BLUEPRINT FOR COORDINATOR SUCCESS

Staying one Step Ahead of Your Program Director

Marilane B. Bond, EdD, MBA

Assistant Dean & Director, GME

Emory University School of Medicine

Handout: Program Coordinator Responsibility Timeline

- Timeline provides an overview of the Coordinator's responsibilities
  - Customize to specialty specific program coordinator & structure of GME
  - Coordinator's general responsibilities with ACGME requirements
  - Broad perspective of requirements
  - Resources for additional information

HIGHLIGHTS

- ACGME
  - Common Program Requirements, Institutional Requirements, Specialty Requirements
  - WebADS
  - Resident Surveys
- NRMP
- Evaluations
  - Appointment/Reappointment
  - Annual Program Review
- Internal Reviews
- External Reviews/Site Visits

ACGME

TYPES OF REQUIREMENTS

- Common Program Requirements
  - Common Program Requirements for One-Year Fellowships
- Specialty-Specific Program Requirements
- Institutional Requirements

AHME

TYPES OF REQUIREMENTS

- Be familiar with institutional requirements
- Know Common Program Requirements
- Know Specialty-specific Program Requirements
- Be aware of requirement revisions
  - RRC distributes revisions for review and comments

Knowledge of Program Requirements

- Remain current on changing requirements and trends
  - Join listserve for your specialty if available
  - Network with friends in the same or other specialties
  - Attend national meetings to learn about the GME issues

ACGME Database Applications

- Resident Case Log System (web-based)
  - Resident experience/case/procedure data
- Accreditation Data System (WebADS)
  - Annual data collection
  - Change notification
  - Site visit preparation
  - Resident survey

ACGME WebADS

- Verify information annually
- Submit changes
  - Resident complement
  - Change in curriculum
  - Program Director change
  - Change in participating institution
- Update site visit materials
- Administer resident survey

ACGME RESIDENT SURVEY

- Administered between January and May
- Core programs and subspecialties [4 + residents]
- Administered annually
- 70% compliance
- Programs must monitor residents' completion

ACGME RESIDENT SURVEY

- Areas with significant percentage of noncompliance – immediate attention

- Define "significant noncompliance"

- Important source of information during site visit

NATIONAL RESIDENT MATCHING PROGRAM (NRMP)

NRMP

- Know the match commitment:

  - *"The listing of an applicant by a program on its certified rank order list or of a program by an applicant on the applicant's certified rank order list establishes a binding commitment to offer or to accept an appointment if a match results.*

  - *Failure to honor this commitment by either party participating in a match will be a breach of this Agreement and may result in penalties to the breaching program or applicant…"*

EVALUATIONS

EVALUATIONS

- Formative evaluations of residents - completion of each rotation *[CPR V.A.1.a]*

- Evaluations showing multiple evaluators - faculty, peers, patients, nurses, and other professionals *[CPR V.A.1.b(2)]*

- Documentation of competency-based semi-annual evaluations with feedback *[CPR II.A.4.g]*

EVALUATIONS: Contract Non-Renewal Decisions

- Evaluation process is important
  - Determine whether resident satisfied competencies and should be promoted
- Timing of the semi-annual appointments vary by programs. Consideration in timeline:
  - 1st semi-annual = September-October
    - Detect potential problems
  - 2nd semi-annual = March-April
    - Allows time for remediation

AHME

EVALUATIONS

- Final summative evaluation - <u>'verify that the fellow has demonstrated sufficient competence to enter practice without direct supervision'</u> *Effective July 1, 2007* [CPR V.A.2]

- Annual written confidential evaluations of faculty by residents *[CPR V.B.3]*

- Annual written confidential evaluations of program by residents *[CPR V.C.1.d.(1)]*

- Annual written evaluations of program by faculty *[CPR V.C.1.d.(1)]*

EVALUATIONS

Program Evaluation and Improvement *[CPR V.C]*

1. The program must document formal, systematic evaluation of the curriculum at least annually. Monitor and track:

   a) resident performance;
   b) faculty development;
   c) graduate performance; and,
   d) program quality. Specifically:

      (1) <u>Residents</u> and <u>faculty</u> must have the opportunity to evaluate the program <u>confidentially and in writing</u> at least annually, and

      (2) The program must use the results of residents' assessments of the program together with other program evaluation results to improve the program.

