

PROGRAM IMPROVEMENT THROUGH SELF STUDY

SEMCME Workshop

March 7, 2018

James G. Tyburski, MD

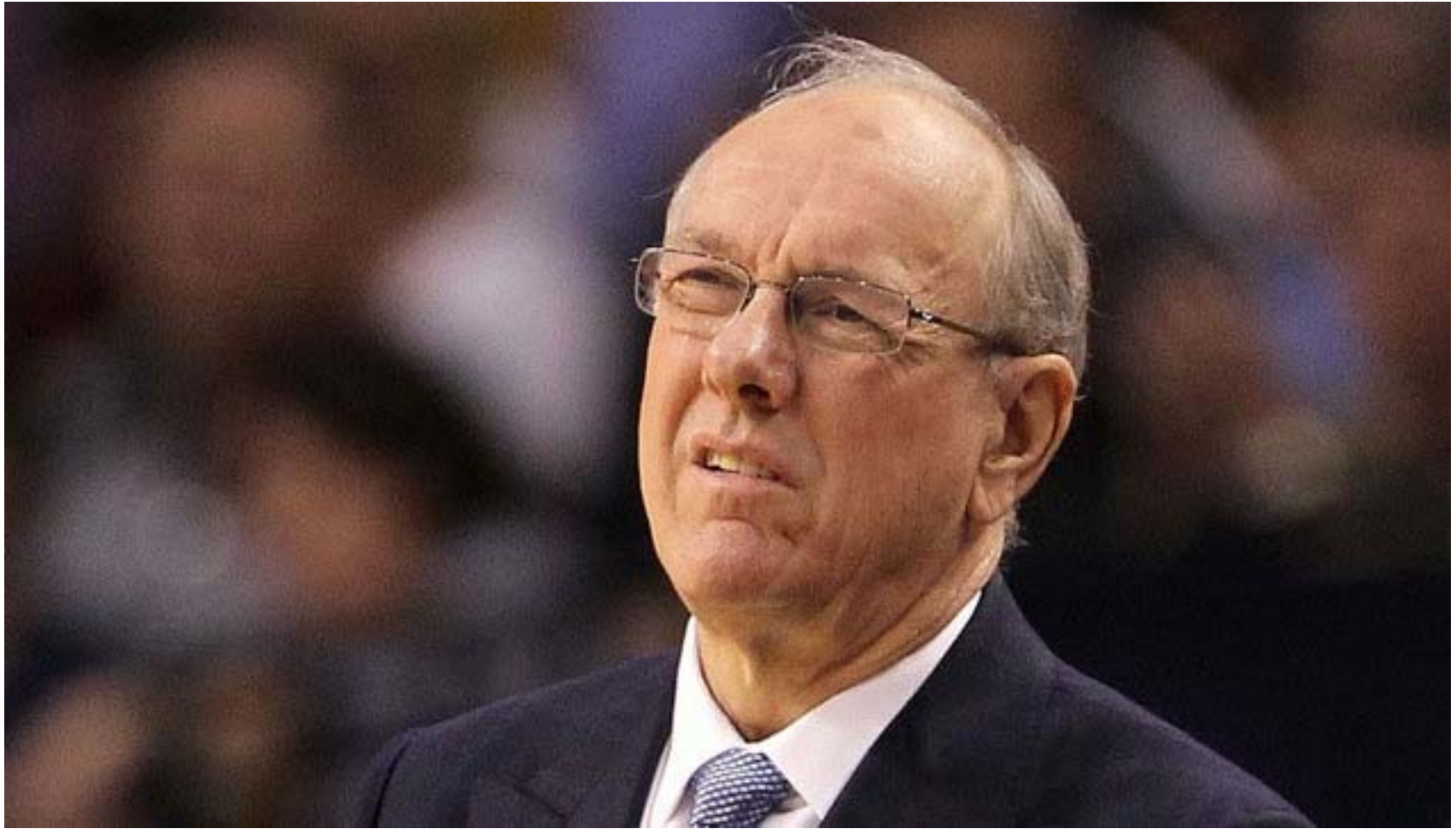
Chief of Surgery, Detroit Receiving Hospital

