

Financially Supporting Your Trainees- Come On Guys!!

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Introduction

All residency programs seem to be feeling the squeeze of constricting system graduate medical education budgets. This has resulted in a significant decrement in resident attendance of regional and national meetings and courses. Some programs no longer even support resident travel to meetings in which they have presentations. In this short communication, we report our solution to the problem- internal philanthropy.

Methods

We established two separate internal funds to support resident education. The first is a general philanthropic fund into which any donations are accepted. Our team funnels any speaker fees, course remittance, or patient donation into this fund. A second fund consists entirely of direct deposit or deferral of salary from neurosurgical faculty. We report the general level of available funds and the activities supported by these actions.

Results

CC-VTC Neurosurgery feature 9 faculty neurosurgeons. Approximately 120,000 dollars are made available for resident activities each year. This is in addition to dedicated GME Department funds which support one national meeting for each senior resident, moderate book funds, outside mandatory rotations and courses.

50,000 dollars have been made available via salary deferral. Another 50-60,000 dollars are direct contributions from the faculty surgeons and another 10-20,000 are deferred payments from speaking engagements and other industry related activities. Less than 10,000 per year are direct patient and patient family donations. Average faculty donation to the resident funds is therefore around 13,000 dollars a year. Faculty salaries parallel just short of MGMA mean salaries for appropriate levels of RVU production.

The combination of GME Department funds and our philanthropic funds allow tremendous educational flexibility in our program. All residents attend at least two national meetings each year and more if they are presenting papers, or have a special interest in a meeting or subspecialty. They are encouraged to seek and attend special technical courses across the country. Any text they request is provided. Research materials and support within reason is readily provided. Residents are treated to academic dinners 3-5 nights each month. 3-4 visiting professors are supported each year. Furthermore an aggressive campaign to engage medical students from 2 local medical schools through group dinners and pizza gatherings is also supported.

Conclusions

The purpose of this short communication is to serve as a "call to arms" for academic neurosurgical faculty to better financially support their charges. Average American resident salary is 55,000 dollars a year. Median MGMA practicing neurosurgeon salary is 725,000 dollars at 9,200 RVUS of production (with many neurosurgeons earning substantially more). For perspective- the ubiquitous "1%" of top earners in our society start at 450,000 dollars a year. Almost 40% of residents carry over 200,000 dollars of student debt- many as much as \$500,000. We are literally starving our residents of educational activities- they certainly cannot afford them themselves.

Through a truly modest yearly donation from our faculty surgeons we have been able to essentially any educational activity desired by the residents; as well as many team building, leadership development, faculty development, and resilience building activities. We were able to establish several streams of revenue into our resident education funds which are now accruing a modest but growing volume as an endowment. For faculty who may feel direct donation is painful, we have arranged modest salary diversion into the funds.

Resident education flourishes through a multi-faceted/multi-modality approach to their education, and through contact with other programs and educators. Residents across the country are being afforded less opportunity to access such opportunities due to GME financial constriction. All programs are seeing GME funding constriction. Many programs are sending fewer and fewer residents to national meetings and specialty courses. We feel that it is time for neurosurgeon educators to "pony up" and financially support their educational programs. The amount needed is relatively modest- particularly in comparison to median neurosurgeon incomes. So come on guys- it is time to step up to the plate!

Want to Discuss??

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Learning Objectives

to consider another method of financial support for resident education.