

SES124 Polish In Action: Form The Best APE and Make It Shine!

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Disclosure

SPEAKERS:

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Disclosure

□ None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



Agenda

- 1. Introduction
- 2. What makes a good APE?
 - Small group discussion
- 3. Our approach
 - Small group discussion
- 4. Summary, next steps, and Q&A
- 5. Handouts





Learning Objectives

- Understand the importance of APE in continuous programmatic improvement cycle
- Recall at least 2 characteristics of an exemplary APE
- Brainstorm 2 actionable changes to implement





1. Introduction



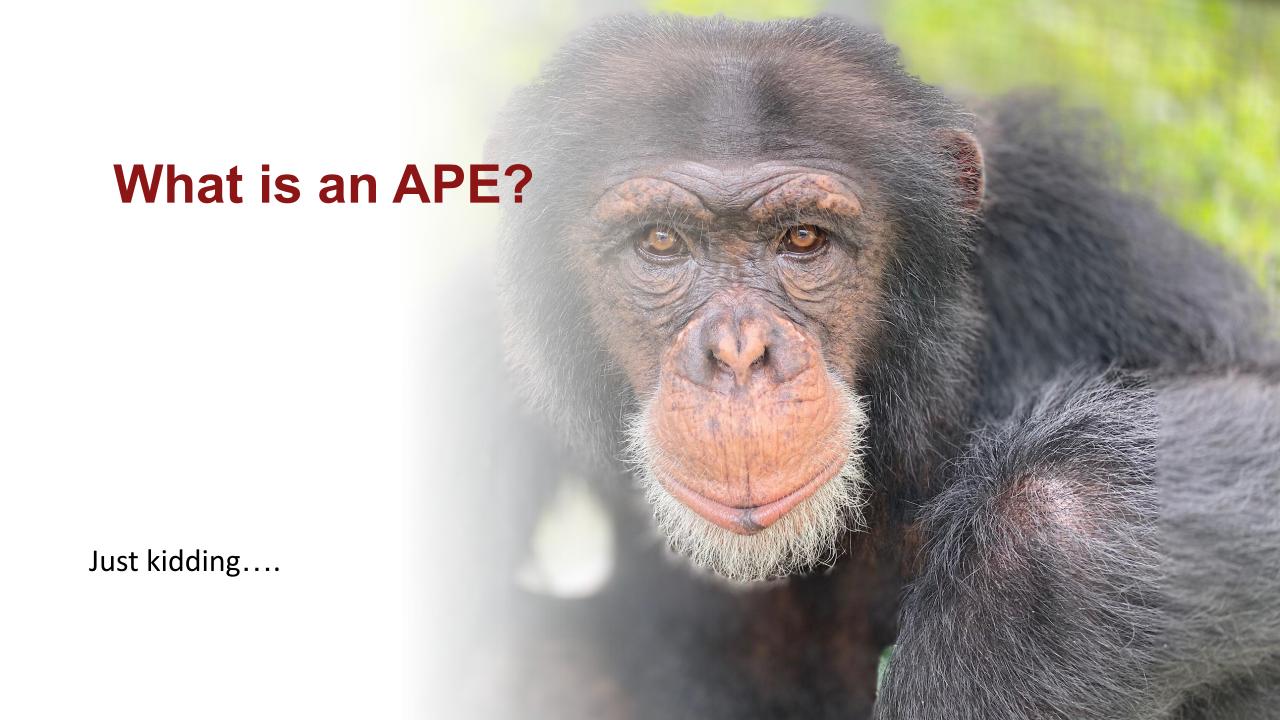






Who are We? Stanford Health Care

- □ Over 120 ACGME programs
- Over 1,500 residents and fellows
- ☐ GME Department
 - Educational Team
 - Operations Team



What is an APE (Annual Program Evaluation)?

"In order to achieve its mission and train quality physicians, a program must evaluate its performance and plan for improvement in the Annual Program Evaluation."

