

ABSTRACT: 2019 ELAM Institutional Action Project

Project Title: From Annual Program Evaluation to Annual Report: Leveraging Accreditation requirements to communicate GME program quality to institutional stakeholders

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Topic Category (choose 1): Education

Background, Significance of project: Graduate medical education (GME) programs have the potential to achieve collaborative aims in the domains of education, patient care and research. The investments in GME that institutions make can be sustained through transparent communication of outcomes relevant to diverse stakeholders. GME programs are required by the ACGME to complete an annual program evaluation but the specific measures and formatting isn't standardized. Transitioning this to uniformly presented information regarding outcomes could enable assessment of quality so that the impact of past interventions and potential of proposed changes can be determined. Such a format also would allow for smoother transitions when program, department or institutional leadership changes occur.

Purpose/Objectives: The purpose of this project is to develop a pilot of a standardized GME annual report for communication of program quality, achievement of accreditation standards, and current strengths, weaknesses, opportunities and threats (SWOT). This annual report will facilitate program leaders partnering with the GME office, department chair, dean and hospital CEO to guide continuous improvement, collaborative program goals and strategic growth.

Methods/Approach/Evaluation Strategy:

A list of relevant outcomes and the methodology for reporting on each was developed based on ACGME accreditation requirements, institutionally relevant measures and other data related to stakeholder strategies. Examples of annual reports and GME "dashboards" from other institutions were reviewed in search of identified best practices. Feedback regarding the proposed measures and domains was sought from members of the office of assessment and evaluation, designated institutional officers (DIOs), deans and sample program directors. An anonymous survey will be completed by stakeholders to generate additional feedback and to measure the impact. After modifications, a preliminary version of the annual report will be implemented for the 2019 annual program evaluation process.

Outcomes/Results:

The impact of this process will be determined by the rate of completion of the report components and stakeholder satisfaction. The stakeholder satisfaction survey will include questions about the usefulness and availability of outcome measures and how the annual report contributed to achieving cooperative action plans. Additionally, the DIO and GME administrative office will review the annual report and SWOT analysis to determine if key concerns were represented and addressed.

Discussion/Conclusion with Statement of Impact/Potential Impact:

Achievement of the institution's strategic initiatives related to GME and enhancements of our programs to attain national distinction depend on stakeholder awareness of program performance. Through increased transparency and collaborative goals, trust can be built regarding the value of GME programs in achieving the quadruple aim. Programs that are struggling in specific areas can receive support from the institution and leadership and strengths can be celebrated. Having a consistent format for presenting the data can facilitate understanding and necessary action steps. Program directors can benefit from having central support from the GME administrative office in gathering components of the data, report compilation and feeling like the strengths and areas for improvement in their program are known to institutional leaders and transitions facilitated.

Background

Graduate medical education (GME) programs have the potential to achieve synergistic goals in the domains of education, patient care and research. The investments that institutions make in GME can be sustained through transparent communication of outcomes relevant to each diverse stakeholder. The Accreditation Council on Graduate Medical Education (ACGME) requires each GME program to complete an Annual Program Evaluation (APE) but the specific measures and formatting aren't standardized. Transitioning to a uniformly presented format of information regarding outcomes would enable assessment of quality in order to observe the impact of interventions or the potential effects of proposed changes. Such a format would allow for smooth transition when changes occur in program, department or institutional leadership.

Purpose

The purpose of this pilot project is to develop a standardized GME annual report for communication of program quality, achievement of accreditation standards, and current strengths, weaknesses, opportunities and threats (SWOT). This report will facilitate program leaders partnering with the GME office, department chair, dean and hospital CEO to guide continuous improvement, collaborative goals and strategic growth.

Methods

- A list of relevant GME outcomes and the methodology for reporting on each was developed from the ACGME accreditation requirements, institutionally relevant measures and other data related to stakeholder strategies (completed)
- Examples of annual reports and GME "dashboards" from other institutions were reviewed to identify best practices (completed)
- A draft annual program report was created for one program (completed)
- A draft institutional GME program dashboard was created (completed)
- Feedback regarding the proposed measures and domains was sought from members of the office of assessment and evaluation, designated institutional officials (DIOs), deans and a sample of program directors (in progress)
- An anonymous survey will be completed by stakeholders to generate additional feedback and to measure impact (May 2019)
- After modification, a preliminary version of the annual report will be implemented for the 2019 annual program evaluation process (July 2019)
- Additional future measures will include completion rate of the annual report components.

Results

Current results are two process measures: 1. Development of draft measures 2. Development of draft sample program annual report for the internal medicine residency program.

