

# Preparing for the ACGME Site Visit

Lisa Schirtz-Carroll, BS C-TAGME
Cardiology Fellowship Administrator



Dear Drs. Knohl, Hopkins, Szyjkowski, Carhart, Perl, Fazili, Brangman, Gilligan, Khanna, and Paul:

As you are aware, I have been assigned to be the primary contact for the upcoming team site visit of your core program and its associated subspecialty programs on August 15-17, 2017.

This is a **10-year site visit** for all programs. For each program, the site visit will consist of a **full** accreditation site visit that will address compliance with all relevant program requirements, as well as a review of the program's <u>Self-study Summary</u> and <u>Summary of Achievements</u> that have been made in areas identified in the self-study.

Please email the following documents (which are also outlined in Dr. Philibert's letter) to me (jrubin@acgme.org) at least 12 days prior to the visit:

- A combined copy of the complete 3-day site visit schedule with names and titles/roles of all participants.
- Address of the site visit location, parking instructions, and detailed directions for finding
  the meeting room in which the visit will be conducted. We should meet in a central
  common location and then the site visitors can be escorted to the individual rooms for
  the site visits.
- Contact information for the core program director and program coordinator, with a cell phone or pager number in case an urgent need to contact the program arises.

Tuesday, 8/15/17 to Thursday, 8/17/17



Judith Rubin, MD Pediatrician



Barbara Bush, PhD



Donald Kraybill, PhD

#### Site Visit Instructions

Please read these instructions and follow them to prepare for your site visit.

#### Site Visit Format

- It will be a full site visit, which will assess compliance with all common and specialtyspecific accreditation standards.
- The sources of information for the site visit will be (1) date the program has entered into the Accreditation Data System (ADS), and (2) documents the site visitors will review during the on-site visit, discussed in more detail in the next section.

#### Preparing Documents for the Site Visit

- For the review of the 10-year site visit, the Review Committee (RC) will use three
  documents prepared by the program: (1) the self-study summary that is already filed in
  ADS, (2) the summary of achievements that you will prepare for the site visit, and (3)
  information in ADS, which you will update prior to the site visit.
- Using the template available from the ACGME 10-Year Site Visit web page, prepare
  the summary of achievements. This document provides a list of the program's
  strengths and the improvements that have been achieved to date in areas identified
  during the self-study. For the 10-year site visit, the ACGME will not ask programs to
  provide any information on areas identified during the self-study that have not yet
  resulted in improvements.
- Update the program's information in AOS. Only three sections of the ADS data can be updated and will be usable by the site visitor and the assigned RC reviewer(s): (1) your updated, current responses to any citations; (2) the open text section disscribing major changes in the program (you should use this section to discuss any recent improvements to the program, such as actions in response to data suggesting possible problems in the ACGME Resident and Faculty Surveys; and (3) a current block diagram that accurately reflects your program.
- Submit the completed summary of activevements to ADS, and complete the ADS update a minimum of 12 days before the site visit date. The final upload date is shown on the first page of the site visit announcement letter.

#### Planning the Site Visit Day

- On the site visit day, the site visitors will meet with you, faculty, residents/fellows, and
  a sponsoring institution representative (the DIO or his or her designee). As the site
  visitors will divide the interviews, please ensure that 2 rooms suitable for group
  interviews are evaluable throughout the site visit day.
- If multiple institutions collaborate in this program, the site visitors will need to meet with representatives of each.
- One of the site visitors will contact you by email or telephone to arrange the site visit schedule. Alternatively, you may reach him/her using the contact information above. The best day to call is Finday.
- Also, one of the site visitors will send you a note for sharing with your residents/fellows and faculty. It will ask for each group to complete a separate consensus list of program strengths and opportunities for improvement. Each group will then send their list directly to the site visitors prior to the site visit.

#### Documents to Be Sent to the Site Visitors:

Please send the following documents to both site visitors at least 12 days before the visit.

