SEMCME WORKSHOP
NEW RESIDENCY PROGRAM DIRECTORS

ACGME Resident Survey Strategies

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Disclosures:

None
What does a new Program Director need to know to achieve positive outcomes on ACGME resident survey?

By the end of this session, you will be able to answer these questions:

• **Who** has to take the surveys?
• **What** are the surveys?
• **When** are the surveys?
• **Where** do I get answers or more information?
• **How** will I prepare my program for the surveys?
• **Why** are the surveys important?
When I took over as PD...
Provided goals and objectives for assignments
Instructed how to manage fatigue
Satisfied with opportunities for scholarly activities
Appropriate balance for education
Education (not) compromised by service obligations
Supervisors delegate appropriately
Provided data about practice habits
See patients across variety of settings
ACGME SURVEY - What are the surveys?

• ACGME required survey of trainees (and faculty)
• The survey contains questions about the clinical and educational experience within their program, as well as duty hours worked.
• Used to monitor graduate medical clinical education
• Provide early warning of potential non-compliance with ACGME accreditation standards.
• All specialty and subspecialty programs (regardless of size) are required to participate in these surveys
What are the surveys?

- Program administration DOES NOT have access to the survey itself, or to any individual responses provided by residents/fellows.
- Accreditation Data System (ADS) logins will not provide you (PD) access to the survey.
- Reports are provided that aggregate at program compares against national, institutional, and specialty averages.
- Anonymous survey allows individual residency programs to compare results to those of similar specialties and all residency programs.
Who has to take these surveys?

- All ACGME-accredited specialty and subspecialty programs (regardless of size) will be surveyed each academic year.

- 70% response rate is required for all programs with four or more active residents/fellows.

- Programs with fewer than four residents/fellows should reach a 100% response rate.

- The Review Committees will closely monitor the response rates of programs and will review programs that fail to meet this requirement.
Who has to take these surveys?

• All active residents/fellows within a program will be scheduled to complete the survey each year.
  • Residents/fellows who started the program off-cycle (after August 31 of the current academic year), and have a current status of “Off-Cycle” in the ADS, will NOT be scheduled to participate.

• The ACGME DOES NOT notify or send reminders to residents/fellows about this survey.
  • Programs are responsible for notifying their residents/fellows and ensuring they complete the survey before the assigned deadline.
Who has to take these surveys?

• How can I keep track of which residents need to complete the survey?
  • Access a list of scheduled residents/fellows by logging into your ADS account.
  • Click on the “Surveys” tab and find the “Resident Survey” heading.
    • Within this menu, click the "View Current Resident Survey Takers" button to access a list of scheduled survey takers from your program.
    • Note: The list of residents/fellows scheduled to complete the survey (along with the “View Resident Survey Takers” button itself) will only be available during your scheduled administration window.
When do the surveys and reports come out?

- Surveys occur each academic year between the months of January and June.
  - Your program’s survey window is always on ADS

- Resident Survey Reports –
  - When at least 70% of a program’s residents/fellows have completed the survey and at least four residents/fellows have responded, reports will be available annually.
  - Programs with <4 residents/fellows and meet the 70% compliance rate, reports will only be available on an aggregated basis after at least three years of survey reporting.
  - If less than 70% of your residents/fellows complete the survey, data from your program will not be available that academic year.

- Reports now come to programs in June
Where do I get answers and more information?

http://www.acgme.org/Data-Collection-Systems/Resident-Fellow-and-Faculty-Surveys
ACGME Resident Survey – Program FAQs

What is the Resident/Fellow Survey?
Each year from January through April, the ACGME requires residents and fellows to complete an online survey. This survey contains questions about the clinical and educational experience within their program, as well as duty hours worked. Note: This survey is only to be completed by residents/fellows. Program administration DOES NOT have access to the survey itself, or to any individual responses provided by residents/fellows. Accreditation Data System (ADS) login will not provide access to the survey.

Which programs are scheduled to participate?
All ACGME-accredited residency programs will be surveyed each academic year.

