ACGME ADS’ “Citation” and “Major Changes & Other Updates” Sections Hands-on Workshop

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Disclosures

• None to report

Disclaimer

• Please note that the examples in this presentation are typical but do not reflect any specific program
Workshop Objectives

**Goal:** Properly address all citations, LON areas for improvement (AFI) and ACGME survey concerns

**Objectives:**

1. Identify types of items that need updates or explanations in the ACGME ADS’ “Major Changes and Other Updates” Section
2. Identify and discuss the major principals of continuous quality improvement
3. Discuss the importance of and involve the Program Evaluation Committee in addressing major changes, updates and areas for improvement
4. Apply a suggested provided framework when addressing areas for improvement, citations, survey items and others
Citations and AFI’s

• Citation(s)
  • A finding of a Review Committee (RC) that a Sponsoring Institution or program has failed to comply substantially with a particular accreditation requirement.
    • requires response in ADS

• Area(s) For Improvement (AFI) in Letters of Notification (LON)
  • Identified by Review Committee based on the current review of the program and/or concerning trends based on data related to the current review, as well as from previous annual reviews of the program including surveys.
    • RC assumes the program and institution WILL address the AFI
    • AFI’s do NOT have a separate response box in ADS – address elsewhere
    • AFI could become a citation if not addressed and trend continues
Do I write a letter to ACGME or respond to citations in ADS?

• All Citations must be addressed in the annual ADS update.

   NOTE: Each citation will have its own response box

HOWEVER, on occasion, the ACGME will request a progress report.

*Do not send progress reports (letter and documentation) unless requested to do so.*

• If a progress report is requested, the citations to be addressed in the progress report will be indicated in the Areas Not in Substantial Compliance section of the LON and the following text will appear:

   “The Review Committee requests a progress report in which each citation listed above is addressed. This information is requested via email to the Executive Director. As specified in the ACGME Institutional Requirements, the report should be reviewed and approved by the sponsoring institution’s Graduate Medical Education Committee and cosigned by the DIO prior to submission to the ACGME.”
Do I write a letter to ACGME or respond to citations in ADS?

• All Citations must be addressed in the annual ADS update. HOWEVER, on occasion the ACGME **will request** a progress report. *Do not send progress reports (letter and documentation) unless requested to do so.*

• If a progress report is requested, the citations to be addressed in the progress report will be indicated in the *Areas Not in Substantial Compliance* section of the LON and the following text will appear.

> “The Review Committee requests a progress report in which each citation listed above is addressed. This information is requested via email to the Executive Director. As specified in the ACGME Institutional Requirements, the report should be reviewed and approved by the sponsoring institution’s Graduate Medical Education Committee and cosigned by the DIO prior to submission to the ACGME.”

**** All responses to the ACGME should be reviewed by the GME office prior to submission*****
ADS “Citation Information” Section

What are your thoughts?
• Does the response demonstrate compliance with the program requirement?
• Did the response address what the RC identified as non-compliance?

Citation

Faculty Responsibilities/Core Faculty Scholarly Activity [II.B.5.e]) All core faculty must be involved in continuing scholarly activity.

Of the eleven core faculty members listed in ADS, Drs. Bxxxx, Kxxxx, Lxxxx and Wxxxx do not have any peer-reviewed scholarly activities. In addition, Dr. Wxxxx's information does not list any scholarly activities of any type. The Committee notes that scholarship and research will be included in faculty development plans.
What are your thoughts on this response?

Response:
There have been many articles published on the fact that our specialty should not require scholarly work from their trainees. If the trainees shouldn’t be expected to produce scholarly work, then it should be the same for the attendings. We have discussed this with our residents with our residents and staff and all agree that the requirement is unnecessary.

We will input the scholarly activity that is done on annual basis in the ADS system.

• Does the response demonstrate compliance with the program requirement?
• Did the response address what the RC identified as non-compliance?
What are your thoughts on this response?

• **Response:**

There have been many articles published on the fact that our specialty should not require scholarly work from their trainees. If the trainees shouldn’t be expected to produce scholarly work, then it should be the same for the attendings. We have discussed this with our residents **with our residents** and staff and all agree that the requirement is unnecessary.

We will input the **scholarly** activity that is done on annual basis in the ADS system.

