



COURSES

RRC: Maintain certification in PALS, IO simulation, NRP

Required:

RRC: PALS

RRC: NRP

Other:

Simulation courses

Procedure courses

Educational courses

QI courses

Research courses

Original cert - pre-PGY I

Re-cert- PGY II/III



Social Activities

- Retreats, ballgames, etc.
- Not required but appreciated
- Promotes bonding
- Plan ahead, advertise, arrange coverage



Graduation



- Event – plan, invite, honor
- Certificates – ending dates
- ABP verifications
- RRC: Summative Evaluation (perf, comp)
- Awards/ parting gifts
- Turn in: pagers, white coats, etc.
- Future contact (email, phone, address)
- Exit Evaluations (Graduate surveys)



Program Maintenance

A Year on the ***U.S.S. Pediatrics***

- Onboarding
- Direction: Mother Ships
- Passengers/ Orientation
- Itinerary:
 - Annual check points
- Staff (admin, committees)
- Schedule (activities)
- Cost: What's included
- Cruise Ratings
- Passenger Feedback
- Challenges





Cost of cruise: What's included?

Department of Pediatrics, Hospital, Institution

Program

- # Residents
- House Staff PCs/ Admin
- Recruiting Season
- Intern Orientation
- In-training examinations
- Graduation
- Retreats
- Socials
- Office/ Lounge Supplies

Resident Perks

- Parking
- Lunches
- On-call meals
- Book funds
- Licenses, DEA
- Courses (PALS, NRP, etc)
- Memberships
- Research meetings
- Incentives
- Moving allowance





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Common to All Programs Reviews

- Annual ACGME Survey –
60% faculty, 70% resident
- Annual Program review (APE) - PEC
Program Improvements/ Goals
- ACGME WebADS - next accreditation system
- Resident semi-annual evaluation/ feedback



Common to All Programs

RRC: Faculty

Faculty Evaluations

- **RRC:** Evaluate faculty performance annually
- **RRC:** Annual written confidential evaluations
- Meet with faculty/rotation leaders

Faculty Development

- Identify Fac Dev program
- Perform Needs Assessment
- Program sponsored topics
- **RRC:** Encourage Faculty leadership/ core faculty members' participation (minimum annually)



Individual Resident/ Fellow “Report Card”

- Evaluations/ Milestones
- Curriculum
- Duty hours
- Procedure logs
- Educational conference attendance
- ITE/ (Board examination)
- Other: (req education, license, etc)





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Challenges: Sharks in the water



A Different Age...

THIS IS PROGRESS



"Tales Of Mere Existence" By Levni Yilmaz

www.ingredientx.com





Procedure Logs: “Hands-on” Pediatrics





Clinical/ Educational Work Hours



- RRC: Must monitor resident
Clinical and Work hours
- Rules – residents, faculty must know rules
 - Call: no more than 24 hrs (+4 hrs)
 - 1 in 7 days off averaged over 4 weeks
 - 80 hours ave/ 4 wk – (includes “home-work”, “home call”, moonlighting)
- Institution Requirements
- Identify and troubleshoot problem areas
- Survey–ACGME survey, institution, evaluations
- “Shift” mentality – work ends, life begins

Travel Journal: Documenting the journey?



- APE
- Self Study
- Patient data feedback
- Service vs education
- Inpt vs Outpt
- Scheduling
- Handoffs
- ???????????



Cruise Ship Reminders: Common to All Programs

Residents:

- Flu shots/ TB tests/ FIT testing (OSHA)
- Pediatric Boards sign-up (Feb – March, late fee until May)
- Step III, Medical License, DEA, NPI #'s, Medicaid #, etc.
- Credentialing for other hospitals besides home-base

Programs:

- Program Letters of Agreement (PLA) with participating sites (renew 5 yrs)
- Program Letters of Agreement - Resident Away Rotations
- Program policy updates (annually minimum)
- Website updates (annually)





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Program Maintenance Cruise Ship

- | | |
|-----------------|----------------------------------|
| Direction: | Who do we look to? |
| Passengers: | All on board, not overboard? |
| Itinerary: | When are the checkpoints? |
| Staff: | Who are teams/ development? |
| Schedule: | When/ what activities scheduled? |
| Cost: | What all is included? |
| Cruise ratings: | How do we get/give feedback? |
| Challenges: | Where are the sharks? |



APPD

Trainee Assessment and CCC





Trainee Assessment

- **Establish expectations**
 - For the year
 - For the rotation
- **Determine purpose and frequency of evaluations**
- **Determine the method of evaluation**
 - Will vary based on subject/rotation
 - Will vary based on level of resident/fellow



Trainee Assessment

Types

- PD/Faculty
- Advisor
- Chief(s)
- Peer-to-Peer
- 360 degree
 - Members of the interdisciplinary team (peer, student learner, nurse, RT, faculty, parent, etc.)
- OSCE
- ITE



Tracking Evaluations

- **An automated method helps here**
 - Ex. New Innovations
 - Reminders can be set
 - Template for evals
 - Mapping the milestones, the journey to competency



Tracking Evaluations

- How do you summarize it all?
- By program
 - Gen peds program vs. primary care program
- By advisor, by PD
 - Monthly at a minimum



