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New Institutional Review Document Available

The new Institutional Review Document (IRD) is now available on the ACGME website homepage. To access the IRD, Designated Institutional Officials (DIOs) can select either the “Institutional Review” or the “DIO” link at www.acgme.org. Major changes to the document resulted from the Institutional Review Committee’s (IRC) efforts to align institutional accreditation processes with several of the ACGME’s strategic priorities, in particular, to increase efficiency and reduce burden in the accreditation process and to place greater emphasis on educational outcomes. In effect, the final product, in both form and substance, make the IRD a “new,” rather than simply a revised document.

Increasing Efficiency, Reducing Burden

Every question on the new IRD includes a corresponding Institutional Requirement for easy reference.



In addition, the new IRD is shorter than its predecessor. It eliminates redundancy and relies heavily on “yes/no” questions instead of narrative responses, especially in those instances where the IRC must determine whether the Sponsoring Institution maintains various policies, procedures, and programs in compliance with the Institutional Requirements. These process components, i.e., essential elements for an appropriate learning environment at the institutional level, include such essentials as whether the resident contract contains all required elements, whether certain policies are in force, and whether the Sponsoring Institution makes various kinds of resident benefits available. The number of narrative questions has been significantly reduced. DIOs and Graduate Medical Education Committees (GMECs) should note, however, that “yes/no” questions leave no room for “maybe.” As always the case, ACGME site visitors will validate all responses during the institutional site visit.

Greater Emphasis on Educational Outcomes

A Sponsoring Institution’s effective oversight of its ACGME-accredited programs is the principle means by which it demonstrates attention to educational outcomes. In the previous version of the IRD, the two most important documents by which the IRC reviewed previous citations and the GMEC’s action plans to monitor efforts at improving these areas were Attachments 8 and 9. To place greater emphasis on educational

outcomes, these two important data collection tools have been moved to the beginning of the document as *Attachment 1—Program-specific Citation Summary*, and *Attachment 2—Response to Program-specific Citation Summary*. By July 1, 2008, Attachment 1 will be generated electronically by the DIO. The IRC anticipates that the electronic version of Attachment 1 will eventually become the pre-eminent tool used by DIOs and GMECs for tracking areas in which programs need improvement.

Attachments 1 and 2—Focusing on Oversight AND Increasing Efficiency

DIOs will find that the new *Attachment 1—Program-specific Citation Summary* identifies more specific categories than the previous Attachment 8. There are several reasons for this change.

First, the new citation categories are organized into major groupings that correspond to the Common Program Requirements. Secondly, these categories have been used internally for several years by ACGME Review Committee (RC) staff to code citations. While this coding has been transparent to DIOs and program directors, it has served an ACGME internal purpose for identifying some broad categories of concern across RCs. *Most importantly, however, starting July 1, 2008, this coding will allow DIOs to create Attachment 1 electronically.*

With this electronic format, (*starting July 1, 2008*), DIOs will be able to compile all citations into Attachment 1 whenever they choose to do so for monitoring and review, and of course, as part of the IRD for a scheduled institutional review. The electronic Attachment 1 will graphically represent patterns of citations to show, at a glance, where GMECs need to focus on institutional improvement efforts to support programs. Since the coding process began only several years ago, the data set of citations is not yet complete. Therefore, in

the interim, DIOs will continue to compile citations by hand, using the Attachment 1 form included with the new IRD. By July 1, 2008, however, the data should be available for every program and the capability to produce the electronic report will be more accurate.

Attachment 2—Response to Program-specific Citation Summary corresponds to the previous Attachment 9. The IRC uses this Attachment to help determine the effectiveness of GMEC oversight. Attachment 2 should document specific improvement plans by program in each general category of citation and should also describe the GMEC's efforts to monitor these plans. The IRC checks whether the internal review process identifies areas of concern before they are noted by an RC, and/or whether the internal review process monitors progress by programs in addressing the areas of concern identified in the Citation Summary.

All three of these components of institutional review, Attachments 1 and 2 and the internal review process, provide evidence that the “the DIO and GMEC...have authority and responsibility for oversight and administration of the Sponsoring Institution's programs and responsibility for assuring compliance with ACGME, Common, specialty-specific Program and Institutional Requirements.” (Institutional Requirements, (I.B.4)

FAQS--No. 1!



Questions! We Get Questions!

As part of the development process for the new IRD, the IRC asked several DIOs from various sizes and types of Sponsoring Institutions across the country to provide comment and feedback. (and the IRC thanks these DIOs for their efforts!) The IRC also

involved the ACGME Field Staff in the review process as well. Despite best efforts, however, we all recognize that questions occur in the minds of those who have not “lived” with a document in development.

