

# The Orthopaedic Surgery Site Visit

*Richard J. Haynes, MD*  
*Steven P. Nestler, PhD*

*ACGME Field Representative*  
*Orthopaedic RRC Executive Director*



# Who is the ACGME?

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- The ACGME is ***YOU***
- The Residencies & Fellowships have Created the Requirements for Accreditation
- Voluntary Participation
- Funded by the Residencies & Fellowships



# ACGME

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- Board of Directors
  - Oversight of the 28 RRCs
- Residency Review Committees
  - 28 including Orthopaedic Surgery
  - **Only Orthopaedic Surgeons make Orthopaedic decisions**



# Orthopaedic Surgery RRC

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- Peter Stern, MD Univ. of Cincinnati
- Steve Albanese, MD SUNY Syracuse
- Jeff Anglen, MD Indiana Univ.
- Michelle James, MD Shriners Hosp., Sacramento
- David Lichtman, MD John Peter Smith, Ft. Worth, TX
- Terry Peabody, MD Univ. of Chicago
- Vince Pellegrini, MD Univ. of Maryland
- Keri Reese, MD Resident UC Irvine
- Craig Roberts, MD Univ. of Louisville
- Lisa Taitzman, MD Univ. of Washington
- Shep Hurwitz, MD ex-officio ABOS



# Orthopaedic Surgery RRC

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- Members Have Written All of the Orthopaedic Surgery Specific Requirements
- Make All Accreditation Decisions & Provide All Citations



# Residency Accreditation Process

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## ACGME

(Accreditation Council for Graduate Medical Education)

### *Voting Membership*

AMA (4) AAMC (4) AHA (4) ABMS (4) CMSS (4)  
Residents (2) Public (3) RRC Chairmen's Council (1)

### *Non-voting Membership*

Federal Government (1)

## Residency Review Committee

### *Membership*

AMA (3), ABOS (3), AAOS (3)  
Resident (1)

## *Program Information Forms*

### *Prepared by*

Program Director  
and  
Institutional  
GME Representative

## *Survey Report*

### *Prepared by*

Field Staff  
or  
Specialist Site Visitor

Based upon *Program Information Forms*, interviews with faculty members, administrators and residents, and—where appropriate—a tour of the facility.



ACGME

**Next Meeting):** June 26-27, 2009

# ACGME Field Representatives

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- 32
- 4 Orthopaedic Surgeons
  - William Robertson, MD Washington, DC
  - Thomas Renshaw, MD Hilton Head, SC
  - Carl Stanitski, MD Charleston, SC
  - Richard Haynes, MD Phoenix, AZ



# Richard Haynes

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- 1995-2001 Orthopaedic Surgery RRC
- 2001-2004 Specialty Site Visitor
- 2005-2008 Orthopaedic Surgery RRC
- 2007- ACGME Field Staff



# RRC Staff

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- **Georgia Andrianopoulos**  
**Executive Director**

[gda@acgme.org](mailto:gda@acgme.org)

- Steve Nestler, PhD  
past Executive Director (June 2009)

[spn@acgme.org](mailto:spn@acgme.org)

- **Jenny Blomgren**

[jblomgren@acgme.org](mailto:jblomgren@acgme.org)

**Accreditation Administrator**

- Billy Hart  
past Accreditation Administrator (January 2009)

[bhart@acgme.org](mailto:bhart@acgme.org)



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# The Accreditation Process

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- Site Visit Scheduled
  - Advance Notification Letter
  - Site Visitor Instruction Letter
- Program Information Form
- Site Visit Report
- RRC Presentation and Decision



# Notification Letter

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- 100 to 110 days in advance
  - Change requests within 14 days of receipt of Advance Notice letter
- Later requests with DIO approval subject to \$2,750 fee for late notice



# Notification Letter

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- Preparing the Site Visit Documents
  - Program Information Form (PIF)
  - 4 Hard Copies
  - **Mail One to Site Visitor to Arrive 14 Days Before the Site Visit Date**



# Site Visitor Letter

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- From Site Visitor
  - 6 to 8 weeks Prior to Site Visit Date
  - Instructions for Visit
  - Contact Information
  - Address for Mailing PIF
- Proposed Schedule
- Instructions for the Site Visit



# Site Visit Letter

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- Conference Room with a large central table
- Participants turn off cell phones and beepers
- Typed copy of the final schedule **with names and titles of the people.**
- Contact information for the day of the Site Visit.
- Directions to the Medical Center, parking, and to the meeting room.
- Anything special that I need to know about parking, security, finding the meeting room, etc.
- Request for Changes in the Proposed Schedule