- A copy of the site visit achedule with the names and titles of all the participants.
- Directions to the institution and the meeting rooms in which the visit will be conducted.
- Contact information for the program director or another staff member, with a cell
  phone or pager number for contact if an emergency or other urgent need to contact
  the program arises.

 A few days before the visit, please confirm that both the faculty and residents/fellows have sent their group's list of strengths and opportunities for improvement directly to the site visitors.

#### Guidelines for the Resident Interview

- Programs with 15 or fewer residents/fellows: The site visitors will interview all trainees on duty on the day of the visit.
- Programs with more than 15 residents/fellows: The site visitors will interview a minimum of 15 to 18 peer-selected trainees, representing all years of training.
- Residents/fellows may be interviewed in smaller groups by years of training or individually, and your primary site visitors will indicate the interview format in his/her letter to you.
- ACGME defines "peer-selected" as residents/fellows voted on by their peers (other residents only) and not chosen by a chief resident or other program representative. Chief residents beyond the accredited years of training may not participate.
- If your program includes a combined residency other than Internal Medicine-Pediatrics (which is accredited separately by the ACGME), residents from the combined program must be represented in the resident interview group.

#### Documents for Review by the Site Visitors

Please see the list at the end of this instruction page for the documents that need to be made available to your site visitors for a full accreditation site visit. For selected specialties your site visitor may ask that additional documents the RRC wants to have reviewed be made available on the site visit day.

#### Site Visit Document Check List

Please have these documents available for review on the day of the site visit.

#### Common Program Requirements

Sponsoring and Participating Institution

1. Current, signed program letters of agreement (PLAs).

Resident Appointment and Evaluations

2. Files of recent program graduates and current residents/fellows (1-2 in each year of training); files of any trainees who have transferred in or transferred out of the program, or have resigned or been dismissed in the past three years. Resident/fellow evaluations by faculty, peers, patients, self, other staff; semi-annual evaluations; and final evaluations will be assessed during review of the resident/fellow files.

Educational Program

- \_\_ 3. A sample of competency-based, educational level-specific goals and objectives for one rotation/assignment.
- 4. Conference schedule for current academic year.

Faculty and Program Evaluation

- 5. Sample of a completed annual confidential evaluation of faculty by residents/fellows.
- 6. Written description of Clinical Competency Committee (CCC): membership, semi-annual resident evaluation process, reporting of Milestones evaluation to ACGME, CCC advising on resident progress including promotion, remediation, and dismissal.
- Written description of Program Evaluation Committee (PEC): membership, evaluation and tracking protocols, resident evaluations of rotations/assignments, development of written Annual Program Evaluation (APE), and action plans resulting from the APE.

Duty Hours and the Learning Environment

- 8. Program-specific (not institutional) policies for supervision of residents/fellows (addressing progressive responsibilities for patient care and faculty responsibility for supervision), including guidelines for circumstances and events that require residents/fellows to communicate with appropriate supervising faculty members.
- 9. Sample duty hour compliance data demonstrating your monitoring system.

Quality Improvement

\_\_ 10. Sample documents demonstrating resident/fellow participation in patient safety and quality improvement projects.

