

MEMORANDUM

February 1, 2003

To: Program Directors

From: Lois L. Bready, M.D.
Associate Dean for Graduate Medical Education and
Designated Institutional Official

Subj: Annual Progress Reports for Graduate Medical Education Programs at
UTHSCSA

Effective institutional oversight of all GME programs, as mandated by ACGME, requires periodic evaluation of performance of sponsored programs. Internal reviews are conducted at the midpoint in time between ACGME accreditation site visits, and they provide in-depth evaluations of each program, with focus on prior RRC citations. Annual reviews, in the form of annual progress reports (APRs) will monitor the ability of each GME program to meet accreditation, regulatory, and institutional goals with available resources.

The Program Director is responsible for completion of the APR. APRs will be reviewed by the Designated Institutional Official and the GME Committee, and data will be used to guide performance improvement and resource allocation.

Please complete the following questions, attach documentation as indicated, and return to the GME Office by March 1, 2003. Thank you.

Cc: Program Coordinators

Annual Progress Report (APR)

Program	Date of completion of this form
Program Director	Associate Program Director

1. ACGME accreditation status - My most recent RRC accreditation letter was _____, and resulted in ___ years' accreditation.
 My next site visit is scheduled for _____.
Citations – please attach a copy of the ACMGE letter or a summary of citations.

√	
	A = Accredited \geq 3 year cycle, no citations
	B = Accredited < 3 year cycle, and/or citations
	C = Probation
	If B or C = comments:

Please attach action plan if one has been developed for your program.

2. Board pass rate, past 3 years - First time board pass rate, averaged over most recent 3 year period.

√	
	A = \geq 90 %
	B = 75-89%
	C = \leq 74%
	If B or C = comments:

3. Residency fill rate – My program is accredited for ___ resident positions.
 For the current training year, ___% of these positions are filled.

√	
	A = \geq 90 %
	B = 75-89%
	C = \leq 74%
	If B or C = comments:

4. Percent on-time graduation - ____% of residents who started training in my program who are expected to finish the program on time this academic year.

√	
	A = $\geq 90\%$
	B = 75-89%
	C = $\leq 74\%$
	If B or C = comments:

5. Percentage of training accomplished within UHS, VA, Christus-Santa Rosa, and SAUSHEC (WHMC and/or BAMC) facilities – Per rotation schedules for current training year. If changes are anticipated, please explain in comments section.

√	
	A = $\geq 70\%$
	B = 50-70%
	C = $\leq 49\%$
	If B or C = comments:

6. Faculty Staffing – Program Director's estimation of quality, quantity, and mix of teaching staff.

√	
	A = no problems, meets all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

7. Administrative Staffing – Program Director's estimation of quality and quantity of administrative support for GME mission.

√	
	A = no problems, meets all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

8. Hospital staffing – Nursing

Program Director's estimation of nursing staff's sufficiency to support adequate caseloads for training (please complete one box per facility, and label).

√	UHS
	A = no problems, meets all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

√	VA
	A = no problems, meet all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

√	Christus Santa Rosa
	A = no problems, meet all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

√	Other - which?
	A = no problems, meet all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

9. Hospital staffing – Technician and other support staff

Program Director's estimation sufficiency to support GME mission (please complete one box per facility, and label).

√	UHS
	A = no problems, meets all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

√	VA
	A = no problems, meet all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

√	Christus Santa Rosa
	A = no problems, meet all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

√	Other which?
	A = no problems, meet all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

10. Caseloads

Program Director's estimates, according to ACGME Program Requirements, board requirements (if different), or other documented standards.

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	A = no problems, meet all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

11. Equipment, Supplies, Space

Program Director's estimate according to ACGME Program Requirements, or other documented standards. Includes library, office space, call rooms, equipment, training tools, AV equipment, computers, specific space, etc.

√	
	A = no problems, meet all RRC requirements
	B = met RRC requirements at last review but may not meet them now, or in near future if current trends continue
	C = major problems that immediately threatens accreditation
	If B or C = comments:

12. Compliance with critical ACGME, JCAHO, UTHSCSA requirements for GME programs

Program Director determines that the program is in compliance with

- ACGME Institutional and Program Requirements – (www.acgme.org)
- UTHSCSA GME Policies (www.uthscsa.edu/gme)
- Responsibilities of the Program Director(www.uthscsa.edu/gme)

And has:

- appropriate educational Goals and Objectives and an educational curriculum* that is updated annually and is coming into compliance with teaching the ACGME general competencies
- written Resident Supervision Policy that includes a job description by year of what each resident is competent to do with regards to patient care, as required by JCAHO
- the G&O, curriculum, and program-specific policies are distributed to and used by the faculty and trainees, and a process is in place to distribute updates to policies throughout the year
- monitors resident duty hours and conditions, and is in compliance with its RRC program requirements regarding duty hours

* Curriculum must provide educational experiences so that residents develop the specific knowledge, skills, and attitudes to demonstrate: patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health; medical knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral)

sciences and the application of this knowledge to patient care; practice-based learning and improvement that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care; interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals; professionalism, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population; and systems-based practice, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system for health care and the ability to effectively call on system resources to provide care that is of optimal value.

In addition, programs must ensure that residents develop a personal program of learning to foster continued professional growth; participate fully in the educational and scholarly activities of their program; receive instruction in quality-assurance/performance improvement. and participate in appropriate components of the institution's performance improvement program. Programs must also ensure that autopsies be performed whenever possible and appropriate with a sufficient number of autopsies that represent an adequately diverse spectrum of diseases.

√	
	A = no problems, meet all requirements above
	B = <4 requirements, and will meet them within the next 4 months
	C = does not meet >4 requirements and will not be able to meet them within the next 4 months
	If B or C = comments:

13. Support Information

- I spend hours/month on Program Director tasks _____
- My administrative support (Program Coordinator, other clerical support) represents _____ FTE. (if you have 1 assistant full time, and another halftime, that would be 1.5 FTE)
- Allocated time and resources are adequate to meet all requirements listed in 12 above. Y or N
- The 3 greatest barriers to meeting all requirements listed in 12 above are:

Please attach any additional information you wish to include here, and return completed document to the GME Office, 567-4431.