



**USF Health - Morsani College of Medicine
GME POLICY & PROCEDURE**

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Scope: Applies to all University of South Florida Morsani College of Medicine (“USF MCOM”) residents and fellows (“Residents”) in Accreditation Council for Graduate Medical Education (“ACGME”) accredited programs as appointed through the House Officer Contract issued by the USF MCOM Graduate Medical Education Office (“GME Office”).

Background: Per the ACGME Institutional Requirements I.B.6., the Graduate Medical Education Committee (“GMEC”) must demonstrate effective oversight of underperforming programs through a Special Review process. The Special Review process must include a protocol that establishes a variety of criteria for identifying underperformance that includes, at a minimum, program accreditation statuses of Initial Accreditation with Warning, Continued Accreditation with Warning, and adverse accreditation statuses and results in a timely report that describes the quality improvement goals, corrective actions, and processes for GMEC monitoring of outcomes, including timelines.

Policy: GMEC shall identify programs as meeting the criteria of underperforming based on the following:

- Program received an accreditation status of Initial Accreditation with Warning or Continued Accreditation with Warning
- Program receives any other adverse accreditation statuses as described by ACGME policies (ACGME Policies and Procedures 20.10)

In addition, the GMEC Program Review subcommittee will review annual program data and outcomes and identify programs as underperforming and/or would benefit from special review process according to:

- Concerns related to the ACGME resident or faculty survey. Trends as well as absolute concerns will be considered
- Program data or outcomes (ex. duty hour compliance, board pass rate, case log data)
- Concerning or a significant number of new citations or extended citations
- Failure to submit ACGME required data by identified deadlines
- Concerns related to underperformance identified and communicated to the GME Office by Residents or faculty in a particular program
- Program-specific issues identified by the Designated Institution Official (“DIO”), GMEC or its subcommittees

If a program is identified as underperforming, the Special Assessment Subcommittee (“SAS”), under the auspices of the GMEC, will assign a Special Review Team to conduct a focused or full review of the program, which will result in a timely report that includes quality improvement goals, corrective actions recommended for the

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program, as well as the process and timeline by which SAS will monitor the program's outcomes. SAS will provide updates at the bi-monthly GMEC meetings.

Procedure for Review:

A. Identification of Underperformance and Program Notification:

1. The Program Review Subcommittee will determine if programs meet the criteria for underperforming and receive a special review based on this policy and the program metrics that are reviewed by the committee including but not limited to: ACGME letters of notification, annual program evaluations ("APE"), etc.
2. SAS will receive a debrief from Program Review identifying the specific concerns that prompted the Special Review.

B. Preparation

1. SAS will discuss and determine if a focused (address and assess specific aspects of a program) or a full (address and assess compliance with all applicable ACGME requirements) special review will be required.
2. The program(s) identified as underperforming will be notified of Special Review and the process will commence. The Chair of SAS will also notify GMEC.
3. SAS will assemble the Special Review Team. The Special Review Team should include, at minimum, one program director/faculty member and one resident. All individuals from the Special Review Team must be from within the Sponsoring Institution but not from within the GME program being reviewed. Additional reviewers may be included on the Special Review Team as determined by the SAS and DIO.
4. The program being reviewed will be required to submit documentation and to coordinate meetings between stakeholders and the Special Review Team.

C. The Special Review:

1. Materials and data to be used in the review process shall include:
 - i. The ACGME Common, specialty/subspecialty-specific Program, and Institutional Requirements in effect at the time of the review;
 - ii. Accreditation letters of notification from the most recent ACGME reviews and progress reports sent to the respective RC (as applicable);
 - iii. Previous Annual Program Evaluations (APE);
 - iv. Results from most recent internal and external resident and faculty surveys; and,
 - v. Any other materials the Special Review panel considers necessary and appropriate.
2. The Special Review Team will interview the program director and program administrator, residents and program selected faculty in separate groups.

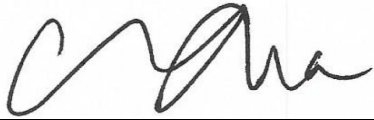
D. Report: Based on the data generated from the review of program documentation and stakeholder interviews, SAS will result in a timely, within 3 months, report that includes quality improvement goals, corrective actions recommended for the program, as well as the process and timeline by which SAS will monitor the program's outcomes. The final report will be reviewed and approved by the SAS and presented to GMEC, program, and department leadership.

E. Monitoring of Outcomes: SAS will monitor outcomes of the Special Review process for one academic year. SAS will provide a timeline on when the program will be required to provide a

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progress report on action items to the subcommittee. SAS will provide feedback on reports to the program and report program progress at the GMEC meeting. The SAS will assess program at year-end to determine if the program remains underperforming to decide whether the special review process is complete or extended.

APPROVED:



Senior Associate Dean, Graduate Medical Education/DIO

Date of Origin	Effective	Revision/GMEC Approval:	Originally Policy #
09/2015	09/2015	06/2018; 06/2021; 10/2023	N/A