### Residency Review Committee for Internal Medicine (RRC-IM) Update American Society of Hematology 2013

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### Since we last met ...

- NAS is here
- Experience with ADS
- ABIM & AAIM working feverishly in sub milestones



## When is my program reviewed?

- Each program is reviewed annually
- NAS is a continuous process
- Annual data supplemented by:
  - Reports of self study visits
  - Progress reports (when requested)
  - Reports of site visits (as necessary)
- Cycle lengths not used
- Feedback given to program annually

## Where did the NAS annual data elements come from?

History of prior accreditation decisions

Data analysis & modeling

Analysis to determine what combination of data elements may predict a "problem" program.

Adequate sensitivity
Minimize false negative and positives
Importance of trends

Understand that this is a...

New data elements will likely be introduced in future.

#### Annual Data Review Elements

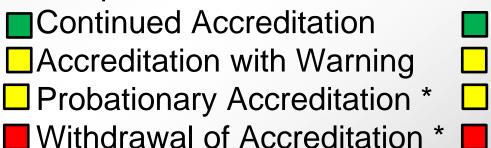
## The following are the "primary" annual data elements:

- 1) Program Attrition
- 2) Program Changes
- 3) Scholarly Activity
- 4) Board Pass Rate
- 5) Clinical Experience Data
- 6) Fellow Survey
- 7) Faculty Survey
- 8) Milestones



## What happens after data are reviewed?

- "Cycle Lengths" will not be given that's OAS, not NAS
- Citations may be given or removed
- Areas for Improvement may be given
  - Areas for Improvement are different from citations
    - Will not be reviewed annually by RC
    - Are not necessarily linked to a PR
    - Programs do not need to provide response in ADS
    - RC will monitor whether addressed using annual data
- Status Options:





<sup>\*</sup> Status conferred only after a site visit.

# Clinical Competency Committee new common PR effective July 1, 2013

## The program director must appoint the Clinical Competency Committee. (Core)

- At a minimum the Clinical Competency Committee must be composed of three members of the program faculty. (Core)
- There must be a written description of the responsibilities of the Clinical Competency Committee. (Core)



## Clinical Competency Committee

#### **The Clinical Competency Committee should:**

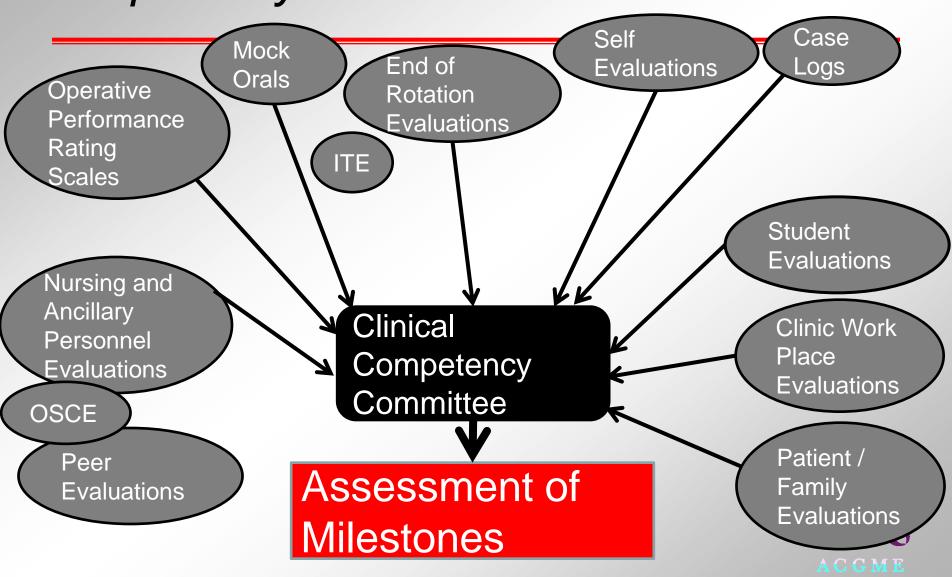
review all resident evaluations semi-annually; (Core)

prepare and assure the reporting of Milestones evaluations of each resident semi-annually to ACGME; and, (Core)

advise the program director regarding resident progress, including promotion, remediation, and dismissal. (Detail)



## Competency Committees + Milestones





### Citations

- Citations are given only by RC committee (not by staff)
- Require response in ADS as long as they are active
- Require an RC member to review annually
- Removed once issue is solved
  - Annual data
  - Progress report
  - Site visit



#### NAS: What's Different?

No site visits (as we know them)
 but...

- Focused site visits for an "issue"
- Full site visit (no PIF)
- Self-study visits every ten years





### Focused Site Visits

- Minimal notification given (~ 1 month)
- Minimal document preparation expected
- Team of site visitors
- Specific program area(s) looked at as instructed by the RRC



### Full Site Visits

- Application for a new core program
- At the end of the initial accreditation period
- RRC identifies broad issues/concerns
- Other serious conditions or situations identified by the RRC
- Notification given ~ 60 days
- Minimal document preparation
- Team of site visitors





## What is a Self-Study Visit?

- Not fully developed
- Scheduled every ten years
- Conducted by a team of visitors
- Minimal document preparation
- Interview residents, faculty, leadership



## What is a Self-Study Visit?

- Examine annual program evaluations
  - Response to citations
  - Faculty development
- Focus: Continuous improvement in program
- Learn future goals of program
- Will verify compliance with core requirements



## What about Milestones?

