Stanford GME's Revised APE Summary & Metrics

STANFORD HEALTH CARE – GRADUATE MEDICAL EDUCATION

Table of Contents

Stanford APE Revision Summary

APE Revision Detail

GME centered the new APE revision under three areas:

- **APE Metric Revision**
  - We focused on keeping APE information that directly related to residency and fellowship program performance.
  - We removed metrics that were not meaningful or provided context in any domain of program performance.
  - The new metrics can be found at the Revised APE Metrics section [link here]
- **Effective communication**
  - GME wanted to make the APE review protocol as dialogue driven; programs would be able to communicate to GME when APEs were ready and respond to GME's APE reviews.
  - GME used a combination of communication through a dedicated project management platform, residency management system (RMS), and direct communication with program.
  - The communication channel are as followed: Project management platform sends out request for update on APE completion status every 2 weeks to the program (PC & PD) → Program mark APE is ready and GME is notified → GME reviews APE documentation and provide review comments in Residency Management System (RMS) → Project management platform sends email to program (PD & PC) GME has finished review → Program reads GME's review comments in RMS → (Optional) Program provide a response to GME's review in RMS
- **Integration into residency management system**
  - All the APE documentation should be recorded within the residency management system (RMS) to ensure compliance and standardization.
  - The following documents were integrated into RMS:
    - SWOT analysis – formerly documented in the APE Guidebook [Link Here]
    - Action Plan – formerly documented in the APE guidebook [Link Here]
  - In addition to the APE documentation, programs needed to upload proof of their APE attendance, APE meeting (e.g., minutes, slide deck, APE PowerPoint), and didactic schedule.

Engagement and Decision Making

To ensure GME was making the appropriate changes, we listened to our Program Directors and Program Coordinators throughout the revision process. Below is the summary of what we've done:

1. **Observation and Engagement**:
   - GME observed six program APE meetings, gaining firsthand insights into existing practices.
   - This direct observation allowed them to understand the nuances and challenges faced by programs, specifically by Program Directors (PDs) and Program Coordinators (PCs)
2. **Focus Groups with PDs and PCs**:
   - GME facilitated focus groups involving Program Directors and Program Coordinators.
   - These collaborative sessions provided a platform for detailed discussions and feedback in root cause analysis and testing APE change prototypes.

3. **Monthly Feedback Sessions**:
   o Regular feedback sessions were held with PDs and PCs during monthly meetings.
   o Open dialogue ensured that concerns, suggestions, and improvements were addressed promptly.
4. **Informed Decision-Making**:
   o GME leveraged their first-hand experience gained from reviewing all ACGME program APEs annually, where Common trends and patterns were noted.
   o This strengthened GME's understanding of the APE protocol, resulting in creating a new evaluation process that was more effective and timely.

From these interactions, programs asked GME for more guidance on APE protocols, documentations, and guidelines/templates. As an institution, GME had to monitor and ensure all ACGME programs were meeting ACGME APE requirement, while ensuring the APE were meaningful in assessing program performance. GME uncovered several root causes into why many programs were not meeting APE documentation requirements that included: Unclear APE documentation expectations by GME, lack of guidance in aggregating APE information and high value data, disconnect of APE processes between the PD & PC, and availability constraints by APE members. GME then focused on areas within the department's ability to control. From there, GME continuously gathered feedback through each change iteration.

Stanford GME's Revised APE Metrics

Below is the new APE metrics created by Stanford GME, followed by screenshots of how it is implemented in the Residency Management System.

Revised APE Metrics

Trainee Performance

❖ **Case and procedural logs [Question type: Yes/No]**
  o *Are all trainees on track to meet the minimum requirements on case/procedures by graduation? (If NO, please explain)*
❖ **Work hours [Question Type: numerical & short answer]**
  o *Average hours per week since the beginning of the AY*
❖ **Mentorship [Question Type: Yes/No & short answer]**
  o *Has each trainee been assigned to a faculty mentor? (If NO, please explain)*
❖ **Milestones [Question Type: Yes/No]**
  o *Are all trainees on track to reach the target milestones levels upon graduation? (If NO, please explain)*
❖ **CCC [Question Type: Yes/No & Date]**
  o *Will your program have at least two CCC meetings by the end of this AY? List the dates (or expected dates) of the meetings.*
❖ **Trainee evaluations by faculty [Question Type: Short answer]**
  o *How often were evaluations of trainees delivered to faculty attendings?*
❖ **Completion of trainee evaluations [Question Type: Numerical]**
  o *What is the completion rate of trainee evaluations by faculty within 14 days after delivery?*
❖ **Quality Improvement [Question Type: Yes/No & short answer**
  o *Are all trainees participating in QI activities? (If NO, please explain)*

Faculty Development

❖ **Professional development [Question Type: Yes/No & short answer]**
  o *Have your faculty received any professional development trainings in this AY? (If NO, please explain)*
❖ **Faculty evaluations by trainees [Question Type: Yes/No & short answer]**
  o *Has every faculty member been evaluated formally by your trainees at least once this AY? (If NO, please explain)*
❖ **Completion of faculty evaluations [Question Type: Yes/No]**
  o *What is completion rate of evaluations of faculty by trainees this AY?*

Graduate Performance

❖ **Board scores/pass rates [Question Type: Numerical]**
  o *This is the board score and pass rate of the program*