When is my program scheduled to complete the survey?
The Resident/Fellow Survey begins each academic year between the months of January and April. Programs are scheduled for windows, approximately five weeks in length, within which their residents/fellows must complete the survey.

The ACGME will notify programs directly when their participation is required. You can also find more information about when your program is scheduled to participate by logging into your ADS account.

- Click on the “Surveys” tab and find the “Resident Survey” heading. Within this menu, you will find scheduling information for the current and previous iterations of the survey. Final scheduling takes place in early January of each academic year.

Is there a required response rate that my program must meet before the deadline?
Yes. A 70% response rate is required for all programs with four or more active residents/fellows. Programs with fewer than four residents/fellows should reach a 100% response rate. The Review Committee will closely monitor the response rates of programs and will review programs that fail to meet this requirement.

How will my residents/fellows know when they need to participate in this survey?
Programs are responsible for notifying their residents/fellows of the survey and its deadlines. The ACGME DOES NOT contact residents and fellows directly about this survey. It is the program's responsibility to ensure its residents/fellows complete the survey by the assigned deadline. To notify/remind residents/fellows of their involvement and provide login information for the survey, log into ADS, click the “Surveys” tab and find the “Resident Survey” heading. Click “View Current Resident Survey Takers” to access a list of your current survey takers. Follow the instructions on this page to e-mail residents/fellows directly from ADS.

Does the ACGME notify or remind residents/fellows of this survey?
No. The ACGME DOES NOT notify or remind residents/fellows of this survey. Programs are responsible for notifying their residents/fellows and ensuring they complete the survey before the assigned deadline.

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http://www.acgme.org/Portals/0/ACGME_Resident_Survey-Program_FAQs.pdf
# Resident Survey Content Areas

## ACGME Resident Survey Content Areas

All information you provide about your current program will be used anonymously. Your individual responses will be given to your program, your program director, your faculty, your institution, or the Residency Review Committee. The summarized data will be a part of the information considered by the accreditation site visitor and the Residency Review Committee for the accreditation of the program and sponsoring institution. Summary data and other information about programs, institutions, resident physicians, or resident physician education which is not identifiable by person or organization may be published in a manner appropriate to further the quality of GME and consistent with ACGME policies and with law.

The survey will take approximately 20 minutes to complete. You may also be asked additional questions that are specific to your specialty and level of training.

### Duty Hours

- Area in which ACME rules were broken: 60 hours per week, 1 day free in 3rd 8th
- Hours in a day: 8
- Continuous hours scheduled off duty: 8
- Night float: no more than 8

### Faculty

- Sufficient supervision: Appropriate level of supervision
- Sufficient interaction: Faculty and staff interested in resident education

### Evaluation

- Opportunity to evaluate faculty mentors: Satisfied that evaluations of faculty are confidential
- Opportunity to evaluate program: Satisfied that program-assessment evaluations to improve

### Educational Content

- Provided goals and objectives for assignments
- Taught how to manage fatigue
- Provided opportunity for scholarly activities
- Appropriate balance for education

### Resources

- Access to relevant materials
- Use electronic medical records in hospital
- Use electronic medical records in ambulatory setting
- Electronic medical records integrated across settings

### Patient Safety/Teamwork

- Culture promotes patient safety responsibility
- Effective work in interprofessional teams

### Overall Evaluation of Program

- Overall evaluation of the program

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[http://www.acgme.org/Portals/0/ResidentSurvey_ContentAreas.pdf](http://www.acgme.org/Portals/0/ResidentSurvey_ContentAreas.pdf)
Resident Survey Key Terms and Content Areas

Duty Hours
Duty Hours include all clinical care, in-house call, right and day float, and transfer of patient care. For call from home, only the hours spent in the hospital are counted.

Scheduled duty periods are those assigned within the institution, encompassing hours which may be within the normal work day, beyond the normal work day, or a combination of both.

