

Deciphering the “Alphabet Soup” of Graduate Medical Education

ACGME: American Council on Graduate Medical Education: The organization that accredits medical residencies and fellowships

ADS: Accreditation Data System – online service where programs upload program information yearly for ACGME

APE: Annual Program Evaluation – Yearly program self evaluation required by ACGME

AOC: Area of concern – ACGME review has revealed an area where the program exhibits weakness in the area or has trended down. The issue is not to the degree that the program is out of compliance, so they do not receive a citation.

Citation: ACGME review has determined that a program is out of compliance with an accreditation standard or ACGME policy or procedure. Citations MUST be address in a program’s next APE

CCC: Clinical Competency Committee - Three or more active teaching faculty who are chosen by the program directo to review evaluation information for each resident and determines each residents’ performance evaluation outcome

CLER: Clinical Learning Environment Review – a review of the institution’s efforts to provide residents with a safe learning environment, and to engage residents in initiatives focused on patient safety, quality improvement and resident wellness

CPR: Common Program Requirements: ACGME requirements that apply to all specialties and subspecialties

Competencies: Specific knowledge, skills and behaviors residents must illustrate to complete an accredited program. Programs must show how they both teach and evaluate each of the competencies. The 6 competencies are:

- Patient Care
- Medical Knowledge
- Practice based learning and improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems Based Practice

Complement: Maximum number of residents a program is allowed to train at any one time

Compliance: A program or institution’s adherence to requirements

Continued Accreditation: This is an accreditation status. It means the program has been reviewed and it is in compliance with requirements

Core Faculty: Faculty who play a significant role in the education of residents. They must have specific qualifications to serve as core faculty which depend on the program's specialty area. Core faculty devote at least 15 hours per week to resident education and administration

DIO: Designated Institutional Official – The person responsible for all of the ACGME accredited residencies and fellowships

Fellow: A physician who has already met requirements for board certification in a specialty (e.g., Pediatrics or Internal Medicine), but is now completing a training program in a subspecialty (e.g., Cardiology, Rheumatology etc.)

GMEC: Graduate Medical Education Committee – A group of program directors, residents and program coordinators who meet once a month to review accreditation issues. Program directors serve as voting members, and vote on changes in program directors, association program directors, issues around internal program reviews, etc.

LON: Letter of Notification – the official letter that tells a program the outcome of an ACGME review, and the action taken by the committee. A program can get continued accreditation with or without “areas of concern” or “citation.” Programs can also be put on probation, and accreditation can be terminated

Master Affiliation Agreement: A document that outlines the agreement between the sponsoring (primary) institution and a major participating site

PD: Program Director: One physician faculty with authority and accountability for the operation of the residency/fellowship

PEC: Program Evaluation Committee: The faculty chosen by the program director to conduct the Annual Program Review (APE)

PLA: Program Letter of Agreement: A document that outlines responsibilities between an individual program and a site that is not part of the sponsoring institution where their trainees go for a required educational experience

RRC: Review Committee, Residency Review Committee – sets accreditation standards and provides peer evaluation of residency and fellowship programs

SI: Sponsoring Institution – the organization that has ultimate financial and academic responsibility for a graduate medical program. Our SI is Stanford Health Care

Summative Evaluation (Final Evaluation): The evaluation completed at the end of the training program to certify that the resident has successfully completed the program

TOC: Transitions of Care – managing the transition of a given patient's care during a change in care team. The focus is to ensure that the new team has the complete and accurate information they need to take proper care of the patient

Program Coordinator Responsibilities for Program Accreditation

Resident Evaluations - Ongoing

ACGME requires that residents receive *timely* feedback on their performance. Timely feedback is foundational to a solid educational program; when residents get feedback long after a rotation or other educational experience it is not as helpful in guiding performance improvement and professional development. Each program has its own evaluation system. Typically, residents receive feedback from faculty, other residents and patients. Faculty complete written evaluations when they have worked with a resident for a specific time on a specific rotation or service.

Your role: Your program's evaluation forms are located in MedHub under the evaluations tab. It will be helpful to review your program's evaluation process with your program director. Typically, program coordinators are responsible for sending out evaluations, and tracking when they are complete to make sure they are completed in a timely manner. You may be asked to run evaluation reports, and to compile the various performance evaluations to help your program complete the semi-annual evaluations required by the ACGME.

Resident Evaluations - Milestones/Semi-annual Resident Evaluations

"Milestones" refers to a set of competencies that residents are expected to gain as they complete their training. The milestones were developed by experts from each medical specialty training community. These experts worked to determine what a resident should know or be able to do at different points in their training. They serve to help programs determine if a resident is "on track."

"Milestone" evaluations are semi-annual performance evaluation of your residents. These evaluations are completed by the Clinical Competency Committee (CCC). The CCC is a subgroup of core faculty chosen by your program director. The CCC meets to pull together all of the performance evaluations of each resident to determine if they are "on track" in their progress towards becoming a competent physician.

ACGME requires all programs to report the "Milestones" progress of each resident twice a year (Dec-Jan and Jun-Jul). In addition, all residents must meet with their program director at the end of the training program for a "summative evaluation" that reviews if they have reached clinical competency in the milestones for their specialty. This ensures that all graduates are competent to practice or move onto further specialized training.