• **Does the response demonstrate compliance with the program requirement?**

• **Did the response address what the RC identified as non-compliance?**
The wrong way to respond to a citation...

• Tone –
  “We already addressed this.....”
  “Residents didn’t understand the question....”
  “This has been reviewed with the residents and is no longer a problem...”
  “This has been previously addressed....”

• Typos, grammar-
  Errors in grammar and spelling is a poor reflection on the Program Director and the program.

• Vague – ACGME may continue a citation for non-specific responses, discordant responses, unclear responses, etc.
  “We have initiated a plan to correct this citation...”
  “Residents and faculty now understand the fatigue policy...”
  “We have added faculty and now have the needed amount of core faculty....”
What are your thoughts on this response?

Citation:

Faculty Qualifications/Current Specialty Certification[II.B.2.a)] All core physician program faculty and other attending staff who provide supervision for emergency medicine residents must have current certification in the specialty by the American Board of Emergency Medicine, or possess qualifications acceptable to the Review Committee.

Based upon information provided in ADS, Dr. Fxxxx is not currently certified in Pediatrics or Pediatric Emergency Medicine. In addition, Dr. Sxxxx is currently certified only in Pediatrics. In order to supervise emergency medicine residents while on emergency medicine rotations, American Board of Pediatrics certified faculty members must also be certified in pediatrics emergency medicine.
What are your thoughts on this response?

Response:
We strongly agree that the qualifications of our faculty are very important. Our trainees need to be learning from appropriately trained and qualified faculty. Our residents’ ED rotations are only in facilities that have 100% ABEM-board certified or board prepared physicians. All of our faculty are board certified or board prepared (residency and/or fellowship recently completed, board status pending) in either Emergency Medicine and/or Pediatric Emergency Medicine. The two faculty members in question had completed their Pediatric Emergency Medicine fellowships and their Pediatric Emergency Medicine Boards were in progress at the time of the site visit. Since then, Dr. Sxxxx has passed her boards on 3/28/19 (ABP#xxxx) and Dr. Fxxxx passed on 4/9/20 (ABP#xxxx), having completed their fellowships June 2019. ADS and faculty information have been updated to reflect this information.

- Does the response demonstrate compliance with the program requirement?
- Did the response address what the RC identified as non-compliance?
The proper way to respond to a citation...

- There should be proofreading of every item for the ACGME.
- Responses should be clear and sufficiently detailed.
- Extraneous or irrelevant information should NOT be included. (Don’t provide information that is NOT requested)
- Whether or not you believe the RRC’s concern seems reasonable, the tone of our response must be respectful and even appreciative. Placing blame on the RRC or site visitor, individuals within the program or residents, or unreasonable requirements is counterproductive.
PDSA Framework for Responses

- **SMART Aim/Goal** (specific, measurable, achievable, realistic, time-based)
- **Plan Do Study Act Cycle (PDSA)**
PDSA Framework for Responses

Before entering the PDSA cycle, the framework requires you to start by answering three fundamental questions:

1. What are we trying to accomplish? (the aim statement)
2. How will we know that a change is an improvement? What measures of success will we use?
3. What changes can we make that will result in an improvement? (the change concepts to be tested)

How do we use the PDSA cycle

1. Plan: After identifying an opportunity, then plan the change
2. Do: Carry out the test or change
3. Study: Review the test or change, analyse the results and identify what you have learnt
4. Act: Take action based on the results from the study step; either the next change cycle or eventually full implementation. If the change did not work, then this is time to go through the cycle again with a different plan. Once the process is successful, now you can implement what was learnt during the test cycle. Take what you have learnt from this to inform the planning for new improvements – the cycle now begins again.
How to turn a PDSA cycle into a narrative response for ADS

State the problem identified from citation.

“The PEC has reviewed the citation issued to our program relating to faculty development and have determined that not enough opportunities exist for our faculty. More opportunities in the required development areas identified by the ACGME, as well as areas identified by our PEC, must be provided to our faculty.”

