

**IV. Educational Program**  
**A. Curriculum components**  
**5. ACGME Competencies**  
**f. Systems-based Practice**

**Common Program Requirement:**

5. *ACGME Competencies*

*The program must integrate the following ACGME competencies into the curriculum:*

*f. Systems-based Practice*

*Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Residents are expected to:*

- (1) work effectively in various health care delivery settings and systems relevant to their clinical specialty;*
- (2) coordinate patient care within the health care system relevant to their clinical specialty;*
- (3) incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate;*
- (4) advocate for quality patient care and optimal patient care systems;*
- (5) work in interprofessional teams to enhance patient safety and improve patient care quality; and,*
- (6) participate in identifying system errors and implementing potential systems solutions.*

*[As further specified by the Review Committee]*

- **Documentation for SBP:** The Common PIF requests a description of a learning activity that addresses development of abilities in the knowledge base and skills in effective coordination of patient care, applying considerations of cost containment and risk-benefit analysis, patient advocacy, and interprofessional teamwork. (See PIF question below.) Documentation may include the written goals and objectives for this learning activity, curriculum (didactic and experiential) that demonstrates the elements of SBP, and assessment of resident outcomes. Site visitors may verify responses through interviews as needed.

**PIF Question:**

*a. Describe the learning activity(ies) through which residents achieve competence in the elements of systems-based practice: work effectively in various health care delivery settings and systems, coordinate patient care within the health care system; incorporate considerations of cost-containment and risk-benefit analysis in patient care; advocate for quality patient care and optimal patient care systems; and work in interprofessional teams to enhance patient safety and care quality.*

*Limit your response to 400 words.*

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- **Documentation for system errors:** The Common PIF requests a description of a learning activity that demonstrates how the program supports the development of resident skills for identifying system errors. (See PIF question below.) Important elements may include identified faculty to guide the activity, mechanism to ensure active engagement by each resident, and evidence of experiential learning (not just passive presence at conferences or meetings) in which residents participate in identifying a system problem or error and contribute to a potential solution. Additional documentation would be the written goals and objectives for this learning activity and how residents are assessed. Aggregated resident outcomes may be in the form of percentage of residents that completed a patient safety or other SBP project by the end of training, annual list of improvements that resulted from such projects, etc. Site visitors may verify responses through interviews as needed.

PIF Question:

*b. Describe an activity that fulfills the requirement for experiential learning in identifying system errors  
Limit your response to 400 words.*