Your role: The CCC needs to look at a lot of information about each resident to synthesize it into a cohesive performance evaluation. Typically, program coordinators compile this information for the CCC prior to the meeting. This information often includes rotation evaluations, in-service exam scores, procedure numbers, etc. This information can be found in MedHub. Your program director may also ask you to convene the meeting, take notes during the meeting, and enter information into MedHub after the meeting. After the CCC meeting, you will report the milestone progress to ACGME via WebADS prior to the deadline.

WebADS (Web = web based. ADS = Accreditation Data System)

WebADS refers to the ACGME Web based portal to store program information. All programs MUST update their program information in WebADS annually. ACGME wants extensive information about each program to ensure that programs are "healthy."

Your role: Program coordinators play a large role in compiling the information that ACGME requires from each program. You likely will need to work with each faculty member to ensure that you have an updated copy of their curriculum vita that includes all of their most recent publications, presentations and grants (“scholarly activity”) and certifications. You will work with your program director to help him or her compile information about the residents, program policies, curriculum goals and objectives, etc. You will also work with your GME Program Manager to review the compiled information to make sure that the information is complete and accurate.

Training Program Evaluation

ACGME requires each program to complete an annual program evaluation (APE). The APE is an opportunity for the program to “look in the mirror” and self-evaluate strengths and weaknesses. The APE is completed by the Program Evaluation Committee (PEC). Your program director decides who serves on the PEC.

The PEC:

- meets and reviews information that helps them evaluate the program strengths and weaknesses
- conducts a SWOT (Strengths, Weaknesses, Opportunities and Threats) analysis of the program.
- creates an “Action Plan” that lists issues, proposed quality improvement strategies, timelines for these quality improvement strategies and who is responsible for implementation.

This information is entered into the “APE Guidebook.” The APE Guidebook is an Excel spreadsheet that the GME office created to help structure programs’ APE and to standardize how the APE is reported out across programs. It helps programs track issues, solutions and outcomes over many years. This is important to overall accreditation, because ACGME looks for program quality improvement and innovation over time.

Your role: Program coordinators play a large role in compiling the information that the PEC needs to conduct the APE. We will review the list of information that should be compiled during the individual and group program coordinator evaluations that will occur over the next few months. You may also be asked to convene the PEC, attend the meeting and keep minutes, work with the APE Guidebook template and upload files to MedHub.

Surveys

There are four surveys each year that you will help with.

GME Housestaff Survey: This is an internal survey that the GME office conducts before the ACGME survey. We use it to help determine program quality, elicit any issues, and as a “early warning system” to try and avert issues on the ACGME survey that may be based on misunderstandings. The survey link is sent to all residents in November. We compile the information in December and send programs a “report card” that shows trends across years.

ACGME Resident Survey: ACGME sends out a survey to all residents regarding program quality each year. This is an important method for them to keep track of program quality and determine if a program is having issues such that they need to be reviewed and evaluated more closely.

ACGME Faculty Survey: ACGME sends out a survey to all faculty regarding program quality each year. Like the resident survey, the ACGME uses the results of this survey to track trends over time, and to determine if a program is struggling and needs closer oversight.

Alumni Survey: The GME office sends out a survey to all alumni of Stanford training programs. The survey helps us have the perspective of our graduates on the quality of training they received. In addition, the survey helps us track alumni activity. Some of the program evaluation information you will need will come from this survey, as ACGME wants to know about the relative success of your graduates as an indicator of your program's quality.

Your role in surveys: Program coordinators are asked to remind residents, faculty and alumni to complete all surveys. We can not require people to take the surveys, but try to motivate them to express their opinion. Some programs set aside a specific time to allow people to complete surveys, since people tend to forget or struggle to find time given their many competing demands. This is particularly important in small programs, as GME and ACGME will not report out survey results when they have fewer than 4 resident responses or fewer than 5 faculty responses. The survey results are very helpful in program evaluation, so it is important to try to reach these numbers.

Duty Hours

ACGME has very strict rules about resident duty hours. These include the number of hours they can work in one week, how much time they have off between shifts and how many days they work in a row. These rules were put in place to protect residents, but also to ensure that residents are not so fatigued that they can not provide quality care to patients. Residents input duty hours into MedHub, and MedHub creates a report of any duty hours that are not in compliance with ACGME limits.

Your role: Program coordinators help to ensure that residents report their duty hours in a timely manner. In addition, they must pull all flagged "duty hour violations" (when the reported hours do not align with ACGME rules). Duty hour violations must be reviewed with the program director to determine why a violation occurred. MedHub's duty violations tracking is not 100% correct, so there are also times that the program coordinator will note that there was not a real duty hours violation.

Self Study and Site Visit

ACGME requires programs to submit program information – the self study – when they are to undergo a program review by ACGME. Self studies are typically submitted only when a program is applying for ACGME accreditation, if ACGME requires a special review, or every 10 years. The self study is a synthesis of the various yearly program evaluation processes from the last five years, and a description of how the program plans to continue to improve and evolve over the next 10 years. After the self study document is submitted, ACGME sends out a site visitor to validate the information. **If your program needs to submit a self study or is likely to have a site visit anywhere in the near future, or your GME program manager will work closely with you to help you pull together the necessary information.**

What requires GME Approval?

