

2015 ACGME Conference Recap:

The ACGME Self Study: Key Roles for Program Coordinators

Adapted from original presentation by Ingrid Philibert, PhD, MBA
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Accreditation Council for Graduate Medical Education

The ACGME Self-Study: Key Roles for Program Coordinators

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Disclosures and Objectives

Disclosures

- Employed by the ACGME; no other items requiring disclosure

Objectives

- Describe what is new about the self-study and the 10-year site visit
- Discuss the elements of the self-study
- Explore the concept of continuous improvement
- Describe the role of the program coordinator
- Offer practical suggestions for program coordinator involvement in self-Study preparation and process

The Next Accreditation System

- Annual data collection and review
- **A Self-Study and a site visit every 10 years**
- Increased focus on continuous improvement
 - Institutional oversight
 - **Ongoing assessment and improvement using the Annual Program Evaluation**
- Programs with a status of Continued Accreditation free to innovate

The Program Self-Study

- A comprehensive review of the program
 - Information on how the program creates an effective learning and working environment and how this leads to desired educational outcomes
 - Analysis of strengths, weaknesses, opportunities and threats, and ongoing plans for improvement
- **12-18 months later:** the 10-year site visit
 - **Time lag is by design to give programs time to make improvements**

Rationale

- A self-study without a concurrent site visit allows for a frank and forthright review of the program
- **12 to 18-month time lag between self-study and 10-year visit allows programs to make improvements**
 - **Program communicates improvements to Review Committee before 10-year site visit, paired with observation on program aims and context from self-study summary**
 - **Program can provide addendum to summary document as needed**
- Planned: Comprehensive assessment of the utility and benefits of the self-study approach

“The Scoop”: A Pilot of an Added Voluntary Visit after Completing the Self-Study

- **The Self-Study Pilot Visit**

- Field staff with special added training review and offer feedback on the self-study to further progress toward improvement and meeting aspirational goals

- **Not an accreditation visit**

- Program volunteers for the visit

- Programs Eligible for the Pilot

- Phase I programs with an initial 10-year site visit between April 2015 and July 2016
- ACGME will await results from initial pilot before extending to other Phase I programs and/or Phase II programs

A Pilot: An Added Voluntary Visit After Completion of the Self-Study (cont).

- **Aims**
 - **Learn if a “non-accreditation” site visit with feedback accelerates program self-improvement**
 - **Learn about effective approaches for conducting the self-study**
- Participation Process
 - Completely voluntary; ACGME contacts eligible programs and asks if interested in participating
- Concurrent
 - Small delay for programs not identified as alpha programs (alpha programs have been notified)
 - Other programs with an early 10-year visit also get a small delay in the start date for their self-study
 - ACGME will communicate self-study start date

A Time Line, Program with July 2015 10-Year Visit

(Voluntary segments in shown in red)



Time	ACGME	Program
March 2015	DFA sends notice to begin self study	Conducts Self Study
	Asks program to volunteer for self-study pilot visit	
July 2015		Uploads self-study summary to ADS
Aug./Sept. 2015	If Yes: Self-study pilot visit	
September 2015	Team sends report to program	Program can update self-study summary if desired
July 2016	Sends notice of 10-year site visit	
October 2016 (12 days before 10-year visit)		Updates ADS data, uploads summary of improvements
October 2016	10-year site visit	
Winter 2016/17 meeting	Review Committee reviews 10-year visit and self-study	

After the Self Study: Program Prepares Self-Study Summary (All Programs)

- **Brief (4 to 5 pages, ~ 2300 word) summary of key dimensions of the Self-Study**
 - **Aims**
 - **External environmental assessment (Opportunities and Threats)**
 - **Process of the Annual Program Evaluation and the Self-Study**
 - **Learning that occurred during the self-study (Optional!)**
- **Information on areas for improvement identified in the self-study not included in the Summary**
- **Summary is uploaded into ADS**

The Self-Study Pilot Visit

(Only Programs that Volunteer)

