

Accreditation Council for Graduate Medical Education

ACGME Webinar

Self-Study: Nuts and Bolts

Practical Guidance on the Program Self-Study

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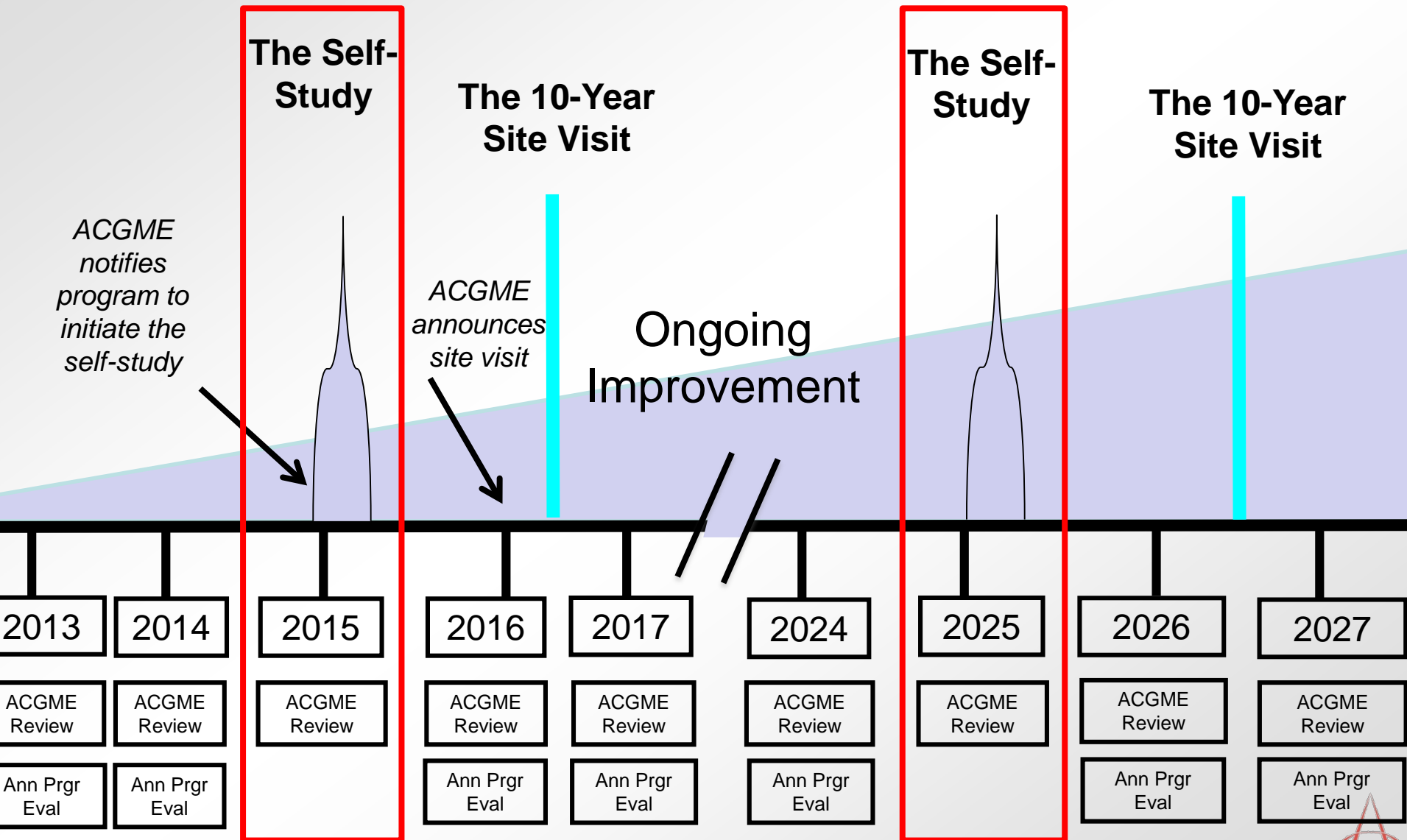
Disclosures

- Ingrid Philibert, PhD, is a full-time employee of the ACGME
- No other items requiring disclosure
- Susan Guralnick, MD, is the Designated Institutional Official at Winthrop University Hospital. She is also a member of the Transitional Year Review Committee.