**Professor of Surgery,
Wayne State University School of Medicine**

- The Self-Study is an objective, comprehensive evaluation of the residency or fellowship program, with the aim of improving it.
- Underlying the Self-Study is a longitudinal evaluation of the program and its learning environment, facilitated through sequential annual program evaluations that focus on the required components, with an emphasis on program strengths and “self-identified” areas for improvement (“self-identified” is used to distinguish this dimension of the Self-Study from areas for improvement the Review Committee identifies during accreditation reviews)









1. Assemble the Self-Study Group
2. Engage Program Leaders and Constituents in a Discussion of Program Aims
3. Aggregate and Analyze Data from your Annual Program Evaluations and the Self-Study to Create a Longitudinal Assessment of Program Strengths and Areas for Improvement
4. Examine the Program's Environment for Opportunities and Threats
5. Obtain Stakeholder Input on Strengths, Areas for Improvement, Opportunities, and Threats to Prioritize Actions
6. Interpret the Data and Aggregate the Self-Study Findings
7. Discuss and Validate the Findings with Stakeholders
8. Develop a Succinct Self-Study Document for Use in Further Program Improvement as Documentation for the Program's 10-Year Site Visit

1. Assemble the self-study group

- Need to throw a wide net and keep the best fish
- Need individuals familiar with the department
They can learn the APE process
- PEC members valuable
- Current and former residents, faculty from various backgrounds

2. Engage program leaders and constituents in a discussion of program aims

- Define, codify program aims
- What do you want to achieve?
- Who do we want to be? What do we want our graduates to do?
- Chairman/Department Chiefs important in this

- 3. Aggregate and analyze data from your annual program evaluations and the self-study to create a longitudinal assessment of program strengths and areas for improvement**

- Resident performance on boards, in-training exam
- Goals and objectives of rotations, case logs
- Faculty development
- Resident feedback data for program and faculty
- Work hour compliance (reporting and hours)
- Graduate fellowships/jobs/careers
- ACGME resident/faculty survey
- What did your APE cover?



Suggested Annual Program Evaluation Action Plan and Follow-Up Template

Use this template for tracking Areas for Improvement from the Annual Program Evaluations across multiple years. The intent is to create a summary of improvements achieved, and a working list of areas that are still in need of attention. The template is suggested and you may adapt it in any way you find useful to facilitate program improvement. You also may use attachments or appendices if additional detail is relevant to tracking a given issue.

(Note: This form should NOT be shared with the Review Committee or with ACGME field representatives during accreditation site visits.)

	Areas for Improvement (AY 2016–2017)	Intervention/Action Plan	Date Instituted/Individual Responsible	Link to Program Aims and/or Context (Opportunities, Threats)	Expected Resolution (Outcome Measures and Date)	Status (Resolved, Partially Resolved, Not Resolved)
1						
2						
3						
....						
	Areas for Improvement (AY 2015–2016)	Intervention/Action Plan	Date Instituted/Individual Responsible	Link to Program Aims and/or Context (Opportunities, Threats)	Expected Resolution (Outcome Measures and Date)	Status (Resolved, Partially Resolved, Not Resolved)
1						
2						
3						

4. Examine the program's environment for opportunities and threats

- SWOT Analysis (**S**trengths, **W**eaknesses, **O**pportunities, **T**hreats)
- Internal
 - Finances, physical resources, personnel, academics, processes
- External
 - Work force trends, shift in patient demographics, new technologies, competition, political and economic environment

- Strength – Program with multiple training sites
- Weakness – Expansion may limit exposure to any one faculty
- Opportunity – New teachers, ideas
- Threat – Expansion disrupts call schedules/too many services to cover

5. Obtain stakeholder input on strengths, areas for improvement, opportunities, and threats to prioritize actions

- Present your SWOT analysis to a wide group in your department (stakeholders)
- Feedback on what is working/not working
- APE is helpful
- Have a thick skin

**6. Interpret the data
aggregate the self-study
findings**

- Assess where you are and list your priorities
- What needs fixing, what needs to be left alone
- What do you want the program to look like in 5 years?

7. Discuss and validate the findings with stakeholders

- Make sure your five-year plan seems reasonable to the stakeholders in the department

8. Develop a succinct self-study document for use in further program improvement as documentation for the program's 10-year site visit

- Put it on paper
- ACGME has two forms
- Look at it after an interval



Self-Study Summary Short Form

Use this template for aggregating information from the Self-Study for submission to the ACGME. This form is optional for use with subspecialty programs. Programs may choose to use this form, or the longer [Self-Study Summary](#).