#### Site Visit Document List for the 10-Year Accreditation Site Visit

| Site Vielt Beaumont Charlellet   |
|--|
| Site Visit Document Checklist  Please have these documents available for review on the day of the site visit.  |
|  |
| Sponsoring and Participation Institutions  |
| _ 1. Current, signed program letters of agreement (PLAs)   |
| Resident Appointment and Evaluations   |
| 2. Files of recent program graduates and current residents/fellows (1 to 2 in each year of training); files of any trainees who have transferred in or transferred out the program, or have resigned or been dismissed in the past three years. Resident/fellow evaluations by faculty, peers, patients, self, other staff; semiannual evaluations; and final evaluations will be assessed during the review of the resident files.  |
| Educational Program  |
| <ul> <li>3. A sample of competency-based, educational level-specific goals and objectives for one<br/>rotation/assignment</li> </ul>   |
| 4. Conference schedule for current academic year   |
| Faculty and Program Evaluation   |
| <ol><li>Sample of a completed annual confidential evaluation of faculty by residents/fellows</li></ol>   |
| Written description of the Clinical Competency Committee (CCC): membership, semiannual resident evaluation process, reporting of Milestones evaluation to ACGME, CCC advising on resident progress including promotion, remediation, and dismissal 7. Written description of Program Evaluation Committee (PEC): membership, resident and faculty evaluations of the program, program evaluation and action plan tracking protocols  |
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| Duty Hours and the Learning Environment  |
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|  |
| Quality Improvement10. Sample documents demonstrating resident/fellow participation in patient safety and quality improvement projects   |
| Annual Program Evaluation and Self-Study Documents   |
| The documents below will NOT be accessed or reviewed by the site visitors, but should be available to the program director for a discussion of the program's ongoing improvement efforts.  |
| <ol> <li>Annual Program Evaluations for the past five years, action plans resulting from these<br/>evaluations, data tracked and information on improvement activities</li> <li>Self-Study Documentation, if available (in addition to the Self-Study Summary)</li> </ol>  |
|  |



#### Eight Steps to Prepare for the 10-Year Accreditation Site Visit

http://www.acgme.org/What-We-Do/Accreditation/Site-Visit/Eight-Steps-to-Prepare-for-the-10-Year-Accreditation-Site-Visit

1. Reassemble the Annual Program Evaluation/Self-Study Group to "Harvest" the Data in Areas for Improvement Identified during the Self-Study

**Timing:** The 10-year accreditation site visit is scheduled 12 to 18 months after a program has completed and uploaded its Self-Study Summary. The period between the Self-Study and the 10-year accreditation site visit is deliberate to allow programs time to make improvements and conduct one more program evaluation prior to the site visit. This evaluation is when the program should assess and document progress in areas for improvement identified during the Self-Study.

**Team Composition:** The Program Evaluation Committee (PEC) or, if desired, the Self-Study group, should review the data collected for areas of improvement identified during the Self-Study.

**Process:** When the PEC conducts this annual evaluation prior to the site visit, a key area to be assessed pertains to the improvements made in areas identified during the Self-Study.

Review these simple-to-use (optional) forms for aggregating data for  $\overline{\mathbf{W}}$  a single year's Annual Program Evaluation and  $\overline{\mathbf{W}}$  for tracking improvements longitudinally across multiple Annual Program Evaluations.

Ideally, the role of data collection, aggregation, and tracking of progress should be assigned to an individual or a small group (with each individual member responsible for a particular area of improvement).

The individual or the team responsible for each improvement area will need to assess progress, as well as identify if improvement has been achieved or if the data constitute early indications of future improvement.



#### **Preparing Documents for the Site Visit**

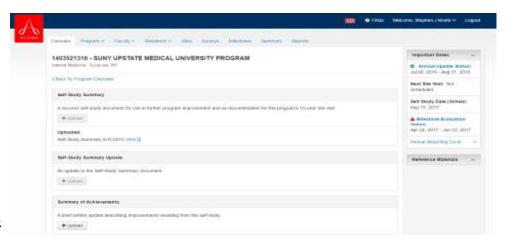
For the review of the 10-year site visit, the Review Committee (RC) will use three documents prepared by the program: (1) the self-study summary that is already filed in ADS; (2) the summary of achievements that you will prepare for the site visit; and (3) information in ADS, which you will update prior to the site visit.

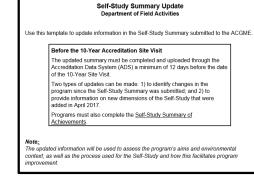
Using the template available from the ACGME 10-Year Site Visit web page, prepare the summary of achievements. This document provides a list of the program= s strengths and the improvements that have been achieved to date in areas identified during the self-study. For the 10-year site visit, the ACGME will not ask programs to provide any information on areas identified during the self-study that have not yet resulted in improvements.