In-house call are duty hours in addition to the regular resident work day that are spent within a sponsoring or participating institution so that residents are immediately available, as needed, for clinical duties. In-house call does NOT include night float, being on call from home, or regularly scheduled overnight duties. Residents in their first year of training (see Attachment 1) should not be assigned in-house call.

Night float is a rotation designed to eliminate in-house call or assist other residents during the night. Night “shift” assignments in specialties such as Emergency Medicine are not considered night float.

When the word “should” is used (as in residents should have 10 hours, and must have eight hours, free of duty), it should indicate that patient care or an educational justification must be offered when the rest period is shorter than 10 hours.

After 24 hours on duty, PGY2 residents and above (see Attachment 1) may spend up to 4 hours to transfer care, but may not care for new patients, attend continuity clinic, or participate in new surgical procedures.

Faculty
Faculty is defined as individuals with a formal assignment by the residency program to teach residents/fellow physicians.

Supervising Physicians are either faculty members or more senior residents who have been designated by the program director as the supervisor of a junior resident.

Faculty members or more senior residents functioning as supervising physicians should delegate portions of care to those being supervised, based on the needs of the patient and the skills of the residents.

Evaluation
A confidential evaluation by a resident means that resident responses cannot be identified. Many data collection systems can identify who has and has not responded and this does not compromise confidentiality.

Residents must have access, upon request, to their current and previous performance evaluations in electronic or hard copy.

The program must use the results of the residents’ assessment of the program, together with other program evaluation results, to improve the program.

http://www.acgme.org/Portals/0/ResidentSurveyKeyTerms.pdf
ACGME Resident Survey - Duty Hours FAQ

What activities are included in "duty hours"?
Duty hours are defined as all clinical and academic activities related to the residency program. This includes clinical cases (both inpatient and outpatient care), administrative duties related to clinical cases, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences, journal clubs, and grand rounds. Time included in duty hours are all hours spent on activities required by the accreditation standards such as memberships on hospital committees, or any activities that are an accepted practice in residency programs, such as participating in interviewing residency candidates. Duty hours do not include reading, studying, and preparation time spent away from the hospital or ambulatory site if call from home, only the hours spent in the hospital after being called in to count toward duty hours.

What does "averaged over a four-week period" mean?
This means that the average should be working hours within, and not across, rotations. It is not appropriate to combine rotations having in-house call with other that do not include call to obtain a lower average. Similarly, it is inappropriate to average a rotation week (with 6 hours worked) with regular duty weeks to obtain a lower average.

Does the “1 day in 7 free” mean that I must have 1 day per week off?
It is common for smaller surgical residency programs to have residents on duty one weekend (Friday and Sunday) for instance, so they can be off the next weekend. As long as duty hour requirements are met within the specified average, this type of every other weekend schedule is acceptable. Note that in-house call, adequate rest (generally 10 hours) must be provided between weekend duty periods. There are no exceptions to the rule and it is not averaged across 4 weeks. Thus, in-house call on two consecutive nights (i.e., Friday and Saturday) is not permitted, unless the residents are given a rest period of about 10 hours between the two shifts.

How does the ACGME define "adequate time for rest" between duty shifts?
This is generally defined as 72 hours, however programs may provide somewhat shorter rest periods when appropriately educationally justified. Allowing added time for didactic lectures of high importance, or for surgical experience in rare cases or weeks with particular educational value, is acceptable since Program Committees would consider appropriate.

If I’m on call from home, but I have to go to the hospital, is that in house call?
If call comes from home, any time spent in the hospital after being called is counted toward duty hours. Call from home that does not result in travel to the hospital or clinical site is NOT to be included in duty hours.

If call from home isn’t included in duty hours, is it permissible for me to take call from home or sight for extended periods, such as a month?
This requirement that 1 day in 7 be free of patient care responsibilities would prohibit being assigned home call for an entire month. Assignment of a partial month (more than six days but less than 24 days) is possible however, keeping in mind that call from home is appropriate if the service intensity and frequency of being called is low. The ACGME requires that programs monitor the intensity and workload resulting from home call, through periodic assessment of work load and intensity of the in-house activities.