- **Visit is based on the program's self-study summary**
- Information on areas for improvement shared verbally only by program leaders during the site visit
- A specially trained team of 2 site visitors
 - Different team from the 10-year site visit
- **Team offers verbal feedback**
 - Dialogue on strengths and areas/suggestions for improvement the program identified in its self-study
- **Team prepares written report** and shares with program
 - Report is **NOT shared with the Review Committee**
- Program may update its self-study summary in response to the feedback

The 10-Year Accreditation Site Visit (All Programs)

- The 12- to 18-month period is by design to allow programs implement improvements
- Different team of site visitors
- **A “PIF-Less” Visit**
 - **Program update their self-study summary and provides information ONLY on the improvements that were realized from their self-study**
 - No request for information on areas that have not been resolved
- Team provides verbal feedback
 - Key strengths and suggestions for improvement
- Team prepares a written report for the Review Committee

Review Committee Review of the 10-Year Visit (All Programs)

- Available to the Review Committee
 - ADS Data
 - The program's summary from the self-study 12 to 18 months earlier
 - The program's summary of improvements achieved as a result of the self-study
 - No data collected on areas still in need of improvement
 - The site visitors' report from the 10-year site visit (a full accreditation visit)
- Review of program aims, context and the improvements from the self-study allows the RC to assess the effectiveness of the self-study, with data on the improvements achieved as 1 measure of effectiveness

Review Committee Actions (All Programs)

- Review Committee provides a Letter of Notification from the Full Accreditation Site Visit
 - Citations
 - Areas for improvement
- Review Committee provides feedback on the Self-Study taking into consideration
 - Program aims and context
 - Improvements reported and verified during the 10-year visit
 - Effectiveness of the self-study, based on the improvements the program reported it made as a result of its self-study
- No accreditation impact for initial feedback on the self-study

Self-Study Elements

Self-Study Scope

- Assesses current performance and ongoing improvement effort
- **Initial period: since the program's last accreditation review**
 - Ultimately, a 10-year interval
- Reviews improvement activities, successes achieved, and areas in need of improvement
 - Uses data from successive Annual Program Evaluations, ACGME data, other relevant information

Self-Study Objectives

- **Assess** compliance and improvement using data from prior Annual Program Evaluations and data collected/aggregated for the self-study
- **Focus on**
 - Program Strengths
 - Program Areas for Improvement
- **Consider**
 - Program Aims
 - The program's external environment
 - Environmental Opportunities
 - Environmental Threats
- **Track** ongoing improvements and the success of actions taken

New Areas: Program Aims and Opportunities and Threats

- Program aims
 - Should be realistic
 - Evaluate effectiveness in meeting aims
 - Assess relevant initiatives and their outcomes
- Opportunities and Threats
 - Assess how factors and contexts external to the program (eg, institutional, local, regional and national) that affect the program
 - Opportunities: Factors that favor the program, that the program may take advantage of
 - Threats: Factors that pose risks

Defining Program Aims

- Set aims as part of the annual program evaluation
- Relevant considerations
 - Who are our residents/fellows?
 - What do we prepare them for?
 - Fellowship
 - Academic practice
 - Leadership and other roles
 - Who are the patients/populations we care for?

Strengths and Areas for Improvements

- Strengths and Areas for Improvements identified by:
 - Citations, areas for improvement and other information from ACGME
 - The Annual Program Evaluation
 - Other program/institutional data sources
- Data on improvements should pertain to the period since the program's last accreditation review

Enhancing the Definition of “Areas for Improvement”

- Negative aspects that **detract from the value of the program or place it at a disadvantage.**
 - What factors within your control detract from the ability to maintain a high-performing program?
 - What areas need improvement to accomplish objectives or enhance or supplement your existing strengths?
 - What does your program lack (expertise in a certain subspecialty, a type of technology, access to a particular patient population, faculty with interest and skill in research)?
 - Is there a lack of some types of resources; is the institution constrained in its capacity to provide support?

