Now and Next: Preparing Your Programs for the next Accreditation System

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GME Leadership Development Course Part II
September 20, 2012

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NAS in a Nutshell

- *Continuous* Accreditation Model

  - Based on review of annually submitted data

- SVs replaced by 10-year Self-Study Visit

- Standards revised every 10 years

- Standards organized by

  - Core Processes
  - Detailed Processes
  - Outcomes

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To...
The Next Accreditation System

Continuous Observations

Potential Problems

Diagnose the Problem (*if there is one*)

Ensure Program Fixes the Problem

Promote Innovation

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Trended Performance Indicators
"6.5 of 8" already in place

- ✓ Annual ADS Update
  - ✓ Program Attrition – Changes in PD/Core Faculty/Residents
  - ✓ Program Characteristics – Structure and Resources
- ✓ Scholarly Activity – Faculty and Residents
- ✓ Board Pass Rate – Rolling Rates
- ✓ Resident Survey – Common and Specialty Elements
- ✓ Clinical Experience – Case Logs or other
- ✓ Semi-Annual Resident Evaluation and Feedback
  - ➢ Milestones
- ➢ Faculty Survey – Core Faculty
- ➢ Annual Sponsor Site Visit (CLER)

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Faculty Survey 2012

- Questions focusing on residents and overall program – similar to RS
  - Faculty Supervision / teaching
  - Educational content
  - Resources
  - Patient Safety
  - Teamwork
  - Program overall

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Scholarly Activity Template

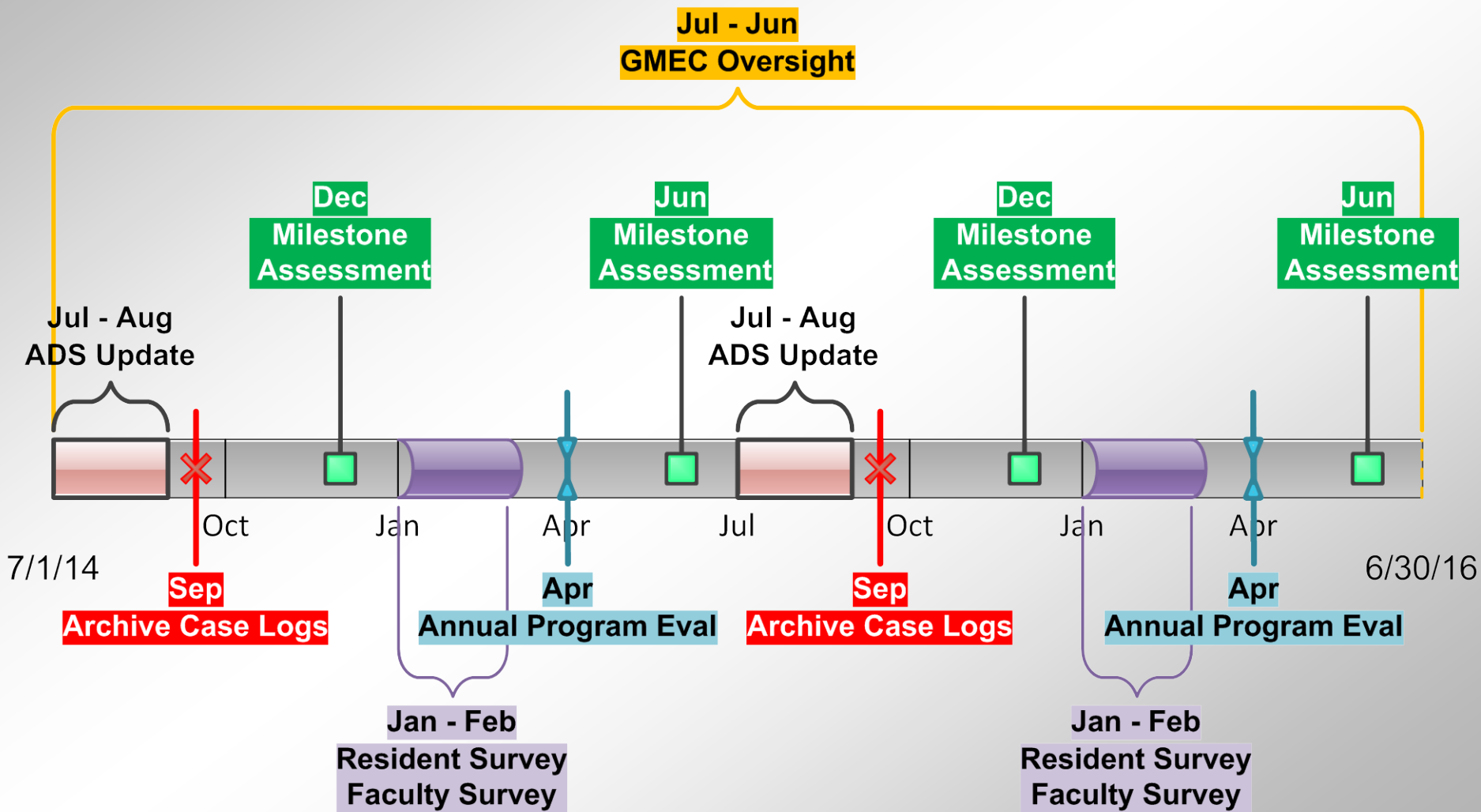## Scholarly Activity as Performance Indicator