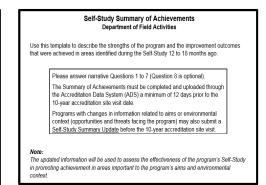
Update the program=s information in ADS. Only three sections of the ADS data can be updated and will be usable by the site visitor and the assigned RC reviewer(s): (1) your updated, current responses to any citations; (2) the open text section describing major changes in the program (you should use this section to discuss any recent improvements to the program, such as actions in response to data suggesting possible problems in the ACGME Resident and Faculty Surveys; and (3) a current block diagram that accurately reflects your program.

Submit the completed summary of achievements to ADS, and complete the ADS update a minimum of 12 days before the site visit date. The final upload date is shown on the first page of the site visit announcement letter.

Must be sent by Tuesday August 1st, 2017









#### Eight Steps to Prepare

http://www.acgme.org/What-We-Do/Accreditati

3. Reassess Program Aims and Other Elements of

In most cases, aims will take a longer-term pers reassess them as part of the Annual Program E -should be reassessed for changes in the envir

Programs that submitted their Self-Study Sumr back, and a five-year look-forward, as well as ar These elements of the Self-Study were added in in a Self-Study Summary Update they will subm together with their Summary of Achievements.

#### Self-Study Summary Update Department of Field Activities

Use this template to update information in the Self-Study Summary submitted to the ACGME.

#### Before the 10-Year Accreditation Site Visit

The updated summary must be completed and uploaded through the Accreditation Data System (ADS) a minimum of 12 days before the date of the 10-Year Site Visit.

Two types of updates can be made: 1) to identify changes in the program since the Self-Study Summary was submitted; and 2) to provide information on new dimensions of the Self-Study that were added in April 2017.

Programs must also complete the Self-Study Summary of Achievements.

#### Note:

The updated information will be used to assess the program's aims and environmental context, as well as the process used for the Self-Study and how this facilitates program improvement.

## Must be sent at least 12 days before site visit

#### Self-Study Summary of Achiever Department of Field Activities

Use this template to describe the strengths of the program and that were achieved in areas identified during the Self-Study 12 to

Please answer narrative Questions 1 to 7 (Question 8

The Summary of Achievements must be completed an the Accreditation Data System (ADS) a minimum of 12 10-year accreditation site visit date.

Programs with changes in information related to aims context (opportunities and threats facing the program) Self-Study Summary Update before the 10-year accre-

#### Note:

The updated information will be used to assess the effectivenes in promoting achievement in areas important to the program's accontext.

#### Self-Study Summary Update Department of Field Activities

Use this template to update information in the Self-Study Summary submitted to the ACGME.

#### Before the 10-Year Accreditation Site Visit

The updated summary must be completed and uploaded through the Accreditation Data System (ADS) a minimum of 12 days before the date of the 10-Year Site Visit.

Two types of updates can be made: 1) to identify changes in the program since the Self-Study Summary was submitted; and 2) to provide information on new dimensions of the Self-Study that were added in April 2017.

Programs must also complete the <u>Self-Study Summary of Achievements</u>.

#### Note:

The updated information will be used to assess the program's aims and environmental context, as well as the process used for the Self-Study and how this facilitates program improvement.

### **Self-Study Summary of Achievements**

- Program Strengths
- Question 1: List the program's key strengths identified during the Self-Study. (Maximum 250 words)
- Question 2: Discuss how these strengths relate to the program's aims. (Maximum 200 words)
- Question 3: Discuss how these strengths relate to the program's context (i.e., how do they capitalize on program opportunities or mitigate threats facing the program). (Maximum 200 words)
- Achievements in Program's Self-Identified Areas for Improvement
- Question 4: Describe improvements in critical areas identified during the Self-Study. (Maximum 250 words)
- Question 5: Discuss how these improvements relate to the program's aims. (Maximum 250 words)
- Question 6: Discuss how these improvements relate to the program's context (i.e., how do they capitalize on program opportunities or mitigate threats facing the program). (Maximum 250 words)
- Question 7: Summarize the process for how the program made these improvements, and what information was used to track progress and to assess the improved outcomes. (Maximum 250 words)
- Question 8: If this is a core program with two or more dependent subspecialty programs, did the Self-Study process for the dependent subspecialty programs identify strengths, areas for improvement, opportunities and/or threats that were shared among all or some of these programs? \_\_\_\_Yes No.
  - If Yes, please summarize common areas identified during the Self-Study where improvements have been made. (Maximum 200 words)
- **OPTIONAL Question 9:** Summarize any learning that occurred during the process of making improvements in areas identified during the Self-Study. (Maximum 200 words)