Sample Internal Medicine Residency Program Annual Report

		2018-2019	2017-2018	2016-2017
Program Demographics	Program AIM	"Our aim is to train the next generation of knowledgeable, compassionate, resilient physicians to provide high value care to our community in an area of clinical practice that they are passionate about, whether it is primary ambulatory care, hospital medicine or an internal medicine subspecialty. We prepare graduates to create and implement reliable care practices that enhance quality and improve safety through their participation in an innovative curriculum and clinical experience with diverse patients in 2 different large health systems. Additionally, our program prioritizes a commitment to excellence and the support of each resident's individual personal and professional goals with the desire that our graduates be role models of self-care and wellness as they promote the well-being of the patients they serve."		
	Program Director Name (Year appointed)	Cheryl O'Malley, MD (2008)		
	Total Number of Residents/Fellow	66 categorical + 11 preliminary medicine		
	ACGME Approved Complement	83		
	Accreditation Status (last site visit)	continued accreditation (2018)		
Match Results (categorical IM only)	Number of Applicants	2531	2193	1938
	Applicants Interviewed	256	219	168
	Applicants Matched	23	23	22
	% UA Graduates (COM-T and COM-P): % of Under Represented Minorities (URM includes African Americans, Hispanic/Latino, Native Americans (American Indians, Alaska Natives, and Native Hawaiians), Pacific Islanders, and mainland Puerto Ricans)	26%	14%	14%
	Timeliness Program (APE, ACGME Ads updates)	y	y	y
Leadership and Environment	VOICE Survey Engagement	pending		62% n/a
	% of core faculty participation in faculty development activities	100%		100%
	% of Faculty Turnover: Percentage of core faculty who left the institution	0%		6%
	% Resident Satisfaction with program overall (national mean)	pending	92 (84)	86 (85)
	% Faculty Satisfaction with program overall	pending	100 (98)	100 (99)
Education	3 year rolling % Board Pass Rate	90		87
	% of in-service exams above the national average 1st year	41		50
	% of in-service exams above the national average 2nd year	65		50
	% of in-service exams above the national average in final year	57		63
Accreditation-ACGME Faculty	Faculty Supervision & Teaching	pending	4.5 (4.6)	4.8 (4.6)
	Educational Content	pending	4.8 (4.7)	4.6 (4.7)
	Adequate Resources	pending	4.4 (4.4)	4.4 (4.4)
	Quality of Patient Safety Training	pending	4.6 (4.5)	4.5 (4.5)
Accreditation-ACGME Resident	Quality of Teamwork Training	pending	4.5 (4.6)	4.7 (4.8)
	Duty Hour Compliance	pending	4.6 (4.7)	4.7 (4.8)
	Faculty Supervision & Teaching	pending	4 (4.2)	4 (4.2)
	Effectiveness of Evaluation Process	pending	4.4 (4.4)	4.4 (4.4)
Medical Student Education	Educational Content	pending	4.2 (4.2)	4.2 (4.2)
	Adequate Resources	pending	4.3 (4.3)	4.1 (4.3)
	Quality of Patient Safety and Teamwork Training	pending	4.3 (4.3)	4.3 (4.3)
	Number of UA COM-P 3rd year rotations	92	no data	no data
	Number of UA COM-P 4th year rotations	24	no data	no data
	Number of UA COM-T rotations	6	no data	no data
Scholarly Activity	Number of Midwestern and AT Still Rotations	13	no data	no data
	Number of Creighton Rotations	0	no data	no data
	Number of Other Outside Rotators	46	no data	no data
	% of graduates participated in patient safety or QI projects	pending		100
	% of graduates with at least one presentation	pending		100
	% of core faculty who gave at least one presentation	pending		88
	% of core faculty who had a publication in the AY	pending		17
	total number of presentations by core faculty	pending		23
	total number of international, national and/or regional presentations	pending		12
	Total number of publications by core faculty	pending		27
Graduate Performance	Total number of publications by residents	pending		6
	% Graduates pursuing further training	36		43
	% Graduates remaining in Arizona (for either further training OR employment) of those entering practice in AZ, percent entering employment by Banner	55		75
	% Graduates remaining in Arizona (for either further training OR employment) of those entering practice in AZ, percent entering employment by VA	68		71

Sample Internal Medicine Residency Program SWOT Analysis

Strengths (Internal)		Weaknesses & Citations (Internal)	
#1	Diverse training sites (BUMCP, VA and community)	#1	Timely and meaningful feedback from faculty
#2	Academic Half Day	#2	BUMCP ICU rotation and burnout concerns
#3	Culture of support and continuous growth among residents and faculty	#3	Teaching on the wards (VA and BUMCP)
#4	Innovative and brave approaches to common GME challenges	#4	Research support and tracking
#5	Expertise in QI among faculty and established curriculum with alignment to health system goals	#5	Communication standards to reduce burden on residents, improve responsiveness and celebrate successes
Opportunities (External)		Threats (External)	
#1	Connect with subspecialty resources with expanding divisions	#1	Support for GME administrative time among core faculty and leaders
#2	Leverage COM-P and department research resources	#2	Increased reporting requirements without robust data support and systems
#3	Increased interest in primary care of applicants	#3	Disconnection between administrative infrastructure of BUMD and UA COM-P
#4	Connect UA COMP global health, service learning, MPH, art in medicine, humanities, advocacy and community clinics to align with individual resident interests	#4	Preserving culture as faculty expands
#5	National movement to competency based education	#5	Preserve diverse patients and clinical sites

The program SWOT analysis allow for the program leadership to communicate needs and opportunities in order to facilitate collaborative approaches among department, GME and institutional leaders. These are necessary as part of the ACGME Self Study and by incorporating them in the APE and report, they become more meaningful.

Discussion/Conclusions

Achievement of each stakeholder's strategic initiatives (institution, sponsor, program) related to GME and enhancements of our programs to attain national distinction depend on awareness of program performance. Through increased transparency and joint goals, trust can be built regarding the value of GME programs. Programs that are struggling in specific areas can receive support from the institution and leadership and strengths can be celebrated. Having a consistent format for presenting the data can facilitate development of and ultimate approval for necessary action steps. Program directors can benefit from having central support from the GME administrative office in gathering components of the data, report compilation and assurance that the strengths and areas necessary for improvement of their program are understood and supported by institutional leaders.

Summary

Dashboards and annual reports are useful ways to communicate efficiently and reliably about achievement of goals. Through developing agreement about the most valuable metrics, standards and mechanisms for reporting them, collaborative engagement from stakeholders can support advancement of initiatives related to GME.