ACGME 10 Year Accreditation Site Visit

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Disclosure Information

- We have nothing to disclose

Objectives

- Describe strategies to use the ACGME Self-Study Visit as a longitudinal platform to prepare for the 10-year Site Visit

- Identify best practices for planning a 10-year Site Visit

- Design Program Improvement Metrics that align with Program Aims and identified opportunities

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ACGME Self-study

- Comprehensive program evaluation
- Aim is longitudinal improvement

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Self-Study Scope

- Assess program performance & ongoing improvement effort
    - Facilitate improvement in areas already in compliance
    - Identify successes achieved & areas in need of improvement

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Context of the Self-Study

Aims

Opportunities

Threats

Longitudinal tracking

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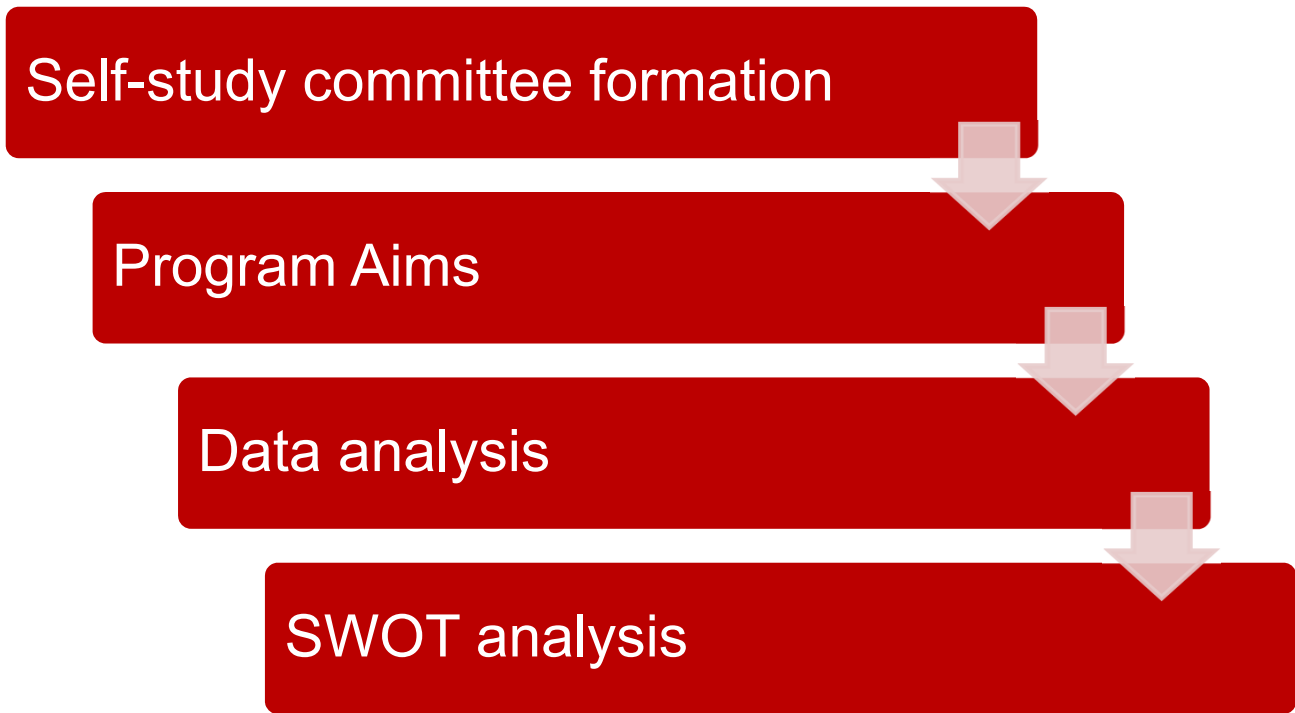WEXNER MEDICAL CENTER

