

A Single Accreditation System: How to Prepare for Your Program's ACGME Site Visit"

ACGME Webinar

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Ingrid Philibert, PhD, MBA

Senior Vice President, Department of Field Activities



Disclosures

- Ingrid Philibert is employed by the ACGME.
- No other items requiring disclosure

Webinar Goals

- Discuss principles for site visits in the Single Accreditation System
- Introduce the ACGME Field Staff
 - Discuss added training for field staff
- Describe site visit scheduling
 - ACGME commitment to timely site visit scheduling
 - “Batching” multiple program visits at an institution
- Discuss site visit preparation and the site visit day
 - Collecting information on strengths and areas for improvement
 - Interview participants and sequencing
 - Clarification and on-site feedback at closing interview



Principles for Single Accreditation System Site Visits

ACGME Expectations for All Accreditation Site Visits

- Based on the documentation provided by the program and sponsoring institution
- Interviews used to verify existing information, clarify and explain missing or ambiguous information
- Conducted in accord with established policies
- Address all relevant aspects of program
- Site visit report contains no recommendation for RRC action
- The site visit is educational and non-adversarial



ACGME Expectations for All Accreditation Site Visits (cont.)

- Inform Review Committee accreditation decisions in a “substantial compliance” model
- Compliance assessed
 - By peer review
 - Against the entire set of standards
 - Model not formally “weighted”
 - Model not compensatory (e.g., really good performance in one areas does not offset non-compliance in another area)
- The aim is continuous improvement

Principles for Site Visits for Osteopathic Programs on Pre-accreditation

- Treated as a “New” (to ACGME) program with trainees (residents/fellows)
- Single site visitor
- A full site visit with review of all applicable program and institutional requirements
- Program application uploaded through ADS serves as the core document for the site visit
- Will review other documentation on site, as needed
- Interviews with residents, faculty, program leadership, sponsoring institution leadership

What is Meant by a “New Program with Residents”

- ACGME expects the program to be in substantial compliance with the requirements at the time of the site visit – “a snap shot”
- We will ask residents about the program’s general educational resources, such as faculty skills, interest in and availability for teaching supervision, volume and variety of patients, etc.
- Approach is comparable to that for programs that go from no accreditation to ACGME accreditation

What is Meant by a “New Program with Residents” (cont.)

- Site visitors will not ask “historical” data in areas where the standards differ
 - Data on current compliance may come from program leadership (eg, new resident assessment forms vs. completed forms historically used for resident assessment)
 - Process for some areas will differ from both the process used for applications and for programs currently accredited by ACGME
 - Example: In the absence of case and experience data for some osteopathic program, the site visit will assess institutional case/patient data as a measure of adequacy of cases/patients

What is Meant by a Full Site Visit

- Site visitors will review the program application for compliance with all applicable requirements
- The site visitor reviews the application for areas that are unclear or suggest potential area of non-compliance
- The reports will use the ACGME application reporting format with information on compliance with all requirements
 - Will include an expanded discussion of program strengths and opportunities for improvement identified by program leadership, faculty and trainees

ACGME vs AOA Requirements

- Differences in the specific language, but a good degree of commonality in underlying expectations
- Example
 - Program evaluation and improvement
 - ACGME requires a Program Evaluation Committee with specified membership
 - As you implement the ACGME-specified approach, also highlight what your program traditionally has done for program evaluation

What if.... The Program Does Not Achieve Initial Accreditation at its First Review?

- A second site visit for a program that does not achieve initial accreditation entails a more longitudinal assessment
 - Intent is to capture improvements the program has made
- Site visit will include a review of prior citations and the improvements the program has made
- Where pertinent, residents will be asked about changes in their recent experience (since the prior site visit) in areas covered by the standards

Introducing the ACGME Accreditation Field Staff



The ACGME Field Staff



Accreditation Field Staff

- 32 individuals (26 MDs, 1 MD/JD, 5 PhDs/EdDs)
- Extensive prior experience in medical education
 - Many former program directors, designated institutional officials and RRC members
- Lots of experience
 - Most senior 28 years, 13 with 10 or more years
- Employed by the ACGME
 - Most field representative perform this work as the final formal part of a career in graduate medical education
 - A few mid-career individuals
 - Limit other academic and work roles to avoid conflicts and dualities of interest