SMART Aim/Goal: Increase the number of faculty development opportunities available to all in our department from 1 per year to 5 per year to be offered at least every two months per academic year based on a needs assessment conducted by the PEC.
How to turn a PDSA cycle into a narrative response for ADS

1. Explain the “Plan” (either what you will do –or what you have done)

“A committee was formed and reviewed the PEC’s recommendations and identified expert speakers on 4 additional topics for the upcoming academic year. Speakers have been scheduled and marketing will be done to inform all faculty of the events at least two months prior to each event. Presentations will also be recorded and presentation materials will be available for later use or review as needed.”
How to turn a PDSA cycle into a narrative response for ADS

2. Describe the “Do”. (Describe what you will implement or what will be measured/evaluated)
   • Each faculty will be evaluated on the contents of their lecture, the relevance to their teaching, speaker effectiveness and other items related to the faculty development opportunities.
   • Attendance will be taken through an on-line quiz created for each lecture.
   • The quiz will be used to monitor faculty understanding of each topic.
   • Topics identified for this year are:
     • July 20 – Teaching and telemedicine (as teacher) by Dr. Exxxxx
     • October 15 – Eating and sleeping, when you don’t have time for either (wellness) by Dr. Dxxxxxx
     • January 11 – The steps in a Quality Improvement Project (QI) by Dr. Rxxxxxx
     • April 18 – Unconscious Bias (Diversity) by Dr. Pxxxxxxx
How to turn a PDSA cycle into a narrative response for ADS

3. **Report the “Study”** (either what you have learned or what you will review)

   The PEC will review evaluations after each presentation to determine if faculty:
   - Find value in these events
   - Provided suggestions for improvement for upcoming sessions

Quiz and/or Evaluation data will be reviewed by the PEC’s Subcommittee to determine if additional faculty development in any of the topics.
How to turn a PDSA cycle into a narrative response for ADS

4. Provide the “Act”.

“The PEC will review resident and faculty surveys as well as suggestions from Faculty and continue quarterly faculty development opportunities for our teaching faculty. Faculty evaluations will be used to change elements of the offerings as needed.” – Adopt, Adapt, or Abort
How to address a continued citation....

• DON’T give the same answer as your last response.
• DON’T tell the ACGME you have corrected the problem without providing details.
• DON’T give information that is not factual.

• DO take a continued citation seriously.
• DO use the PDSA cycle(s) prior to answering.
• DO provide details and examples of corrections that have been or will be made.
• DO seek input from PEC, faculty, residents and staff.
ADS “Major Changes and Other Updates”

Any Major changes in the organization of the program

• Program Change Examples:
  • Curricular and/or Site Changes
  • Faculty and/or PD Changes (loss or gain of core/key faculty)
  • Implementation of program tracks
  • New initiatives (e.g. scholarly activity, wellness, duty hours, etc.)

• Responses to ACGME Areas for Improvement (AFIs)
• Responses to low/non-compliance ACGME survey items/areas
• Changes related to pandemic (e.g. virtual didactics, rotations, telemedicine, etc.)

Note: There is only one 8000 character narrative box to list all changes/updates
Areas For Improvement (AFI) responses

- Acknowledge the AFI’s in your responses in ADS.
- Involve PEC in creating action plans.
- Use the Major changes section to report action plans.
Why involve the Program Evaluation Committee (PEC)?

• How should the PEC be involved?
  
  Among the other tasks outlined in the common program requirements, the PEC must actively participate in addressing areas of non-compliance with ACGME requirements.

  Therefore, the PEC should be involved with all action plans created to address citations and areas for improvement.

• How often should PEC meet?

  The PEC should meet at least annually
  (more if checking PDSA cycles)

• Who all needs to know the results/outcomes of each PEC meeting?

  The annual review, including action plans, must be distributed to and discussed with the members of the teaching faculty, residents/fellows and staff and submitted to the DIO via the Annual Program Evaluation (APE).
Hands-On small work groups (15 min)

Use your own example or one of the examples below:
- Insufficient Procedures
- Insufficient Scholarly Activity
- Duty Hour Violations
- Inadequate Supervision
- Inadequate Evaluations

Submit any questions through CHAT if you have them as you are working.

Assign a reporter for f/u large group discussion
Large Group Discussion (10 min)

• What was your PDSA?
• What was difficult?
• What was easy?
Questions?

Find these slides here:
https://gme.med.ufl.edu/graduate-medical-education/gme-office-faculty-and-staff-development/