Do I include my research project in duty hours worked?
Research time is included if it is a program-required activity. If the research is pursued on the resident’s own time (without program requirement), it is not included in duty hours.

What does "flexible" mean?
The word "flexible" refers to systematic instruction by means of planned learning experiences such as class room lectures, conferences, and grand rounds. It is often used in contrast with "clinical" education.

How should I interpret the Resident Survey duty hour response options?
Very often = very frequently; extremely often
Often = frequently; many times; not seldom
Occasional = on some occasions, at times
Rarely = at time; never

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http://www.acgme.org/Portals/0/dhfaqsresidents.pdf
Table Exercise
How will I prepare my program for the survey?

- Schedule a meeting with your residents near time of survey
  - PD vs APD to run meeting
  - Discuss survey importance
  - Show them report from last academic year
  - You cannot tell them how or what to answer, but you can use tools on ACGME website
    - Discuss confusing terms/sections
    - Use all survey FAQs and tools on ACGME website to facilitate the discussion
    - Opportunity to remind them of things like:
      - Fatigue education
      - Clinical performance measures
  - Samples of these surveys are not available
How will I prepare my program for the survey?

• Allow protected time to complete the survey
  • Demonstrates importance of the survey to PD and Program
• Computer lab or access at work
• Provide copies of the ACGME definitions at computer stations

• Cookies or snacks always appreciated
How will I prepare my program for the survey?

• Program Review Committee (PEC)
  • Annual Program Evaluation (APE)
  • Resident and Faculty survey data provide important information for the PEC to review
  • Faculty and Residents participate
  • Opportunity to educate them and address survey concerns
Why are the surveys important?

• Survey reports are reviewed by your ACGME RC annually
  • Concerning trends in survey can be used to generate areas for improvement or citations on annual reviews
  • Progress reports or site visits could result if survey indicates serious concern with the program
Why are the surveys important?

• Annual Program Evaluation (APE)
  • Resident and Faculty survey data provide important information for the Program Evaluation Committee (PEC) to use for the annual program review and evaluation (APE)

• GMEC must include the results of the ACGME surveys of residents (and core faculty members) in the Annual Institutional Review (AIR)

• GMEC must demonstrate effective oversight of all programs
  • Must have Special Review (SR) criterial and protocols for programs that demonstrate underperformance
    • Results of surveys – concerning reports or trends can be a trigger for SR
    • SR may be very useful for help needed to address areas of non-compliance

• Institutions can monitor and track program performance
  • often used in institutional dashboards
As a new Program Director, now you know how to achieve positive outcomes on ACGME resident survey

You can answer these questions.

• Who has to take the surveys?
• What are the surveys?
• When are the surveys?
• Where do I get answers or more information?
• How will I prepare my program for the surveys?
• Why are the surveys important?
Top 10 things to know about the ACGME Annual Resident Surveys

1. Use the resources available on the ACGME website to understand the survey
   ACGME Resident/Fellow and Faculty Surveys -
   http://www.acgme.org/Data-Collection-Systems/Resident-Fellow-and-Faculty-Surveys

2. Schedule time to meet with residents to explain the survey using the resources available from the ACGME
   a. ACGME Resident Survey – Program FAQs
      http://www.acgme.org/Portals/0/ACGME_Resident_Survey-Program_FAQs.pdf
   b. ACGME Resident Survey Content Areas
      http://www.acgme.org/Portals/0/ResidentSurvey_ContentAreas.pdf
   c. ACGME Resident Survey Key Terms and Content Areas
      http://www.acgme.org/Portals/0/ResidentSurveyKeyTerms.pdf
   d. ACGME Resident Survey - Duty Hours FAQ
      http://www.acgme.org/Portals/0/dhfaqsresidents.pdf