After completing the Self-Study, provide responses to the seven items below.

The deadline for uploading the Self-Study Summary into the Accreditation Data System (ADS) is the last day of the month the Review Committee indicated for the program's first site visit in the Next Accreditation System. (For example, if the Review Committee indicated **October 2017** as the date of the first site visit, the document must be uploaded by **October 31, 2017**.)

Program Name: _____

Program Number: _____

Self-Study Date (Month, Year): _____

Note

The documents will be used to assess the program's aims and environmental context, as well as the process used for the Self-Study and how this facilitates program improvement.

*Do **NOT** provide information on areas for improvement identified during the Self-Study. A separate document (to be submitted 12 to 18 months after initiating the Self-Study) will request information on improvements realized in areas identified in the Self-Study.*

Program Description and Aims

Describe the program and its aims, using information gathered during the Self-Study.

Item 1: Program description and program Aims

Provide a brief description of the fellowship program, as you would to an applicant or a prospective faculty member. (Maximum 200 words)

Item 2: Program activities to advance the Aims

In bullet form, identify the program's aims, as well as current activities to further these aims. (Maximum 200 words)

Environmental Context

Summarize the information on the program's environmental context that was gathered and discussed during the Self-Study.

Item 3: Opportunities for the program

In bullet form, based on the information gathered and discussions during the Self-Study, describe important opportunities for this program. (Maximum 200 words)

Item 4: Threats facing the program

In bullet form, based on the information gathered and discussions during the Self-Study, describe real or potential significant threats facing this program. (Maximum 200 words)

Significant Changes and Plans for the Future

Item 5a: Describe significant changes and improvements made in the program over the past five years. (Maximum 200 words)

Item 5b: Project your vision and plans for the program for the coming five years. (Maximum 200 words)

Item 5c: Based on the plans described in the previous item, describe what will "take this to the next level." (Maximum 200 words)

Note: In your response, discuss what the "next level" will look like, the envisioned steps and activities to achieve it, and the resources needed.

Self-Study Process

Item 6: Describe the Self-Study process for your program.

Provide information on elements of your program's Self-Study, including how data were collected and assessed, how conclusions were reached, and any other relevant information. (Maximum 250 words)

|

Item 7: Learning that occurred during the Self-Study

Describe learning that occurred during the Self-Study. The information will be used to identify potential best practices for dissemination. (Maximum 200 words)