The Accreditation Site Visitors' Role

- The “eyes and ears” of ACGME and the Review Committee
- Meet with: Program Director, residents, faculty, administrators
- Explain the accreditation and site visit process to participants
- Clarify, confirm, verify, newer role: “diagnose”
- Tour facilities
 - Prior Citations and/or RRC expectation to see physical facilities or equipment
- Emerging: Sample clinical and didactic offerings
 - Serve as a sensor and reporter from the field



Field Staff Professional Development

- Twice yearly week-long professional development
- Development focused on relevant skills: team skills, data synthesis, interviewing, reporting qualitative information, offering feedback
 - Briefings on all relevant ACGME areas
 - Team exercises with debriefing
 - Participation in ACGME-wide “Town Halls”



Field Staff Professional Development (cont.)

- Added training for members of the field staff who will conduct site visits in the Single Accreditation System
 - Some members selected with prior experience with osteopathic institutions/programs and programs with dual accreditation
 - Scheduled to occur in June 2015
 - Lorenzo Pence, DO, Sr. VP for Osteopathic Accreditation and committee members of the new osteopathic accreditation committees will have a major role
- Ongoing updates about changes in the requirements such as Review Committee acceptance of program directors with AOA certification
- As the SAS progresses, added education about Osteopathic Principles Recognition and Osteopathic Neuromusculoskeletal Medicine (ONMM)



Scheduling Site Visits in the Single Accreditation System

Site Visit Scheduling for Programs on Preaccreditation

- “High Priority” scheduling of site visits
- Aim is to allow reviews for applications submitted by the September 30, 2015 to occur in the fall/winter Review Committee meetings
- Department of Field Activities goal
- “Batch” scheduling of site visits for multiple programs at a single sponsor if applications are received reasonably concurrently
- Will attempt to “batch” schedule applications received later
 - Ability to do so may depend on other components of the site visitor’s schedule

Preparing for the Site Visit

Process for all ACGME Site Visits

- Announcement e-mail notice sent by ACGME
 - Detailed information in letter posted in ADS
- Follow-up announcement sent by site visitor (coordinate with PD or, more often, the coordinator)
 - Identify participants (program director, faculty, residents, designated institutional official, any others) and respective times
 - Arrange for documents to be made available for the site visit
 - Confirm suggested sequence of interviews and secure interview room, announce tours if needed (eg, Family Medicine Center)
- Application has been filed with ACGME
 - No changes can be made, but changes can be communicated via the site visitor

Enhancing Resident Input: Collecting a Consensus List of Strengths and Opportunities for Improvement

- Note to the program directors to be forwarded to the resident
- Asks them to complete and submit a single, confidential “consensus list” of 5 strengths and opportunities for improvement (OFIs) they would like to discuss during the site visit interview
- List is sent directly to the site visitor or brought to the resident interview

Enhancing Resident Input: Reactions

Used for all ACGME program accreditation site visits since July 2011

- No negative feedback from programs (some initial questions/curiosity)
- Highly positive feedback from the residents
- Appreciate the more formal inclusion into the site visit data collection process
- Data valuable to field staff and RRCs
- “Strengths” are shared with the program director during the final interview, “OFIs” are shared with the residents’ express permission

Practical Tips: Always Be Prepared

- **Have a “site visit ready” program, all the time**
 - Keep all relevant documentation current
 - Added focus on milestones and assessment records
 - Can be provided via electronic records (program staff must know how to access)
- Documents for review should be current

Practical Tips: Getting Ready for the Visit

- Read the ACGME announcement letter carefully
- Follow the instructions and request clarification if any guidance is not perfectly clear
 - Keep all relevant documentation current
 - Added focus on milestones and assessment records
 - Can be provided via electronic records (program staff must know how to access)
- Application filed in ADS cannot be updated
- If a correction or update is vitally important
 - Convey to site visitor for inclusion in site visit report