Templates for Scholarly Activity

Faculty Scholarly Activity	Mouse-over definitions:	Pub Med Ids (assigned by PubMed) for articles published between 7/1/2011 and 6/30/2012. List up to 4				Number of abstracts, posters, and presentations given at international, national, or regional meetings between 7/1/2011 and 6/30/2012	Number of other presentations given (grand rounds, invited professorships), materials developed (such as computer-based modules), or work presented in non-peer review publications between 7/1/2011 and 6/30/2012	Number of chapters or textbooks published between 7/1/2011 and 6/30/2012	Number of grants for which faculty member had a leadership role (PI, Co-PI, or site director) between 7/1/2011 and 6/30/2012	Had an active leadership role (such as serving on committees or governing boards) in national medical organizations or served as reviewer or editorial board member for a peer-reviewed journal between 7/1/2011 and 6/30/2012	Between 7/1/2011 and 6/30/2012, held responsibility for seminar, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules or program for medical students, residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences.
	Faculty Member	PMID 1	PMID 2	PMID 3	PMID 4	Conference Presentations	Other Presentations	Chapters / Textbooks	Grant Leadership	Leadership or Peer-Review Role	Teaching Formal Courses
	John Smith	12433	32411			3	1	1	3	Y	N
Resident Scholarly Activity	Mouse-over definitions:	Pub Med Ids (assigned by PubMed) for articles published between 7/1/2011 and 6/30/2012. List up to 3.				Number of abstracts, posters, and presentations given at international, national, or regional meetings between 7/1/2011 and 6/30/2012		Number of chapters or textbooks published between 7/1/2011 and 6/30/2012	Participated in funded or non-funded basic science or clinical outcomes research project between 7/1/2011 and 6/30/2012		Lecture, or presentation (such as grand rounds or case presentations) of at least 30 minute duration within the sponsoring institution or program between 7/1/2011 and 6/30/2012
	Resident	PMID 1	PMID 2	PMID 3		Conference Presentations		Chapters / Textbooks	Participated in research		Teaching / Presentations
	June Smith	12433				1		0	N		Y
Categories for points:	Peer Review Publication			Other Scholarly				Grantsmanship	Leadership / Peer Review		Education

