Objectives

- Know the significance of the program evaluation cycle
- Recall your role in the Annual Program Evaluation (APE)
- Identify the requirements for conducting an APE
AGENDA

- Refresher from last session
- Program evaluation Cycle
  - House Staff survey
  - ACGME surveys
  - GME Program Evaluations
  - PEC & APE
  - ADS
- Q/A
Refresher – From last month’s course

Trainee Evaluation

- Semi-annual, summative, and final evaluation
- milestone
- CCC
  - CCC Guidebook - https://med.stanford.edu/gme/program_portal/program/clinical-competency-committee--ccc-.html
Program Evaluation
Why conduct a program evaluation?

- Annual program evaluation is required by ACGME

- Implement continuous process improvement model
  - Address areas for improvement
  - Build on strengths

V.C.1.d) The Program Evaluation Committee must evaluate the program’s mission and aims, strengths, areas for improvement, and threats.

V.C.1.e) The annual review, including the action plan, must:

V.C.1.e).(1) be distributed to and discussed with the members of the teaching faculty and the residents; and, *(Core)*

V.C.1.e).(2) be submitted to the DIO.

What will take my program to the next level?
Program Major Responsibilities

Program Evaluation
- GME Housestaff Survey
- ACGME Surveys
- Program Evaluation
- Faculty Evaluation
- Program Evaluation Committee (Annual Program Evaluation)
- Annual WebADS Updates
- Work Hours Logging

Trainee Evaluation
- Ongoing Evaluation
- Clinical Competency Committee
- Semi-annual & Summative Evaluation
- Milestone Reporting
- Final Evaluation
- Case Log Recording

Operations
- Recruitment
- Interview/Hiring
- Continuing Trainees
- Scheduling
- Rotations
- Reimbursement
- Medical License

MedHub
- ALL Tasks
Overview of Program Evaluation Process

- **Oct-Nov**: GME Survey
- **Feb-Apr**: ACGME Survey by Residents and Faculty
- **Apr**: Program Evaluation by Residents and Faculty
- **May-Jun**: Program Evaluation Committee (PEC)
- **Jun-Jul**: Annual Program Evaluation (APE)
- **Aug-Sept**: Annual WebADS Updates

Program Improvement Planning

Report Plan to ACGME
GME Housestaff Survey – Program Quality #1

Survey Report

PART 1

Survey Report

Survey Report
GME Housestaff Survey – Cont.

- Completely anonymous and confidential internal survey
- Your role is to encourage your trainees to complete the survey
- Reports are generated if program have 4 or more responses
  - Highlights areas your program excels and are deficient in
  - Qualitative comments provide context

- Your program will use the report to address areas for improvement or critical incidents, especially before ACGME Surveys are distributed.
ACGME Survey - Program Quality #2

**Purpose:** ACGME check in on program quality and another data tool (external) for your program evaluation

**Your Role:**

-- Ensure completion rate: resident 70%; faculty 60%
-- Ensure that residents and faculty understand survey is confidential
ACGME Survey – Cont.

- ACGME’s sends annually survey to trainees and faculty
- Completely anonymous and confidential
- Survey will be live from 2/31/2022 - 4/17/2022 (roughly 11 weeks)

- ACGME will generate 4 total reports from the survey:
  
  (1) ACGME survey by trainee
  (2) Wellness survey by trainee
  (3) ACGME survey by faculty
  (4) Wellness survey by faculty
ACGME Survey – Domains & Questions

- Resources
- Professionalism
- Patient Safety and Teamwork
- Faculty Teaching and Supervision
- Evaluation
- Educational Content
- Diversity and Inclusion
- Clinical Experience and Education
- Wellness
ACGME Survey

2019-2020 ACGME Resident/Fellow Survey - page 1

Survey taken: January 2020 - February 2020
Residents Surveyed 28
Residents Responded 25
Response Rate 90%

Residents' overall evaluation of the program

<table>
<thead>
<tr>
<th>Program Mean</th>
<th>Very negative</th>
<th>Somewhat negative</th>
<th>Neutral</th>
<th>Somewhat positive</th>
<th>Very positive</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>6%</td>
<td>0%</td>
<td>4%</td>
<td>32%</td>
<td>64%</td>
</tr>
</tbody>
</table>