Defining “Opportunities”

- Opportunities are external attractive factors that, if acted upon, **will contribute to the program flourishing.**
- What are your capabilities for further evolving the program; how can you capitalize on them?
- Has there been recent change in your immediate context that that creates an opportunity for your program?
- Are these opportunities ongoing, or is there a narrow window for them? How critical is the timing?

Defining “Threats”

- Threats include external factors that affect the program.
- **While the program cannot control them, beneficial to have plans to address them if they occur.**
 - What factors beyond your control place your program at risk? What are changes in residents’ specialty choice, regulation, or other factors that may affect the future success of your program?
- Are there challenges or unfavorable trends in your immediate context that may affect your program?
 - E.g. faculty burdened with heavy clinical load that prevents effective teaching and mentorship

Benefits of a Focus on Program Aims

- Suggests a relevant dimension of the program:
 - What kinds of graduates do we produce for what kinds of practice settings and roles?
- Allows for a more “tailored” approach to creating a learning environment
 - Focus on specific aims can produce highly desirable “graduates” that match patient and healthcare system needs⁽¹⁾
- Enhances the focus on functional capabilities of graduating residents
 - Fits with a milestones-based approach to assessment

Hodges BD. “A *Tea-Steeping* or *i-Doc* Model for Medical Education?,” Academic Medicine, vol. 85, No. 9/September Supplement, 2010, pp. S34-S44.

Benefit of a Focus on Environmental Context

- Facilitates assessment of the program's performance in its local environment
- What are program strengths?
 - What should definitely be continued (important question in an environment of limited resources)
- What are areas for improvement?
 - Prioritize by relevance to program aims, compliance, importance to stakeholders
- Useful for all programs, particularly high-performing programs: “What will take our program to the next level?”




The Self-Study Process

Who Should Organize and Conduct the Self-Study?

- Not defined by ACGME
- **Members of the Program Evaluation Committee are the logical choice**
 - **Natural extension of improvement process through the Annual Program Evaluation**
- PEC requirements¹
 - The PEC must be composed of at least 2 faculty members and at least 1 resident^(core);
 - must have a written description of responsibilities^(core)
- **PEC Membership may be expanded for the Self-Study**

¹ ACGME Common Program Requirements, Effective July 2013

The Program Evaluation Committee

-
- a) must be composed of at least two program faculty members and should include at least one resident; (Core)  Yes resident members
- b) have a written description....; and
- c) participate actively in:
- should participate actively in:
 - planning, developing, implementing, and evaluating educational activities of the program; (Detail)
 - reviewing and making recommendations for revision of competency-based curriculum goals and objectives; (Detail)  Interface with CCC
 - addressing areas of non-compliance with ACGME standards; and, (Detail)  Citations and actions to address
 - reviewing the program annually using evaluations of faculty, residents, and others, as specified below. (Detail)

