

SECTION: Graduate Medical Education Policies

ISSUED: November 29, 1999

SUBJECT: Internal Review Policy & Procedure

REVISED: June 11, 2002

July 28, 2005

December 20, 2007

PURPOSE:

I. CHARGE

Internal reviews function as an essential tool to evaluate Graduate Medical Education Programs. The review process provides periodic mid-cycle evaluations conducted at mid-point between ACGME reviews of programs to identify opportunities for change and improve the quality of programs to assure continued ACGME accreditation.

In the case of non-ACGME programs the timing of the first internal review will be set at the time of initial program approval by the Graduate Medical Education Committee (GMEC). The timing of subsequent internal reviews for non-ACGME programs will be scheduled based on the outcome of the GMEC deliberations when the internal review is presented to the committee.

II. PROCESS

Lifespan affiliated hospitals (Rhode Island Hospital, The Miriam Hospital and Bradley Hospital), designate to the Graduate Medical Education Committee the responsibility for the educational validity of the graduate medical education programs. The Graduate Medical Education Committee, through the internal review process, ensures that each specialty program fully meets the ACGME requirements for approval by the Residency Review Committee, or comparable standards for non-ACGME programs.

For ACGME Accredited Programs:

An Internal Review Committee, consisting of one GMEC member and one resident from within the Sponsoring Institution, but not from within the program being reviewed, and GME administrator(s), is appointed by the Graduate Medical Education Committee to conduct an internal review of each ACGME program in accordance with the following guidelines:

- Each Internal Review Committee will assess the following:
 - Compliance with the Common, specialty/subspecialty-specific Program and Institutional Requirements
 - Educational objectives and the effectiveness in meeting those objectives;
 - Educational and financial resources
 - Effectiveness in addressing areas of non-compliance and concerns in previous ACGME accreditation letters of notification and previous internal reviews
 - Effectiveness in assessing educational outcomes in the ACGME general competencies (See attachment 1)

- Effectiveness in using evaluation tools and outcome measures to assess a resident's level of competence in each of the ACGME general competencies
- Annual program improvement efforts in:
 - Resident performance using aggregate resident data
 - Faculty development
 - Graduate performance including performance of program graduates on the certification examination
 - Program quality
- A site visit to the program will be scheduled 3 months prior to the ACGME designated midpoint date
- The Program Director will complete the appropriate program PIF and GME General Competencies Assessment prior to the program visit date for review by the Internal Review Committee.
- Program Housestaff will be asked to complete a House staff Survey in preparation for the Internal Review program visit.
- Internal Review Committee materials to be reviewed prior to the program visit
 - Internal Review Policy & Procedures
 - Completed PIF
 - Completed General Competences Assessment
 - Most recent GMEC internal review summary
 - Program Director's response to GMEC internal review
 - Most recent ACGME accreditation status notification
 - Program Directors response to ACGME notification
 - Additional correspondence to/from ACGME (if appropriate)
 - ACGME institutional requirements summary (See attachment 2)
 - Completed Housestaff surveys
 - Recent annual program evaluation meeting minutes
- In addition to the materials listed above the Internal Review Committee will review Program documents at the program visit (See attachment 3).
- At the program visit the Internal Review Committee will interview the program director and program coordinator, key faculty members and housestaff (at least one peer-selected resident/fellow from each level of training in the program) and other individuals if deemed necessary

After the program visit, the Internal Review Committee will prepare a report for presentation and review by the Graduate Medical Education Committee by the mid-point date established by the ACGME.

Internal Review Report Format:

- Information to be included in the report:

- Name of the program reviewed, program director, Department, Chief/Chair of Division/Department, length of program, number of approved positions
- *Accreditation Effective Date, Next Review Date, ACGME assigned midpoint, program visit date and date of GMEC approval*
- Names and titles of Internal Review Committee members
- Description of the internal process
- List of individuals interviewed
- List of Program Documents reviewed
- List of previous citations, areas of non-compliance or concerns from previous accreditation status letter with a description of the program's efforts to address each issue, and the Internal Review committee's recommendation for continued improvement if appropriate
- Internal Review Committee's findings with regard to compliance with Program Requirements
- The Graduate Medical Education Committee cover letter, summary of recommendations and full report are forwarded to the Program Director
- A written response/action plan to the Graduate Medical Education Committee is required from the Program Director

If a Program does not have any housestaff enrolled at the mid-point of the review cycle, a modified internal review of the program will be conducted to ensure that the program maintains adequate faculty and staff, resources, clinical volume, and other curricular elements to be in substantial compliance with all requirements prior to enrolling a resident/fellow. The process described above will be followed except that the Internal Review Committee will meet only with the Program Director and Coordinator. After enrolling a resident/fellow, a full Internal Review will be completed within the second six-month period of the house officer's first year in the program.

For Non-ACGME Programs

An Internal Review Committee, consisting of one GMEC member and one resident from within the Sponsoring Institution, but not from within the program being reviewed, and GME administrators, is appointed by the Graduate Medical Education Committee that will conduct the internal review in accordance with the following guidelines:

- The Internal Review Committee will assess the following:
 - Non-ACGME Program Requirements Summary (*Attachment 4*)
 - Educational objectives and the effectiveness in meeting those objectives;
 - Educational and financial resources
 - Effectiveness in addressing areas of non-compliance and concerns in previous internal reviews
 - Effectiveness in educational outcomes in the ACGME general competencies (See attachment 1)
 - Effectiveness in using evaluation tools and out measures to assess a resident's level of competence in each of the ACGME general competencies
 - Annual program improvement efforts in:

- Resident performance using aggregate resident data
 - Faculty development
 - Graduate performance including performance of program graduates on the certification examination
 - Program quality
- A site visit to the program will be scheduled at the date designated by the GMEC
 - The Program Director will complete a Program Requirements Summary and GME General Competencies Assessment prior to the program visit date for review by the Internal Review Committee.
 - Program Housestaff will be asked to complete a House staff Survey in preparation for the Internal Review program visit.
 - Internal Review Committee Materials to be reviewed prior to the program visit
 - Internal Review Policy & Procedures
 - Completed Program Requirements Summary (See attachment 4)
 - Completed General Competencies Assessment
 - Most recent GME internal review summary
 - Program Directors response to GME internal review
 - Completed Housestaff surveys
 - Recent annual program evaluation meeting minutes Institutional Requirements summary
 - In addition to the materials listed above the Internal Review Committee will review Program Documents at the program visit (See attachment 3).
 - At the site visit the Internal Review Committee will interview the program director and program coordinator, key faculty members and residents (at least one peer-selected resident from each level of training in the program) and other individuals if deemed necessary

After the program visit, the Internal Review Committee will prepare a report for presentation and review by the Graduate Medical Education Committee

Internal Review Report Format:

- Information to be included in the report:
 - Name of the program reviewed, program director, Department, Chief/Chair of Division/Department, length of program, number of approved positions
 - Date of Site Visit
 - Names and titles of Internal Review Committee members
 - Description of the internal process
 - List of individuals interviewed
 - List of Program Documents reviewed
 - List of previous citations, areas of non-compliance or concerns from previous Internal Reviews with a description of the program's efforts to address each

issue, and the Internal Review committee's recommendation for continued improvement if appropriate

- Internal Review Committee's findings with regard to compliance with Program Requirements
- The Graduate Medical Education Committee prepares a cover letter, summary of recommendations and the final full report, which are forwarded to the Program Director

A written response/action plan to the Graduate Medical Education Committee in response to the report is required from the Program Director