Disclosures and Objectives

- Discuss the elements of the self-study, and ongoing program evaluation and improvement on which it is based
- Detail the sequence and the components of the self-study, the voluntary self-study pilot visit, and the 10-year site visit
- Describe program and institutional practices to assist with self-study preparation and execution
- Detail the components of the 10-year accreditation site visit and Review Committee review
- Highlight education materials and resources under development

The Self-Study and the 10-Year Site Visit: A Conceptual Model



Self-Study Scope

- Assesses program performance and ongoing improvement effort
 - Facilitate improvement in areas already in substantial compliance with the accreditation standards
- Initial period: since last accreditation review
 - Ultimately, a 10-year interval
- Review improvement activities, successes achieved, and areas in need of improvement
 - Based on successive Annual Program Evaluations, ACGME Resident and Faculty Survey data, other relevant information, stakeholder input

Familiar Components: Strengths and Areas for Improvements

- Strengths
 - Important to acknowledge and celebrate
 - What should definitely be continued (important question in an environment of limited resources)
- Areas for Improvements identified by:
 - Citations, areas for improvement, and other information from ACGME
 - Annual Program Evaluation
 - Other program/institutional data sources
- Expected: Longitudinal tracking of strengths and areas for improvements through successive Annual Program Evaluations

Improvement Viewed in Context: Program Aims, Opportunities, and Threats

- Aims as a way to differentiate programs
 - Set and reassessed as part of the Annual Program Evaluation
- Ultimate goal: Intentionality in program design
 - Meeting the needs of the program's service area (may be local, regional, or national)
- Context: Opportunities and Threats
 - External attractive factors that, if acted upon, will contribute to the program flourishing or may have a negative effect
 - While the program cannot fully control them, it is beneficial to have plans to mitigate their effect

Defining Program Aims

- Aims are set and revisited/revised 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 patients/populations we care for?

Benefits of a Focus on Program Aims

- Suggests a relevant dimension of the program:
 - Types of graduates produced for specific community needs, practice settings, and roles
- Allows for a more “tailored” approach to creating a learning environment
 - Focus on specific aims can produce highly desirable “graduates” who match patient and health care system needs⁽¹⁾
- Enhances the focus on functional capabilities of graduating residents
 - Fits with a milestones-based approach to assessment

1. Hodges BD. A tea-steeping or i-Doc model for medical education? *Acad Med.* 2010;85(suppl 9):34-44.

Defining “Opportunities”

- **Opportunities are external attractive factors that, if acted upon, will contribute to the program flourishing**
- What are capabilities for further evolving the program? How can the program capitalize on them?
- Has there been recent change in the program’s context that creates an opportunity?
- 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 fully control them, it is beneficial to have plans to mitigate their effect**
 - What factors beyond the program’s may place it at risk?
 - What are changes in residents’ specialty choice, regulation, or other factors that may affect the future success of the program?
- Are there challenges or unfavorable trends in immediate context that may affect the program?
 - e.g., faculty burdened with heavy clinical load that prevents effective teaching and mentorship

Coordinated Self-Study for Core and Subspecialty Programs

- Coordination of curriculum and program resources
 - Needs of core and subspecialty programs considered collectively
 - Subspecialties can access core resources
 - Core oversight of fellowships
- Assess common strengths, areas for improvement
 - Coordinated action plans
- Increase efficiency
 - Less time and resources spent, coordinated collection and review of data

Self-Study Process

- Who should conduct the self-study?
 - Not defined by ACGME
 - Members of the Program Evaluation Committee (PEC) are the logical choice
 - PEC membership may be expanded
- Data Gathering
 - Many potential sources, including ACGME Resident and Faculty Surveys, program and institutional data
 - Focus on data gathering as a learning exercise
 - Important: Stakeholder (residents, faculty, and relevant others) participation, input, and perspective
 - Data as evidence to support conclusions

The Winthrop University Hospital Experience

AN INSTITUTIONAL AND PROGRAM APPROACH TO THE SELF-STUDY

A Joint Institutional and Program Approach to the Self-Study

- IM Core Program plus 11 Subspecialties
- Engagement of:
 - Programs as a “team”
 - Stakeholders
- Avoid “Duplication of Effort”
- Develop a shared process
- Look for shared themes for inclusion in shared action plans

Self-Study Planning Group

- Program Leadership
 - *Core PD/Fellowship PD/APD*
- Program Coordinator(s)
- Faculty
- Resident/Fellow
- DIO
- GME Coordinators/Staff
- (Others)

Self-Study Planning Group

- Who are our Stakeholders?
- Methods of Data Collection
 - The Annual Program Evaluation
 - Templates/Worksheets
 - Aims, SWOT
 - Think nationally, regionally, locally, internally
 - Surveys
 - Focus Groups
 - Meetings
 - Retreats