Residents' overall opinion of the program

<table>
<thead>
<tr>
<th>Program Mean</th>
<th>Definitely not choose again</th>
<th>Probably not choose again</th>
<th>Might not choose again</th>
<th>Probably choose again</th>
<th>Definitely choose again</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0%</td>
<td>0%</td>
<td>4%</td>
<td>8%</td>
<td>28%</td>
</tr>
</tbody>
</table>

Resources

- Education compromised by non-physician obstacals: 6% (Program), 86% (Specialty)
- Impact of other learners on education: 92% (Program), 83% (Specialty), 3.9
- Appropriate balance between education and patient care: 82% (Program), 75% (Specialty)
- Faculty members discuss cost awareness in patient care decisions: 88% (Program), 89% (Specialty)
- Time to interact with patients: 92% (Program), 85% (Specialty)
- Time to participate in structured learning activities: 76% (Program), 78% (Specialty)
- Able to attend personal appointments: 72% (Program), 87% (Specialty)
- Access to mental health counseling or treatment: 96% (Program), 93% (Specialty)
- Satisfied with safety and health conditions: 80% (Program), 67% (Specialty)

Professionalism

- Residents fellows comfortable calling supervisor with questions: 80% (Program), 85% (Specialty)
- Faculty members act professionally when teaching: 100% (Program), 93% (Specialty)
- Faculty members act professionally when providing care: 100% (Program), 98% (Specialty)
- Process in place for confidential reporting of unprofessional behavior: 95% (Program), 65% (Specialty)
- Able to raise concerns without fear or intimidation: 72% (Program), 80% (Specialty)
- Satisfied with process for dealing with problems and concerns: 80% (Program), 76% (Specialty)
- Experienced or witnessed abuse: 96% (Program), 4% (Specialty)

Patient Safety and Teamwork

- Information not lost during shift changes or patient transfers: 80% (Program), 81% (Specialty)
- Culture emphasizes patient safety: 92% (Program), 89% (Specialty)
- Know how to report patient safety events: 100% (Program), 96% (Specialty)
- Interprofessional teamwork skills modeled or taught: 72% (Program), 75% (Specialty)
- Participate in adverse event analysis: 80% (Program), 77% (Specialty)
- Process to transition care when tired: 88% (Program), 88% (Specialty)
### Well-Being Survey

2019-2020 ACGME Resident/Fellow Survey  
Survey taken: January 2020 - February 2020  
Residents Responded: 24  
Response Rate: 100%

**Well-Being Survey Questions**

National data has been omitted from this administration of the survey based on complications resulting from the COVID-19 pandemic.

An important component of the Common Program Requirements is that physician well-being is crucial to delivering the safest, best possible care to patients. The results of the Well-Being Survey are intended to help your program and institution build and improve local well-being efforts, and make it easier to comply with the ACGME well-being requirements.

Aggregate reports will be provided to the program and sponsoring institution when a minimum number of responses is reached. This ensures anonymity and maintains confidentiality for survey respondents. These results are NOT used by the ACGME in the accreditation process.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Program Mean</th>
<th>National Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>I find my work to be meaningful.</td>
<td>56.3%</td>
<td>41.7%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>3.6</td>
<td>N/A</td>
</tr>
<tr>
<td>I work in a supportive environment.</td>
<td>75.0%</td>
<td>25.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>3.8</td>
<td>N/A</td>
</tr>
<tr>
<td>The amount of work I am expected to complete in a day is reasonable.</td>
<td>20.8%</td>
<td>58.3%</td>
<td>28.8%</td>
<td>0.0%</td>
<td>3.0</td>
<td>N/A</td>
</tr>
<tr>
<td>I participate in decisions that affect my work.</td>
<td>58.3%</td>
<td>37.5%</td>
<td>4.2%</td>
<td>0.0%</td>
<td>3.5</td>
<td>N/A</td>
</tr>
<tr>
<td>I have enough time to think and reflect.</td>
<td>25.0%</td>
<td>54.2%</td>
<td>16.7%</td>
<td>4.2%</td>
<td>3.0</td>
<td>N/A</td>
</tr>
<tr>
<td>I am treated with respect at work.</td>
<td>70.8%</td>
<td>29.2%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>3.7</td>
<td>N/A</td>
</tr>
<tr>
<td>I feel more and more engaged in my work.</td>
<td>29.2%</td>
<td>50.0%</td>
<td>20.8%</td>
<td>0.0%</td>
<td>3.1</td>
<td>N/A</td>
</tr>
<tr>
<td>I find my work to be a positive challenge.</td>
<td>29.2%</td>
<td>66.7%</td>
<td>4.2%</td>
<td>0.0%</td>
<td>3.3</td>
<td>N/A</td>
</tr>
<tr>
<td>I find new and interesting aspects in my work.</td>
<td>33.3%</td>
<td>58.3%</td>
<td>8.3%</td>
<td>0.0%</td>
<td>3.3</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>Program Mean</th>
<th>National Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>I often feel emotionally drained at work.</td>
<td>12.5%</td>
<td>50.0%</td>
<td>20.8%</td>
<td>16.7%</td>
<td>2.6</td>
<td>N/A</td>
</tr>
<tr>
<td>After work, I need more time than in the past in order to relax.</td>
<td>4.2%</td>
<td>50.0%</td>
<td>33.3%</td>
<td>12.5%</td>
<td>2.5</td>
<td>N/A</td>
</tr>
<tr>
<td>I feel worn out and weary after work.</td>
<td>8.3%</td>
<td>33.3%</td>
<td>50.0%</td>
<td>8.3%</td>
<td>2.4</td>
<td>N/A</td>
</tr>
</tbody>
</table>

