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Lessons Learned: Collecting and Reporting Information to Your Program's Best Advantage

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Education Program Manager

Cardiovascular Medicine

Brigham and Women's Hospital



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Objectives

- The program administrator's role in the new program application process
- The program administrator's role in site visit preparation and execution
- How information collected and processes implemented for new program applications and site visits can benefit new and existing programs in achieving requirements in the NAS



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Next Accreditation System (NAS)

- **Continuous accreditation**
- **No PIFs**
- **Programs reviewed at least annually**
- **Citations reviewed annually**
- **Self-study every 10 years**
- **Full vs. Focused site visit**
- **Ongoing Improvement**



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NAS: Self-Study

“Underlying the self-study is a longitudinal evaluation of the program and its learning environment, facilitated through sequential annual program evaluations.”

ACGME Self-Study Webpage



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NAS: Program Administrator's Role

- **ADS**
 - Annual Update
 - Faculty and Resident Rosters
 - Resident Survey
 - Faculty Survey
 - Block Schedule



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NAS: Program Administrator's Role

Clinical Competency Committee



Program Evaluation Committee



Annual Program Evaluation



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New Program Application: Laying the groundwork for a successful program

Components:

- New program application in ADS**
- Specialty-specific application**
- Creation of block schedule, policies, educational goals and objectives, evaluations**
- Program Letters of Agreement (PLAs)**



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Remember highlight o

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PIF

THE RESIDENCY REVIEW COMMITTEE FOR INTERNAL MEDICINE
PROGRAM INFORMATION FORM - ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

ACCREDITATION INFORMATION - [edit] [refresh]

Date of First Class: 7/1/2012
Date: 3/28/2012
Title of Program: Brigham and Women's Hospital Program
Address: Brigham and Women's Hospital
75 Francis Street
Boston, MA 02115
Program Director: Lynne W. Stevenson, MD
Program Coordinator: Nicole M. Levesque, BA
10 Digit ACCME Program ID# (for accredited programs): 1552414015
Email: LWSTEVENSO@BWH.HARVARD.EDU
Email: nlevesque@bwh.harvard.edu

Accreditation Status: Application Subspecialty
Original Accreditation Date: N/A
Program Requires Prior CME: NO
Effective Date: N/A
Accredited Length of Training: N/A
Number of Requested Positions: 3
Last Site Visit Date: N/A
Cycle Length: N/A

Core Program Information

Title of Program: Brigham and Women's Hospital Program
Program Director: Joel T. Katz, M.D.
10 Digit ACCME Program ID# (for accredited programs): 1402421172

Accreditation Status: Continued Accreditation
Effective Date: 12/2/2010
Number of Approved Positions: 174
Next Site Visit Date: 10/1/2013
Last Site Visit Date: 5/11/2010
Cycle Length: 3.0

The signatures of the director of the program and the designated institutional official attest to the completeness and accuracy of the information provided on these forms.

Name: Lynne W. Stevenson, MD
Signature: [Signature]
Date: [Date]

Name: Joel T. Katz, M.D.
Signature: [Signature]
Date: [Date]

Name: John Patrick T. Co, MD, MPH
Signature: [Signature]
Date: 5-29-12

CITATION INFORMATION - [edit] [refresh]

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New Program Application: Laying the groundwork for a successful program

**ADS – Completing it correctly now is
the first step to successful program
management.**



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New Program Application: Laying the groundwork for a successful program

ADS New Program Application

- **Program Administrator's role**
 - **Data entry**
 - **Participating sites**
 - **Faculty/teaching CVs**



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New Program Application: Laying the groundwork for a successful program

ADS New Program Application

- **Program Administrator's role**
 - **Resource for institutional information, policies and opportunities**



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New Program Application: Laying the groundwork for a successful program

Required Documents:

- **Program Letters of Agreement**
- **Block Diagram**
- **Supervision Policy**
- **Fellow Duty Hours and Work Environment (moonlighting)**



Advanced Heart Failure and Transplant Cardiology

Program Evaluation Committee

The goal of this Program Evaluation Committee (PEC) is to oversee curriculum development and program evaluations for the Advanced Heart Failure and Transplant Cardiology Fellowship. The PEC of Advanced Heart Failure and Transplant Cardiology Fellowship will meet annually. The PEC will have at least three members; two program faculty and one trainee from the program, unless there are not enrolled trainees in the program. Faculty members may include physicians and non-physicians from the Advanced Heart Failure and Transplant Cardiology Fellowship.

The PEC is composed of the following members:

- Chair:
- Faculty:
- Current Clinical Fellows

The committee's responsibilities are to:

- Plan, develop, implement, and evaluate educational activities of the program;
- Review and make recommendations for revision of competency-based curriculum goals and objectives;
- Address areas of non-compliance with ACGME standards;
- Review the program annual using evaluations of faculty, residents or clinical fellows, and others;
- Documents on behalf of the program, formal systematic evaluation of the curriculum at least annual and render a written Annual Program Evaluation (APE), which must be submitted to the Office of Graduate Medical Education (OGME) annually;
- Monitor and track each of the following:
 - Resident performance;
 - Faculty Development;
 - Graduate performance including performance on certifying examination;
 - Program Quality; and
 - Progress in achieving goals set forth in previous year's action plan.
- Review recommendations from the Clinical Competency Committee.