Method of Evaluation

CCC structure/method

- Each resident/fellow level done q6 mos
- All evals pulled together, reviewed, and plotted
- All projects, committee work reviewed as well by CCC

Innovative methods

- M&M presentations
- Research days
- Advocacy
- Professionalism
- Primary care program



Program Evaluation
and Improvement



Program Evaluation and Improvement

- RRC: Program Evaluation Committee (PEC)
- RRC: Program Director appoints the PEC
- RRC: Specific PEC composition set by ACGME:
 - Two Program Faculty Members (minimum)
 - One resident (minimum)
- RRC: Written description of responsibilities set
- No requirements on how PEC carries out responsibilities
- PEC or PD may carry out improvement plans



RRC Pediatrics: PEC



The PEC must actively participate in...

- Planning, developing, implementing, evaluating educational activities of program;
- Reviewing, making recommendations for revision of competency-based curriculum goals and objectives;
- Addressing areas of non-compliance with ACGME standards;
- Reviewing program annually using evaluations of faculty, residents, and others.



Annual Program Evaluation

- The program, through the PEC, must document formal, systematic evaluation of the curriculum at least annually.
- PEC responsible for rendering a written Annual Program Evaluation (APE).
- APE elements: resident/ graduate performance, faculty development, program quality, progress on action plan.



APE: Program Improvement Data

- RRC: Program must monitor and track:
 - Resident performance;
 - Faculty development;
 - Graduate performance, including performance of program graduates on the certification examination;
 - Program quality:
 - Confidential faculty /res evaluation of program annually
 - Results of faculty/ res evaluations
 - Progress of previous year's improvement action plan





PEC

- Prepare a written performance improvement plan (PIP) – a plan of action - to document initiatives to improve performance in one or more of the areas listed.
- Delineate how improvement will be measured and monitored – data, facts, focus.
- Review and approve plan through PEC and document in meeting minutes.
- Track improvements...





APE Action Plan/ Follow up

Areas identified for Improvement 2016-2017	Point Person/ Group	Data – current	Intervention	Data-outcome	Follow up
ABP pass rate	Chiefs/ PD	60% pass rate over last 3 years	Board Review Course; QOD	Evaluate pass rate after review course, QOD	Improved to 75%; continued monitoring
QI projects	QI Director, PD	Participation 25%/ Knowledge low	Mini-quality academy; individual meetings; increase opportunity	# of residents participating; QI knowledge evaluation	Improved 60% participation; offer more opportunities



Milestones,
ABP, WebAds



ACGME Reporting

Milestones

- Reported via WebAds in January and June
- Manually enter the data



ACGME Reporting

Surveys

- The faculty and trainee surveys come out in mid-February
- Survey goes straight to trainees
- PD must notify Faculty of the survey and the log in process
 - There will be an email.



ACGME Reporting

Annual Program Update in ADS

- This is CRUCIAL as it now forms the core of the NAS review process.
- Due August 31st this year

The major focus is in the Responses to Citations as this is where you document ongoing program improvement efforts.



ACGME Reporting

Annual Program Update in ADS

- Update Faculty roster
 - The “trigger” for sending a faculty the survey is not published, but is dependent upon the hours of contact in your program.
- Need Faculty Scholarly Activity
 - Need Fellow scholarly activity as well



ADS Update

Faculty Scholarly Activity

Please review the Faculty Roster located within the 'Faculty' Tab to ensure that your faculty roster is up-to-date before proceeding. Once verified, enter scholarly activity that occurred during the previous academic year only.

To add scholarly activity (add one year of activity only), click the "Add" link. If there was no scholarly activity for the previous academic year, click "No Scholarly Activity".

If this is a specialty program, only complete for core faculty.

If this is a subspecialty program, complete for all faculty.

[Download Scholarly Activity Template](#)[Download Scholarly Activity FAQs](#)

- Similar data is required for Fellow Scholarly Activity. There is a similar template for download to help with data gathering
- Gather data in Late Spring or Summer to catch graduates and to have time to get data from Faculty



AAMC Reporting (GME Track)

National GME Census

Program Update & Survey

FREIDA update.

Basic data about your program

Trainee Update & Survey

Updates trainee information and their progression in the program.



ABP Reporting

These are received in the mail, but e-mail prompts when sent.

Yearly Tracking Roster (July)

Basic demographic for new trainees

Progress of Remaining trainees

Clinical and Professional Evaluation

Final Evaluation (Arrives mid May, due mid June)

You are certifying them as Board Eligible

Final assessment of Trainee

Total Clinical training time

Scholarly Time for Fellowships

Scholarly Work Product for Fellowships



The Circle of Life





What We Said We Would Do

PROGRAM ORGANIZATION 101: Basics of day-to-day program

This session is designed for all program leaders (PDs, APDs, Coordinators, FPDs) who are new to their roles and those wanting a refresher about the important activities of GME program leadership, including the annual cycle for both core programs and fellowships.

Topics include:

Match

Recruitment

Orientation

Reporting to the Governing Bodies
(ACGME, AAMC, ABP)

Program Assessment

Trainee Assessment

Program Evaluation



Thank You!