General Surgery ACGME Resident Survey 2011 to 2017													
	2016-2017		2015-2016		2014-2015		2013-2014		2012-2013		2011-2012		
	% Program Compliant	Program Mean	% Program Compliant	Program Mean	% Program Compliant	Program Mean	% Program Compliant	Program Mean	% Program Compliant	Program Mean	% Program Compliant	Program Mean	
1	96%	4.7	90%	4.5	80%	4.2	69%	4	82%	4.3	85%	4.4	Duty Hours
2	100%	4.7	96%	4.8	96%	4.6	86%	4.4	80%	4.3	98%	4.8	
3	98%	4.8	100%	4.9	98%	4.9	96%	4.7	96%	4.8	100%	4.9	
4	100%	5.0	100%	5	100%	5	98%	4.8	96%	4.8	100%	5	
5	96%	4.7	96%	4.8	no data	no data	86%	4.5	86%	4.4	88%	4.4	
6	79%	4.2	75%	4	no data	no data	73%	4.1	76%	4.2	85%	4.3	
7	98%	4.4	96%	4.5	88%	4.2	90%	4	88%	4	85%	4.1	Faculty
8	94%	4.5	98%	4.7	98%	4.6	96%	4.4	88%	4.3	92%	4.5	
9	88%	4.3	92%	4.4	80%	4.1	67%	3.7	65%	3.6	73%	3.9	
10	83%	4.2	88%	4.4	74%	3.9	76%	3.8	55%	3.4	73%	3.9	Evaluation
11	83%	4.1	79%	4.2	56%	3.6	43%	3.2	24%	2.9	58%	3.6	
12	100%	5.0	100%	5	98%	4.9	96%	4.8	96%	4.8	90%	4.6	
13	100%	5.0	100%	5	90%	4.6	92%	4.7	84%	4.3	88%	4.5	
14	92%	4.4	96%	4.6	74%	4.1	59%	3.6	47%	3.4	54%	3.5	
15	100%	5.0	100%	5	92%	4.7	98%	4.9	90%	4.6	88%	4.5	
16	94%	4.5	96%	4.5	80%	4.3	73%	3.8	59%	3.7	58%	3.8	Edu Content
17	85%	4.2	85%	4.3	54%	3.5	43%	3.2	20%	2.8	40%	3.3	
18	81%	4.0	83%	4.2	50%	3.3	41%	3.3	41%	3.2	29%	3.1	
19	100%	5.0	100%	5	94%	4.8	73%	3.9	65%	3.6	77%	4.1	
20	94%	4.8	90%	4.6	82%	4.3	67%	3.7	94%	4.8	83%	4.3	
21	77%	4.1	81%	4.2	60%	3.5	41%	3	37%	3	54%	3.4	
22	83%	4.1	79%	4.1	64%	3.7	57%	3.6	45%	3.3	58%	3.7	Resources
23	79%	4.0	65%	3.9	48%	3.4	31%	3.1	27%	2.9	38%	3.2	
24	98%	4.7	100%	4.6	100%	4.6	98%	4.3	100%	4.2	94%	4.1	
25	71%	3.8	73%	3.9	52%	3.1	27%	2.1	24%	2	29%	2.2	
26	98%	4.9	100%	5	96%	4.8	98%	4.9	96%	4.8	96%	4.8	
27	100%	5.0	98%	4.9	96%	4.8	98%	4.9	96%	4.8	96%	4.8	
28	100%	5.0	100%	5	100%	5	100%	5	100%	5	100%	5	Patient Safety
29	100%	5.0	100%	5	100%	5	88%	4.5	88%	4.5	88%	4.5	
30	100%	5.0	100%	5	98%	4.9	88%	5	88%	5	88%	5	
31	96%	4.4	94%	4.3	96%	4.2	96%	4.2	100%	4.2	100%	4.3	
32	85%	4.4	83%	4.3	74%	4	67%	3.7	61%	3.4	75%	4	
33	88%	4.4	90%	4.4	74%	3.9	59%	3.5	49%	3.3	60%	3.8	
34	90%	4.5	92%	4.4	82%	4.3	84%	3.9	76%	3.9	73%	3.9	Patient Safety
35	85%	4.3	92%	4.4	68%	4	67%	3.7	65%	3.6	63%	3.8	
36	96%	4.4	100%	4.6	100%	4.6	98%	4.4	100%	4.3	98%	4.4	
37	100%	4.7	100%	4.5	100%	4.5	100%	4.2	100%	4.1	98%	4.1	
38	75%	4.0	67%	3.7	58%	3.3	61%	3.4	65%	3.6	52%	3.1	
39	98%	4.0	96%	3.9	98%	4	90%	3.4	92%	3.4	94%	3.4	
40	100%	4.6	100%	4.6	100%	4.4	100%	4.2	98%	4.1	100%	4.3	Patient Safety
41	100%	4.5	100%	4.4	98%	4.3	98%	4	98%	3.9	98%	4.1	

Compliance Totals

Compliance										
Above or equal to 86%	29		31		21		21		20	20
Between 76 and 85%	10		6		5		2		5	5
between 61 and 75%	2		4		6		9		5	5
Below or equal to 60%	0		0		7		9		11	11

Program Mean Totals

Program Means										
Above or equal to 4.0	40		37		29		22		22	25
Between 3.5 and 3.9	1		4		6		11		7	9
Below or equal to 3.4	0		0		4		8		12	7

Item Compliance						
Above or equal to 86%	22	17	13	11		
Between 76 and 85%	0	4	6	6		
between 61 and 75%	1	2	2	3		
Below or equal to 60%	0	0	2	3		
Program Means						
Above or equal to 4.0	17	16	11	9		
Between 3.5 and 3.9	0	1	4	6		
Below or equal to 3.4	0	0	2	2		

- Don't get confused by the nomenclature
- Do keep up a reasonable pace
- Be inclusive; you can always throw the crazy stuff later and you will find hidden gems
- Do have a thick skin – sometimes it isn't personal
- Don't be hesitant to seek help/new ideas
- Remember you are the face of the review