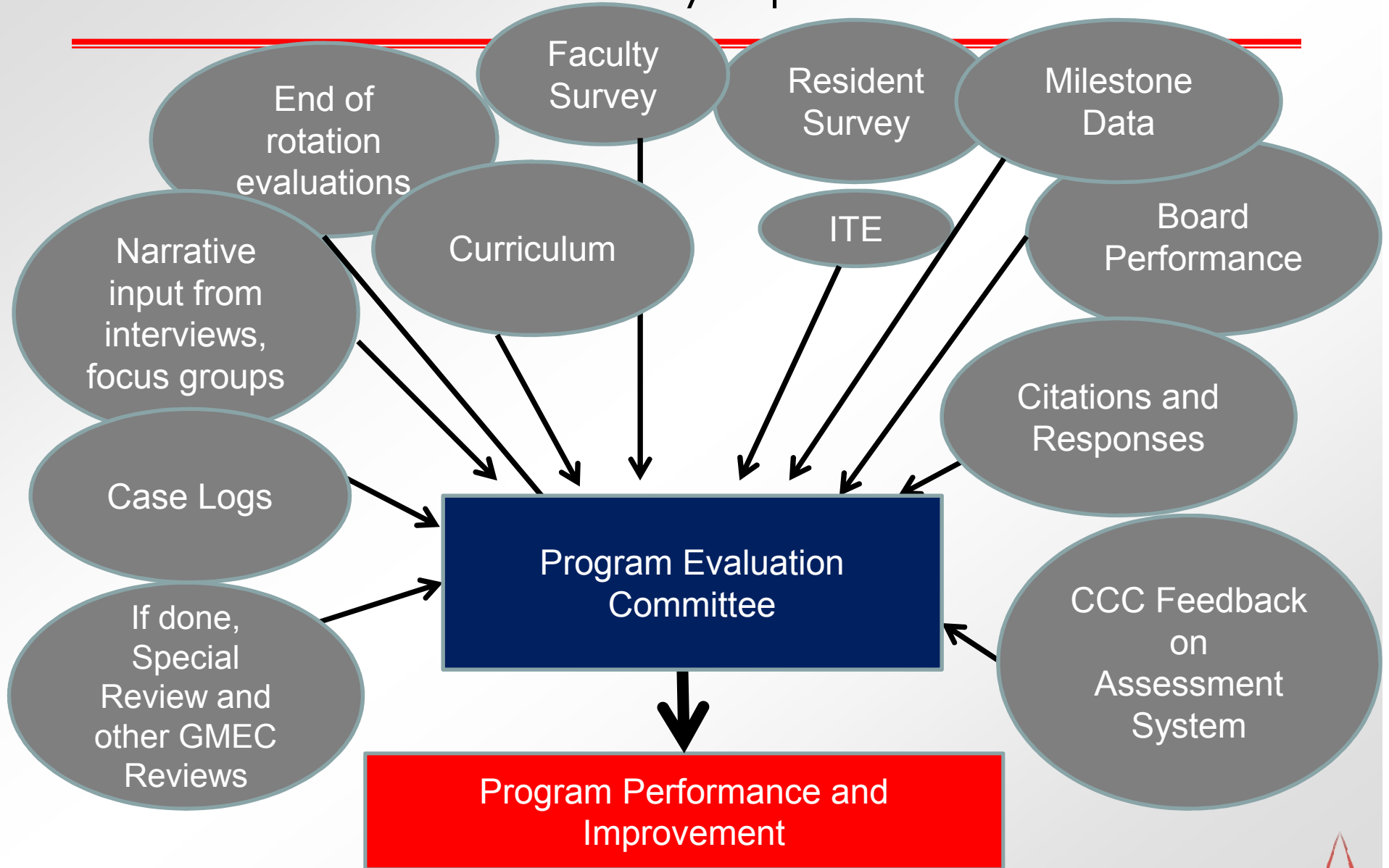
Self-Study Data Gathering

- Annual Program Evaluation data, ACGME Resident and Faculty Survey data, other program and institutional data
- Focus on data gathering as a learning exercise
- Evaluate strengths and areas for improvement
- Explore opportunities and threats
- Reflect stakeholder (residents, faculty, and relevant others) participation, input and perspective
- Data provide evidence to support conclusions

Self-Study Data Gathering (2)

- Interviews
 - Verify and validate data
 - Identify areas that have been resolved and areas and priorities for improvement
 - Identify program strengths
 - Review and revise program aims
 - Assess and validate strengths, weaknesses, opportunities and threats

Range of Potential Annual Evaluation and Self-Study Inputs



The Shewhart PDSA Cycle

- PLAN – prepare the change
- DO – implement the change
- STUDY – monitor and analyze impact of change
- ACT – revise and standardize the change

Identifying Areas for Improvement

- Based on data and facts
- Focus on learners, patients and other stakeholders
 - Prioritize (cannot improve everything at once)
- Systems Thinking
 - Program and institutional systems relevant to resident education and the area needing improvement
- Process Thinking
 - Processes: sets of related tasks used to accomplish something
 - Processes are focal areas for improvement