"Performance of residents and faculty members is a reflection of program quality, and can use metrics that reflect the goals that a program has set for itself. The Program Evaluation Committee utilizes outcome parameters and other data to assess the program's progress toward achievement of its goals and aims."



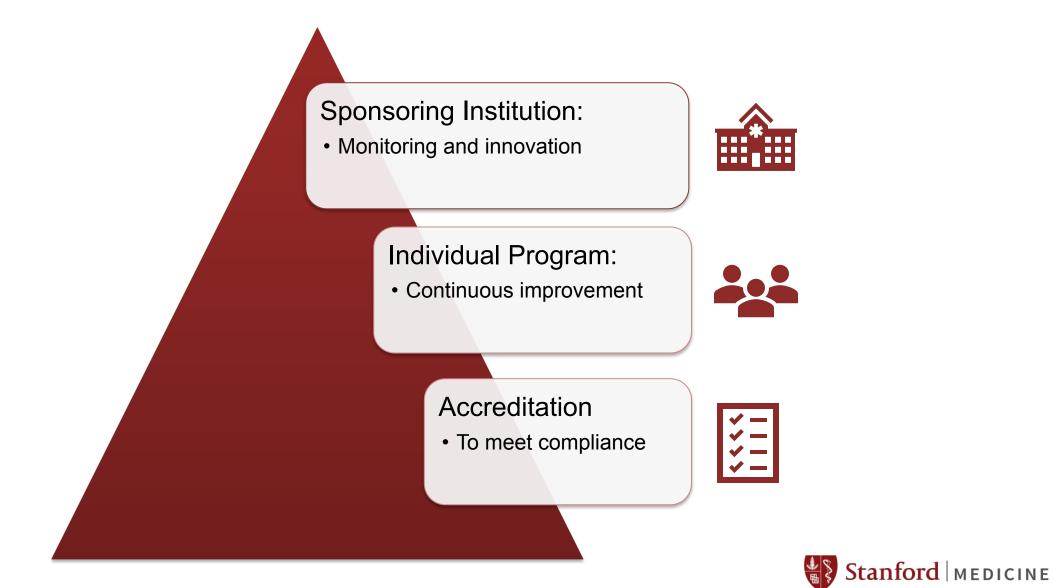


Look in the Mirror...
What do You See in Yourself?





Why are APEs Important?





What is Your Role in APEs? What are the Challenges of APEs?

Feel free to speak up

or

Use the Poll QR code

or

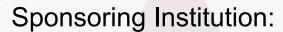
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What are the Challenges of APEs?



Monitoring and innovation



Limited resources to review and track all APEs, synthesize meaningful information across programs, feedback and comments provided to programs

Individual Program:

Continuous improvement



Scheduling, data collection, consolidation, and synthesis, evidence-based discussion, meaningful evaluation

Accreditation

• To meet compliance



Documentation, timing, connections to other required tasks





2. What Makes a Good APE?





What Should be the Functions of APEs?

- □ Program Evaluation Committee responsibilities must include:
 - acting as an advisor to the program director, through program oversight;
 - review of the program's self-determined goals and progress toward meeting them;
 - guiding ongoing program improvement, including development of new goals, based upon outcomes; and,
 - review of the current operating environment to identify strengths, challenges, opportunities, and threats as related to the program's mission and aims.



What Should be the Elements of APEs?

Trainee	🔒 Faculty	Graduates	Program				
 Well-being Recruitment & retention Diversity Quality improvement & patient safety Scholarly activity Achievement of Milestone In-training exam 	 Well-being Recruitment & retention Diversity Quality improvement & patient safety Scholarly activities Evaluation Professional development 	 Board pass and certification rates Graduate performance 	 Workforce diversity Program aim SWOT analysis ACGME surveys ACGME well-being surveys GME Program evaluations ACGME letters of notification, including citations, areas for improvement, and comment 				
Outcome from prior APE							
Program curriculum							



Who Should be the Stakeholders of APEs?

The Program Evaluation Committee must be composed of at least two program faculty members, at least one of whom is a core faculty member, and at least one resident.