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# Proposed Schedule

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- Significant Orthopaedic Faculty
  - All Hospitals with 4 Month Rotations
  - No More than 10 Faculty Members
- Residents
  - Peer Selected from all Levels of the Program
  - 10-12 Residents



# Content of the Review

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- The Orthopaedic Surgery RRC Determines what is in the Orthopaedic Portion of the PIF and What is Reviewed at the Time of the Site Visit
- The Site Visitor Makes No Determinations or Judgments and Expresses No Opinions
- The RRC makes All Decisions



# Program Information Form

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- Description of how your Program is Organized
  - Living Document Requiring Updating
  - Not a Document Created every 2-5 Years

# Program Information Form

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- Updating
  - Board Certification and Licensure Data
  - Faculty Curriculum Vitae
    - Role in the Program
    - Refereed Publications in last 5 years
  - No place for Block Diagram
    - Add as Addendum
- Follow Directions
- Read Program Requirements
- DIO Review



# ACGME Resident Survey

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- How has the Program Utilized the Survey Results?



# PIF: Change in Complement

**ACGME Accredited Data Collection Application - Mozilla Firefox**

File Edit View History Bookmarks Tools Help

https://www.acgme.org/ads/main/default.asp

ACGME | Accreditation Council on Graduate Medical Education

### RESIDENT APPOINTMENTS

**NUMBER OF POSITIONS - [\[edit\]](#) [\[refresh\]](#)**

Positions	Year 1	Year 2	Year 3	Year 4	Year 5	TOTAL
Number of ACGME Approved Positions *	5	5	5	5	5	25
Number of Filled Positions **	0	0	0	0	0	0

\* Requests for complement change must be made by clicking "Approved Positions" in the "Request Changes" section. Requested changes will automatically appear in the table above for programs with upcoming site visits.

\*\* Includes residents that Started program Off Cycle (if applicable). The total number of Filled Positions should not include combined residents, however they should be counted in the ACGME approved positions. The combined residents should be logged at the individual combined program. Once entered in the combined program these residents will appear below the core program residents.

### ACTIVELY ENROLLED

Name	Program Start Date	...
None.		

\* Indicates resident was accepted as a visitor.  
\*\*(y/n) Did you obtain documentation for transfers only?

**If you are requesting an increase in resident complement, do so in Resident Appointments Section Submitted Rationale belongs here also**

Find: stern Next Previous Highlight all Match case

Done www.acgme.org Ukraine (most): Wednesday, 5:24pm Mostly Cloudy, 61°F 61°F

# Program Information Form

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- Your Programs Presentation of Itself to the RRC
  - Take Advantage of the Opportunity
  - Clarity, Accuracy and Completeness
  - The Site Visitor and RRC Reviewer will spend a great deal of time reviewing your PIF Presentation



# Surgical Operative Logs

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- Program Director responsibility to provide Education and Oversight (Monitoring Resident Experience)
- Current Procedural Terminology (CPT) Rules for Correct Coding of Procedures



# Day of Site Visit

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- Timeliness and Flow
  - Turn off Pagers
- PIF Review
  - Corrections and Clarifications
  - Clarity to Site Visitor necessary for Clarity to RRC
  - Corrections to PIF
    - Occasionally at Time of Site Visit
    - Submitted within a week after visit
- Document Review



# Documentation Review

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- Have Documents Immediately Available
- Mark Area Requested for Review



# Document Review

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- **Documentation of Internal Review**
  - **Date (Relationship to Midpoint)**
  - **Participants' Titles**
  - **Type of Data Collected**
  - **Date of Review by the GMEC**



# Document Review

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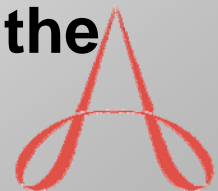
- **Overall Educational Goals of the Program**
- **Competency-Based Goals & Objectives for Each Assignment at Each Educational Level**



# Document Review

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- **Current Program Letters of Agreement Between the Program & All Participating Sites**
  - **Identify the Faculty with Educational & Supervisory Responsibility for the Residents**
  - **Specify Faculty Responsible for Teaching, Supervision, & Formal Evaluation of the Residents**
  - **Specify the Duration & Content of the Experience**
  - **Reference the Policies/Procedures that govern Resident Education during the rotation**
  - **Dates less than 5 Years Old & Signatures of the current Responsible Individuals**



