

University of Arizona College of Medicine-Tucson
Annual Institutional Review (AIR) - Executive Summary
February 2024

Introduction

In compliance with the ACGME Institutional and Common Program Requirements, the DIO must annually submit a written executive summary of the AIR to the Sponsoring Institution's Governing Body. The written executive summary must include a summary of institutional performance on indicators for the AIR; and action plans and performance monitoring procedures resulting from the AIR.

Institutional Performance Indicators

The GMEC reviews data and identifies common themes and strategies that could be addressed across programs at the institutional level. The Institution and individual programs participate in numerous activities that aim for continuous improvement. The following tools were utilized to identify common areas that require institutional action:

- New Institutional/Common Program Requirements for changes in the upcoming year
- GME mission statement
- Institutional ACGME resident and faculty surveys (including 3-year trends)
- Institutional accreditation status
- Institutional citations/areas of improvement
- Institutional milestones reports
- Previous year's Executive Summary, including identified AIR goals and progress toward meeting those goals
- Sponsored programs' accreditation statuses
- Sponsored programs' citations/areas of improvement
- Review of programs in special review
- Program APEs and identified action plans, and progress toward meeting action plan goals
- Self-Study reports (when applicable)
- Resident Grievance(s)
- CLER report and response(s)
- Quantity and quality of exceptionally qualified trainees
- GME office annual survey results
- Other relevant material as applicable

SWOT/PDSA

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| STRENGTHS + <ul style="list-style-type: none">• Set up a check and balance with subcommittees for special review programs that are more structured and assist with the early detection of programs• No citations• Programs are doing well• Committed faculty to education | WEAKNESSES – <ul style="list-style-type: none">• Lack of scholarly activity• Communication with residents and Banner• Ongoing struggles with clinical partners and tensions between clinical productivity and teaching responsibilities• Lack of “teaming” |
| OPPORTUNITIES + <ul style="list-style-type: none">• Banner to be more involved with communication• This communication with improve morale across the departments | THREATS – <ul style="list-style-type: none">• Understaffed• Hiring and onboarding process is too slow• Banner attrition |

Institutional Goals (2022-2023)

1. Interprofessional Teamwork skills modeled or taught ACGME Surveys - Patient Safety and Teamwork

PLAN:

1. Will meet with individual program directors (or as a group) for programs that are significantly below the national average for this area and review their specialty-specific requirements in this area with them.
2. These PDs will be asked to create a plan to address this.
3. Will meet with Banner leadership if needed if issues related to the CLE are identified as barriers to interprofessional teaming, particularly if related to specific program requirements
4. Will also plan for an upcoming Faculty Forum Faculty Development session to discuss this topic specifically.
 - a. Consider including other faculty and residents to lead this session

MONITORING:

- Will continue to monitor ACGME surveys for improvement
- Will monitor notification letters for citations and areas of improvement

2. Faculty members satisfied with the process for evaluation as educators ACGME Surveys – Faculty Teaching and Evaluation

PLAN:

1. Will meet with individual program directors (or as a group) for programs that are significantly below the national average for this area to understand any program specific barriers in this area.
2. These PDs will be asked to create a plan to address for their programs.

MONITORING:

- Will continue to monitor ACGME surveys for improvement
- Will continue to monitor notification letters for citations and areas of improvement

3. Participation in safety event investigation and analysis ACGME Surveys – Patient Safety and Teamwork

PLAN:

1. Will review Institutional Requirements for GMEC responsibilities of Oversight of I.B.4.a).(7) *“the provision of summary information of patient safety reports to residents, fellows, faculty members, and other clinical staff members. At a minimum, this oversight must include verification that such summary information is being provided. (Detail)*
2. Will discuss with the Chair of the GMEC Subcommittee of Patient Safety and Quality to consider rolling into the subcommittee’s current work
 - Will provide the subcommittee with a summary of ACGME survey results and CLER report when available
3. Will discuss with Dr. Gordon Carr and other Banner leadership as needed to ensure residents are integrated into clinical RCAs
 - Consider requiring the residents/fellows involved in the clinical encounter to participate in the hospital-level RCA.
4. Review ACGME Resources for QIPS assessments (Ex: QIKAT) for faculty development
5. Provide additional faculty development sessions at Faculty Forum on this topic
 - Review ACGME tools
 - Involve GMEC Subcommittee Chair and/or others with experience/expertise in this topic in faculty development
6. Consider developing institution-wide models that include all required steps of an RCA and interactive case discussions with program residents/faculty

MONITORING:

- Will continue to monitor ACGME surveys for improvement
- Will continue to monitor notification letters for citations and areas of improvement
- Ensure the process for GMEC oversight for ongoing monitoring

4. Residents satisfied with faculty members’ feedback

PLAN:

- Will meet with individual program directors (or as a group) for programs that are significantly below the national average for this area to understand any program specific barriers in this area.
- These program directors will be asked to create a plan to address for their programs.

- Consider a model for program directors to:
 - directly observe and provide feedback to teaching faculty on providing feedback to residents
 - ensure teaching faculty are using evidence-based methodologies such as One-Minute Preceptor, SNAPPS, etc.
- Consider asking program directors with positive outcomes in this area to help coach/mentor PDS as needed.

MONITORING:

- Will continue to monitor ACGME surveys for improvement
- Will continue to monitor notification letters for citations and areas of improvement

5. Institutional AIR Process

PLAN:

1. Have requested programs to nominate one resident/fellow to attend monthly resident/fellow forum meetings for greater diversity and insight from the residents and fellows.
2. Will resurvey the GME community anonymously in the fall to assess changes and solicit additional feedback.
3. Will continue with new processes for AIR/APE/ADS reviews. New checklist forms are being created to help ensure oversight of program data to the RCs.
4. Will survey program directors after implementation of the new peer review process as part of the APE/ADS oversight to assess satisfaction with the process and solicit feedback for improvement the following year.
5. GMEC member dinner planned for early fall to continue to build on the GMEC team and ensure continued open and honest communications.

MONITORING:

- Survey responses to surveys described in the above plan.
- Continued monitoring of program and institutional citations, improved program performance, and quality improvement efforts.

6. Communication Concerns between clinical campuses, separate MECs, GME Office

PLAN:

1. Will meet with communication leaders in COM and clinical departments to discuss best practices in communication in general.
2. Develop a newsletter to help provide regular and timely updates on relevant issues to the GME community
3. Website being redeveloped which will also include updated information and improved access to important GME information such as current GME policies and procedures.
4. Will include survey questions in annual GME community anonymous surveys to assess for improvement.

MONITORING:

- Survey responses to GME community surveys.