This report is confidential and not for further distribution. Please do not publish or share these results outside of your Sponsoring Institution.
ACGME Survey – Purpose and Accreditation

- ACGME surveys are another tool for your program evaluation process
- ACGME reviews surveys to assess your program
- Non-compliance (<70% response rate or <80% scoring) is a deficiency and can result in a citation
Your role in ACGME survey – Response Collection

- Track your program’s survey completion status on ACGME
- Ensure all your trainees and faculty completes survey independently and honestly

- Reports will be generated if there are 4 or more responses AND completion rate is at least 70%
  - GME will send the survey reports when available.
Understanding the Report

- Your program uses the ACGME survey to address deficient areas and is a guiding datapoint in the annual program evaluation (APE)

- ACGME uses the ACGME survey to evaluate your program
  - Concerning programs are further monitored and can result in a citation or site visit

- GME uses the ACGME survey to measure your program’s performance
  - Additionally, GME creates the 5-year trend analysis report to review longitudinal data. The 5-year trend analysis is a dashboard overview of your program’s performance every year
Any Questions So Far?
Purpose:
- Annual evaluate program from both trainee and faculty perspective.
- More narrative questions

Delivery & Reporting:
- GME distributes (via MedHub), aggregates, and generates reports for your program

Your Role:
- Remind faculty and trainees to complete the evaluations
GME Program Evaluations - Reports

## Aggregate Evaluation Report - Faculty Evaluation Of Program/hospital

**Generated:** 04/29/2020 4:03pm PDT  
**Target:**  
**Date Range:** 04/01/20-04/29/20  
**Responses:** 8

To facilitate the evaluation and continual improvement of your program, we ask that you please answer the following questions. Your responses are confidential. Thank you.

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Disagree Slightly</th>
<th>Agree Slightly</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>Avg</th>
<th>Std</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The educational resources available to the training program are adequate.</td>
<td>12.50%</td>
<td>67.50%</td>
<td>10.00%</td>
<td></td>
<td></td>
<td></td>
<td>5.88</td>
<td>0.3</td>
</tr>
<tr>
<td>2. The administrative support available to the training program is adequate.</td>
<td>25.00%</td>
<td>75.00%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5.75</td>
<td>0.4</td>
</tr>
<tr>
<td>3. The program allows me to maintain an educational environment conducive to educating residents in each of the ACGME Core Competency areas.</td>
<td>25.00%</td>
<td>75.00%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5.75</td>
<td>0.4</td>
</tr>
<tr>
<td>4. I have sufficient time allotted to me to fulfill my supervisory responsibilities.</td>
<td>25.00%</td>
<td>75.00%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5.75</td>
<td>0.4</td>
</tr>
<tr>
<td>5. I have sufficient time allotted to me to fulfill my teaching responsibilities.</td>
<td>25.00%</td>
<td>75.00%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5.75</td>
<td>0.4</td>
</tr>
<tr>
<td>6. I am able to regularly participate in organized clinical discussions, rounds, journal clubs, and conferences.</td>
<td>12.50%</td>
<td>87.50%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5.75</td>
<td>0.7</td>
</tr>
<tr>
<td>7. The program allows me to maintain an environment of inquiry and scholarship with an active research component.</td>
<td>25.00%</td>
<td>75.00%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5.75</td>
<td>0.4</td>
</tr>
<tr>
<td>8. There are a sufficient number of faculty with appropriate qualifications to supervise all the residents in the program.</td>
<td>25.00%</td>
<td>75.00%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5.75</td>
<td>0.4</td>
</tr>
</tbody>
</table>
Your role in GME program evaluation survey

