



Special Program Review Policy and Protocol

Effective Date: February 2016	Policy Owner: Graduate Medical Education Administration
Last Review Date: February 2016	Policy Contact: Marsha Sellner
Next Review Date:	ACGME Institutional Requirement #:
Origination Date: February 2016	ACGME Common Program Requirement #:

POLICY STATEMENT

Initiating a Special Program Review

The following criteria are used by the GMEC Patient Safety and Quality Subcommittee (PSQS) to trigger a Special Program Review (SPR):

Internal Criteria:

- At the request of hospital, department, or program administration
- Problems identified from internal surveys
- Concerns communicated to the GME office or PSQS by residents or faculty
- Issues identified by the GMEC or its subcommittees
- Routine review of newly accredited program within first 12 months of starting with first class of residents
- Review of programs with no residents for 24 months
- Concerns about board pass rates

External Criteria:

- Annual ADS information submitted by programs:
- Pattern of resident or faculty attrition
- ACGME Case Log reports indicating minimum requirements not met by recent graduates
- Annual ACGME Resident Survey
- Two or more categories with less than or equal to 50% compliance on any category question
- A pattern of significant downward category trends since the last survey
- Survey completion rate below the 70%
- Annual ACGME Faculty Survey
- Two or more categories with less than or equal to 50% compliance on any category question
- Pattern of significant downward category trends since the last survey
- Survey completion rate below the 60%
- RRC request for progress report

Special Program Review Types

PSQS assessment of identified issues determines if an SPR takes the form of either:

- Team SPR
- GME Office SPR

Team SPR

Team SPRs are charged by the PSQS and conducted under supervision of the DIO. Teams are led by a program director or faculty member from outside the section where the program under review resides. The team includes at least one resident from outside the section. GME Office staff supports each review team.

The GME Office prepares a set of materials to document elements of the training program under review. Materials are electronically archived by the GME Office and made available to team members. Documentation includes:

- ACGME ADS summary
- ACGME Graduate Resident Case Log – Minimums Report (*if available*)
- Annual Program Evaluation reports for the past two academic years
- Previous SPR Reports and Work Plans
- ACGME Resident Survey results for past two academic years
- ACGME Faculty Survey results for past two academic years
- RRC Accreditation Requirements
- Relevant RRC correspondence
- Relevant program policies
- Most recent board pass rate report for graduates
- Other materials as necessary

GME Office SPR

The DIO or delegate notifies the Program Director identifying specific areas of concern. The program director is responsible for reviewing the issue(s) and outlining a work plan with corrective action. The DIO or delegate meets with the Program Director to review the report. After confirmed by the DIO or delegate, the written report is reviewed by the PSQS. Upon review the PSQS determines if a satisfactory plan is in place to resolve the trigger issue(s) or if a Team SPR is required.

SPR Report

For all SPRs there must be a written report that contains the following:

- Name of the program reviewed
- Program leadership roster
- Review Team roster (*Team SPR only*)
- Last RRC site visit date
- Current accreditation status
- Start and end dates of the SPR
- Quality improvement action items
- Overview of program strengths, weaknesses, opportunities, and threats (*Team SPR only*)
- Work plan to address action items

GMEC Monitoring of Outcomes

A work plan addressing corrective measures must be completed by the Program Director and submitted to the GME office within 30 days of SPR closure. The proposed work plan is reviewed and approved by the PSQS with feedback. A progress report of the approved SPR work plan is attached to the Annual Program Evaluation (APE).

The report and all work plan actions are reflected in the minutes of the PSQS. Actions recorded in the PSQS minutes are reported to the GMEC for approval. Reports to the GMEC are made as required, but at least quarterly.

Confidentiality

The SPR process is a quality assurance evaluation that is protected pursuant by Texas statute. SPR reports and work plans are confidential and are not shared with RRC site visitors. To confirm compliance with this policy document and ACGME institutional requirements, SPR reports are included in the Institutional Review Questionnaire (IRQ) and examined by the ACGME Institutional Review Committee at the time of periodic institutional accreditation evaluation to verify that we are following approved SPR policy, protocol, and procedure.

Sharing SPR Findings with Faculty and Residents

In order to complete the review process, the program director should share the results of the review with residents and faculty in the program. Discussion of any SPR action items should take place by the Program Education Committee (PEC) as part of the Annual Program Evaluation (APE) process, with an SPR progress report submitted as an attachment to the APE report.

REASON FOR POLICY

The TIGMER Graduate Medical Education Committee (GMEC) is responsible for the development, implementation, and oversight of a quality improvement process in the form of a Special Program Review (SPR) for ACGME-accredited graduate medical education training programs. The purpose of the SPR is to support program quality improvement efforts in areas judged non-compliant with Accreditation Council for Graduate Medical Education (ACGME) regulations. SPRs are coordinated by the GMEC Patient Safety and Quality Subcommittee (PSQS) in collaboration with the TIGMER Education Office (GME).

PROCEDURES

FORMS/INSTRUCTIONS

RESPONSIBILITIES

FAQ

ADDITIONAL CONTACTS

Subject	Contact	Phone	Fax/Email
Primary Contact(s)			
Subject			

DEFINITIONS

Resident: any physician in an accredited graduate medical education program, including interns, residents, and fellows.

Special Program Review (SPR): mechanism for GMEC oversight of under-performing ACGME-accredited graduate medical education training programs.

Team SPR: Special Program Review comprised of a team that includes faculty and resident from outside the section where the program under review resides.

GME Office SPR: Special Program Review done by GME Office staff only.

RELATED INFORMATION

HISTORY