EDUCATIONAL COMMITTEE: Getting Started

Set up an Educational Committee Meeting

- Educational Committee - held at least annually

- Include key teaching faculty from major rotations and off-site rotations

- Include at least one house staff member (suggest more for larger programs)

AHME

EDUCATIONAL COMMITTEE:

The purpose of the meeting:

- Provides an opportunity to gain insight from house staff and faculty on common problems
- Provides an opportunity for house staff to assist in the structure of their education
- Helps to educate house staff and teaching faculty on accreditation requirements
  - duty hours compliance
  - general competencies
  - needs for procedural information
  - standard program specific policies
  - use of evaluation tools
  - faculty development

AHME

ANNUAL PROGRAM REVIEW

- Demonstrate continuous quality educational improvement
- "Dress rehearsal" for your RRC site visit
  - Review of written documentation
  - Honest analysis
  - Compare against what's required
  - Action plans
- Learn common citations in your specialty

ANNUAL PROGRAM REVIEW

- **What is the "outcome of the review?"**
  - If deficiencies are found ➡️ explicit plan of action
    - approved by the faculty
    - documented in the minutes
  - If deficiencies aren't found ➡️ 1 or 2 Continuous educational quality improvements

INTERNAL REVIEW

INTERNAL REVIEW

- Required by ACGME of Sponsoring **Institution**
- GME Committee is responsible to develop, implement & oversee internal review process.
- Conducted at midpoint between last accreditation visit and next RRC site visit
- **Not** department annual review

INTERNAL REVIEW

- Compliance with requirements
- Educational objectives and effectiveness
- Educational and financial resources
- Effectiveness in addressing areas of non compliance
- Concerns in previous ACGME accreditation letters/prior internal reviews

INTERNAL REVIEW

- Effectiveness of evaluation tools and outcome measures
- Annual program improvement in
    - Resident performance
    - Faculty development
    - Graduate performance including performance of program grads on exams
    - Program quality

INTERNAL REVIEW

- Use the information provided from the internal review to critically assess your program
  - Develop a plan to address each of the concerns raised by the review
  - Report progress to program education committee

EXTERNAL REVIEW/SITE VISIT

EXTERNAL REVIEW/ SITE VISIT: 'a continuous process'

- Knowledge of program requirements
- Annual program review
- Review internal mid-cycle review
- Involve faculty and residents
- Update PIF regularly

AHME

Site Visit Notification Letter
What to do when you receive the letter?

- Receive email notification @ 110 days out
- Confirm with your DIO, Division chief, chair
- Celebrate..you have a great program..your chance to shine!
- Set a timeline…working back from the date of the site visit
- Assess who you will need, especially any extra staff
- Pull RRC requirements and make sure all know it
- Know common citations, your specialty, your institution
- Pull last site visit, last internal review
- Program Information Form (PIF)
  - You should already be familiar
  - Review the last one
  - If not, start! One person to "touch"

PREPARE AN ACCURATE PIF

- Form a working group shortly after notification of the site visit
  - Divide the PIF into pieces and assign each part to an individual member
  - Choose each person for his/her expertise

PREPARE AN ACCURATE PIF

- Review the PIF and program requirements
- Responses should address the requirements
  - Use the narrative sections to explain areas not addressed in the structured format of the PIF
  - Avoid making the narrative redundant

PREPARE AN ACCURATE PIF

- Schedule periodic meetings of the working group
- Have someone read the document for internal consistency and to ensure clarity
- The program director is ultimately responsible for producing an accurate narrative of the program

SET UP A TIMELINE: About 11 weeks left

- Convene a meeting of all principles
- Discuss with residents, faculty
- Decide what you will delegate (if you will)
  - If yes, timelines, clear area of responsibility
- Review all program documentation
- Review all program files
- Refer to handout: Program Documentation for Site Visit
  - Organize documentation according to the Program requirement sections
- Continue working on PIF