- Remind and encourage trainees and faculty to complete survey honestly
- Share & disseminate GME Program Evaluation report
# GME 5-year Trend Analysis

## Program's 5-Year Trend Analysis (Program Report Card)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Sufficient Supervision</td>
<td>RESIDENT</td>
<td>Survey</td>
<td>ACGME % COMPLIANT</td>
<td>97%</td>
<td>85%</td>
<td>90%</td>
<td>98%</td>
<td></td>
</tr>
<tr>
<td>Sufficient Instruction</td>
<td>RESIDENT</td>
<td>Survey</td>
<td>ACGME % COMPLIANT</td>
<td>88%</td>
<td>64%</td>
<td>69%</td>
<td>68%</td>
<td></td>
</tr>
<tr>
<td>Faculty/Staff Create Environment of Inquiry</td>
<td>RESIDENT</td>
<td>Survey</td>
<td>ACGME % COMPLIANT</td>
<td>80%</td>
<td>60%</td>
<td>72%</td>
<td>70%</td>
<td></td>
</tr>
<tr>
<td>Satisfied with Process for Problems and Concerns</td>
<td>RESIDENT</td>
<td>Survey</td>
<td>ACGME % COMPLIANT</td>
<td>96%</td>
<td>63%</td>
<td>62%</td>
<td>53%</td>
<td></td>
</tr>
<tr>
<td>Climate Where Residents Can Raise Concerns Without Fear</td>
<td>RESIDENT</td>
<td>Survey</td>
<td>ACGME % COMPLIANT</td>
<td>83%</td>
<td>71%</td>
<td>75%</td>
<td>58%</td>
<td></td>
</tr>
<tr>
<td>Overall Eval of the Program</td>
<td>RESIDENT</td>
<td>Survey</td>
<td>ACGME % COMPLIANT</td>
<td>89%</td>
<td>83%</td>
<td>85%</td>
<td>83%</td>
<td></td>
</tr>
<tr>
<td>Overall Number of ACGME Citations</td>
<td>PROGRAM</td>
<td>ACGME</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Board Pass Rates</td>
<td>PROGRAM</td>
<td>ABMS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>93%</td>
</tr>
<tr>
<td>Overall Satisfaction with Program</td>
<td>RESIDENT</td>
<td>GME-Survey</td>
<td></td>
<td>90%</td>
<td>89%</td>
<td>90%</td>
<td>81%</td>
<td>83%</td>
</tr>
<tr>
<td>Program Organized to Meet Educational Needs</td>
<td>RESIDENT</td>
<td>GME-Survey</td>
<td></td>
<td>77%</td>
<td>73%</td>
<td>65%</td>
<td>76%</td>
<td>83%</td>
</tr>
<tr>
<td>Service Over Education</td>
<td>RESIDENT</td>
<td>GME-Survey</td>
<td></td>
<td>71%</td>
<td>49%</td>
<td>49%</td>
<td>52%</td>
<td>90%</td>
</tr>
<tr>
<td>Encouraged to Ask Questions on a Regular Basis</td>
<td>RESIDENT</td>
<td>GME-Survey</td>
<td></td>
<td>94%</td>
<td>92%</td>
<td>92%</td>
<td>96%</td>
<td>72%</td>
</tr>
<tr>
<td>Residents Can Be Open and Honest with Faculty</td>
<td>RESIDENT</td>
<td>GME-Survey</td>
<td></td>
<td>92%</td>
<td>95%</td>
<td>93%</td>
<td>83%</td>
<td>97%</td>
</tr>
<tr>
<td>Residents Would Recommend Program</td>
<td>RESIDENT</td>
<td>GME-Survey</td>
<td></td>
<td>96%</td>
<td>86%</td>
<td>88%</td>
<td>96%</td>
<td>79%</td>
</tr>
<tr>
<td>Faculty Overall Evaluation Program</td>
<td>FACULTY</td>
<td>Pgm Eval Mean Score/10</td>
<td></td>
<td>8.73</td>
<td>7.72</td>
<td>7.78</td>
<td>9.09</td>
<td></td>
</tr>
<tr>
<td>Resident Overall Program Evaluation</td>
<td>RESIDENT</td>
<td>Pgm Eval Mean Score/10</td>
<td></td>
<td>8.39</td>
<td>7.51</td>
<td>8.18</td>
<td>8.46</td>
<td></td>
</tr>
<tr>
<td>&gt;80 Violations / AY</td>
<td>PROGRAM</td>
<td>MedHub Duty Hr Rpt</td>
<td></td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td># Unreviewed Duty Hr Periods by PD / AY</td>
<td>PROGRAM</td>
<td>MedHub Detailed Rpt</td>
<td></td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