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Scholarly Activity Template
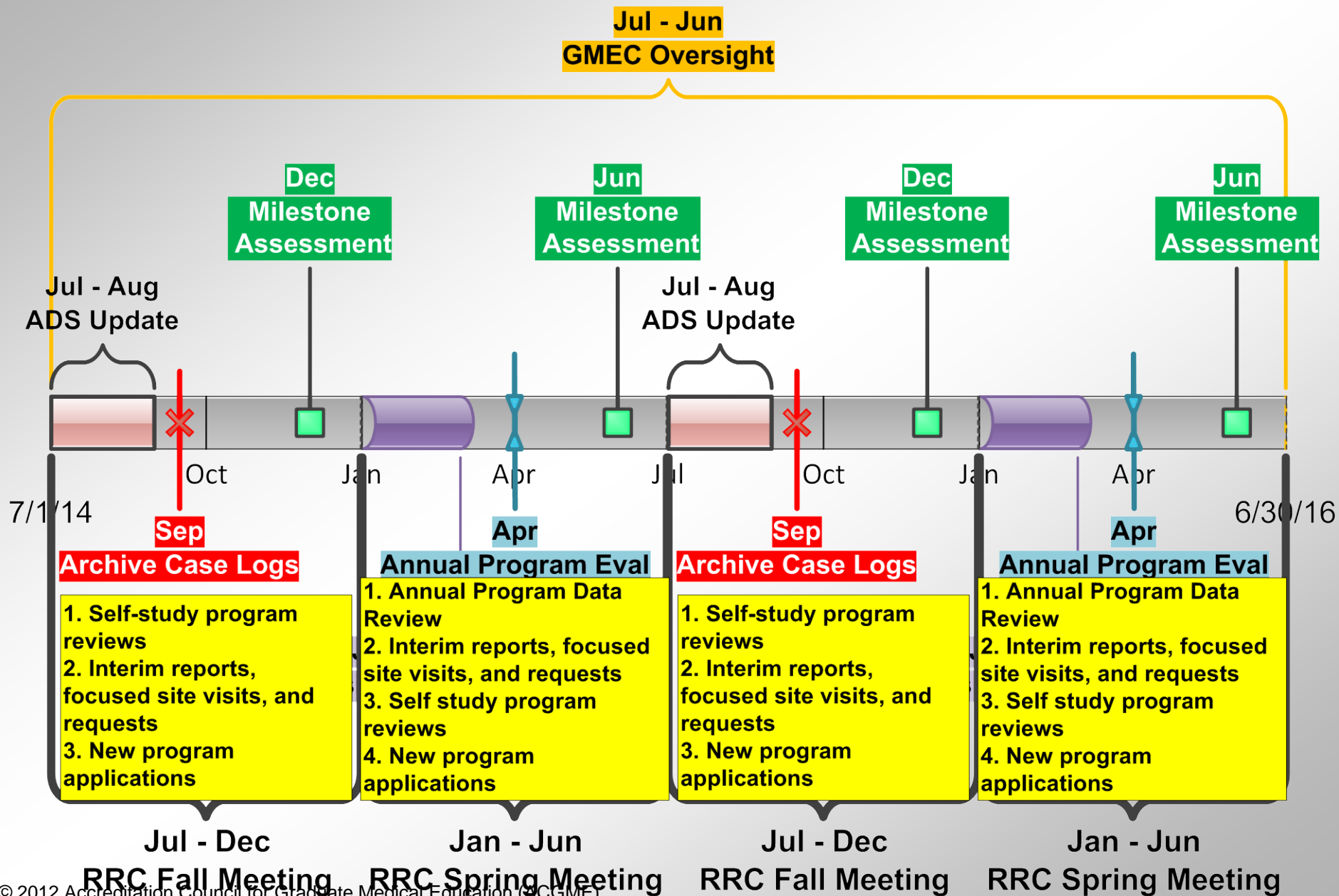
- For each <u>core</u> faculty member enter:
    - x Pub Med ID's
    - Four numbers
    - Answer two Y/N questions
- For each resident <u>with</u> <u>scholarly</u> <u>activity</u> enter:
    - x Pub Med ID's
    - Two numbers
    - Answer two Y/N question

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Program Activities – Next System