Self-Study Planning Group Surveys

- Who to Survey?
 - Residents/Fellows/Faculty/Coordinators/Alumni
 - Nurses/Other staff/Patients
- Survey Questions
 - Cross-Program Questions
 - Program-Specific Questions
 - Planning Group survey development
 - Vet surveys with program leadership/stakeholders

Focus Groups

- Opportunity for group thinking
 - Should be interactive among the group
- Clarification/Elaboration on survey responses
- Facilitator(s) from outside the program
 - Instruction/training
 - Can be run by GME office
- Conversations recorded/transcribed
- Anonymity/confidentiality is important

Data Analysis

Program Self-Study Committee

- Membership (Likely the same as PEC, may include additional)
- Aims
- SWOT Analysis
- Longitudinal APE review (Annual Program Evaluation)
- ADS information
- Survey information
- Focus Groups/Meetings/Retreats

The Cornerstone

The Annual Program Evaluation

- Longitudinal data/action plans from the annual program evaluation provide the foundation for the self-study
- Formal, systematic evaluation
 - Program Evaluation Committee (PEC)
 - PD, ≥ 2 Faculty, ≥ 1 Resident/Fellow, (PC)
- The program must monitor **and** track:
 - Resident Performance
 - Faculty Development
 - Graduate Performance
 - Program Quality

The Annual Program Evaluation Monitoring and Tracking

Resident Performance

- *Evaluations*
- *In-Training Examinations*
- *OSCEs*
- *Other Performance Measures*

Graduate Performance

- Board Certification examination (% taken/% passed)

Faculty Development participation

- Faculty or Leadership Development programs relevant to role in the program
- Programs that enhance effectiveness of skills as educators, based on their role in the program

Annual Program Evaluation Monitor **and** Track **Program Quality**

- **ADS Data**
 - ACGME Resident and Faculty Surveys
 - Resident and Faculty Scholarship
 - Case Logs (*If none required for specialty, review resident survey for clinical experience*)
- **Duty Hours**
- **Resident and Faculty written confidential evaluations** of the program (and rotations)
- **Review Curriculum** (revise as needed)

Annual Program Evaluation

- Analyze **CLER Site Visit report**
- **ACGME Communications**
- **Action plans must use** the data and discussion to improve the program
- **Monitor progress** on previous year's Action Plans

Sample Self-Study Timeline

Notification of self-study

Recruitment/Appointment of (Institutional/Departmental) Self-Study Planning Committee (SSPC)

Recommend committee watch an ACGME Self-Study Webinar

Meetings of the SSPC

- Review SS Process
- Review/Define SS Timeline
- Create/Review SS SWOT Template
- Create/Review SS Survey Documents
- Define Focus Group Process

Presentation of SSPC Work to GMEC/discussion

Finalize process, survey questions, stakeholder meeting/focus group plans, other details

Sample Self-Study Timeline

Formation of Program-Specific SS Committees (PEC members plus others as appropriate/desired)

Program-Specific SS Committees meet

- Program-specific SS planning
- SWOT Analysis begins

Surveys distributed

Survey Data Collection

Focus Group/Other Meetings

Program-Specific SS Committees meet

- Data Analysis
- SWOT Analysis review with additional data collected
- Performance of Full Self-Study

Prepare SS Document for submission to ACGME

Finalize SS Document for submission to ACGME

The Self-Study Pilot and the 10-Year Accreditation Site Visit

New: Allowing 12-18 months between the Self-Study and the 10-Year Site Visit

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 to allow programs to make improvements
 - The program communicates improvements to the Review Committee for the 10-year site visit
 - At the time of the site visit, the program:
 - Provides a summary of achievements made as a result of its self-study 12–18 months earlier
 - May provide an update to its self-study summary

New: A Pilot of a Voluntary Self-Study Pilot Visit

- All Phase I programs with an initial 10-year site visit between April 2015 and July 2016
- Participation is voluntary; ACGME staff contacts eligible programs and asks if interested in participating
- What it entails
 - A site visit 2 to 3 months after the program has completed its self-study
 - Not an accreditation visit
 - Site visit team offers feedback on the self-study to further progress toward improvement and meeting aspirational goals
- Core and subspecialty programs
 - If the core volunteers, subspecialty programs can opt in or out of the self-study pilot visit

Timeline, Programs with April–July 2015 10-Year Visit (Voluntary segments 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	
By July 2015		Uploads self-study summary
August–October 2015	If program volunteers: the self-study pilot visit	
August–October 2015	Site visit team sends report to program	Program may update self-study summary if desired
TBD April–September 2016	Sends notice of 10-year site visit (60–90 days notice)	
12 days before 10-year visit date		Updates ADS data, uploads self-study summary of improvements
TBD July–November 2016	10-year site visit	
Winter 2016/2017 meeting	Review Committee reviews 10-year visit and self-study	