Program Quality

- ❖ **Program's internal strengths [Question Type: short answer]**
- ❖ **Program's internal weaknesses [Question Type: short answer]**
- ❖ **Program's external opportunities [Question Type: short answer]**
- ❖ **Program's external threats [Question Type: short answer]**
- ❖ **Curriculum [Question Type: Yes/No & file upload]**
  - ○ *Has the PEC reviewed your program's curriculum and didactic schedule? Please upload a copy of the didactic schedule under File Attachments on the left.*
- ❖ **Major changes [Question Type: short answer]**
  - ○ *In addition to last year's action plan, describe any other major changes to the program in the Comments box*
- ❖ **Action plan [Question Type: Yes/No & short answer]**
  - ○ *The action plan generated by the PEC has been shared and approved by the core faculty members in the program*

ACGME Accreditation

- ❖ **ACGME surveys [Question Type: Yes/No & short answer]**
  - ○ *Has the PEC reviewed and discussed the metrics lower than 80% from this year's ACGME resident and faculty surveys?*
- ❖ **Responses to low ACGME survey metrics [Question Type: short answer]**
  - ○ *How does the program plan to address the metrics lower than 80% (Put NA in the comments box if not applicable)*
- ❖ **ACGME accreditation letter [Question Type: Yes/No & short answer]**
  - ○ *Has the PEC reviewed the discussed this year's ACGME accreditation letter, including the areas of concerns and citations if any?*

Review Panel

- ❖ **GME Program Manager Review [Question Type: short answer]**
  - ○ *Completed by the GME PM*
- ❖ **DIO Review [Question Type: short answer]**
  - ○ *Completed by the DIO*
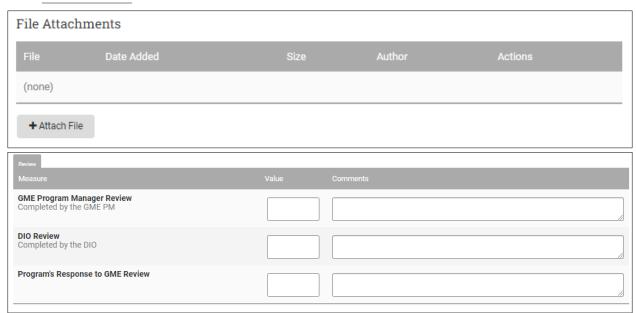- ❖ **Program's Response to GME Review (Optional) [Question Type: short answer]**

Stanford GME's Revised APE Metric in RMS

Trainee Performance

Measure	Value	Comments
Case and procedural logs Are all trainees on track to meet the minimum requirements on case/procedures by graduation? (If NO, please explain)		
Work hours Average hours per week since the beginning of the AY		
Mentorship Has each trainee been assigned to a faculty mentor? (If NO, please explain)		
Milestones Are all trainees on track to reach the target milestones levels upon graduation? (If NO, please explain)		
CCC Will your program have at least two CCC meetings by the end of this AY? List the dates (or expected dates) of the meetings.		* required
Trainee evaluations by faculty How often were evaluations of trainees delivered to faculty attendings?		
Completion of trainee evaluations What is the completion rate of trainee evaluations by faculty within 14 days after delivery?		
Quality Improvement Are all trainees participating in QI activities? (If NO, please explain)		

Faculty Development

Measure	Value	Comments
Professional development Have your faculty received any professional development trainings in this AY? (If NO, please explain)		
Faculty evaluations by trainees Has every faculty member been evaluated formally by your trainees at least once this AY? (If NO, please explain)		
Completion of faculty evaluations What is completion rate of evaluations of faculty by trainees this AY?		

Graduate Performance

Measure	Value	Comments
Board scores/pass rates This is the board score and pass rate of the program		* required

Program Quality

Measure	Value	Comments
Program's internal strengths		
		* required
Program's internal weaknesses		
		* required
Program's external opportunities		
		* required
Program's external threats		
		* required
Curriculum Has the PEC reviewed your program's curriculum and didactic schedule? Please upload a copy of the didactic schedule under File Attachments on the left.		
Major changes In addition to last year's action plan, describe any other major changes to the program in the Comments box		
		* required
Action plan The action plan generated by the PEC has been shared and approved by the core faculty members in the program		

ACGME Accreditation

Measure	Value	Comments
ACGME surveys Has the PEC reviewed and discussed the metrics lower than 80% from this year's ACGME resident and faculty surveys?		
Responses to low ACGME survey metrics How does the program plan to address the metrics lower than 80% (Put NA in the comments box if not applicable)		
		* required
ACGME accreditation letter Has the PEC reviewed the discussed this year's ACGME accreditation letter, including the areas of concerns and citations if any?		

Action Plan

Area for Improvement	Action Plan	Expected Resolution	Date Instituted	Target Date	Individual Responsible	Context	Status	Actions
(none)								

+ Add Action Item

File Attachments

File	Date Added	Size	Author	Actions
(none)				

+ Attach File

Review

Measure	Value	Comments
GME Program Manager Review Completed by the GME PM		
DIO Review Completed by the DIO		
Program's Response to GME Review		

Note

- The review box is where GME input their APE review comments.
- *(Optional)* Programs can choose provide their response after GME's review.

Contact Us

- Stanford GME Contact Page - https://med.stanford.edu/gme/gme_team.html