PREPARING FACULTY & RESIDENTS

- Inform the faculty and residents of the upcoming site visit
  - They must be available
  - Must understand the importance
  - Be honest with the site reviewer, but not the appropriate venue to voice minor concerns

PREPARING FACULTY & RESIDENTS

- Meet with residents and faculty to remind them of the important elements of program

- Not appropriate to debate the merits of a program requirement with the site visitor; the site visitor is not the right person to speak to regarding this issue

AHME

Enlist Ongoing Help of Faculty and Residents

- Use feedback from ongoing meetings with residents and faculty to help keep program in compliance at all times

  - Program is responsive to residents needs
  - Maintain consistency among all groups

TIMELINE: About 10 weeks left

- Begin organizing documentation according to the Program requirement
- Continue working on PIF
  - Use short paragraphs, headings, bullets
  - Paginate correctly
  - Check grammar and spelling
- Try to fill in holes (if possible)

TIMELINE: 6 weeks

- Continue working on PIF & documentation
- Review ACGME survey of your residents
- Call or get in touch with site visitor (if you have not yet heard from him/her)
- Confirm agenda of the day (their agenda, not yours!)
  - Who they want to talk with
  - How many, which residents?
  - Which faculty?
  - Any others? DIO?
  - Will they wish to tour hospital? Call rooms? Go t clinics? Visit an off site location?
  - Plans to pick up, meet etc.
  - Be prompt

TIMELINE: 4 weeks left

- Make sure you reserve conference room for the entire day – no interruptions
- The Site Visitor wants to stay put – bring the faculty, residents, etc. to him/her
- If he/she hasn't already, DIO should proof your PIF
  - Confirm deadline for this review in advance
- Confirm lunch, order simple, confirm numbers (usually likes to eat with the residents – but ask)

AHME

TIMELINE: 3 weeks

- Obtain all required signatures

AHME

TIMELINE: 2 weeks

- Send PIF, right number of copies, follow instructions "on time" (send to site visitor's address – not ACGME – "no signature required")
- Send confirmed agenda to site visitor, map/directions and parking instructions
- Confirm anyone who is supposed to meet with site visitor will be available
- No pagers, cell phones etc.

AHME

TIMELINE: 1 week

- Gather all supporting documents and organize by category

- Last minute issues, questions etc.

AHME

TIMELINE: Day before

- Clean conference room

- Bring in all supporting documentation

- Get a good night's sleep

SITE VISIT DAY

- Have directions clearly written for the site visitor so he/she may locate you easily

- Have someone meet the site visitor at the door if possible

- Maintain a constructive and positive demeanor with the site reviewer

AHME

SITE VISIT DAY

- Ensure that all requested information is available

- Have a designated room available for the entire day if possible; it is better to have the faculty and residents come to the reviewer than to have the reviewer move around all day

AHME

SITE VISIT DAY

- Have someone available to retrieve additional information which might be requested by the visitor

AHME

SITE VISIT REPORT

- Review of program history
- Review of previous citations & actions taken to correct
- Review of institutional issues/citations
- Clarification/verification of PIF
  - Based on interview with faculty, residents, program director and others
- Clarification of resident complaints (if any submitted) to ACGME
- Clarification of residents' response to ACGME survey

summary

SUMMARY

- Keep calendar of residency related events
- Review ACGME webpage regularly
- Update your PIF regularly
  - Verify information in WebADS
- Monthly meetings with your Program Director
- Network with other Program Coordinators within your institution and in your specialty
- Attend national GME conferences

REFERENCE SOURCES

- AAMC- www.aamc.org
  - Roadmap to Residency: From Application to the Match and Beyond, 2nd Edition
- ACGME – www.acgme.org
  - Common program requirements, institutional and specialty-specific requirements, WebADS, etc.
- AHME – www.ahme.org
  - Guide to Medical Education in the Teaching Hospitals, 2nd Edition/ 3rd Edition available soon

- *For additional reference sources consult handout: Program Coordinator Responsibility Timeline*