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# Document Review

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- Files of Current Residents who have Transferred into the Program
  - Documentation of Previous Experiences & Summative Competency-Based Performance Evaluations
- Evaluations Showing Use of Multiple Evaluators
  - Faculty, Peers, Patients, Self, & Other Professional Staff)



# Document Review

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- Final (Summative) Evaluation of Residents
  - Documenting Performance During Final Period of Education
  - Verifying that the **Resident has Demonstrated Sufficient Competence to Enter Practice Without Direct Supervision**
- **Completed Annual Written Confidential Evaluation of the Program by the Faculty**



# Documentation Review

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- **Documentation of Program Evaluation and Written Improvement Plan**
- Documentation of Resident Duty Hours

# Site Visit Interviews

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- Chair, DIO & Faculty
  - Sequentially in One Conference Room
- Residents
  - All present at Appointed Time
    - Truly Peer Selected
  - Interview is not Limited by Time
  - Tours dictated by Residents
- Follow-up with Program Director & Coordinator
  - 3 PIF Copies placed in Envelope by Site Visitor
  - **The Site Visitor Cannot and Should Not Predict the RRC Decisions**



# Resident Interviews

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- Confidential
  - No Report to Program Director Without Resident Permission
- Based on Program Requirements
- Based on ACGME Resident Survey
  - Verification of Survey Results on the Day of the Survey
- Residents Determine Tours
- No Identity of Residents in Report



# Site Visit Report

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- Objective Verification of Program Information Form
- Clarification of Program to the RRC
- Documentation of Interviews
- ACGME Resident Survey Verification with Residents
- **No Site Visitor Opinions, Editorial Comments or Recommendations**
- Final When Filed (Usually One Week)



# Site Visitor

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- Charge is Objective Observational Verification and Clarification
- “Voice of the Program to the RRC”
  - What is the Message the Program Wants to Present to the RRC?



# RRC Meeting

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- Site Visitor cannot change or Add to Report once Filled
  - No Further Input in Any Manner
- Two RRC Members Review PIF & Site Visit Report and Make Recommendations
- Committee Makes Decision
  - Based on Substantial Compliance with the Program Requirements



# RRC Decision Options

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- Defer for Further Information
- Accreditation
  - Time until Next Site Visit
  - Citations
- Proposed Adverse Action
  - Probation
  - Withdrawal of Accreditation
- Program Response to Proposed Adverse Action
  - Sustain Citations and Action
  - Rescind Citations and Action
- Appeal Process



# Nine “Red Flags”

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- Nine “Red Flags” in Accreditation Site Visits and Reviews
  - Barbara Bush, PhD, William Robertson, MD & Ingrid Philibert, PhD
  - ACGME-Bulletin, February 2008
  - [www.acgme.org](http://www.acgme.org)



# Nine “Red Flags”

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1. Lack of Program Leadership
2. Lack of Program Infrastructure for Teaching & Evaluation
3. Lack of Appropriate Volume & Variety of Patients
4. Problems with Resident Recruitment and/or Retention
5. Lack of Dedicated Teachers



# Nine “Red Flags”

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6. Lack of Meaningful Didactics
  7. Lack of Financial & Human Resources
  8. Service has a Higher Priority than Education
  9. Lack of Preparation for the Accreditation Process
- Lack of faculty and/or resident scholarship



# Duty Hours

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- Institute of Medicine Report on Resident Duty Hours
  - December 2008
- The report noted that duty-hour limits frequently are violated and underreported
- “Underestimation of noncompliance” due to the risk of disaccreditation
- Increased policing by the ACGME, Joint Commission and Centers for Medicare & Medicaid Services.



# Personal Experiences

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- Late &/or Incomplete PIFs
- Blank CVs
- Expired Medical Licenses
- Lapsed & Inaccurate Board Certification
- Ten Year Old References
- Changed Citations
- Incomplete PLAs
- Resident Intimidation
- Interview No Shows
- Request Resident Increases at end of SV



# Impressive Observations

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- Preparation for the Site Visit is an Opportunity for Program Self-Reflection
- Problems Identified & Corrected During Preparation for the Site Visit
- ACGME Resident Survey Addressed Prior to Site Visit



# ACGME Site Visit

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- Your Opportunity to Send the Residency Review Committee the Message That You Want !
- It is a True Pleasure to Review and Report Well Prepared Programs that Substantially Comply with the ACGME Program Requirements
- GME at its Finest