Tracking Improvements

- Design and Implement solutions
 - Identify individual or group that will be responsible
 - Identify and secure resources
 - Timeline
- Follow-up is key: ensure all issues addressed
- Documentation to facilitate ongoing tracking
 - Example: A simple spreadsheet recording improvements achieved and ongoing priorities
 - Record over multiple years of improvement

Sample Improvement Plan

Area for Improvement	Issue(s)	Improvement Plan	Group Responsible	Target Completion Date	Follow-up
Dissemination of Goals and Objectives	<ul style="list-style-type: none"> • Posted on Intranet (5 clicks to reach) • Not accessed • Not known how or how much this is used by residents and faculty 	<ul style="list-style-type: none"> • Educate residents and faculty • More prominent placement on Intranet (1-click) • Make accessible/viewable in every setting • Integrate with resident formative evaluations 	2 residents and 1 faculty member (names) – give them credit for work	<ul style="list-style-type: none"> • June XXXX for implementation at start of new academic year 	<ul style="list-style-type: none"> • Quarterly survey regarding effectiveness of new approach • Spot check

Components of an Effective Self-Study

- Fits the nature of the program and its aims
- Ensures effective evaluation of entire program with positive impact
- Engages program leaders and others
 - Faculty, residents, fellows, coordinators, staff
 - Potentially: graduates, institutions hiring them
- Is efficient in its execution
- Reporting focused on
 - Improvements achieved
 - Tracking of action items for future improvement

Resident Participation in the Self-Study

- Resident participation critical:
 - They are the beneficiaries of the educational program
 - They have first hand knowledge of areas that need improvement
- Double benefit:
 - Residents help improve their own education
 - Resident participation in “educational QI effort” can be used to meet the requirement for resident involvement in quality and safety improvement

Coordinated Self-Study for Core and Subspecialty Programs

- Coordination of curriculum and program resources
 - Needs of core and subspecialty programs taken into account
 - Subspecialties can access to core resources
 - Core oversight of fellowships
- Assess common strengths, areas for improvement
 - Action plans for areas for improvement
- Increase efficiency
 - Less time and resources spent, coordinated collection and review of data

Organizing the Self-Study for a Core Program and its Dependent Subspecialty Programs

- Effective: Individuals with interest and the most knowledge about improvement efforts
- Efficient: Linking the Self-Study to existing structure for identifying and prioritizing areas for improvement, and tracking action plans and success
- Coordinated: Identifying common areas for improvement across programs that can be considered and addressed collectively to conserve resources and maximize impact

The Self-Study Summary

- A brief document prepared by the program
- ~5-7 pages for core program, less for subspecialties
- Focus: key Self-Study dimensions
 - Aims
 - Opportunities and Threats
 - Self-study process
 - Who was involved, how were data collected and interpreted
 - Evidence of ongoing improvement through sequential Annual Program Evaluations

Key Roles for the Program Coordinator

Key Roles for the Program Coordinator

- Ensure regular, accurate ADS Updates
- Record/aggregate data and improvement realized via the Annual Program Evaluation
 - Participate in the annual program evaluation
 - **Provide input from the coordinator's perspective**
 - Track action plans for areas for improvement
- Maintain a multi-year record of improvements and areas still being worked on
- Coordinate self-study data collection processes, including surveys, interview, focus groups

Key Roles for the Program Coordinator

(con't)

- Maintain self-study data
- Provide input into self-study
- Coordinate self-study
- Coordinate planning the 10-year site visit with the assigned lead field representative
- Coordinate activities on the site visit day
- Provide input on the site visit day



Information and Education Plan

- Self-Study Sessions at AEC
 - Appointment time at AEC for programs with an early self-study (IP and Field Staff with Self-Study pilot experience)
- Planned Webinars:
 - New approach to Self-Study and 10-Year Site Visit, Self-Study Basics, PDSA, program evaluation
- Article on rationale for approach in June issue of JGME
- Self-study web page to go live in March
- “Self-Study” mailbox for questions and feedback (ACGME monitors)

Questions?