## Key

- **STRENGTH**
- **WEAKNESS**
GME reports – MedHub Location

- Located on MedHub → Program Accreditation → APE → Academic Year 2021-2022 under file attachments
Any Questions So Far?
Program Evaluation Committee (PEC) & Annual Program Evaluation (APE)
Program Major Responsibilities

Program Evaluation:
- GME Housestaff Survey
- ACGME Surveys
- Program Evaluation
- Faculty Evaluation
- Program Evaluation Committee (Annual Program Evaluation)
- Annual WebADS Updates
- Work Hours Logging

Trainee Evaluation:
- Ongoing Evaluation
- Clinical Competency Committee
- Semi-annual & Summative Evaluation
- Milestone Reporting
- Final Evaluation
- Case Log Recording

Operations:
- Recruitment
- Interview/Hiring
- Continuing Trainees
- Scheduling
- Rotations
- Reimbursement
- Medical License

MedHub:
- ALL Tasks
Overview of Program Quality Evaluation Process

Oct-Nov: GME Housestaff Survey
Feb-Mar: ACGME Survey by Residents and Faculty
Apr: GME Program Evaluations by Residents and Faculty
May-Jun: Program Evaluation Committee (PEC)
Jun-Jul: Annual Program Evaluation (APE)
Aug-Sept: Annual WebADS Updates

Program Quality Indices
Program Improvement
What do you see when you look into the mirror?

Applicable and important for both ACGME and non-ACGME programs
Program Evaluation Committee

**Preparation Work**

- Form the committee and schedule the APE meeting
- Compile program quality indices (see data checklist), distribute prior to meeting
- Analyze the information gathered

Data gathering checklist found inside GME APE Guidebook
[https://med.stanford.edu/gme/program_portal/program/ape_pec.html](https://med.stanford.edu/gme/program_portal/program/ape_pec.html)
Annual Program Evaluation

**Actual Meeting**

- Attend meeting, take meeting minutes
- Contribute to the discussion
- Get core faculty approval for action plan and guidebook
- Documentation

APE Guidebook will help track SWOT analysis and action plans for each year

https://med.stanford.edu/gme/program_portal/program/ape_pec.html
Any Questions So Far?
Prep Work (May – June)

Logistics

Data
1. Logistics

1) Form a Program Evaluation Committee (PEC):

   Program director, associate program director(s), program manager or coordinator, site director, (at least one) core faculty member, (at least one) faculty member, division chief, director of education, department chair, (at least one) trainee.

   Think of it as a Program Retreat!

2) Set up a meeting time (done by PC):

   • Reserve enough time for the meeting
   • Send out calendar invites as early as possible!
## Prep Work (May – June)

### 2. Data

1) Facilitate in data gathering

<table>
<thead>
<tr>
<th>Trainee</th>
<th>Faculty</th>
<th>Graduates</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Milestone</td>
<td>Scholarly activities</td>
<td>Board pass rate</td>
<td>GME survey</td>
</tr>
<tr>
<td>In-training exam</td>
<td>Recruitment &amp; retention</td>
<td>Employment</td>
<td>ACGME surveys</td>
</tr>
<tr>
<td>Scholarly activity</td>
<td>Well-being</td>
<td></td>
<td>ACGME well-being surveys</td>
</tr>
<tr>
<td>Recruitment &amp; retention</td>
<td>Diversity</td>
<td></td>
<td>GME Program evaluations</td>
</tr>
<tr>
<td>Well-being</td>
<td>Quality improvement &amp; patient safety</td>
<td></td>
<td>ACGME citations or areas of concern</td>
</tr>
<tr>
<td>Diversity</td>
<td>Professional development</td>
<td></td>
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<tr>
<td>Quality improvement &amp; patient safety</td>
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</tbody>
</table>

