

POLICY: Internal Review Protocol

Purpose:

To establish an Internal Review process for UCSF Fresno medical education training programs that will enable an Ad Hoc Subcommittee for Internal Review (SIR) to consider programs for special reviews at the recommendation of the GMEC, DIO, or the Associate Dean of GME. The SIR can make recommendations to the GMEC to change policy as needed to comply with ACGME Institutional Requirements regarding the Special Review Process.

Definitions:

- Focused Report to GMEC:** A verbal report provided to GMEC regarding areas of concern that need further explanation for the SIR to determine the appropriate action to be recommended.
- Targeted Review:** A modified internal review of a program. This consists of reviewing specific areas within a program. The specific areas to be reviewed in the program will be determined by one or more triggers identified in the Special Review Criteria section below. Some data collection may be required as outlined under special review processes section.
- Special Review:** A full internal review of a program. This would consist of reviewing all aspects of a program against compliance of their ACGME standards for that individual program (Institutional, Common Program and Specific Program Requirements).

Protocol:

- The SIR, an Ad Hoc subcommittee of the GMEC, reviews all UCSF Fresno programs as needed for program underperformance.
- Composition of SIR consists of GME support staff, GME director, Assistant Dean for GME (IR Chair), leadership and faculty from current core programs within UCSF Fresno and when needed a house staff member will be selected to participate. Leadership and faculty SIR members are selected as needed in participation on the committee which also includes participation on any Special and Targeted reviews for any UCSF Fresno programs.
- Performance Indicators
The SIR on an annual basis will review the Institutional Dashboard that contains the following performance indicators (at a minimum) to determine if the program is underperforming and what type of review the program should receive, if any.
 - Accreditation Cycle Length
 - CLER Outcomes
 - Board Scores
 - In-service Exam Scores
 - Accreditation Citations
 - Faculty and Resident ACGME Surveys
 - Compliance & Documentation in WebADS
 - Annual Program Review Actions
 - Annual Reports to GMEC
 - Work Hours
 - Changes within Programs

Documentation Review (Policies, Files, Evaluations, etc.)
Scholarly Activity (residents and faculty)
Quality and Patient Safety Improvements
Procedure Compliance

Additional performance indicators may be reviewed depending on the program's specialty, department policies or at the request of the SIR.

▪ **Outcome Options**

The SIR, after their review, will determine if a program's underperformance requires one of the following reviews

1. Focused Report
2. Targeted Review
3. Special Review

Depending on the outcome, a Focused Report and Targeted Review can initiate a Special Review.

Processes:

1. Focused Report

- a) The program will be notified of the SIR's decision for an updated report and the area(s) of concern
- b) The program will be scheduled to report at the next scheduled GMEC meeting.
- c) The SIR Chair will determine if the report was sufficient, if the program needs a targeted or special review and/or any additional monitoring requirements, and if further reporting is necessary,
- d) The outcome will be reported at the next scheduled GMEC meeting.

2. Targeted Review

- a) The program will be notified of the SIR's decision for a targeted review and the specific areas that will be reviewed which may include some data review.
- b) The targeted review committee consists of the following:
 - Review Chair (Assistant Dean for GME)
 - GME Manager
 - GME Support Staff
 - One (1) SIR faculty member from outside the reviewed program (if applicable)
 - One (1) house staff member from outside the reviewed program (if applicable)
- c) Communications of Targeted Review
 - Orientation E-mail
 - Review of committee materials and assignments with appropriate due dates
 - Collection of Assignments and Findings
 - Each committee member will provide the GME support staff with their completed assignment and findings
 - Some assignments may include data review
 - Targeted Review Report
 - After completion of the review report (includes quality improvement goals and recommended action plans), the GME support staff will provide a copy to the Targeted Review committee for approval
 - Outcome Meeting
 - Present report to program director/chief of the program being reviewed
 - Incorporate comments and/or input from program director/chief
 - Prepare updated report for the GMEC for review and approval
- d) Report to the GMEC

The SIR will present to the GMEC a written summary report of its findings as well as an institutional plan of action to report/update the program's progress to the GMEC for monitoring.

- e) Monitoring of the action plan outcomes will be completed during the program's quarterly meetings with the Associate Dean and/or the Assistant Dean for GME, and in their annual program report to the GMEC, and any additional follow-up the SIR as requested.

3. Special Review

- a) The program will be notified of the SIR's decision for a special review
- b) The special review committee will consist of the following
 - Review Chair (Assistant Dean for GME)
 - GME Manager
 - GME Support Staff
 - One (1) SIR faculty member from outside the reviewed program (if applicable)
 - One (1) house staff member from outside the reviewed program (if applicable)
- c) Communications of Special Review
 - Orientation E-mail
 - Review of committee materials and assignments with appropriate due dates
 - Collection of Assignments and Findings
 - Each committee member will provide the GME support staff with their completed assignment and findings
 - Special Review Report
 - After completion of the review report (includes quality improvement goals and recommended action plans), the GME support staff will provide a copy to the Special Review committee for approval
 - Outcome Meeting
 - Present report to program director/chief of program being reviewed
 - Incorporate comments and/or input from program director/chief
 - Prepare updated report for the GMEC review and approval
- d) Data Review
 - Data reviewed by the special review committee will consist of at least the following:
 - ACGME Institutional, Common and program-related and/or subspecialty requirements
 - ACGME notification letters – both institutional and program related
 - CLER concerns or areas identified for the program
 - Frequent or common citations as provided by the specific RC
 - Results of the latest ACGME on-line faculty survey
 - WebADS documentation
 - Annual reports presented to and approved by the GMEC
 - Annual program reviews/Action Plans from the reviews
 - Core competency data
 - Duty hour reports
 - Written curriculum, including goals and objectives for each rotation
 - Results of the latest ACGME on-line resident survey
 - Questionnaires completed by residents and faculty
 - Quarterly Monitoring Reports related to resident academic actions
 - Program oversight information from Chief/Program Directors Meeting
 - Files/Documents within review.
 - Program policies and procedures
 - Scholarly Activity – Faculty/Resident
 - Quality Improvements/Patient Safety Improvements (evidence of) implementation of milestones into evaluations (or plan to implement)
- e) Questionnaires
 - Internal questionnaires will be provided to house staff and faculty of the program under review.
 - These questionnaires will assist the review committee.
- f) Interview Process

Interviews will take place with the program director, core faculty and house staff members. If necessary, additional interviews may take place.

g) Process/Protocol Objectives

Analyze outcome of data reviewed including questionnaires and interviews.

Review any CLER reports and determine the program's effectiveness in correcting any deficiencies noted.

Identify any new issues that affect program effectiveness due to changes in the ACGME requirements or changes in the program.

Identify and address any unusual monitoring data.

Determine the program's effectiveness in defining specific knowledge, skills and attitudes and providing educational experiences necessary for residents/fellows to demonstrate proficiency in the core competencies.

Determine if the program can provide evidence of outcome measures used to assess a resident's/fellow's competence in each of the core competencies.

Determine if the program has implemented milestones into their evaluations or has a plan to implement them.

Determine if the program can demonstrate evidence of a process that links the educational outcomes with program improvement.

h) Report to the GMEC

The SIR will present to the GMEC a written summary report of its findings as well as an institutional plan of action to report/update the program's progress to the GMEC for monitoring.

i) Monitoring of the action plan outcomes will be completed during the program's quarterly meeting with the Associate Dean and/or Assistant Dean for GME, in their annual program report to the GMEC, and any additional follow-up the SIR as requested.

(Original signed Policy is available in the UCSF Fresno Office of Graduate Medical Education)

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