**ETSU Graduate Medical Education Policies**

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| Section Program Policies & Procedures | Effective 7/1/2015  Revised |
| Policy GME Special Review Policy | Responsibility Designated Institutional Official |
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| Policy  The GMEC has established a process for conducting Special Review of programs. An individual program may be selected for Special Review based on underperformance, by request of its program director, or at the direction of the GMEC or DIO. Any program with an ACGME accreditation status of continued accreditation with warning or probationary accreditation will undergo Special Review.  Criteria used in identifying underperformance include but are not limited to:   1. Program Attrition    1. Change in Program Director more often than once every two years    2. Decrease in core faculty >10% each year for two years    3. Residents/fellows withdrawing, transferring, or dismissed >10% for two consecutive years 2. Program Changes    1. A major participating site has been added or removed    2. Consistent incomplete resident/fellow complement for two years    3. Major curricular changes 3. Scholarly Activity    1. Identified inadequate scholarly activity for either core faculty or residents/fellows 4. Board Pass Rates    1. Falling below the accepted specialty threshold over a three year period 5. Clinical Experience    1. Any significant changes in adequacy of clinical or didactic experience 6. ACGME Surveys    1. Poor response rate    2. Resident/fellow or faculty overall evaluation of the program    3. Problematic survey items    4. Repeated survey items previously identified 7. ACGME Responsibilities    1. Incomplete or inaccurate reporting of milestones or annual updates    2. Inability to meet common and program specific requirements    3. Inability to demonstrate success in the CLER focus areas    4. Incomplete or inaccurate annual program evaluation reports   The DIO will convene a panel for each Special Review. The panel will consist of the DIO, the assistant deans in GME, and a team of participants from another program. Those individuals from another program will consist of a program director or associate program director, program coordinator, and resident/fellow member.  Based on the identified concern, the program being reviewed may be asked to submit documentation prior to the Special Review visit that will help the panel gain clarity. Information used in the review process shall include:   * The current ACGME Common, specialty/subspecialty-specific Program, and Institutional Requirements * Letters of notification from the most recent ACGME review and any progress reports submitted to the RRC * Reports from previous Special Reviews and old internal reviews * Previous Annual Program Evaluations * Results from ACGME Resident/Fellow and Faculty Surveys * Other materials the panel considers necessary and appropriate.   The Special Review panel will conduct interviews with the Program Director, key faculty members, selected residents/fellows from each year of training, and other individuals deemed appropriate. The panel will submit a written report to the program leadership and GMEC with recommendations of the panel. The DIO and GMEC will work with the program director on making necessary improvements, continuing to monitor outcomes to ensure the program is meeting expectations.  The Program Director will provide an initial response to the report with specific details to demonstrate how the program is progressing in addressing concerns. Subsequently, the DIO will schedule additional reports from the program at future GMEC meetings as the program continues to make improvements based on individual program needs and the amount of progress made with action plans. | |