3. Schedule time for all residents and space for residents to take the survey during work hours
4. Survey results are used by the program evaluation committee (PEC) and provide important information for the annual program evaluation (APE)
5. Understand that survey results are reviewed by RC annually and areas of concern or citations can be triggered by non-compliant areas (especially trends).
6. Get more information by attending the annual ACGME meeting sessions on the surveys and the update sessions
7. Get more information by attending the annual program director meetings in your specialty
8. Your GMEC will review all surveys annually and sharing best practices can benefit all training programs at your institution
9. Share the survey results with your department leadership (Chair)
10. Your DIO can help when survey indicates a concerning trend or potential problem
ACGME FACULTY SURVEY

• Annual Faculty Survey – same time as resident survey
• Another good reason to keep your ADS program faculty roster current and accurate
  • PD should review with PC prior to survey and as part of annual ADS update
• Important to prepare Faculty for the Survey
  • Use same approach as resident preparation
    • Information and FAQs from ACGME Website
  • Inform them of the importance of completing the survey
    • Answer any questions
    • Avoid leading
  • PEC participation also important for program faculty to understand importance to program
ACGME Faculty Survey – Program FAQs

What is the ACGME Faculty Survey?
Each year from January through April, the ACGME requires faculty members to complete an online survey. This survey contains questions about faculty members' experiences working within their program, as well as their interactions with the residents/fellows training there. Note: This survey is only to be completed by scheduled faculty members with the exception of the program director only, as a faculty member will be scheduled to complete the survey. Program administration does not have access to the survey list or to any responses provided by individual faculty members. Accreditation Data System (ADS) logs will not provide access to the survey.

Which programs are scheduled to participate?
All ACGME-accredited specialty and subspecialty programs (regardless of size) will be surveyed each academic year.

When is my program scheduled to complete the survey?
The Faculty Survey takes place each academic year between the months of January and April. Programs are scheduled for windows approximately five weeks in length within which they must complete the survey. The ACGME will notify programs directly when their participation is required. You can also find more information about when your program is scheduled to participate by logging into your ADS account.
- Click on the "Survey" tab and find the "Faculty Survey" heading. When the menu will list scheduled information for the current and previous iterations of the survey. Find scheduling usually takes place in early January each academic year.

Is there a required response rate that my program must meet before the deadline?
Yes. A 90% response rate is required for all programs. Programs with fewer than three faculty members participating in the survey should reach a 100% response rate. Review Committees will closely monitor programs' response rates and will review programs that fail to meet this requirement.

How will my faculty members know when they need to participate in this survey?
Programs are responsible for notifying their faculty members of this survey and its deadlines. The ACGME does not contact faculty members directly. It is the program's responsibility to ensure its faculty members complete this survey by the assigned deadline. To notify your faculty members of their involvement and provide login information for the survey, log into ADS, click the "Survey" tab, and find the "Faculty Survey" heading. Click "View Current Faculty Survey Task" to access a list of your current survey tasks. Follow the instructions on this page to e-mail faculty members directly from ADS.

Does the ACGME notify or remind faculty members of this survey?
No. The ACGME does not notify or remind faculty members of this survey. Programs are responsible for notifying their scheduled survey task and ensuring they complete the survey before the assigned deadline.

http://www.acgme.org/Portals/0/ACGME_Faculty_Survey-Program_FAQs.pdf
ACGME FACULTY SURVEY

• Faculty Survey Reports –
  • When at least 60% of a program’s faculty members have completed the survey and at least three faculty members have responded, reports will be available annually.
  • For those programs with fewer than three faculty members scheduled to participate who meet the 60% compliance rate, reports will only be available on an aggregated basis after at least three years of survey reporting.
  • Compliance must be maintained over these years in order to receive this aggregated report.
  • Only summary data are displayed; no individual data are available.
  • If less than 60% of your faculty complete the survey, data from your program will not be available that academic year.
Reference: much of the information is available on the ACGME website:
http://www.acgme.org/Data-Collection-Systems/Resident-Fellow-and-Faculty-Surveys