

***AIAMC National Initiative X***

***Optimizing the Clinical Learning Environment***

***for the*** ***Future***

**CALL FOR APPLICATIONS**

**NATIONAL INITIATIVE X**

**ANNOUNCEMENT TO AIAMC-MEMBERS AND THE CLINICAL LEARNING ENVIRONMENT COMMUNITY**

**APRIL 14, 2025**

The Alliance of Independent Academic Medical Centers (AIAMC) is now accepting [applications](https://d.docs.live.net/c168d17c1dd2653d/AIAMC/NI%20X/Call%20For%20Applications/NI%20X%20Application%20Form.docx) for participation in our *National Initiative (NI) X Optimizing the Clinical Learning Environment for the Future.* Completed [applications](https://d.docs.live.net/c168d17c1dd2653d/AIAMC/NI%20X/Call%20For%20Applications/NI%20X%20Application%20Form.docx) are due no later than **MONDAY, JUNE 2, 2025** and must be emailed in Word format. All applicants will be notified of selection in late June, followed by pre-work this summer and our first meeting in October. Be sure to read the [*Call for Applications*](https://d.docs.live.net/c168d17c1dd2653d/AIAMC/NI%20X/Call%20For%20Applications/Call%20for%20Applications%20NI%20X.docx) in its entirety prior to completing the application form.

To learn more about participation in National Initiative X, plan to attend a one-hour informational webinar on Wednesday, May 7th at 1:00 pm EDT. The webinar is free, but pre-registration is required. To register visit , [﻿​﻿﻿​﻿﻿﻿​NI X Informational Webinar | AIAMC](https://aiamc.org/event/68)

***NI X Optimizing the Clinical Learning Environment for the Future*** will be an eighteen-month initiative that features bi-monthly Zoom cohorts and four in-person meetings\*. Cohort groups will be structured by themes based on focus areas identified in the applications, with best practices from all cohorts shared at the in-person meetings. Learning session topics will include identifying barriers to thriving in today’s clinical learning environment; strategies to counteract those barriers; and the importance of creating and fostering environments that serve all our learners, leaders and patients. (\*Please note that Meeting Three will be virtual.)

The AIAMC’s eighteen years of experience with nine successful National Initiatives provide a rich and unique resource to the clinical learning environment community. We have engaged numerous key leaders, including the Accreditation Council for Graduate Medical Education (ACGME), American Hospital Association (AHA), American Medical Association (AMA), the Assembly of Osteopathic Graduate Medical Educators (AOGME) and many others, and look forward to their continued input and support. The AIAMC is also an inaugural member of the [National Collaborative for Improving the Clinical Learning Environment](file:///C%3A%5CUsers%5Cmschwab%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CINetCache%5CContent.Outlook%5C22N9ZQMQ%5Cncicle.org) (NCICLE), which represents more than 40 major health care organizations working to improve the educational experience and patient care outcomes within clinical learning environments.

The *Call for Applications* document may be viewed in its entirety here: [NI X Call for Applications](https://d.docs.live.net/c168d17c1dd2653d/AIAMC/NI%20X/Call%20For%20Applications/Call%20for%20Applications%20NI%20X.docx)

**WHY the Clinical Learning Environment?**

The clinical learning environment is the foundation of graduate medical education, directly shaping the professional development, well-being, and competency of future physicians. The rapidly evolving landscape of modern healthcare, including emerging technologies, workforce shortages, and growing complexity of patient care, demands that physicians are trained in settings that promote adaptability, lifelong learning, and resilience.  Strengthening the clinical learning environment ensures that training is optimized to support high-quality learning while prioritizing patient safety and quality interprofessional collaboration, and physician well-being (ACGME, 2023).  Standardizing best practices across institutions can help to foster equitable learning experiences, strengthen professional identity formation, and ultimately improve patient outcomes.  Evidence indicates that a well-supported clinical learning environment contributes to improved trainee engagement, reduced burnout, and higher retention rates, directly benefiting both learners and the

healthcare system as a whole (Guille and Sen, 2024).  By investing in the clinical learning environment, GME programs can create sustainable learning environment not only to meet the challenges of healthcare but also to lead its transformation.