- ☐ The annual review, including the action plan, must:
 - be distributed to and discussed with the members of the teaching faculty and the residents;
 and,
 - be submitted to the DIO.





Stanford HEALTH CARE Think about the Traits of an Exemplary APE







What Makes a Good APE?

Functions

Elements

Stakeholders

Feel free to speak up

or

Use the Padlet QR code

or

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3. Our Approach







Where we started from

- Required: APE Guidebook (Excel) and attendance is uploaded to RMS
- Results:
 - Inconsistent APE review in our RMS
 - High number of programs not meeting APE requirements











GME scoring system

Green = full compliance and good standing

Yellow = Concerning program and missing some documents

Red = Incomplete and/or needs intervention





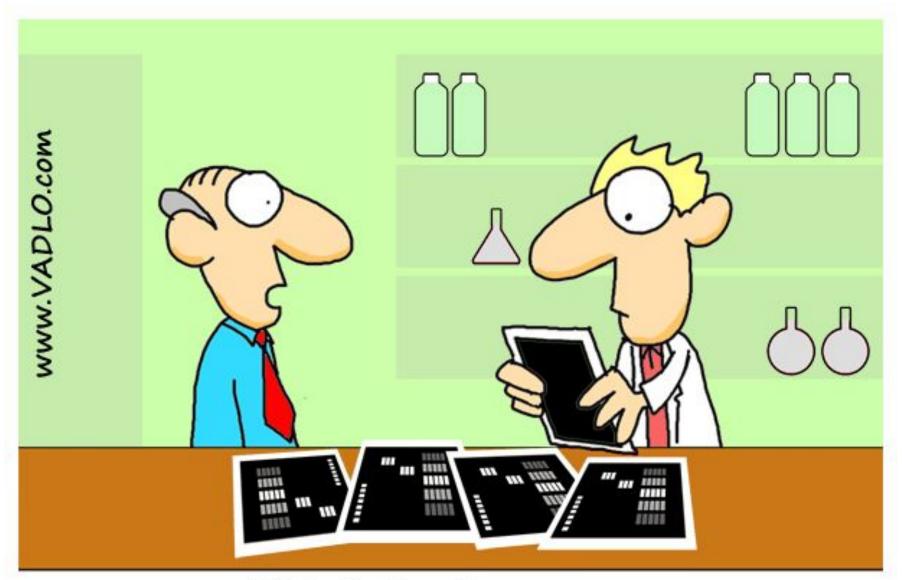
What Did We Hear? (?)



- ☐ GME observed 6 program APE meetings
- ☐ Focus groups with program directors (PD) and program coordinators (PC)
- Feedback session with PD and PC at monthly meetings
- ☐ First-hand experience from reviewing all ACGME program APEs every year
 - **GME PM & DIOs**

We asked ourselves "What makes a good APE?"



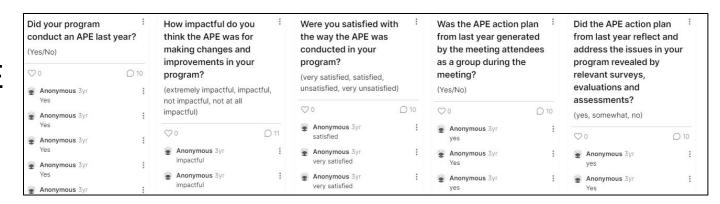


"Data don't make any sense, we will have to resort to statistics."



What Did We Hear? - Cont'd

- Challenges
 - Disconnect between PD & PC
 - Essential "elements" of an APE
 - Time & availability for APE
 - Gathering meaningful data