APE Checklist: [https://med.stanford.edu/gme/program_portal/program/ape_pec.html](https://med.stanford.edu/gme/program_portal/program/ape_pec.html)
# Prep work – GME APE Data Checklist

<table>
<thead>
<tr>
<th>Pre-Meeting Preparation</th>
<th>Annual Program Evaluation Checklist – Last Updated January 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Resident Performance</strong></td>
<td><img src="https://med.stanford.edu/gme/program_portal/progaram_ape_pec.html" alt="Image" /></td>
</tr>
<tr>
<td>Milestone achievements/evaluations</td>
<td>MedHub &gt; &quot;Reports&quot; tab &gt; &quot;Milestone Summary by Level&quot; under &quot;Evaluation Reports&quot;</td>
</tr>
<tr>
<td>Faculty evaluations (of trainees)</td>
<td>MedHub &gt; &quot;Reports&quot; tab &gt; &quot;Resident/Faculty Service Ranking&quot; under &quot;Evaluation Reports&quot; &gt; Select &quot;Resident&quot; &gt; Select &quot;Faculty of resident&quot;</td>
</tr>
<tr>
<td>Semi-annual review with program director</td>
<td>Program &gt; Manual retrieval and/or data entry by program</td>
</tr>
<tr>
<td>Quality improvement and safety projects</td>
<td>Program &gt; Manual retrieval and/or data entry by program or MedHub &gt; &quot;Residents&quot; tab &gt; &quot;Resident Learning Portfolio&quot;</td>
</tr>
<tr>
<td>Didactics/conference attendance</td>
<td>MedHub &gt; &quot;Reports&quot; tab &gt; &quot;Conference Attendance by Resident&quot; under &quot;Conference Reports&quot;</td>
</tr>
<tr>
<td>Duty hour compliance</td>
<td>MedHub &gt; Home &gt; &quot;Resident Duty Hours&quot; &gt; &quot;Duty Hour Statistics&quot;</td>
</tr>
<tr>
<td>Scholarly activities of residents</td>
<td>Web ADS &gt; Web ADS Update (<a href="https://apps.acgme.org/connect/login">https://apps.acgme.org/connect/login</a>) &gt; &quot;Resident Scholarly Activity&quot;</td>
</tr>
<tr>
<td>*Case experience and procedures logs</td>
<td>Program &gt; Varies for programs</td>
</tr>
<tr>
<td>*In-training examination results</td>
<td>Program &gt; Manual retrieval and/or data entry by program</td>
</tr>
<tr>
<td>*Objective Structured Clinical Examinations</td>
<td>Program &gt; Manual retrieval and/or data entry by program</td>
</tr>
</tbody>
</table>

| **Faculty Development** | ![Image](https://med.stanford.edu/gme/program_portal/progaram_ape_pec.html) |
| Mentoring | Program > Manual retrieval and/or data entry by program |
| Trainee evaluation of faculty | MedHub > "Reports" > "Aggregate Evaluation Report" > "Resident evaluation of faculty member" |
| ABMS certification status | Program > Board Certification Verification Website |
| Faculty attendance in grand rounds & conferences | MedHub > "Reports" tab > "Faculty Conference Attendance" |
| Faculty professional development courses | Program > Manual retrieval and/or data entry by program |
| Scholarship activity of faculty | Web ADS > Web ADS Update (https://apps.acgme.org/connect/login) > "Faculty Scholarly Activity" |
| Graduate placement | Program > Manual retrieval and/or data entry by program or Alumni Survey (see below) |
| **Alumni survey | MedHub > Manual retrieval and/or data entry by program |
| *Board scores/pass rates Current/5 year average | Program > Manual retrieval and/or data entry by program |

