

<b>GME Policy #: III-C</b>	<b>Graduate Medical Education Policy &amp; Procedures Pennsylvania Hospital</b>	<b>Page 1 of 3</b> Effective: 06-18-08
	<b>Subject: Internal Review Process</b>	

## **POLICY**

The Graduate Medical Education Committee (GMEC) is responsible for the development, implementation and oversight of the internal review process. This process must fully comply with all requirements as stipulated by the Accreditation Council for Graduate Medical Education (ACGME) Institutional Review Committee (IRC) Standards.

All internal reviews of ACGME accredited residency programs will involve a multi-step process designed to:

- Ensure that all training programs are conducted in accordance with program specific and institutional standards promulgated by the ACGME.
- Establish mechanisms whereby Office of GME staff may provide consultation and support to training programs.
- Establish equitable and uniform policies governing all training programs so that the overall GME environment within Pennsylvania Hospital (PAH) promotes the educational needs of house staff.
- Address any institutional support issues related to the responsibility of the PAH in operating GME programs.

The Internal Review sub-committee of the GMEC will work closely with GME staff to actively coordinate the Internal Review process, with final responsibility and authority to rest with the GMEC concerning the outcomes of these reviews.

## **SCOPE**

This policy applies to all ACGME accredited training programs in PAH.

## **IMPLEMENTATION**

The implementation of this policy is the responsibility of the Chair of the GMEC, Designated Institution Official (DIO), the GMEC members, Program Directors and the Office of GME.

## **PROCEDURES**

1. Each internal review will be conducted by a designated ad hoc internal review committee.
2. The review committee will be chaired by a GMEC member and consist of representation as required by ACGME institutional standards.
3. The review committee is charged with completing the internal review by the approximate midpoint of the ACGME review cycle.
4. An internal review will be considered “in progress” after the internal review materials have been submitted to the Office of GME and the review meeting has been scheduled with the department.
5. The review committee will use the following materials in its process:

<b>GME Policy #: III-C</b>	<b>Graduate Medical Education Policy &amp; Procedures Pennsylvania Hospital</b>	<b>Page 2 of 3</b> Effective: 06-18-08
	<b>Subject: Internal Review Process</b>	

- RRC-specific requirements
  - Previous ACGME accreditation letters
  - Previous Internal Residency Review Summary
  - Annual program evaluations
  - Internal and external resident survey results
  - Board certification results
  - Duty hour compliance reports
  - Program Bibliography
6. The review committee will assess the program's compliance with the program specific ACGME program requirements specifically addressing:
    - The educational objectives of each program
    - The effectiveness of each program in meeting its objectives
    - The adequacy of available educational and financial resources to support the program
    - The effectiveness in addressing areas of noncompliance or concerns in previous ACGME accreditation letters and previous internal reviews
    - Whether each program has defined, in accordance with the relevant Program Requirements, the specific knowledge, skills and attitudes required and provides educational experiences for the residents to demonstrate competency in the following areas: patient care skills; medical knowledge; interpersonal and communication skills; professionalism; practice-based learning; and systems-based practice
    - Evidence of the program's use of evaluation tools to ensure that the residents demonstrate competence in each of the six areas
    - The development and use of dependable outcome measures by the program for each of the general competencies
    - The effectiveness of each program in implementing a process that links educational outcomes with program improvements
    - Other issues as required by PAH GME policy or the GMEC
  7. The review committee will conduct an interview with GME trainees (residents/fellows) currently enrolled in the program under review, wherein the committee examines all aspects of the program as stipulated above and gains feedback from the residents/fellows for this purpose.
  8. The review committee will conduct an interview with representative teaching faculty, wherein the committee examines all aspects of the program as stipulated above and gains feedback from the faculty member for this purpose.
  9. The review committee will conduct an interview with the program director, wherein the committee examines all aspects of the program as stipulated above and gains feedback from the program director for this purpose.
  10. The review committee will prepare a final written report of their findings and present it to the GMEC for approval. The final report will include at a minimum the following: program name, date of assigned midpoint, participants, a brief description of the process,

<b>GME Policy #: III-C</b>	<b>Graduate Medical Education Policy &amp; Procedures Pennsylvania Hospital</b>	<b>Page 3 of 3</b> Effective: 06-18-08
	<b>Subject: Internal Review Process</b>	

documentation of the materials reviewed and a list of citations and areas of non compliance from the previous ACME accreditation letter.

11. The GMEC will discuss the findings and if the report is accepted, will determine when and if a progress report is due. Progress reports will be presented to the GMEC by the Program Director. Additional progress reports may be required.
12. Once approved by the GMEC, the final report will be given to the Program Director and the Chair of the Department.
13. Final reports are maintained in the Office of GME.