Program Aims

- Key expectations of program
- How program differentiates itself from others
- Long term, strategic view
- May evolve over time
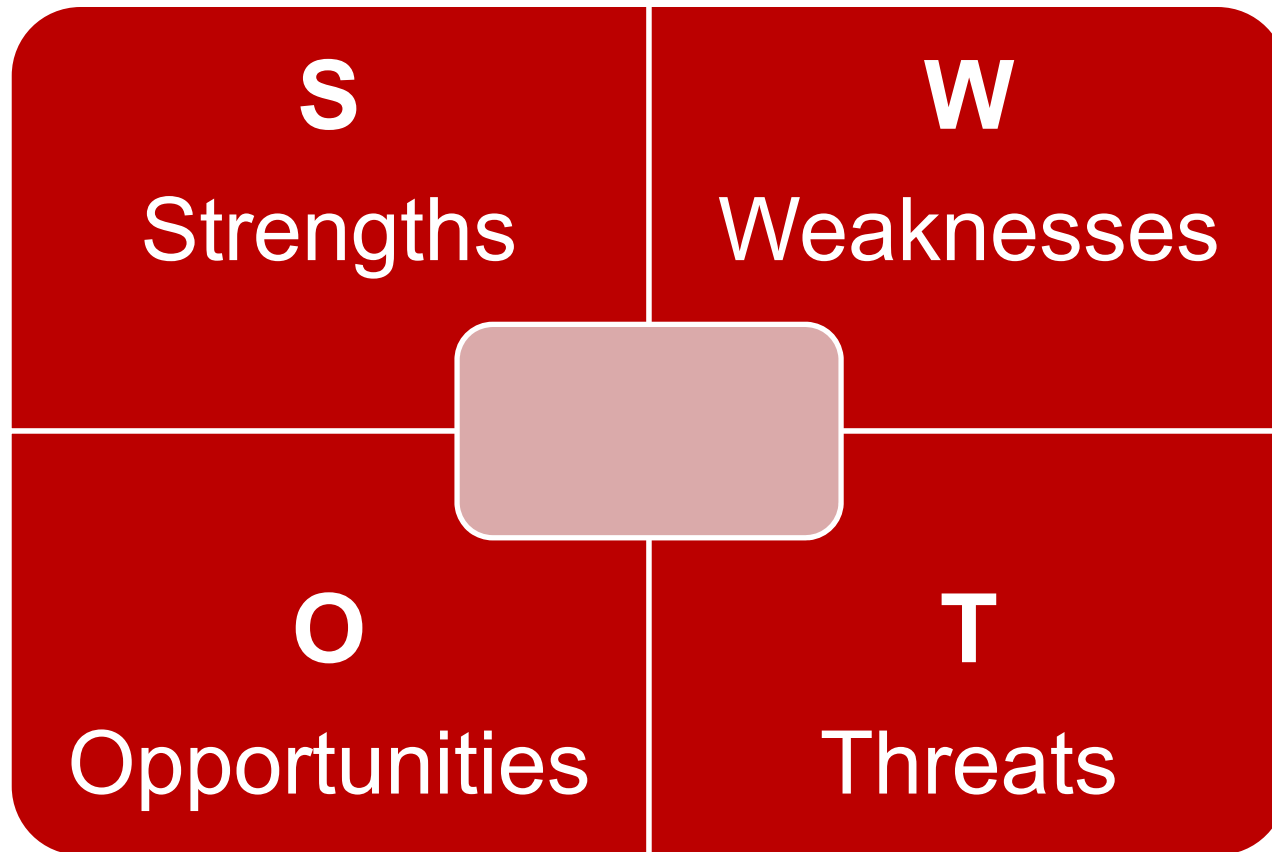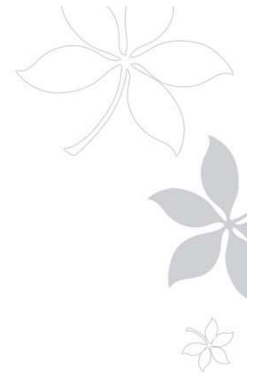- Identify metrics for success

Example Program Aims

The program aims to train academic leaders in Pulmonary/Critical Care Medicine who are broadly trained and clinically adept while promoting opportunities for research and scholarly activities during training.