- WebADS annual updates
- Program Director, Associate Program Director and Assistant Program Director changes (approved by Graduate Medical Education Committee)
- Changes in rotation sites
- Changes in away rotations
- Changes in number of residents and fellows (program expansion and funding decisions are made two times a year)
- Establishment of new programs (program expansion and funding decisions are made two times a year)
- Specialty Board Updates
- Anything that you are not sure of 😊

ACGME & GME Education Timeline July 1, 2020 - June 30, 2021

Tasks	July 2020						June 2021					
	JUL	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
WebADS	WebADS opens for 1st Group	WebADS opens for 2nd Group	<p>Group 1: Prepare WebADS updates. Send to GME prior for review. Submit GME-approved WebADS to ACGME.</p> <p>Group 2: Prepare WebADS updates. Send to GME prior for review. Submit GME-approved WebADS to ACGME.</p>									
Milestones	Send out milestone-based evaluations of residents/fellows to attending physicians.				Submit Milestone Reports to ACGME.		Send out milestone-based evaluations of residents/fellows to attending physicians.				Submit Milestone Reports to ACGME.	
Clinical Competency Committee					Meet, Review, Finalize in MedHub's Milestone Management section. Submit to ACGME						Meet, Review, Finalize in MedHub's Milestone Management section. Submit to ACGME.	
Semi-Annual Evaluations					Meet with resident. Document in MedHub.						Meet with resident. Document in MedHub.	
GME House Staff Survey for Residents/Fellows					Survey Window. GME delivers confidential survey.		Survey results posted in MedHub.					
ACGME Survey for Faculty and Residents/Fellows					ACGME delivers confidential survey.				Survey results posted in MedHub.			
Program Evaluations for Faculty and Residents/Fellows									GME delivers confidential program evaluations.		Evaluations posted in MedHub.	
Final Evaluations	Final Evaluation to be verified for incoming PGY2/fellows/transfers.										Complete form at end of training.	
Program Evaluation Committee / Annual Program Evaluation (APE)	Upload APE documentation in MedHub by 7/31/19										Schedule, Meet & Upload meeting minutes in MedHub.	
Program Expansion & Funding Request			Submit application if needed to GME									
Duty Hours	Monthly Ongoing: Review all violations.											
GME Special Review	Occurs any time at GME's discretion.											
Site Visit	Occurs at any time with an ACGME notification (minimum 30 days prior to visit).											
Self Study	Occurs approximately every 10 years. Advance notice will be posted in ADS (ACGME Self Study letter of notification).											
CLER							Takes place every 18 months.					

ACGME - External
GME - Internal
Hard Deadline Tasks
Tasks

Stanford GME Evaluations and Survey Requirements

Source	Category	Type	Administor	Minimum Frequency
Internal	Program Quality	Program Evaluation by Resident	GME Office	Once/Year (Apr)
		Program Evaluation by Faculty	GME Office	Once/Year (Apr)
		Resident Evaluation of Faculty	Program	At Least Once/Year
		GME Housestaff Survey	GME Office	Once/Year (Oct-Nov)
	Trainee Performance	Milestone Evaluations (Multiple Evaluators Required)	Program	Ongoing
		- Faculty Evaluation of a Resident	Program	At the Ending of Each Rotation (Or At Least Every Quarter for 1-Year Programs)
		- Semi-Annual Evaluation (Including One-On-One Meeting with Trainee)	Program	Twice/Year
		- Patient Evaluation of a Resident	Program	As Needed
		- Other Health Professionals Evaluation of a Resident	Program	As Needed
		- Resident Self Evaluation	Program	As Needed
		Clinical Competency Committee	Program	Twice/Year
		Final Evaluation	Program/PD	At the Ending of Training
Transition of Care Evaluation	Program	At Least Once/Year		
*Sharp Training Checklist	Program	Once/Year		
External	Program Quality	ACGME Resident Survey	ACGME	Once/Year (Feb-Apr)
		ACGME Faculty Survey	ACGME	Once/Year (Feb-Apr)
		ACGME WebADS Updates	ACGME	Once/Year (Jul-Sep)
	Trainee Performance	Receives Milestone Data from Program	From Program	Twice/Year (Nov-Jan & May-June)
		Receives Case/Procedures Data from Program	From Program	Ongoing

Annual Program Evaluation (Led by Program Evaluation Committee)

**Not included in the Annual Program Evaluation*

ACGME One Year Cycle (2020-2021)	
Nov 2020 - Jan 2021	Milestone Reporting to ACGME
Feb-Mar 2021	ACGME Resident and Faculty Survey
May-Jun 2021	Milestone Reporting to ACGME
Jul-Sep 2020	ACGME WebADS Updates
Sep 2020 - Feb 2021	ACGME RC Meeting:
	Milestones and Survey Results from 2019-2020 Will be Reviewed