The PEC will be provided with confidential resident/clinical fellow and faculty evaluation data by the program's administrative staff in order to conduct their business. The program director is ultimately responsible for the work of the PEC. The program director must assure that the annual action plan is reviewed and approved by the program's teaching faculty. The approval must be documented in meeting minutes. The program's annual action plan and report on the program's progress on initiatives from the previous year's action plan must be sent to the GME office annually.

Effective: 7/1/2014

Advanced Heart Failure and Transplant Cardiology

Clinical Competency Committee

The Clinical Competency Committees (see below) will review and use assessment data, including faculty member assessments of fellows on rotations, self-evaluations, peer evaluations, and evaluations by nurses and patients. The CCC of Advanced Heart Failure and Transplant Cardiology Fellowship will meet semi-annually. At a minimum the CCC must be comprised of three key members of the program faculty. Others eligible for appointment to the committee can include faculty from other programs and non-physician members of the health care team from the Advanced Heart Failure and Transplant Cardiology Fellowship.

The Program Director is responsible for appointing faculty to the CCC.

The CCC is composed of the following members:

The Clinical Competency Committee will:

1. Review all resident evaluations semi-annually;
2. Prepare and assure the reporting of Milestones evaluations of each resident semi-annually to ACGME, and;
3. Advise the program director regarding resident progress, including promotion, remediation, and dismissal.

The Clinical Competency Committee will annually review their program-specific requirements to ensure compliance with all aspects of CCC duties, responsibilities and reporting to the ACGME. Recommendations will be made to the Program Evaluation Committee.

Effective: 7/1/2014



Advanced Heart Failure and Transplant Cardiology

Clinical Competency Committee

The Clinical Competency Committee (see below) will review and use assessment data.

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Effective: 7/1/2014

CCC: Program Administrator's Role

- **Coordinate meeting semi-annually prior to milestone evaluation deadline**
- **Primary responsibility is completion of milestone evaluations**
- **Must keep minutes of this meeting**
- **Reports to PEC**



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New Program Application

Opportunity to identify weaknesses or areas for improvement for existing programs



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New Program Application

**Time to build excellent communication
and trust with your new Program
Director – establish a good relationship
now.**



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Full Site Visit Following Initial Accreditation

- **ADS updated**
- **Required documents could include**
 - **PLAs**
 - **Fellow files (current and graduated)**
 - **Competency-based goals and objectives curriculum**
 - **Evaluations**
 - **Written description of PEC and CCC**
 - **Written program evaluation with improvement plan**
 - **Documentation of duty hours**
 - **Policies for supervision, duty hours and work environment**



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Full Site Visit Following Initial Accreditation

- **ADS updated**
 - Very similar to the new program application
 - Faculty CVs updated
 - Faculty board certification and medical license status
 - Tip: Print your most recent annual update to identify missing/outdated/expired information



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Full Site Visit Following Initial Accreditation

- **Program Evaluation Committee**
 - Description
 - Meeting Minutes including action plan and follow-up plan are important to the self-study



Program Evaluation Committee

The committee's responsibilities are to:

- Plan, develop, implement, and evaluate educational activities of the program;
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Effective: 7/1/2014



Program Evaluation Committee

Cardiovascular Disease Fellowship Program Evaluation Committee									
Date	Category	Summary	Action Items	Year 1 follow-up			Year 2 follow-up		
				Update since last meeting	Action Items	Resolved?	Update since last meeting	Action Items	Resolved ?
4/2/15	Resident Performance	<ul style="list-style-type: none">•Fellow evaluations were reviewed•Limited evaluations were available due to low evaluation completion rates.	<ul style="list-style-type: none">•Develop system to increase completion rates•Educate faculty on importance of evaluation completion	4/2/16 <ul style="list-style-type: none">• Completion rates have increased to 90% within 2 weeks of rotation completion• Evals lack quality information	<ul style="list-style-type: none">• Faculty require education on milestones•Encourage Faculty to provide meaningful feedback	No			



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Full Site Visit Following Initial Accreditation

- **Program Administrator's primary responsibility is the organization of program files.**
 - Fellow files including evaluations, procedure logs, contracts
 - PLAs
 - Evaluations of the program by faculty and fellows



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How does the new program application and site visit prepare the program for the NAS and self study?

- **New program application lays the groundwork for successful program administration**
 - Careful completion of ADS will simplify the annual update
 - Policies and procedures in place from the start.
 - Opportunity to establish a good working relationship with your new program director



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How does the new program application and site visit prepare the program for the NAS and self study?

- **Full site visit following initial accreditation provides the opportunity for a check-in on the status of the program.**
 - **Create the PEC meeting minutes and action items which can demonstrate continual review and improvement of the program.**
 - **Helps identify items not full implemented or executed such as policies or PLAs**



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How does the new program application and site visit prepare the program for the NAS and self study?

Many programs we administer have been long standing but might not be up to par for NAS. New application and full site visit will provide an opportunity to identify problems and weaknesses in these programs before the self-study.



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Ultimately the buck stops with us.

