

TEMPLE UNIVERSITY HOSPITAL GRADUATE MEDICAL EDUCATION POLICIES AND PROCEDURES

NUMBER: TUH GMEC – 208
TITLE: Special Program Review Policy and Protocol
EFFECTIVE DATE: 11/5/2014
LAST REVIEWED:
REFERENCES:

PURPOSE

The Graduate Medical Education Committee (GMEC) must demonstrate effective oversight of underperforming programs through a Special Review Process. The programs that are placed on a Special Review are required to present a report that describes the quality improvement goals and the corrective actions. The GMEC will monitor the corrective action plans and the outcomes.

POLICY

The GMEC will establish criteria for identifying program underperformance, develop protocols to use for special reviews and provide reports that describe the quality improvement goals, corrective actions, and ongoing monitoring.

PROCEDURE

The GMEC will identify underperformance through the following established criteria, which may include, but are not limited to, the following:

- Inability to meet established ACGME common and program specific requirements
- Notification from RRC requests for progress reports and site visits, unresolved citations or new citations or other actions by the ACGME resulting from annual data review or other actions
- Resident complaint to ACGME
- Duty hours non-compliance
- Negative ACGME Faculty Survey trends
- Negative ACGME Resident Survey trends
- Significant concerns from APR
- Recruitment performance
- Program attrition
- Loss of major educational necessities
 - Change in major participating sites
 - Major program structure change
- Scholarly activity deficiencies
- Board pass rates – below the acceptable ACGME specialty standards
- Case pass/Clinical experience – below the acceptable ACGME specialty-specific standards
- Negative Milestones trends
- Inability to demonstrate success in the CLER focus areas
 - Patient Safety
 - Health Care Quality
 - Care Transitions

- Supervision
- Duty Hours, Fatigue Management and Mitigation
- Professionalism
- Other at the discretion of the DIO & GMEC

Special Review

The GMEC Educational Competency Committee will schedule a Special Review within 45 days of a program being identified as underperforming.

The Special Review Committee will include a member of the Educational Competency Committee acting as Chair of the Special Review Committee, the DIO and/or the Chair of the GMEC; a staff member from the GME Office and, others that may be designated by the DIO and/or Chair of the GMEC.

The members of the program to be interviewed should include, but are not limited to, the program director, other key faculty members and peer selected residents/fellows. The Chair of the department and other individuals as determined by the Special Review Committee also could be interviewed.

The Special Review Committee will determine materials and data to be used during the Special Review.

The Special Review Committee will conduct the special review through review of materials, data and other information provided by the program and through interviews with identified individuals.

The Special Review Committee will prepare a written report to be presented to the GMEC for review and approval. At a minimum, the report will contain:

- A description of the quality improvement goals to address identified concerns,
- A description of the corrective actions to address identified concerns and
- The process for the GMEC to monitor outcomes of corrective actions taken by the program

The Program Director will be required to provide a corrective action plan for all areas of noncompliance and areas of concern on the written report as directed by the Special Review Committee.

Monitoring of Outcomes

The GMEC will monitor outcomes of the Special Review by documenting discussions and follow up in the GMEC minutes.

Note: ACGME makes no distinction between interns, residents, and fellows. All levels are referred to as “residents”.

APPROVALS

Note: The signed original of this policy is on file with the Office of Graduate Medical Education.