define appropriate supervision and autonomy commensurate with the trainees' knowledge, clinical competence, and patient complexity and acuity.
- In pediatric emergency medicine (PEM), supervision is not standardized and subject to supervisor discretion, creating variability in trainee autonomy.

### **METHODS**

- Qualitative study with semistructured interviews of PEM fellows and faculty from a large, single-center pediatric emergency medicine fellowship program.
- A trained interviewer conducted the interviews over an electronic interview platform.
- Interview transcriptions were analyzed using a hybrid thematic analysis approach to identify themes.

### Figure 1: Selected Quotes from transcripts

"If you're always helping me, or if you're the helicopter parent, how do I know if I actually can be competent in this profession?" - Fellow

"I don't think it's easy to learn autonomy if you are telling an attending about every single patient you see ... to generate a bill." - Attending

"I wish there was more graduation of autonomy at a faster rate. And I think not having that autonomy makes you feel as if you're not trusted to make the decision-making, and that makes you second-guess your decision-making." - Fellow

"I worry, actually, I worry a lot...[fellows and residents are] never alone, and you really don't know how to force those decisions until you have to, until you are by yourself and there is no safety net." - Attending

# Attending personality and management style Fellow experience level, competence and trustworthiness Hospital billing Figure 2: Main factors influencing PEM fellow autonomy Emergency department hierarchy/balancing different roles Patient complexity/acuity Program policy

### RESULTS

- 16 faculty and 13 fellows completed interviews.
- PEM faculty and fellows highly value autonomous clinical decision-making.
- Departmental policy and economic factors influence the nature of supervision for PEM fellows.
- Trainees desire formalized graduated autonomy allowing them to acquire competence for independent clinical practice.

### **CONCLUSIONS**

- Both fellows and faculty acknowledge the importance of autonomy, but differences exist in how each group views supervision as it facilitates training.
- Opportunities for fellow autonomy that include complete ownership of patients (without direct attending oversight) are perceived as necessary to learn independent decision-making.