Key Roles for the Program Coordinator

- Ensure regular ADS Updates
- Contribute to a “site visit ready” program
- Record/aggregate data and improvement realized via the ACGME’s Annual Program Evaluation
 - Track action plans for areas for improvement
 - Participate in the annual program evaluation
 - Provide input from the coordinator’s perspective
- Coordinate site visit planning with the assigned lead field representative
- Coordinate activities on the day of the site visit



Changing the Date of the Site Visit

- Direct requests for changes/postponements to staff listed in the ACGME letter, not the field representative
- It may not always be possible to accommodate a request
 - The process is rule-based to make it fair to all programs
 - Special consideration for applications and programs on pre-accreditation

What to Expect on the Site Visit Day

A Sample Site Visit Schedule

- Program Director opening interview
 - 30 to 45 minutes review of the application document with the program director
- Resident Interview
 - 45 to 90 minutes interview(s) with residents (depending on program size)
 - Likely as 2 separate groups
 - Junior/mid-level residents
 - Residents in the senior year(s) of the program
- Faculty interview
 - 45 minutes with core faculty (composition will vary by specialty)
- Institutional leadership
 - 15 to 30 minutes with DIO or designee
- Program Director clarification interview
 - 45 to 75 minutes, includes debriefing and feedback

ACGME Process: The “Inverted” Site Visit

- Begins with a brief meeting with the Program Director and PIF corrections
- Then the resident interview
- Then faculty, the DIO and finally the PD
- The PD interview at the end
 - Allows for a more thorough reconciliation of discrepant information and
 - Provides some preliminary feedback to the PD on program findings (Strengths and Opportunities for Improvement).

Aims of the “Inverted” Site Visit

- Enhance the focus on the program and the residents’ perspective
- More focus on the program, less on the description of the program
- To shorten the review of documentation with program leadership, and expand the process of reconciling potentially discrepant information

The “Inverted” Site Visit: Reactions

- Residents feel more engaged
- Program directors love it
- Early identification of program-specific “themes”
- Seamless process for follow-up
- Improves continuity and integration of data
- Increased opportunity for reconciliation of discrepant issues
- Transformative model instead of simply additive
- Continues to maintain confidentiality

At the end of the Site Visit: Information Reconciliation and Actionable Feedback”

- Clarification of any discrepant information
- Provision of site visitor guidance for all programs (in a way that does not compromise the Review Committee’s peer decision)
- What it IS NOT
 - A summary of the program’s review
 - A prediction of what the RRC “will do/decide”
- What it IS
 - 3 to 5 actionable areas confirming key strengths or “readily implementable” suggestions for improvement
- **The program director has the last word**
- Recommendations are reported to the RRC

What goes into the SV report?

- Review of the program history
- Review of Institutional issues/citations
- Clarification and verification of the program documents using data from the interviews with faculty, residents, and program and institutional leaders
- Review of case log data collection (selected specialties)
- Whatever else is needed (varies by specialty)

What does NOT go into the SV report?

- Site visitor opinions
- Site visitor biases
- Site visitor judgments
- Opinion of an individual (resident or faculty member) with an axe to grind



In Closing: Key Expectations for Program Leaders

- Interest in a high-quality program is continuously demonstrated (this shows on the day of the visit)
- The application and other documentation accurately describes the program (no “embellishing” - site visitors can tell)
- Don’t ask, “How did we do?” Site visitors can only offer his/her perceptions - he/she is not the decision-maker
- “Prepare” your residents for the visit but do not “coach” them - site visitors find out
- Don’t “grill” the residents after the visit

In Closing: Feedback, ACGME Depends on it

- Provide feedback to the ACGME about your experience (it's the most effective way to improve the site visit)
 - Collect resident input about the site visit experience and make it part of your feedback to the ACGME
- Feedback is collected via on-line survey
- Program director surveys are aggregated, comments are scanned and, if warranted, receive phone follow-up
- Aggregated information provided to field staff
- If the site visit was terrible or wonderful please let the Department of Field Activities know
- If the visit was terrible, you may request that a site visitor not be re-assigned to your program or institution (call Ingrid Philibert for this request)