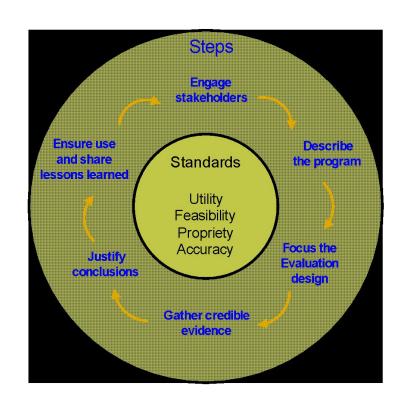


- □ Programs needed from GME:
 - Guidelines
 - Templates
 - Structure





Reference Frameworks



CDC Conceptual Framework

Utility

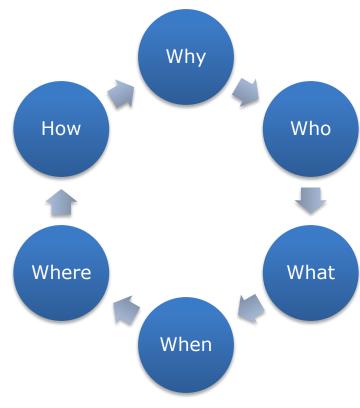
Feasibility

Propriety

Accuracy

Accountability

Five Categories of Standards



Components of an Evaluation Plan





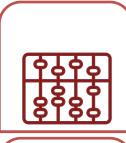
Goals of Our APE Changes

		Accreditation	Program	Institution		
Fund	ction	Completion of program review in accordance with ACGME	Meaningful and progressive improvement, insight, and innovation	Close monitoring of trends, strengths, and weaknesses; Identification and dissemination of best practices		
Elem	nents	Effective and comprehensive collection and synthesis of APE data; Accurate and timely documentation	Establishment of connections between APE and other accreditation tasks, e.g., ADS updates, CCC	Indicator of accreditation performance and benchmark. Data summarized at Annual Institution Review		
Stakeh	nolders	Engagement of PEC members; Obtaining buy-ins from teaching faculty	Structure of PEC to be best representative of program	Coordinated efforts between GMEC and GME. Interfacing between GME and institutional stakeholders at C-suite executives		





Overview of Our Changes



Improved APE metrics



Utilized the Resident Management System (RMS) to facilitate and document APEs



Enhanced APE communications between GME office and individual programs

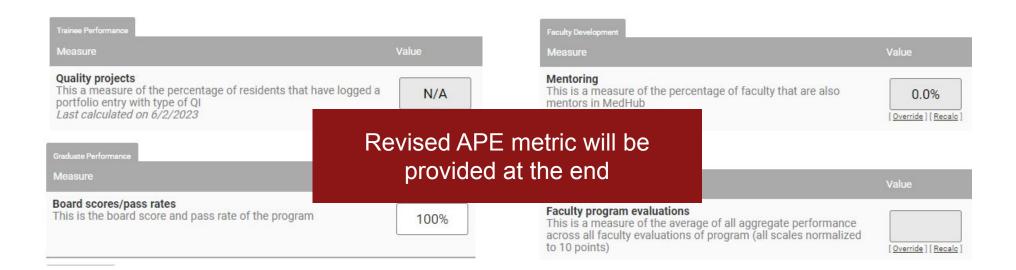






Improved APE metrics

- Revised APE Metrics in RMS
 - 1. Essential metrics and force programs to focus on institutional weaknesses
 - 2. Required response to low survey score
 - Connection from APE to ADS
 - Review letters and citation



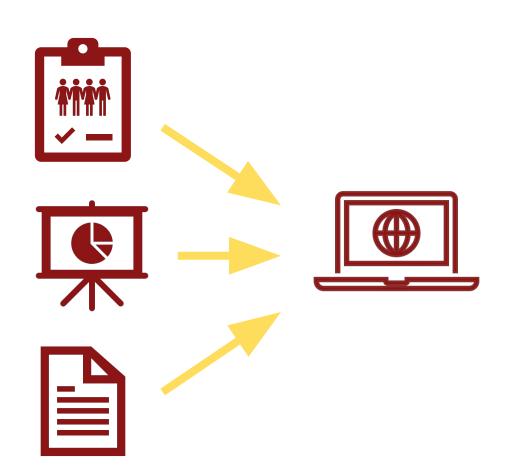




Our APE Changes – Utilization of RMS

■ APE elements were integrated into RMS:

- SWOT
- Action Plan
- Response to citations & low ACGME survey scores
- Work Hour Compliance



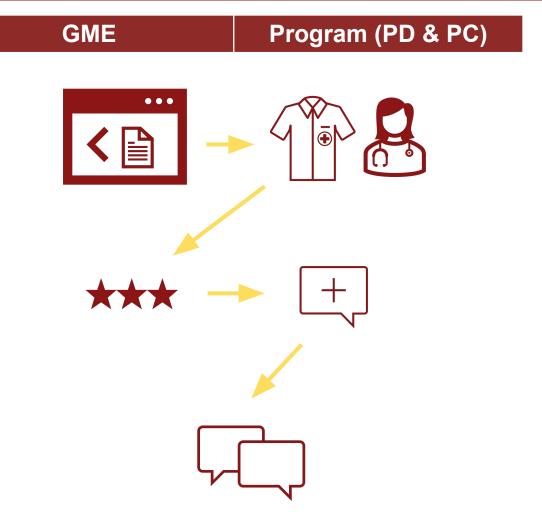






- ☐ GME's communication to programs changed from top down to dialogue driven (2-way)
- Project management tool was used to communicate and notify when APEs were ready for GME review

Program ගි	ACGME or Non-ACGME	GME PM	DIO	Trigger Email - Request APE update from program	Trigger Email - Return incomplete APE back	APE Status	APE PM Review Date	RYG Score [PM complete]	APE DIO Review Date	RYG Score [DIO complete]	Concerns & Comments
Allergy and Immunology	ACGME	Lizzie	Pedro	<u> </u>		GME Review Complete	10/25/23	Green	10/25/23	Green	
- Anesthesiology	ACGME	Jie	Ann			GME Review Complete	10/18/23	Yellow	10/19/23	Yellow	Action plan uploaded in attach
- Pediatric Anesthesiology	ACGME	Jie	Ann			GME Review Complete	10/18/23	Green	10/19/23	Green	
- Cardiac Anesthesia	ACGME	Jie	Ann			GME Review Complete	10/18/23	Green	10/19/23	Green	Good documentation
- Critical Care Anesthesia	ACGME	Jie	Ann			GME Review Complete	10/18/23	Green	10/19/23	Yellow	Good documentation
- OB Anesthesia	ACGME	Jie	Ann			Pending DIO Review (PM Review Complete)				Red	
- Pain Management	ACGME	Jie	Ann			GME Review Complete	10/18/23	Yellow	10/19/23	Yellow	Missing last year's APE Guide







Brainstorm One Change You Can Make to Yours or Our APE







Results from APE Changes

Before the changes...



After the changes...



- Improved working relationship between the program (PCs and PDs) resulting from the coordinated efforts of inclusion
- Quality improvement on ADS question "Major changes and other updates"

GME scoring system

Green = full compliance and good standing

Yellow = Concerning program and missing some documents

Red = Incomplete and/or needs intervention





Next Steps

Monitoring & Controlling

- Continue to work with programs that are in the red
- Monitor programs that are in the yellow

Guidance

- Provide guidance on how to run RMS reports relevant to completing the RMS APE metric
- Clarify how to complete the APE page, specifically the SWOT and Action Plan panel

Trends

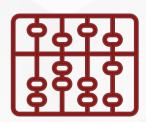
Review evaluation completion rate on trainee and faculty – Current Project!





Summary

Revised APE Metric



Integrated RMS



Dialogue Focused Communication







"When solving problems, dig at the roots instead of just hacking at the leaves."

-Anthony J. D'Angelo











Handouts & Resource



APE Metrics & Summary (New)

PDF containing new APE revision metrics and detailed notes

https://shorturl.at/lzLV8



APE Guidebook Excel (Former)

Excel workbook to track action items and SWOT analysis

https://shorturl.at/lxz08



GME APE Webpage



GME Contact Page









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The evaluation can be found in the mobile app and a link will be sent post-conference by email to attendees.

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Deadline – April 9, 2024

Questions? cme@acgme.org



References

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