Accreditation Council for Graduate Medical Education (ACGME). (2023). *Clinical learning environment review (CLER) pathways to excellence, 2.0.* <https://www.acgme.org/newsroom/2019/12/acgme-releases-version-2.0-of-cler-pathways-to-excellence>

Guille, C. and Sen, S. (2024). *Burnout, Depression, and Diminished Well-Being among Physicians*.  New England Journal of Medicine 2024; 391:1519-1527. <https://www.nejm.org/doi/full/10.1056/NEJMra2302878#sec-7>

Additional resources in the literature:

<https://pmc.ncbi.nlm.nih.gov/articles/PMC5700623/> (provides a great introduction on the importance of CLE)
[https://journals.lww.com/academicmedicine/fulltext/2020/05000/ redesigning\_the\_learning\_environment\_to\_promote.12.aspx](https://journals.lww.com/academicmedicine/fulltext/2020/05000/%20redesigning_the_learning_environment_to_promote.12.aspx) (highlights the prevalence of burnout and how it relates to CLE, and gives strategies to optimize CLE)
<https://pubmed.ncbi.nlm.nih.gov/29482210/> (the hidden curriculum - addressing learning spaces to foster the development of resilient lifelong learners)

To summarize, key aspects of choosing *Optimizing the Clinical Learning Environment for the Future* include:

* **Adaptability and continuous growth**: Training environments must evolve to keep pace with technological advancements and the increasing complexity of patient care.
* **Prioritizing patient safety and interprofessional collaboration**: Ensuring that these elements are central to training can enhance the quality of care provided.
* **Physician well-being**: A supportive learning environment can reduce burnout and improve retention rates, benefiting both trainees and the healthcare system.

Standardizing and sharing best practices across institutions can indeed foster equitable learning experiences and improve patient outcomes. **Investing in the clinical learning environment is not just about meeting current challenges but also about leading the transformation of healthcare.**

**BACKGROUND OF THE AIAMC AND OUR NATIONAL INITIATIVES**

Role of the AIAMC

Founded in 1989, the AIAMC is the only national organization addressing the unique needs of independent academic medical centers. Our members share a common commitment to delivering exceptional patient care through education and innovation. For 36 years, the AIAMC has supported members in achieving exceptional health and well-being outcomes for the communities they serve by fostering an environment of learning, networking, and collaboration. More than 70 hospitals and health systems across the United States are members, representing over 700 senior academic leaders.

National Initiatives I through IX

## The AIAMC National Initiative is the only national and multi-institutional collaborative of its kind in which residents lead multidisciplinary teams in quality improvement projects aligned to their institution’s strategic goals. Seventy hospitals and health systems and over 1,500 individuals have participated in the AIAMC National Initiatives since 2007 driving change that has resulted in meaningful and sustainable outcomes improving the quality and safety of patient care.

Projects of participating institutions must align with that institution’s strategic goals, and engagement of the C-Suite and a multidisciplinary team is required. For more information on each National Initiative’s area of focus and academic publications, visit <https://aiamc.org/national-initiative>.

**OBJECTIVES AND OUTCOMES OF NATIONAL INITIATIVE X**

At the end of NI X, each participant will have engaged learners and leaders and transformed their clinical learning environment. Specific goals and outcomes for NI X include:

* Assess and benchmark the current state of your clinical learning environment
* Develop, implement, and measure initiative(s) designed to enhance learner experiences and outcomes within your clinical learning environment
* Engage with senior leadership, including the C-Suite, in reviewing policies and regulatory requirements impacting the clinical learning environment, identifying opportunities for improvement and strategic alignment
* Achieve significant and measurable enhancements to the clinical learning environment, disseminating strategies and results within your organization’s Micro, Meso, and Macro environments
* Collaborate regionally and nationally to identify, implement, and disseminate best practices for optimizing the clinical learning environment
* Author one or more peer-reviewed scholarly products documenting insights, outcomes, and innovations emerging from National Initiative X