| **Program Quality** | ![Image](https://med.stanford.edu/gme/program_portal/progaram_ape_pec.html) |
| Last year’s action plan | MedHub > Home > "Program Accreditation" > "APE" tab > Select last AV > Scroll down to "File Attachments" |
| ACGME faculty survey | GME > Home > "Program Accreditation" > "APE" tab > Select the current AV > Scroll down to "File Attachments" |
| ACGME citations and/or letters of notification | GME > Home > "Program Accreditation" > "Correspondence" tab > Select "ACGME Initiated" |
| Resident / Faculty program evaluations | GME > Home > "Program Accreditation" > "APE" tab > Select the current AV > Scroll down to "File Attachments" |
| Overview of the curriculum and rotations | MedHub > Home > "Curriculum Objectives/Goals" |
| Exit summative evaluation/interview | MedHub > Home > "Residents" tab > "Forms/Files" or Manual retrieval by program |
| **Resident/fellow program evaluations | GME > Home > "Program Accreditation" > "APE" tab > Select the current AV > Scroll down to "File Attachments" |
| **ACGME resident/fellow survey | GME > Home > "Program Accreditation" > "APE" tab > Select the current AV > Scroll down to "File Attachments" |
| **GME House Staff Survey | GME > Home > "Program Accreditation" > "APE" tab > Select the current AV > Scroll down to "File Attachments" |
| ADS Update / Recent Changes | Web ADS Update (https://apps.acgme.org/connect/login) > "Recent Changes / Improvements" |
| PLAs – Affiliate Contributions to Educations | Program > MedHub > "Accreditation tab" > "PLAs" |
| **Most Updated Trend Analysis | GME > Home > "Program Accreditation" > "APE" tab > Select the current AV > Scroll down to "File Attachments" |
2. Data

1) Facilitate in data gathering

2) Facilitate in data reviewing:

   Best practice: 1) PD (or the lead of PEC) prepares a presentation summarizing all key data points; 2) share the data with the committee before the meeting

- Trainee
- Faculty
- Graduates
- Program

Action plan from the previous year

Current program curriculum
APE Meeting (June – July)

- Based on the data provided, meeting content should cover:
  - Outcomes from prior APE
  - Program’s mission and aims
  - SWOT analysis
  - Curriculum
  - Programmatic issues (such as scores lower than 80%)
  - A new action plan

- Your role:
  - Encourage all to share and facilitate meaningful discussion
  - Meeting minutes
    - What was the issue? Who raised the issue? Who contributed to the discussion? How was the issue being discussed? Was there a decision or action plan made regarding the issue?
  - Send out action plan to teaching faculty and trainees for approval
### Annual Program Evaluation Documentation Templates

**Meeting Agenda**
- Review Previous Year's Action Plan Items (Actual Outcome & Resolve Y/N)
- Review All Elements of Program
  - Resident Performance
  - Faculty Development
  - Graduate Performance
  - Program Quality
- Creating Action Plan for Upcoming Academic Year:
  - SWOT (Strengths, Weaknesses, Opportunities, Threats) Analysis
- Action Plan (Including Issue Synopsis, Detailed Description, Proposed Actions, Person(s) Responsible, & Timeline)
- Program Faculty Review/Approval of Action Plan at Next Program Faculty Meeting

**Minutes (Copy & Paste Additional Rows if Needed)**

<table>
<thead>
<tr>
<th>Category</th>
<th>Issue</th>
<th>Who Raised the Issue?</th>
<th>Who Contributed to the Discussion?</th>
<th>Discussion Content?</th>
<th>Discussion Outcome?</th>
</tr>
</thead>
<tbody>
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</table>

**Print Name**

**Signature**
Documentation (July – early August)

- Upload revised Curriculum to MedHub (program accreditation -> Policies)
- Upload attendance sheet, meeting minutes, and presentation slides to MedHub (program accreditation -> APE)
- Use the GME APE Guidebook to document:
  - Outcomes from prior APE
  - Program’s mission and aims
  - SWOT analysis
  - Programmatic issues (such as scores lower than 80%)
  - An action plan
- Upload the GME APE guidebook to MedHub (program accreditation -> APE)

- GME staff and Ann Dohn (DIO and GME Director) review all APEs every year and provide comments and feedback.
## Documentation (July – early August): GME APE Guidebook

### 2020-2021 APE Meeting - SWOT Analysis

**Aim:**

<table>
<thead>
<tr>
<th>Strengths (Internal)</th>
<th>Weaknesses &amp; Concerns (Internal)</th>
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<tbody>
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<table>
<thead>
<tr>
<th>Opportunities (External)</th>
<th>Threats (External)</th>
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<td>01</td>
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</table>

