

## Preparing for a Site Visit: Advice from the RRC Staff

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## Workshop Agenda

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- What you want to know
  - Identify Topics
- The Who, Why, When, What, Where and How about Site Visits
  - Presentations from Staff
- Interactive Session
- Questions and Answers

## Who - ACGME

- ❑ Organization responsible for accrediting graduate medical education programs.
- ❑ Mission
  - To improve healthcare by assessing and advancing quality of resident physicians' education through accreditation
- ❑ Vision
  - Exemplary accreditation

## Who - RRC

- ❑ Functions through delegated authority from ACGME
- ❑ Composed of 20 members that are specialists in internal medicine and subspecialties
- ❑ Review programs through peer-review process

## Who – Department of Field Activities

- Department within ACGME responsible for scheduling site visits
- Consist of full and part-time staff who perform the surveys
- Clarify and verify information for the RRC

## Why – RRC Responsibilities

- Develop standards
- Regularly review programs for substantial compliance with the standards
- Determine accreditation status and cycle length
- Request interim reports

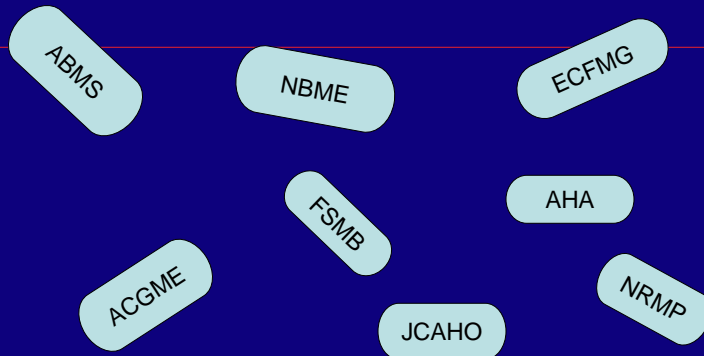
## When Can I Expect a Review?

- Find your last letter of notification
- Approximate site visit date is listed
  - RRC assigns cycle length between 1-5 years
  - Cycle length based upon level of compliance at time of last review

## What are the Steps in the Review Process?

- Program is notified by RRC staff via email
- Completion of PIF and resident questionnaire/survey within 90 days
- Site visit is scheduled and occurs
- SVR submitted to RRC staff
- RRC reviews programs

## Alphabet Soup



## Acronyms for the Internal Medicine Review Process

- ADS** - Accreditation Data System
- DIO** - Designated Institutional Official
- RQ** and **RS** - Resident Questionnaire (Subs) and Resident Survey (Core)
- PIF** - Program Information Form
- CAAR** – Computer-Assisted Accreditation Report (Core)

## Notification of Programs

- Initiated by e-mail to core program director approximately 6 months prior to approximate SV date
  - Notifies the program director of programs due for survey
  - Provides instruction as to where to access the CAAR software or the PIF
  - Describes the resident questionnaire process
  - Identifies due dates

## Program Information Form

- Tool that the RC uses to gather a comprehensive description of programs and its compliance with program standards
- Collects data regarding all components of your program
- Is your opportunity to present your program and its structure to the RC

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**Residency Review Committee for Internal Medicine**  
**Computer Assisted Accreditation Report**

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ANNUAL UPDATE TO BEGIN ON: **NOT SCHEDULED**  
ANNUAL UPDATE TO BE COMPLETED BY: **NOT SCHEDULED**  
ANNUAL UPDATE COMPLETED? **NO** (There are currently 14 residents that have an unconfirmed status)

#### WEB ACCREDITATION DATA SYSTEM HIGHLIGHTS

##### **New Menu in ADS for Program Directors (8/14/2007)**

Program Directors now have a new menu in ADS. The new menu features major sections with expanding and collapsing sub-sections. If you have any questions, please contact your ADS representative. The menu for DIOs has not changed.

##### **Designated Institutional Official (DIO) must initiate Program Director Changes**

**Effective March 22, 2007, all program director changes must be initiated by the DIO.** To initiate a change in program director, the DIO must select *Initiate PD Change* from the menu on the left. The DIO must then click on the *Request PD Change* icon for the appropriate program and is prompted to respond to several questions, including the new program director name, date and term of appointment, phone number, and PD email. The DIO must also verify that the new PD meets the required qualifications and is approved by the GMEC.

An email which provides the login information will be automatically sent to the new PD when the request is initially submitted. The program director must log into ADS to complete professional and certification information as well as other required documentation. The documentation (full or abbreviated curriculum vitae) varies by specialty, but the specific information requirements will be provided within ADS. After the request is complete and submitted, the new program director name will be posted in ADS, and the submitted materials are forwarded to the review committee staff. The next business day the new program director will receive a welcome letter containing useful information including password confirmation. The review committees generally review and approve program director changes at the next review committee meeting. The PD and the DIO will be informed of any submissions that do not meet the RC requirements.

##### **New method of distribution for the accreditation letters**

ACGME no longer mails hard copies of the letters of notification. They are posted to the Accreditation Data System (ADS) as PDFs in the program's password-protected area and are accessible by using the program and the sponsoring institution login information. In general, within two to eight weeks following review committee meetings, only Program Directors, DIOs, and core program directors for dependent subspecialties are notified by email that the accreditation letter will be posted in ADS within the next business day (ACGME system posts in ADS overnight as part of the daily update).

If the action is a proposed adverse action, a copy of the site visitor report and the procedures for proposed adverse actions are posted in ADS, along with the letter. If the action is a confirmed adverse action, the procedures for appeals for adverse actions are posted in ADS, along with the letter.

## Advice on Completing the PIF

- Know your program
  - Prior citations and efforts to address
  - Issues from the last institutional review that affect your program (read LOR)
  - Current rotations and their role in the total educational program
  - Faculty strengths/contributions to program
  - Unresolved/irresolvable issues residents may raise

## Advice on Completing the PIF (cont)

- Organize data collection – START EARLY
- Set timeline and share responsibilities
- Read questions carefully, create new responses
  - Clear, concise, accurate and complete
  - Provide key to abbreviations
- Ask faculty, residents to review and suggest edits
  - + Improves the PIF
  - + Informs residents and faculty
  -

## Advice on Completing the PIF (cont)

- Fix internal inconsistencies in the PIF
  - # residents in program vs. resident roster
  - Block diagram vs. rotation schedule
  - # procedures per resident vs. program total
  - Narrative should agree with data/blocks
- Check spelling and proof for content

**REMEMBER: A good PIF is the key to the good site visit**

## Resident Survey (Core)

- Administered on-line annually to 50% of core programs
- Questions added to the ACGME survey
- Done only for Core programs
- Results used at time of site visit

## Resident Questionnaires (Subspecialties)

- Mailed to program based upon number of residents identified in ADS
- Asked to administer questionnaire
- Peer-selected resident returns in ACGME-Business Reply envelope by due date

## What You Need to Submit

### □ Core

- CAAR Files
- Program Information Forms
- PIF Addendum

### □ Subspecialties

- On-line PIF through ADS
- Hard copies of PIF
- Resident Questionnaires