### **Self-Study Summary Update**

**Describe your vision and plans for the program for the next five years.** (Maximum 250 words

#### Significant Changes and Plans for the Future

- Describe significant changes and improvements made in the program over the past five years. (Maximum 250 words)
- Based on the plans described in the response to the previous question, what will "take this to the next level"? (Maximum 250 words)

#### Updates and 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.
- Describe any changes in opportunities for the program. (Maximum 250 words)
- Describe any changes in threats facing the program. (Maximum 250 words)

MEMO TO: RESIDENTS/FELLOWS

FROM: Judith D. Rubin, MD. MPH. ACGME Accreditation Field Representative:

Site Visit Team Leader

Because the ACGME values input into the site visit from all residents/fellows, we would appreciate receiving from your resident/fellow group a single collective (consensus) list of up to five strengths of your program and up to five areas for improvement of your program that you want to be sure are discussed during the resident/fellow interview.

Must be e-mailed by a fellow

Directly to Recome org ) at least 10 days prior to Please send the list to n the site visit

 Identify the following irubin@acgme.org e-mail visit date. (Abbreviations are OK.)

Please do not share the list with your Program Cirec

Bring a copy of list with you to the site visit interview

The list that you provide will be confidential. Topics will not director or faculty unless you give permission to do so during

Thank you! We look forward to meeting with you.

MEMOTO: FACULTY

Judith D. Rubin, MD, MPH, ACGME Accreditation Field Representative: Site

Visit Team Lander

Because the ACGME values input into the site visit process from all members of the faculty, we would appreciate receiving from your faculty group a single collective (consensus) list of up to five strengths of your program and up to five areas for improvement of your program that you want to be sure are discussed during the faculty interview.

Must be e-mailed by a non-PD faculty member

- Directly to
- Identify the following on the sirubin@acgme.org institution, specially, and site visit date. (Abbreviations are OK.)
- Please do not share the list with the Program Director or the Program Coordinator.
- Bring a copy of list with you to the site visit interview.

The list that you provide will be confidential. Topics will not be shared with the program director unless you give permission to do so.

Thank you! We look forward to meeting with you.



#### **Guidelines for the Resident Interview**

<u>Programs with 15 or fewer residents/fellows: The site visitors will interview all trainees on duty on the day of the visit.</u>

Programs with more than 15 residents/fellows: The site visitors will interview a minimum of 15 to 18 peer-selected trainees, representing all years of training.

Residents/fellows may be interviewed in smaller groups by years of training or individually, and your primary site visitors will indicate the interview format in his/her letter to you.

ACGME defines "peer-selected "as residents/fellows voted on by their peers (other residents only) and not chosen by a chief resident or other program representative. Chief residents beyond the accredited years of training may not participate.

If your program includes a combined residency other than Internal Medicine-Pediatrics (which is accredited separately by the ACGME), residents from the combined program must be represented in the resident interview group.

#### Planning the site visit day

- The site visitors will meet with program directors, faculty, residents/fellows, and a
  sponsoring institution representative (DIO or designee). As the site visitors will divide the
  interviews of the core program and the subspecialty programs, please ensure that one
  room per site visitor are available on all days of the site visit.
- Each room should have a central table of sufficient size to allow all participants to have a seat at the table (no classroom-style seating).
- Arrangements for having refreshments available would be best accomplished by having food/snacks <u>outside the meeting room</u>, for access by all participants during break times and between interview sessions. Please have hot coffee and bottled water available throughout the site visit day.
- Please follow the guidance in Dr. Philibert's letter for peer selecting the residents/fellows for the interview.