### 2020-2021 APE Meeting - Action Plan for Next Year

<table>
<thead>
<tr>
<th>Issue Summary</th>
<th>Description</th>
<th>Proposed Actions</th>
<th>Responsible/Targeted Individuals</th>
<th>Action Completed?</th>
<th>Actual Outcome</th>
<th>Recommended Change</th>
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### Used For Next Year's Meeting

- To be completed in next year's sheet
- To be completed in next year's sheet
- To be completed in next year's sheet
- To be completed in next year's sheet
- To be completed in next year's sheet

### Used For Current Year's Meeting

- To be completed in next year's sheet
- To be completed in next year's sheet
- To be completed in next year's sheet
- To be completed in next year's sheet
- To be completed in next year's sheet

**https://med.stanford.edu/gme/program_portal/program/ape_pem.html**
APE Toolbox

(https://med.stanford.edu/gme/program_portal/program/ape_pec.html)

- **APE 1-Page Instruction & Data Checklist**
  - APE Toolbox
  - Form a PEC & Collect Data
  - Conduct APE
  - Document APE

- **APE Documentation Templates**
  - Sign-in Sheet & Meeting Minutes
  - Approval of Action Plan

- **APE Guidebook**
  - Program Aim, Action plan & SWOT
Overview of Program Quality Evaluation Process

- **Oct-Nov**: GME Housestaff Survey
- **Feb-Mar**: ACGME Survey by Residents and Faculty
- **Apr**: GME Program Evaluations by Residents and Faculty
- **May-Jun**: Program Evaluation Committee (PEC)
- **Jun-Jul**: Annual Program Evaluation (APE)
- **Aug-Sept**: Annual WebADS Updates

**Program Quality Indices**

**Program Improvement**
Accreditation Data System (ADS)

- At the beginning of the academic year, ACGME requires programs to complete an WebADS update.
- This is one tool ACGME uses to monitor program changes.

<table>
<thead>
<tr>
<th>Accreditation Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date: 8/25/2021</td>
</tr>
<tr>
<td>Title of Program: Stanford Health Care-Sponsored Stanford University Program</td>
</tr>
<tr>
<td>Address:</td>
</tr>
<tr>
<td>Stanford University Medical Center</td>
</tr>
<tr>
<td>300 Pasteur Drive, Room H-2103</td>
</tr>
<tr>
<td>Stanford, CA 94305-5218</td>
</tr>
<tr>
<td>County: Santa Clara County</td>
</tr>
<tr>
<td>Program Director:</td>
</tr>
<tr>
<td>Program Coordinator:</td>
</tr>
<tr>
<td>Program Coordinator:</td>
</tr>
<tr>
<td>10 Digit ACGME Program ID# (for accredited programs):</td>
</tr>
<tr>
<td>Accreditation Status:</td>
</tr>
</tbody>
</table>
Components of ADS

ADS update covers:

- Program mission & aim
- Diversity & recruitment
- Major changes and updates since last ADS
- Participating sites
- Faculty roster
- Trainee roster
- Other program specific information & updates
Significance of ADS

- ACGME’s Review Committee will check for compliance in ADS
  - Example:
    - Faculty qualification
    - Information are current
    - Follow-up from citations/areas of concern

Your program can & will receive citations if review committee find errors in the ADS
How to submit a successful ADS

- Refer to GME’s WebADS Updates Manual
  
  [https://med.stanford.edu/gme/program_portal/program/ads.html](https://med.stanford.edu/gme/program_portal/program/ads.html)

- Work with your GME PM and Ann Dohn for ADS update review

Program sends first ADS draft to GME

30 days before deadline
Any Questions So Far?
## Important dates

### GMEC
- Deadline for PD & APD changes April 1

### Program Expansion & Funding
- Deadline is March 31
- [https://stanfordmedicine.qualtrics.com/jfe/form/SV_3CWWnLtRi8AV069](https://stanfordmedicine.qualtrics.com/jfe/form/SV_3CWWnLtRi8AV069)

### Orientations (In-person)
- June 24th, 2022
- July 1st, 2022
- July 6th, 2022
- July 29th, 2022
Next Session: April 18 @ 8:30am

- MedHub will be the focus

- What would you like to learn about MedHub?

- What are your pain points with using MedHub?