Lets Be CLEAR about CLER - ACGME Clinical Learning Environment Review (CLER)

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Acronyms

- ACGME: Accreditation Council for Graduate Medical Education
- NAS: Next Accreditation System
- CLER: Clinical Learning Environment Review
Goals & Objectives

• Define and characterize the ACGME Clinical Learning Environment Review (CLER) visit
• Review and Discuss the ACGME goals of the CLER visit and CLER Pathways to Excellence
• Utilize the ACGME Pathways to do an internal assessment and plan for the next CLER visit
ACGME History

1981
ACGME created

2000
Outcome Project

2008
80 & 24 + 6 hour limit

2011
16 hour & 24 + 4 hour limit

2013
NAS
Does Training Site Quality Impact Outcomes for Practicing Physicians?

Table 3. Sample Characteristics by Quintile Ranking of Residency Programs for Any Major Complication Among All Deliveries (N = 4,906,169)\(^a\)

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Residency Program Maternal Complication Rate Quintile</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High (Q5) (n = 1,217,247)</td>
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<tr>
<td>Deliveries</td>
<td></td>
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<tr>
<td>Cesarean</td>
<td>338,784 (27.8)</td>
</tr>
<tr>
<td>Vaginal</td>
<td>878,463 (72.2)</td>
</tr>
<tr>
<td>Physicians</td>
<td>(n = 1,030)</td>
</tr>
<tr>
<td>Years of experience, as of 2007, mean (SD)</td>
<td>20.4 (11.8)</td>
</tr>
<tr>
<td>Residency programs</td>
<td>(n = 22)</td>
</tr>
<tr>
<td>Risk-standardized complication rate, mean (SD [range])</td>
<td>10.9 (0.5 [9.8-11.6])</td>
</tr>
</tbody>
</table>

\(^a\)Data are presented as No. (%) unless otherwise specified.

## Implementation of the I-PASS Handoff Bundle.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Before Implementation (N = 5516)</th>
<th>After Implementation (N = 5224)</th>
<th>P Value</th>
</tr>
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<tbody>
<tr>
<td><strong>Total no. (no./100 admissions)</strong></td>
<td></td>
<td></td>
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<tr>
<td>Overall medical errors</td>
<td>1349 (24.5)</td>
<td>981 (18.8)</td>
<td>&lt;0.001</td>
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<tr>
<td>Preventable adverse events</td>
<td>261 (4.7)</td>
<td>173 (3.3)</td>
<td>&lt;0.001</td>
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<tr>
<td>Near misses and nonharmful medical errors</td>
<td>1088 (19.7)</td>
<td>808 (15.5)</td>
<td>&lt;0.001</td>
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<tr>
<td><strong>Medical-error subtype</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Errors related to diagnosis (incorrect, delayed, omitted)</td>
<td>184 (3.3)</td>
<td>111 (2.1)</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Errors related to therapy other than medication or procedure</td>
<td>112 (2.0)</td>
<td>77 (1.5)</td>
<td>0.04</td>
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<tr>
<td>Errors related to history and physical examination</td>
<td>43 (0.8)</td>
<td>0</td>
<td>&lt; 0.001</td>
</tr>
<tr>
<td>Other and multifactorial errors</td>
<td>239 (4.3)</td>
<td>106 (2.0)</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Medication-related errors</td>
<td>660 (12.0)</td>
<td>580 (11.1)</td>
<td>0.28</td>
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<tr>
<td>Procedure-related errors</td>
<td>83 (1.5)</td>
<td>85 (1.6)</td>
<td>0.49</td>
</tr>
<tr>
<td>Falls</td>
<td>13 (0.2)</td>
<td>8 (0.2)</td>
<td>0.37</td>
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Starmer et al. NEJM Nov 6 2014
Next Accreditation System (NAS)

### 10 year program self study

<table>
<thead>
<tr>
<th>Clinical Learning Environment Review (CLER)</th>
<th>Annual Data Reports</th>
<th>Institutional Site Visit</th>
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<tbody>
<tr>
<td><em>Clinical Site Visit q 18mths</em></td>
<td><em>Board Pass Rates</em></td>
<td><em>Focus on patient safety, QI, care transitions, supervision, responsibility for duty hours, fatigue management, accurate reporting</em></td>
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<tr>
<td><em>Integration of residents into patient safety, QI, supervision policies, transitions of care, duty hours, professionalism</em></td>
<td><em>Milestone reports</em></td>
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<td><em>Resident Survey</em></td>
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<td><em>Faculty Survey</em></td>
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<td><em>Data on Structure &amp; resources</em></td>
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CLER PATHWAYS TO EXCELLENCE

Expectations for an optimal clinical learning environment to achieve safe and high quality patient care

Version 1.1

https://www.acgme.org/Portals/0/PDFs/CLER/CLER_Pathways_V1.1_Digital_Final.pdf
CLER Focus Areas

- Patient Safety
- Transitions of Care
- Supervision
- Care Quality & Disparities
- Well-Being
- Professionalism
CLER Program
5 key questions for each site visit

- Who and what form the hospital/medical center’s infrastructure designed to address the six focus areas?
- How integrated is the GME leadership and faculty in hospital/medical center efforts across the six focus areas?
- How engaged are the residents and fellows?
- How does the hospital/medical center determine the success of its efforts to integrate GME into the six focus areas?
- What are the areas the hospital/medical center has identified for improvement?
Important Aspects of the Clinical Learning Environment Review (CLER)

• **Formative** site review of the clinical training site
  • Short notice
  • CEO/DIO need to be present for meetings
  • Only affects accreditation if egregious violation discovered