**SELECTION AND EXPECTATIONS OF NI X PARTICIPANTS**

***Application:*** A completed application is required for consideration, and a member of the selection committee may follow up with a phone consultation, if needed. Completed application forms are due to Mindi Apicella, AIAMC Administrative Coordinator, in Word format via email mindi@aiamc.org **no later than June 2, 2025.**

***Team:*** Each selected participant must have a team identified prior to the start of NI X, composed of:

* 1. **Identified Team Leader** who will be responsible for
		1. The project from conception to completion including establishing and maintaining a collaborative, interprofessional team charged with aligning team aims with measures and methods to improve care
		2. Submitting all reports, documents, and NI X required evaluations on time
		3. Ensuring that the team is represented at all NI X meetings, local on-site meetings, and cohort

 Zoom meetings or webinars

* 1. **The composition of each team** must include:
		1. Resident(s)/Fellows(s): Ideally, these team member(s) should be available to participate throughout the entire project, i.e., graduate on or after June 2027, to ensure continuity of team membership throughout the entire project period (Summer 2025 through Spring 2027). In addition to GME, the AIAMC is broadening its focus to include Pharmacy learners

Faculty, Program Director(s) and/or DIO seeking opportunities to align with and exceed the ACGME’s Common Program Requirements and Institutional Requirements. In addition to GME leaders, the AIAMC is broadening its focus to include Pharmacy leaders

Representative from your hospital or health system’s C-Suite, including CEO, CMO, CFO, and others

At least one representative from a unit/office in your hospital or health system aligned with your project aim and processes (e.g., IT, community outreach, quality, safety, patient experience)

***Meetings:*** Attendance of the team leader or his/her designee at all meetings is **required**. Other team members may attend as schedules and budgets allow. The four learning sessions will be held as follows:

|  |  |  |
| --- | --- | --- |
| **Date** | **Location** | **Learning Content** |
| October 16-17, 2025 | Omni Chicago HotelChicago, IL  | Micro Environment Approach *Understanding the key principles of a thriving clinical learning environment* |
| April 17-18, 2026 | Loews Ventana Canyon ResortCarlsbad, CA | Meso Environment Approach*Implementing a clinical learning environment project* |
| October 9, 2026  | Virtual | Macro Environment Approach*Supporting the clinical learning environment project and seeking input from others* |
| April 9-10, 2027 | Loews Ventana Canyon ResortTucson, AZ | Celebrating Our Results*Inspiring the Sustained Improvements in the clinical learning environment* |

Note that meetings two and four will be held in conjunction with the AIAMC Annual Meeting.

Meeting four commitments include a staffed poster display and attendance at the annual awards dinner.

***Zoom Meetings and Webinars: In*** addition to attending the four meetings, NI participants will be **required** to participate in bi-monthly Zoom cohort meetings and webinars. During these activities, timely and educational topics will be presented, progress reports will be shared, and participants will network and brainstorm with one another regarding how to implement sustainable and positive change more successfully.

***Financials:***

**AIAMC Members**: The participation fee for AIAMC member institutions selected is $4,250. Payment options are available. In addition to the participation fee, member institutions will be responsible for covering any costs incurred for travel to on-site meetings. The participation fee will cover one registration for each of the four meetings. In support of the AIAMC’s strategic plan, team members representing pharmacy will also be eligible for free meeting registrations. If additional team members wish to attend the meetings, they may do so at a rate of $275 per person per meeting.

**Non-Members:** The participation fee for non-AIAMC member institutions selected is $6,500. Payment options are available. In addition to the participation fee, institutions will be responsible for covering any costs incurred for travel to meetings. The participation fee will cover one registration for each of the four meetings. In support of the AIAMC’s strategic plan, team members representing pharmacy will also be eligible for free meeting registrations. If additional team members wish to attend the meetings, they may do so at a rate of $275 per person per meeting.

Alternatively, institutions eligible for membership may join the AIAMC at the regular annual dues rate of $6,825 and participate in National Initiative X for just $2,125. A membership application form <https://aiamc.org/become-member> must be submitted by June 2nd to be eligible for the 50% new-member discount.

For More Information, contact Kimberly Pierce Burke, AIAMC Executive Director, at kimberly@aiamc.org