Attached to this issue of *DIO News*, therefore, DIOs and GME coordinators will find *DIO News: FAQs—No. 1*, the first of what we anticipate to become a series of such special issues to address questions of interest to all DIOs and GME coordinators during this transition period (and beyond, as need). In order to provide materials for these FAQs, we hope that DIOs and GME coordinators will send questions of general interest (not institution-specific issues) to the IRC in care of: IRC-FAQS@acgme.org

Our goal is to provide DIOs and GME coordinators with as much information as possible—to fulfill yet another strategic priority of the ACGME—to improve communication.

Those DIOs who might have specific questions regarding particular circumstances for their Sponsoring Institutions should communicate directly with the IRC staff. Some unique circumstances, such as whether a Sponsoring Institution is eligible for a waiver regarding provision of health benefits on the first day of a resident’s program, must be reviewed on a case-by-case basis by the IRC.

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Program Requirements Approved

The following new and/or revised program requirements have been approved by the ACGME Board of directors at its February 13 and June 12 meetings:

Common Program Requirements	Major revision, effective 07/01/07
Institutional Requirements	Major revision, effective 07/01/07
Allergy & Immunology	Major revision, effective 07/01/07
Dermatology	Major revision, effective 07/01/07
Endovascular Surgical Neuroradiology	Major revision, effective 01/01/08
Diagnostic Radiology	Major revision, effective 07/01/08
General Program Requirements for the Subspecialties of Emergency Medicine	Major revision, effective 07/01/07
General Surgery	Major revision, effective 01/01/08
Medical Biochemical Genetics	New, effective 02/13/07
Medical Genetic Pathology	Major revision, effective 07/01/07
Medical Genetics	Major revision, effective 07/01/07
Neuroradiology (Diagnostic Radiology)	Major revision, effective 07/01/07
Obstetrics-Gynecology	Major revision, effective 01/01/08
Pathology	Major revision, effective 07/01/07
Pediatric Emergency Medicine (Pediatrics & Emergency Medicine)	Major revision, effective 07/01/07
Thoracic Surgery	Major revision, effective 01/01/08

These requirements are located on the respective specialty’s web page, found at www.acgme.org at the “Residency Review Committees” link.

FAQs—No. 1 July 2007

FAQ-1

Although the revised Institutional Requirements become effective on July 1, 2007, our Sponsoring Institution cannot make some of the required changes before at least October, 2007, or possibly until early 2008. Will the Sponsoring Institution be considered noncompliant in these cases?

In the transition period for implementation of the revised Institutional Requirements, the Institutional Review Committee (IRC) will take into consideration Sponsoring Institutions' good faith efforts at making the necessary changes to achieve compliance with new or revised standards. In some cases, for example, the development of GME-specific components of an institution-wide disaster policy may take additional time past July 1, 2007 to clear necessary administrative channels within an institution. In such cases, the Designated Institutional Official (DIO) should be able to document that the effort is in process.

The IRC will not review compliance with the revised Institutional Requirements outside of a full institutional review. Therefore, if a Sponsoring Institution has recently been reviewed (2007) and received a five-year accreditation cycle, the IRC will not review for compliance before 2012. Compliance in the interim, however, is still expected. Residency Review Committees take Institutional Requirements into consideration during program and fellowship accreditation reviews as well, and may cite areas of noncompliance they discover during the course of review. Once again, the DIO should be prepared to document efforts in process by the Sponsoring Institution to achieve compliance. In general, the IRC expects that all Sponsoring Institutions will be in full compliance with the revised Institutional Requirements as soon as possible.

FAQ-2

Do we start using the new Institutional Review Document (IRD) immediately?

The new IRD must be used by all institutions with site visits scheduled after October 1, 2007. Those institutions scheduled for an accreditation site visit between July 1, 2007 and October 1, 2007, will be reviewed by the IRC according to the previous version of the Institutional Requirements and must use the previous version of the IRD.

FAQ-3

What major revisions to the Institutional Requirements might call for particular changes to processes and procedures by the DIO and/or the Graduate Medical Education Committee (GMEC) that could take additional time to bring the Sponsoring Institution into compliance?