• Evaluation based on **expectations not requirements**

• May inform future clinical training site requirements

• Identify opportunities for research
CLER 1.0 Format

• ACGME team of 3 physicians with prior CLER site visit experience

• Agenda
  – Met with C-Suite including Quality Officer
  – Met with residents, faculty, and program directors in small groups
  – Did walk round with residents asking questions and observing hand off processes

• Use of Tracer Methodology to gauge 1) Institutional Infrastructure 2) Leadership and Faculty Engagement 3) Resident engagement
SCHEMATIC OF FLOW OF CLER SITE VISIT

Three phases of Visit

Note: each walk around accompanied by resident host/escort, opportunity for staff (e.g. nurses) and patient contact (future). As yet, uncertain of role of interview with governance interview.
CLER 2.0 + Enhancements

• Operative and Procedural Areas
  – Added sub-protocol for institutions w/greater than 30 programs
  – Additional ACGME visitors that have surgical/anesthesiology backgrounds
    • Meeting with physician leadership of OR
    • Meeting with small group of circulating and scrub nurses
    • Walking rounds in OR

• Well-being
  – Add small group meeting with Wellness Champions/Officers
CLER Focus Areas

- Transitions of Care
- Supervision
- Well Being
- Care Quality & Disparities
- Patient Safety
- Professionalism & Wellness
CLER Pathways to Excellence: **Patient Safety**

- Report of adverse events, near misses/close calls, and unsafe conditions
- Education on patient safety
- Culture of safety
- Resident/fellow experience in patient safety investigations and follow-up
- Clinical site monitoring of resident/fellow engagement in patient safety
- Clinical site monitoring of faculty member engagement in patient safety
- Resident/fellow education and experience in disclosure of events
CLER Pathways to Excellence: Health Care Quality

• Education on Quality Improvement
• Resident/fellow engagement in quality improvement activities
• Resident/fellows receive data on quality metrics
• Resident/fellow engagement in planning for quality improvement
• Resident/fellow and faculty member education on reducing health care disparities
• Resident/fellow engagement in clinical site initiatives to address health care disparities
CLER Pathways to Excellence: Care Transitions

- Education on care transitions
- Resident/fellow engagement in change of duty hand offs
- Resident/fellow and faculty member engagement in patient transfers between services and locations
- Faculty member engagement in assessing resident/fellow related patient transitions of care
- Resident/fellow and faculty member engagement in communication between primary and consulting teams
- Clinical site monitoring of care transitions
CLER Focus Areas

- Transitions of Care
- Supervision
- Care Quality & Disparities
- Well Being
- Patient Safety
- Professionalism
CLER Pathways to Excellence: **Supervision**

- Education on supervision
- Resident/fellow perception of the adequacy of supervision
- Faculty member perception of the adequacy of resident/fellow supervision
- Roles of clinical staff members other than physicians in resident/fellow supervision
- Patients and families know the roles of physician members and have adequate contact with physicians
- Clinical site monitoring of resident/fellow supervision and workload
CLER Focus Areas

- Transitions of Care
- Supervision
- Well Being
- Care Quality & Disparities
- Patient Safety
- Professionalism
CLER Pathways to Excellence: **Well Being**

- Learning environment promotes well-being
- Environment demonstrates efforts to promote and maintain well-being
- Environment demonstrates actions to prevent, eliminate, and mitigate barriers to well-being
- Has mechanisms for identification & intervention for individuals at risk for self harm
- Monitors effectiveness at achieving well-being
CLER Focus Areas

- Transitions of Care
- Supervision
- Fatigue Management & Well Being
- Care Quality & Disparities
- Patient Safety
- Professionalism
CLER Pathways to Excellence: **Professionalism**

- Resident/fellow and faculty member education on professionalism
- Resident/fellow attitudes, beliefs, and skills related to professionalism
- Faculty engagement in training on professionalism
- Culture of honesty in reporting
- Clinical site monitoring of professionalism
Break out groups

• Break out into groups
• Pick 2 of the focus areas
• Discuss and share amongst yourselves what your program and what you think GME does to enhance the learning environment in these domains
• Report Out
What now?

• ACGME CLER team will be back for 3\textsuperscript{rd} visit at TGH
  – Expect addition of meeting with wellness leaders
  – Expect operation & procedural competency
  – Focus on improving the learning environment and education of our trainees in the CLER domains
What Now?

• Provide education to all stakeholders
  – Develop CLER champions

• Build a roadmap
  – Assess stakeholders
    • Mock CLER visits
    • Review Handoffs
  – Define action items
Take Home Points

• Leadership & Faculty:
  – Review the ACMGE resources
    • https://www.acgme.org/What-We-Do/Initiatives/Clinical-Learning-Environment-Review-CLER/Resources-and-Documents
  – Be Leaders, Champions, & Role Models for Patient Safety & Quality Improvement Projects at Affiliate Sites
  – Identify Programmatic Ways to Define, Teach, and Engage Fellows/Residents/Students in the CLER Focus Areas
  – Identify & Pursue Research Topics in the CLER Focus Areas
Take Home Points

• Leadership & Faculty
  – Faculty Development Opportunities

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<tr>
<th>Curriculum</th>
<th>National Meetings</th>
<th>Publications</th>
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<tr>
<td>IHI Leading QI: Essentials for Managers</td>
<td>ACGME annual meeting: CLER focused research</td>
<td>AHRQ patient safety network</td>
</tr>
<tr>
<td>American Society for Quality</td>
<td>National IHI meeting</td>
<td>BMJ Quality and Safety</td>
</tr>
<tr>
<td>USF Six Sigma Green Belt Certification Program</td>
<td>AAMC Integrating Quality Meeting</td>
<td>Journal of Graduate Medical Education</td>
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Take Home Points

• Handouts
  – TGH Goals and Report Card