ACGME Webinar
Self-Study: Nuts and Bolts

Practical Guidance on the Program Self-Study

June 18, 2015 2:00–3:00 p.m. Central Time

Susan Guralnick, MD – Designated Institutional Official, Winthrop University Hospital
Ingrid Philibert, PhD – SVP, Field Activities, ACGME
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

ACGME notifies program to initiate the self-study

ACGME announces site visit

Ongoing Improvement

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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
- Enhances the focus on functional capabilities of graduating residents
  - Fits with a milestones-based approach to assessment

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
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<thead>
<tr>
<th>Time</th>
<th>ACGME</th>
<th>Program</th>
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<tr>
<td>March 2015</td>
<td>DFA sends notice to begin self-study</td>
<td>Conducts self-study</td>
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<td>Asks program to volunteer for self-study pilot visit</td>
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<td>By July 2015</td>
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<td>Uploads self-study summary</td>
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<td>August–October 2015</td>
<td>If program volunteers: the self-study pilot visit</td>
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<td>Site visit team sends report to program</td>
<td>Program may update self-study summary if desired</td>
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<td>TBD April–September 2016</td>
<td>Sends notice of 10-year site visit (60–90 days notice)</td>
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<td>12 days before 10-year visit date</td>
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<td>Updates ADS data, uploads self-study summary of improvements</td>
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<td>TBD July–November 2016</td>
<td>10-year site visit</td>
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<td>Winter 2016/2017 meeting</td>
<td>Review Committee reviews 10-year visit and self-study</td>
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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)