Abstract

The ACGME requires accredited residency training programs to perform ongoing self assessment in order to maintain accreditation status. In addition to ensuring compliance, periodic self assessment gives training programs the opportunity to improve by incorporating input from a variety of traditional stakeholders, including trainees, program leadership, and core faculty members. Standard constructs designed to facilitate self assessment (e.g. the Program Evaluation Committee, the Annual Program Evaluation, and the Annual Resident and Fellow Surveys), however, fail to capture input from other, non-traditional stakeholders and do not always result in discrete, actionable recommendations for improvement.

Our novel self assessment process, termed the Continuous Residency Improvement Committee (CRIC), was designed to 1) identify and implement rotation-specific recommendations for improvement, 2) improve resident perception of the program’s receptiveness to feedback, and 3) address the ACGME mandate for self assessment.

Methods

-Residency rotations are reviewed on a 12-month cycle with one or two rotations reviewed each month
-Five reviewers (chief resident, emergency medicine resident, program director or assistant program director, core faculty member, and program administrator) examine key documents including Program Letters of Agreement (PLAs), orientation guides, and historical resident evaluations for the rotation under review
-Reviewers conduct interviews of key stakeholders, including non-traditional sources (e.g. nursing staff, residents from other specialties, and rotation coordinators) to identify areas for improvement with each rotation. Each reviewer uses a different standardized tool to conduct interviews
-The findings are collected and presented for residency-wide discussion at monthly meetings and then integrated into a final document highlighting strengths, areas of concern, and proposed improvements for each rotation
-This document is shared with the rotation director for feedback prior to negotiating final recommendations, which are endorsed by the department Chair and tracked for successful implementation on an annual basis by the CRIC

Results

-Fifteen rotations reviewed for 2015-2016 academic year
-Average of 4.4 recommendations proposed per rotation
-50% of proposed recommendations were achieved at one-year follow-up for all but two of the reviewed rotations
-Significant improvement in resident perception that the program uses feedback to improve compared to pre-implementation year
-Preliminary results from a survey of external rotation directors suggest process viewed as “valuable” and “improved [rotation director’s] ability to provide quality educational experience” to trainees

Limitations

- Lack of universal engagement on part of rotation directors
- Significant time investment required to implement
- Challenge to review large number of rotations within a single academic year

Conclusions

Our novel approach to self assessment through the Continuous Residency Improvement Committee (CRIC) provides a sustainable method to improve rotations and resident perception of the program’s receptiveness to feedback, while simultaneously addressing multiple ACGME mandates for self study. After one year of implementation, the CRIC process has identified and addressed a substantial number of rotation-specific recommendations for improvement. Preliminary results from a survey of rotation directors suggest the process is very well received. This process will be useful to other residency programs seeking to initiate a robust, systematic, and sustainable method for improving their educational offerings.