#### Core Program Responsibilities:

| Pulmonary-Critical Care Medicine Program, Tuesday Morning, August 15 |   |  |
|--|---|--|
| 07:45 - 08:00  | Site Visitor Arrives (Kraybill)   |  |
| 08:00 - 09:00  | Initial Meeting, Review of the Self-Study and the Summary of Achievements - Program Director and Program Coordinator: Initial discussion about your program and review of documents listed in Dr. Philibert's site visit announcement letter. |  |
| 09:00 - 10:00  | Fellow Interview: All available fellows.  |  |
| 10:00 - 10:45  | Interview - Key Faculty: Up to eight key faculty.   |  |
| 10:45 - 11:00  | Site Visitor Private Working Time   |  |
| 11:00 - 11:30  | Concluding Meeting with the Program Director  |  |

| Subspecialty Programs, Wednesday Morning, August 16 |  |  |  |  |
|---|--|--|--|--|
| Cardiology (Bush)                                   |  |  |  |  |
| Gastroenterology (Kraybill)                         |  |  |  |  |
| Rheumatology (Rubin                                 | 1  |  |  |  |
| 08:00 - 09:00                                       | Initial Meeting, Review of the Self-Study and the Summary of Achievements - Program Director and Program Coordinator: Initial discussion about your program and review of documents listed in Dr. Phillibert's site visit announcement letter. |  |  |  |
| 09:00 – 10:00                                       | Fellow Interview: All available fellows.   |  |  |  |
| 10:00 - 10:45                                       | Interview - Key Faculty: Up to eight key faculty.  |  |  |  |
| 10:45 - 11:00                                       | Site Visitor Private Working Time  |  |  |  |
| 11:00 - 11:30                                       | Concluding Meeting with the Program Director   |  |  |  |

| Subspecialty Programs, Wednesday Afternoon, August 16 |   |  |  |  |
|---|---|--|--|--|
| Geriatric Medicine (Bush)                             |   |  |  |  |
| Nephrology (Kraybill)                                 |   |  |  |  |
| Hematology-Oncology (Rubin)                           |   |  |  |  |
| 12:30 - 13:30   | Initial Meeting, Review of the Self-Study and the Summary of Achievements - Program Director and Program Coordinator: Initial discussion about your program and review of documents listed in Dr. Philibert's site visit announcement |  |  |  |
|   | letter.   |  |  |  |
| 13:30 - 14:30   | Fellow Interview: All available fellows.  |  |  |  |
| 14:30 - 15:15   | Interview - Key Faculty: Up to eight key faculty.   |  |  |  |
| 15:15 - 15:30   | Site Visitor Private Working Time   |  |  |  |
| 15:30 - 16:00   | Concluding Meeting with the Program Director  |  |  |  |

| Subspecialty Programs, Thursday Morning, August 17 Infectious Disease (Bush) Endocrinology (Kraybill) |  |  |  |
|---|--|--|--|
| 08:00 - 9:00  | Initial Meeting, Review of the Self-Study and the Summary of Achievements - Program Director and Program Coordinator: Initial discussion about your program and review of documents listed in Dr. Phillibert's site visit announcement letter. |  |  |
| 09:00 – 10:00   | Fellow Interview: All available fellows.   |  |  |
| 10:00 - 10:45   | Interview - Key Faculty: Up to eight key faculty   |  |  |
| 10:45 - 11:00   | Site Visitor Private Working Time  |  |  |
| 11:00 - 11:30 Concluding Meeting with the Program Director  |  |  |  |

# Fellows can be called back at ANY time



#### Core Program Responsibilities:

#### **Documents to Be Sent to the Site Visitors:**

Please send the following documents to both site visitors at least 12 days before the visit:

A copy of the site visit schedule with the names and titles of all the participants.