Jul - Jun
GMEC Oversight

Dec
Milestone Assessment

Jun
Milestone Assessment

Dec
Milestone Assessment

Jun
Milestone Assessment

Jul - Aug
ADS Update

Jul - Aug
ADS Update

Oct

Jan

Apr

Jul

Oct

Jan

Apr

7/1/14

6/30/16

Sep
Archive Case Logs

Apr
Annual Program Eval

Sep
Archive Case Logs

Apr
Annual Program Eval

Jan - Feb
Resident Survey
Faculty Survey

Jan - Feb
Resident Survey
Faculty Survey

Accreditation – Next System

Jul - Jun
GMEC Oversight

Dec
Milestone Assessment

Jun
Milestone Assessment

Dec
Milestone Assessment

Jun
Milestone Assessment

Jul - Aug
ADS Update

Jul - Aug
ADS Update

7/1/14

6/30/16

Oct

Jan

Apr

Jul

Oct

Jan

Apr

Sep
Archive Case Logs

Apr
Annual Program Eval

Sep
Archive Case Logs

Apr
Annual Program Eval

1. Self-study program reviews
2. Interim reports, focused site visits, and requests
3. New program applications

1. Annual Program Data Review
2. Interim reports, focused site visits, and requests
3. Self study program reviews
4. New program applications

1. Self-study program reviews
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3. New program applications

1. Annual Program Data Review
2. Interim reports, focused site visits, and requests
3. Self study program reviews
4. New program applications

Jul - Dec
RRC Fall Meeting

Jan - Jun
RRC Spring Meeting

Jul - Dec
RRC Fall Meeting

Jan - Jun
RRC Spring Meeting

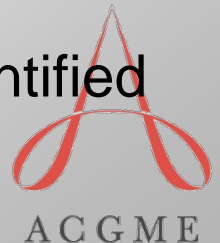# Clinical Learning Environment Review (CLER) Program

- Integration of residents into institution's **Patient Safety** programs, and **demonstration of impact**

- Integration of residents into institution's **Quality Improvement** programs and efforts to **reduce Disparities in Health Care Delivery,** and **demonstration of impact**