The following list highlights the major revisions to the Institutional Requirements which may call for changes in policies and procedures by the Sponsoring Institution. While other Requirements may also necessitate some changes at the local level, it is likely that the following revisions will call for the most attention, at least by some Sponsoring Institutions:

Change	Institutional Requirement
Sufficient financial support and protected time for the DIO	I.B.5.a
Sufficient financial support and protected time for program directors	I.B.5.b
Sufficient salary support and resources for effective administration of GME	I.B.5.c
Policy that addresses administrative support for GME and residents in the event of a disaster or interruption in patient care that includes assistance for continuation of resident assignments	I.B.8
Conditions for reappointment of residents must now include non-promotion (<i>may require change to resident contract</i>)	II.D.4.d.1
Coverage for resident benefits should begin upon the first recognized day of their respective programs, unless statute or regulation requires a later date to begin coverage (<i>may require review by IRC of particular circumstances; see additional FAQ</i>)	II.D.4.g
Participation in an educational program regarding physician impairment that now includes sleep deprivation	II.E.2.b
Safety and privacy for call rooms	II.F.3.b
Statement or institutional policy (not necessarily GME-specific) that addresses interactions between vendor representatives/corporations and residents/GME programs.	III.B.13
Internal reviews must be <u>in process and documented in GMEC minutes</u> by the mid-point of the accreditation cycle	IV.A.2

FAQ-4

The revised Institutional Requirements indicate that the GMEC must “establish and implement policies and procedures” that affect residents’ education and work environment. Is this a major change since it seems that so many policies and procedures were not required in the previous version of the Requirements?

In the previous version of the Institutional Requirements, reference to policies and/or procedures was repeated in each GMEC responsibility. The revised Requirements extract the statement to avoid repetition and include it in the preface to the list of GMEC responsibilities. Overall, the IRC expects to see that the GMEC acts formally and consistently, following operating policies and procedures that articulate the GMEC’s responsibilities outlined in III.B.1-13.

FAQ-5

What if we can’t answer “yes” or “no” to a particular question on the IRD?

The “yes/no” questions in the new IRD relate specifically to areas in which “maybe” is not appropriate response. For example, a particular element can either be found in the resident contract, or not found therein. By its “yes” response, the Sponsoring Institution asserts that it is in compliance with a particular Requirement. As always, the site visitor will verify the responses on the IRD. If the Sponsoring Institution has begun an initiative, or if an appropriate response to a “yes/no” question is “sometimes,” the response should be “no” with an explanation of a plan, or other information provided in the space under the question. In many cases, prolonged narratives in the previous IRD were often not straightforward responses. The IRC ultimately determines whether substantial compliance exists in both “yes” and “no” responses.

FAQ-6

Two policies, included in the revised Institutional Requirements are also required as Attachments to the new IRD. Attachment 5 requests the Institutional Disaster Policy and Attachment 9 requests the Institutional Policy Regarding Vendor Relationships. These policies are both very lengthy. Does the IRC expect the entire policy to be included as an attachment?

In both cases, the IRC does not expect that the entire institutional policy should be included as an attachment to the IRD. The DIO should include only those sections of the policy(-ies) that provide reference to the content stipulated in the Institutional Requirements. For example, only the section of the institutional disaster policy that addresses administrative support for GME programs and residents as well as assistance for continuation of resident assignments in the event of a disaster should be included.

FAQ-7

How will the IRC interpret the revised Institutional Requirement, IV.A.2 regarding scheduling internal reviews? What exactly should be “in process and documented in the GMEC minutes?”

The internal review is the most important tool used by the DIO and GMEC in fulfilling its oversight responsibility for accreditation of its sponsored programs. The IRD provides explicit instructions as to how the date of the internal review should be understood. Interviews with the program director, faculty, and residents constitute only the first step of an internal review. The key component of the internal review process by which the GMEC demonstrates its oversight is its review of the report and subsequent monitoring of action plans. Various examples for considering the (as listed in the IRD) for how to interpret compliance include: 1) the date when the internal review recommendations were approved by the GMEC; 2) the date when a preliminary draft report of the internal review was presented to the GMEC; or, 3) any date of a GMEC meeting for which the GMEC minutes reflect that the particular internal review was in process. The Sponsoring Institution should endeavor to achieve consistency in how it determines the date recorded in Part I of the IRD included in the Accreditation Data System (ADS). In whichever method it chooses, the IRC will review whether this date matches the date included in the internal review report for each program. The IRC recognizes that DIOs require some transition time in revising compliance of the dates for internal reviews if this revision of the understanding of timing does not coincide with local practice. Principles outlined in the July 2006 issue of *DIO News* regarding scheduling of internal reviews with this new understanding of what constitutes the compliant date still apply as far as latitude for timing.

FAQ-8

What constitutes sufficient detail for an internal review report included in the IRD?

Internal review reports can be very lengthy documents. The revised Institutional Requirements, IV.B.1, provide a minimum list of information that should be included in the internal review reports included in the IRD. The IRC reviews these reports to determine whether areas of noncompliance identified by various RRCs have likewise been identified and addressed by the DIO and GMEC. Attachments 1 and 2 and the internal review reports together help the IRC determine whether the internal review process, and ultimately, whether the DIO and GMEC's oversight is effective. *The IRC does not expect that any of these internal review reports included in the IRD should exceed 10 pages.*