

#### INSTITUTIONAL GRADUATE MEDICAL EDUCATION POLICY

SUBJECT: Special Program Review Protocol

DATE EFFECTIVE: July 1, 2022

POLICY: SPR Protocol PAGE: 1 of 7

### **GMEC Special Program Review Protocol**

ACGME requires the GMEC to demonstrate effective oversight of underperforming programs through a Special Review process (Core)

#### **BACKGROUND:**

According to the ACGME, the Special Review process must include a protocol that:

The GMEC must demonstrate effective oversight of underperforming program(s) through a Special Review process. (Core)

The Special Review process must include a protocol that establishes criteria for identifying underperformance; and, results in a report that describes the quality improvement goals, the corrective actions, and the process for GMEC monitoring of outcomes. (Core)

The DIO and Graduate Medical Education Committee are charged with the oversight of all Children's National Hospital (CH) ACGME-accredited programs, and as part of this required oversight, will conduct a Special Program Review (SPR) of underperforming programs. Program Directors for programs deemed "underperforming" will be notified in writing, and at such time, a "Special Review" of the program will be scheduled. The decision to conduct an SPR cannot be contested or appealed by the Program Director.

### **SPECIAL REVIEW SUBCOMMITTEE:**

| , MD, Program Director and/or Faculty, of Program NOT under review |
|--|
| Resident, MD, PGY, of Program NOT under review                     |
| GME Program Accreditation Lead                                     |
| Other Members identified by DIO/Chair of GMEC                      |

#### **SCHEDULE:**

The GME Office will schedule the Special Program Review of a program and provide each member of the SPR Committee with the details of the review, including correspondence submitted to the program for completion, and documents received from the program

#### **FORMAT:**

- 30 60 minutes with at least one resident from each level of training from the program under review. *This requirement may vary depending on the size of the program*
- 30 90 minutes with program director for program under review
- 30 60 minutes with other program faculty, if necessary

#### **PURPOSE:**

#### To aid the GMEC in providing effective oversight of ACGME-accredited programs:

- To review program compliance with ACGME Common, specialty/subspecialtyspecific program, and Institutional requirements
- o To review educational objectives and effectiveness of the program
- o To review educational and financial resources and their adequacy
- To review/discuss areas of non-compliance and/or any areas of concern identified within the program
- To monitor program improvement efforts in resident performance using aggregated data; faculty development; graduate performance including performance of program graduates on the certifying exam; and overall quality improvement goals
- o Effectiveness of program evaluation and improvement activities

#### **SPR COMMITTEE SUPPORTING DOCUMENTS:**

- o ACGME requirements (Common, Specialty/Subspecialty-specific, & Institutional)
- ACGME/Internal Areas of Concern
- o Annual Program Review Summary
- ACGME resident/faculty surveys
- o Progress Reports (if applicable)
- o Other materials deemed appropriate and necessary by the SPR Committee

#### **REPORT:**

- SPR Committee will draft a written report
- SPR Committee will present report to the GMEC within 45 days of Review
- GME Office on behalf of the GMEC will distribute copies of final report, as approved by the GMEC to Program Director with copy to division chief. The GME Office will also upload a copy of the final report to MedHub.

#### **MONITORING PROGRAM OUTCOME**

The DIO/GMEC will establish specific dates for which a program under review must submit a written corrective action plan for areas of non-compliance identified during the Special Review process.

Progress reports will be sent to the Special Program Review Committee for review and presentation to the GMEC.

The GME Office on behalf of the GMEC will update the program status grid to reflect noncompliance that have been addressed and approved by the GMEC.

**APPROVAL** 

Approved by:

Dewed agrand no DIO/Vice Chair, Medical Education

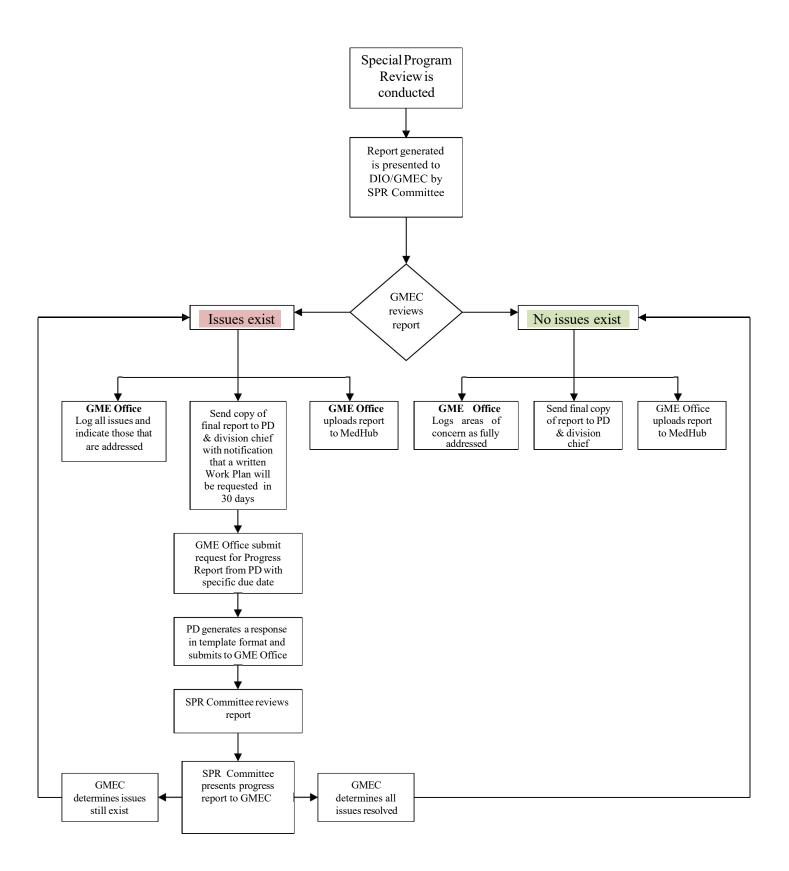
5/8/2024

Approved by GMEC: February 2016

Modified and Approved by GMEC: October 14, 2020 Reviewed and Approved by GMEC: October 13, 2021 Reviewed and Approved by GMEC: June 15, 2022 Modified and Approved by GMEC: September 13, 2023

Reviewed and Approved by GMEC: May 8, 2024

### **Special Program Review Schema**



## **Special Program Review Template**

| Program Name                        |  |
|-------------------------------------|--|
| Program Director                    |  |
| Coordinator                         |  |
| Approx. Date of next Self Study     |  |
| Accreditation Status                |  |
| Length of Training Year             |  |
| ACGME approved Number of Trainees   |  |
| Current Number of Trainees Enrolled |  |

## **Special Program Review Committee Worksheet**

| Materials | Reviewed |
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# **Special Program Review Action Items**

|   | Initiative | Recommendation | Start Date | Expected<br>Completion<br>Date |
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