Directions to the institution and the meeting rooms in which the visit will be conducted.

Contact information for the program director or another staff member, with a cell phone or pager number for contact if an emergency or other urgent need to contact the program arises.

A few days before the visit, please confirm that both the faculty and residents/fellows have sent their group's list of strengths and opportunities for improvement directly to the site visitors.



#### **Common Program Requirements**

Sponsoring and Participating Institution

1. Current, signed program letters of agreement (PLAs).

#### Resident Appointment and Evaluations

2. Files of recent program graduates and current residents/fellows (1-2 in each year of training); files of any trainees who have transferred in or transferred out of the program, or have resigned or been dismissed in the past three years.

Resident/fellow evaluations by faculty, peers, patients, self, other staff; semi-annual evaluations; and final evaluations will be assessed during review of the resident/fellow files.

#### **Educational Program**

- 3. <u>A sample of competency-based, educational level-specific goals and objectives for one rotation/assignment.</u>
  - 4. Conference schedule for current academic year.

# In-Hand on Site Visit Day!!!

#### Faculty and Program Evaluation

- 5. <u>Sample of a completed annual confidential evaluation of faculty by residents/fellows.</u>
- 6. Written description of Clinical Competency Committee (CCC): membership, semiannual resident evaluation process, reporting of Milestones evaluation to ACGME, CCC advising on resident progress including promotion, remediation, and dismissal.
- 7. Written description of Program Evaluation Committee (PEC): membership, evaluation and tracking protocols, resident evaluations of rotations/assignments, development of written Annual Program Evaluation (APE), and action plans resulting from the APE.

#### **Duty Hours and the Learning Environment**

- 8. Program-specific (not institutional) policies for supervision of residents/fellows (addressing progressive responsibilities for patient care and faculty responsibility for supervision), including guidelines for circumstances and events that require residents/fellows to communicate with appropriate supervising faculty members.
  - 9. Sample duty hour compliance data demonstrating your monitoring system.

#### **Quality Improvement**

\_\_ 10. <u>Sample documents demonstrating resident/fellow participation in patient safety and quality improvement projects.</u>

# Say What?????



#### Site Visit Document List for the 10-Year Accreditation Site Visit

| Site Visit Document Checklist   |                |
|---|----------------|
| Please have these documents available for review on the day of the site visit.  |                |
| Sponsoring and Participation Institutions   |                |
| 1. Current, signed program letters of agreement (PLAs)  |                |
| Resident Appointment and Evaluations  |                |
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| Annual Program Evaluation and Self-Study Documents  |                |
| The documents below will NOT be accessed or reviewed by the site visitors, but s be available to the program director for a discussion of the program's ongoin improvement efforts.   | hould<br>g     |
| 11. Annual Program Evaluations for the past five years, action plans resulting from the evaluations, data tracked and information on improvement activities   | iese           |
| 12. Self-Study Documentation, if available (in addition to the Self-Study Summary)  |                |
|   |                |





#### Create 2-3 Binders Containing:

- **❖**PLAs
- ❖ Rotation Description Pick any 1
- Conference schedules for year
- Anonymous Evaluation of a faculty member by

#### fellow

- Clinical Competency Committee Description
- ❖ Program Evaluation Committee Description
- ❖ Fellow Evaluation of the Program
- ❖ Faculty Evaluation of the Program
- **❖** Supervision Policy
- **❖** Duty Hour Policy
- Quality Improvement/Quality Safety Initiatives (Show where/how: include conference schedule, certificates of completion (i.e.. pain management), Fellow Training Record, etc
- ❖Annual Program Evaluations LAST 5 YEARS
- ❖Action Plans LAST 5 YEARS
- ❖Initial Self Study, Self-Study Summary, Self Study Update, Self-Study Summary of Achievements

#### Site Visit Document List for the 10-Year Accreditation Site Visit

Site Visit Document Checklist

Please have these documents available for review on the day of the site visit.