The Self-Study Summary (All Programs)

- After the self-study, the program uploads the Self-Study Summary through ADS
- ACGME Template: 2,300 words (~4–5 pages) for core program, less for small subspecialty programs
- Sections: Key self-study dimensions
 - Aims
 - Opportunities and Threats
 - Self-study process
 - Who was involved, how were data collected and interpreted
- Omitted by design: Information on strengths and areas for improvement

The Self-Study Pilot Visit

(Only Programs that Volunteer)

- Non-accreditation site visit based on the self-study summary, 1–3 months after uploading the summary
- Site visit by specially trained team of 2 site visitors
 - Different team from the 10-year site visit
- Information on areas for improvement shared **verbally only** by program leaders during the 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
 - The report is **NOT** shared with the Review Committee
 - Program may update its self-study summary in response to the feedback

7 Principal Objectives for the Self-Study Pilot Visit

- 1. Verify the data in the self-study summary**, with a focus on exploring program aims, as described in the self-study summary, and assessing the efficacy and effectiveness of the self-study process
- 2. Gather information** about the program's environment and the context in which it operates through observation and interviews
- 3. Review/verify/clarify the program's strengths and areas for improvement**, using information verbally presented by program leadership during the pilot site visit

7 Principal Objectives for the Self-Study Pilot Visit (cont.)

- 4. Assess the degree to which the program's self-study findings are congruent** with program aims and environmental context
- 5. Discuss the program's action plans for areas for improvement** identified during the self-study
- 6. Collect aggregated data on the self-study process**, highlighting efficient approaches to self-study organization and execution
- 7. Provide feedback on self-study content**, highlighting congruence/lack of congruence between the program's aims and environmental context, and strengths and key areas for improvement identified

The 10-Year Site Visit (All Programs)

- A full accreditation site visit
 - Review of all applicable requirements
- 12- to 18-month period is by design, to allow programs implement improvements
- “Summary of Achievements”
- ACGME template uploaded through ADS
- ~1,200 words, describing key improvements accomplished from the self-study
 - Program asked to provide information ONLY on the improvements that were realized from their self-study; no information collected on areas that have not been resolved
 - Program may provide an update to its self-study summary

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

- RC provides Letter of Notification from the 10-year (Full Accreditation) Site Visit
 - Citations and Areas for Improvement
- RC feedback on the self-study taken into consideration
 - Program aims and context; improvements reported and verified during the 10-year visit
 - Effectiveness of self-study, based on process and the outcomes the program has reported
- Formative feedback (no accreditation impact) for the initial RC assessment of self-study effectiveness
 - Envisioned: A milestone-based approach in several key self-study dimensions
 - One aim of the self-study pilot visit is early identification of effective, efficient practices for the self-study

A Comprehensive Program Evaluation of the Benefit of the Voluntary Self-Study Pilot Visit

- **Planned**

- Needs assessment
- Feedback from participants, site visitors, RC reviewers
- Outcome study using matched de-identified paired data

- **Aims**

- Learn if a “non-accreditation” site visit with feedback accelerates self-improvement
- Assess which program dimensions are associated with accelerated improvement
- Learn about effective approaches for conducting the self-study

Self-Study Program Evaluation

Needs Evaluation

- 1) Program director information and learning needs
- 2) Review Committee and ACGME staff learning needs
- 3) Develop tools and other resources to assist programs in conducting their self-study

Process Evaluation

- 1) Learn about effective and efficient approaches for conducting the self-study
- 1) Assess the self-study pilot visit (for best practices)
- 2) Assess the 10-year site visit (for best practices)

Outcomes Evaluation

- 1) Compare improvement for programs with a self-study pilot visit vs. those without
- 2) Assess which program dimensions are associated with accelerated improvement
- 3) Test the adequacy of the time lag between self-study and 10-year site visit (outcome component)

Information and Education Plan

- Individual communication with programs in the self-study pilot eligible group
- Additional webinars
 - Self-Study Basics, PDSA, Program Evaluation
- Article on the rationale of the self-study approach in the June issue of *JGME*
- Self-study web page went live in March
 - Planned additions:
 - Guidance on defining aims, opportunities, and threats
 - Self-study summary of achievements, completed sample documents
- “Self-Study” mailbox (self-study@acgme.org) for questions and feedback (ACGME monitors)