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Self-Study Process

Self-study committee formation

Program Aims

Data analysis

SWOT analysis

Validate the Findings

Prioritize areas for improvement

Share with stakeholders

5 year vision

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Self-Study Process Tips

18-24 months assumes time for improvement

Set realistic goals and define metrics of success

Incorporate SWOT analysis

Coordinate across programs

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After the Self-Study

Limbo… Waiting 1.5-2 years for the accreditation site visit

- PEC (or self study group) keeps meeting

- Revisit Self Study Responses

- Closely monitor survey data (ACGME and program surveys) and all other outcome measures

- Report responses to concerns on WebADS

- APE Action Plan & Follow-up Template – tool for PEC

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Goals tracking table from ACGME

Suggested Annual Program Evaluation Action Plan and Follow-up Template

Use this template for tracking areas for improvement from the Annual Program Evaluations across multiple years. The intent is to create a summary of improvements achieved, and a working list of areas that are still in need of attention. The template is suggested and you may adapt it in any way you find useful to facilitate program improvement. You also may use attachments or appendices if additional detail is relevant to tracking a given issue. *(Note: This form should NOT be shared with the Review Committee or with ACGME site visitors during accreditation site visits).*

	Areas for Improvement (AY 2014-15)	Intervention	Date instituted/Individual responsible	Expected Resolution (outcome measures and date)	Status (resolved, partially resolved and detail, not resolved and date)
1	Address Oncology Service workload	Discuss possible changes with onc faculty, palliative faculty, dept leadership. New non-resident onc svc coverage created Onc 3, JH1 change, JH2 will be added. Final suggestion prior to closing this issue was to inquire whether a fellow could be added to the onc 1 service to optimize service/education balance (previously had been told this was not feasible).	Spring 2015	Rotation evaluations, Year end res eval, HS education committee	Almost resolved 8-15-2015 – in that specific workload complaints about onc 1 are of reduced concerns in latest end of year evaluations. Educational initiatives for the James rotations outlined below are still viewed as worth consideration.
2	VA rotation experience	Individualized schedules with added subspecialty clinics; streamline onboarding; meetings with VA leadership		" " Meeting with VA leadership scheduled for 2015 pending as of 8-15-2015	
3	Address distribution of patient care in the Ross Heart Hospital to support patient care, the learning environment, and to avoid surges in workload.	Hospital medicine RH1 and RH2 added		" " " and Annual ACGME survey	Resolved regarding this specific intervention. Patient volume requires ongoing monitoring at this site, but there is not indication for service restructuring at this point as long as boundaries are monitored and enforced.
4	Address challenges with once weekly conference block	shortened lectures on the hour followed by time for interactive		Individual lecture evaluations, year end resident survey, HS ed committee, core liaison committee	

03/2015

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During 90 day window once they announce "We're Coming!"

- Don't panic!

- Fire up PEC or Self-Study Group (PD)

- Coordinate site visit schedule (Program Coordinator)

- Prepare documents/files for site visitors

- Upload on WebADS
  – Self-Study Update (Added after earliest NAS site visits)
  – Summary of Achievements
  – Open text changes & improvements, response to citations
  – Current Block Diagram

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Due on WebADS 12 days prior to 10-year Site Visit
Self-Study Update

Update 1: Updates/Changes to Information Provided in the Original Self-Study Summary

Use this part of the form to describe any **changes or updates** to the information that was submitted in the original Self-Study Summary. (Maximum 350 words)

Update 2: What Will Take This Program to the Next Level?

If the Self-Study Summary was submitted prior to April 2017, use this part of the form to provide information for areas that were added to the Self-Study Summary.

Project your vision and plans for the program for the coming five years. What will take this program to "the next level"? (Maximum 350 words)

Note: In your response, discuss what the "next level" will look like, the envisioned steps and activities to achieve it, and the resources needed.

Changes in

- Program Description, Aims, Opportunities, Threats (SWOT analysis)

Self Study Pre- April 2017?

- Changes over last 5 years and vision for next 5 years

- What will take the program to "the next level"?