- Establishment, implementation, and oversight of **Supervision** policies

- Oversight of **Transitions in Care**

- Oversight of **Duty Hours Policy, Fatigue Managemen**t and **Mitigation**

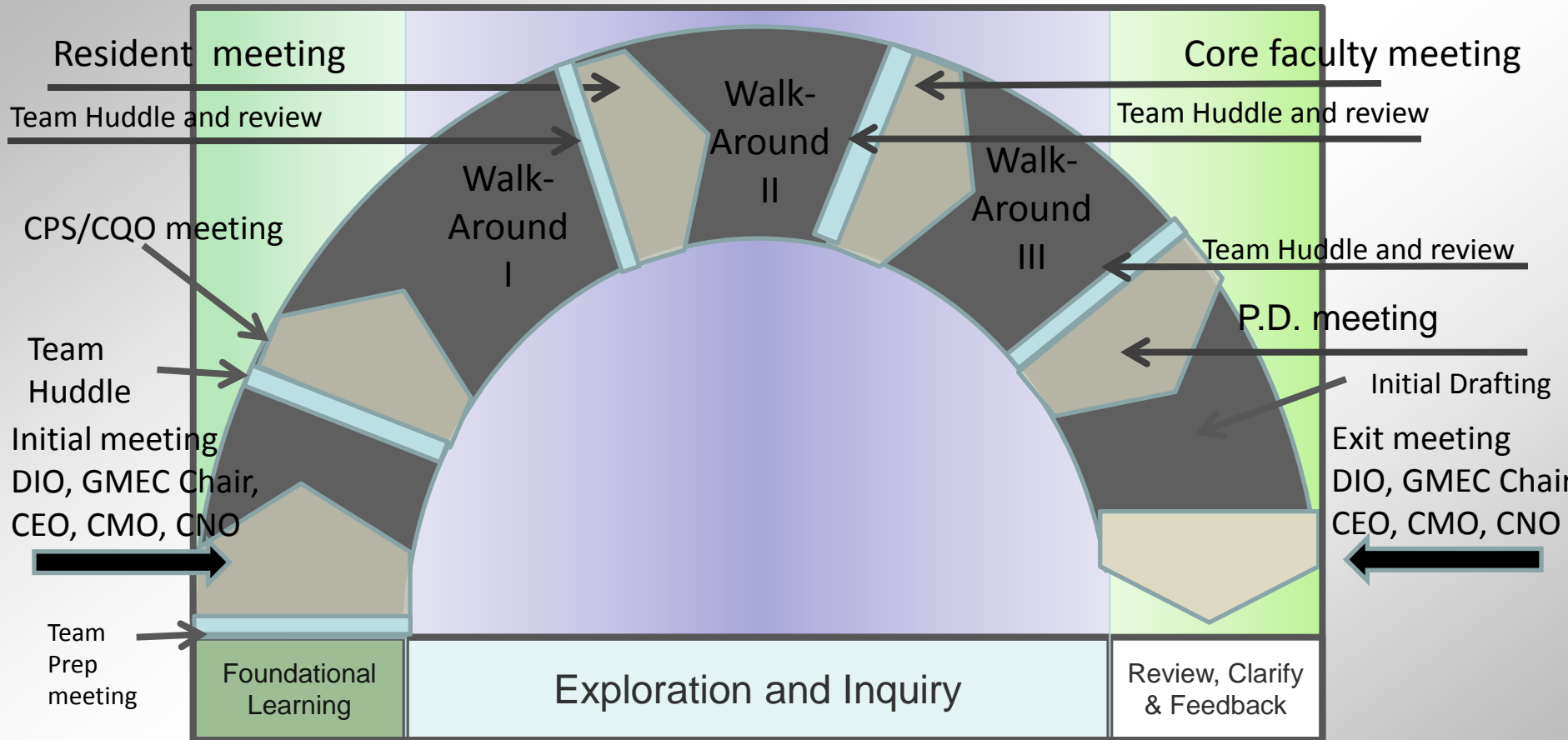- Education and monitoring of **Professionalism**

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CLER Program
5 key questions for each site visit

- Who and what form the hospital/medical center's infrastructure designed to address the six focus areas?

- How integrated is the GME leadership and faculty in hospital/medical center efforts across the six focus areas?

- How engaged are the **residents and fellows**?

- How does the hospital/medical center determine the success of its efforts to integrate GME into the six focus areas?

- What are the areas the hospital/medical center has identified for improvement?

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SCHEMATIC OF FLOW OF CLER SITE VISIT

Resident meeting

Core faculty meeting

Team Huddle and review

Team Huddle and review

Walk-Around I

Walk-Around II

Walk-Around III

CPS/CQO meeting

Team Huddle and review

P.D. meeting

Team Huddle

Initial Drafting

Initial meeting
DIO, GMEC Chair,
CEO, CMO, CNO

Exit meeting
DIO, GMEC Chair,
CEO, CMO, CNO

Team Prep meeting

Foundational Learning

Exploration and Inquiry

Review, Clarify & Feedback

Three phases of Visit

Note: each walk around with resident host/escort, opportunity for nursing staff and patient contact.   Also as yet not certain on role of a governance interview.

Example of possible template for categorizing CLER expectations

- **Basic**
  - All residents/fellows must have the opportunity to report errors, unsafe conditions, and near misses
  - All residents/fellows must have the opportunity to participate in inter-professional quality improvement or root cause analysis teams
- **Advanced**
  - Institutionally approved patient safety goals derived from National/Regional recommendations defined and communicated across the residents and faculty
  - Residents and core faculty on institutional safety/quality committees
  - Comprehensive involvement across multiple programs
  - Occasional sporadic involvement of faculty and residents in patient safety activities (resident, faculty meeting, and walk around)
- **Role Model:**
  - All the above, and faculty and resident leadership in Patient Safety activities (ascertainment from senior leadership meeting with verification)
  - All residents/fellows having experiences in safety related activities
  - Direct Engagement of CEO/Exec Leadership Team with residents over Patient Safety Issues
  - Participate in broad dissemination of output in PS from Core Faculty and Residents

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