#### Sponsoring and Participation Institutions

1. Current, signed program letters of agreement (PLAs)

Resident Appointment and Evaluations

2. Files of recent program graduates and current residents/fellows (1 to 2 in each year of training); files of any trainees who have transferred in or transferred out the program, or have resigned or been dismissed in the past three years. Resident/fellow evaluations by faculty, peers, patients, self, other staff; semiannual evaluations; and final evaluations will

#### Resident Appointment and Evaluations

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Duty Hours and the Learning Environment

- 8. Program-specific (not institutional) policies for supervision of residents/fellows (addressing progressive responsibilities for patient care and faculty responsibility for supervision) including guidelines for circumstances and events that require residents/fellows to communicate with appropriate supervising faculty members 9. Sample duty hour compliance data demonstrating your monitoring system

Quality Improvement

10. Sample documents demonstrating resident/fellow participation in patient safety and quality improvement projects

Annual Program Evaluation and Self-Study Documents

The documents below will NOT be accessed or reviewed by the site visitors, but should be available to the program director for a discussion of the program's ongoing improvement efforts.

- \_\_11. Annual Program Evaluations for the past five years, action plans resulting from these evaluations, data tracked and information on improvement activities
- 12. Self-Study Documentation, if available (in addition to the Self-Study Summary)



#### Recent Graduate, 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> year fellow files

- Certifications
- **❖** Evals 3<sup>rd</sup> Year
- Milestones
- **❖**Procedure Logs
- **❖**In-Training Exams
- **❖** Evals 2<sup>nd</sup> Year
- **❖** Evals 1<sup>st</sup> Year
- Contracts
- Verifications
- \*Correspondences
- Application
- Misc Letters of Good Standing, Reimbursement forms, etc



## And VACATION!







#### ACGME - Meeting Decision

In accordance with the ACGME's Next Accreditation System and the policies set forth in its Policies and Procedures Manual, all accredited programs are being reviewed annually by their relevant Review Committee. At its 01/19/2018 meeting, the Review Committee for Internal Medicine reviewed the program listed below and took the following action:

Cardiovascular disease

1413521128 - SUNY Upstate Medical University Program

New Status:

Continued Accreditation

Effective Date: 01/19/2018

Decision(s):

A detailed letter of notification will be posted in the ACGME Accreditation Data System (ADS) within 60 days of this e-mail, and you will be notified by e-mail when the letter is available. Until the official letter is posted in ADS, Review Committee staff members cannot discuss the Committee's action. When you receive the letter, please contact the Executive Director if you require further clarification regarding the content of the letter or status of your program.

Sincerely,

Christine Gillard

Accreditation Administrator

#### One Site Visit, Two Objectives

#### Self-Study Review

#### Self-Study Report

- Verifies that the self-study document offers an objective, factual description of the learning and working environment
- Verifies educational outcomes and their measurements and how processes and the learning environment contribute to these outcomes

#### Compliance Review

#### Compliance Report

- Assessment of Compliance with **Program Requirements**
- For programs on Continued Accreditation, focus is on "Core" and "Outcome" Requirements

#### Strengths/AFIs

- Assessment of program strengths and areas for improvement
- Note: This is the field staff's assessment, not the strengths/AFIs identified by the program in the selfstudy (though there may be overlap).



SV Report to RC

**RC LON to Program** (Compliance Feedback)

**DFA Letter to Program** (Self-Study Feedback)

E-2018 ACCES

#### Information and Assistance

#### General

ACGME web site: guidance and FAQs for site visits, more information relevant to the

Review Committee web pages for specialty information

Call the Department of Field Activities with site visit related questions

#### Self-Study Related

Webinars: Self-Study Basics, to come: Plan-Do-Study-Act (PDSA) cycle, Program Evaluation

Self-study web page

10-Year Site Visit web page

"Self-Study" mailbox for questions, feedback:

self-study@acgme.org