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Due on WebADS 12 days prior to 10-year Site Visit
Summary of Achievements

Program Strengths

Question 1: List the key strengths identified during the Self-Study. (Maximum 250 words)

Question 2: Discuss how these strengths relate to the program's aims and context. (Maximum 300 words)

Achievements in Program's Self-Identified Areas for Improvement

Question 3: Describe improvements in critical areas identified during the Self-Study that have already been achieved. (Maximum 250 words)

Question 4: Discuss how these improvements relate to the program's aims and context. (Maximum 300 words)

Question 5: Summarize what was used to track progress and to assess the improved outcomes. (Maximum 250 words)

Question 6: If this is a core program with two or more dependent subspecialty programs, did the Self-Study process for the dependent subspecialty programs identify common strengths, areas for improvement, opportunities, and/or threats across programs? *(If not a core with dependent subspecialties, skip to Question 7).*
___ Yes ___ No

If <u>Yes</u>, please summarize common areas identified during the Self-Study where improvements have been made. (Maximum 200 words)

Question 7: Discuss how program leadership coordinates aims and improvement priorities for the program with the priorities of the program's clinical department/division and those of the sponsoring institution. (Maximum 250 words)

Question 8: Discuss whether and how the Self-Study and 10-Year Accreditation Site Visit added value, and summarize any learning that occurred during this process. (Maximum 250 words)

- 200-250 word limits

- Relate program key **strengths**, **aims** and **context**

- Describe **improvements**, and how they relate to **aims** and **context**

- **How is progress tracked?**

- **How are outcomes assessed?**

- **Coordination w/ Department & Institution?**

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"**…**the ACGME will not ask programs to provide any information on areas identified during the Self-Study that have not yet resulted in improvements."

Thus,

"Summary of Achievements"

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06/2018

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The assumption is that there will be achievements.

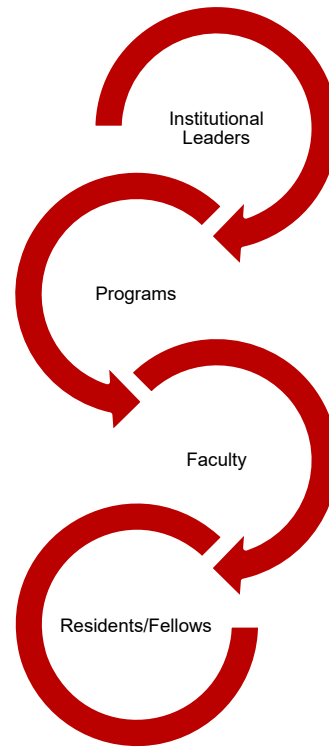## QUESTION

Since your Self Study, what improvements has your program achieved?

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Preparing for the 10-year Visit

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Preparing for the 10-year Visit

Institutional Leaders

Programs

Faculty

Residents/Fellows

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Program Preparation

The best defense is a good offense.

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Program Preparation cont.

- Routine use of SWOT analysis
  - Annual Program Evaluation
  - Encourage wide input [invite some complainers]
  - Uncovers blind spots
  - Allows proactive action plans

- Disseminate response to problems widely and often

Coordinate efforts

- Explore potential synergy & reduce burden
  - Core Program and sub-specialties
  - GMEC

- Examples
  - Supervision policy
  - Wellness policy

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Preparing at Risk Programs

- Who is at risk?
  - ACGME survey responses
  - ACGME citations

- How to mitigate?
  - WebADS to outline plan
  - Focus groups with trainees, DIO, Core Program Director, Vice Chair, etc.

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Prior to the visit

Trainees	Faculty	Chair
• Self-study • PI initiatives	• Self-study • PI initiatives	• Coach him/her • Bring a friend

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Small Group Discussion

- Imagine that your program's 10-year Site Visit has been scheduled for May, 2019. What are you most worried about? What do you believe will be identified as potential areas for improvement?

- Working together, identify one area that has the potential to impact more than one program and propose an improvement plan [with metrics for success] to share with the group.

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