PURPOSE

The ACGME's Institutional Requirements charge the GMEC with demonstrating effective oversight of programs to ensure compliance with ACGME and UCLA GME requirements. This process must include a protocol that:

• establishes criteria for identifying underperformance; and,
• results in a report that describes the quality improvement goals, the corrective actions, and the process for GMEC monitoring of outcomes.

SCOPE

This policy applies to all UCLA-sponsored ACGME-accredited residency and fellowship programs at risk for underperformance, violation of ACGME requirements and other special circumstances.

POLICY

Special Review
Criteria for initiating a special review include one or more of the following:

A. ACGME Letter of Notification of Accreditation indicating:
   1. Accreditation with Warning
   2. Probation
   3. Proposed Withdrawal
B. Inquiry from ACGME Office of Resident Affairs
C. Annual ACGME Resident Survey identifying program compliance of less than 80% in the clinical work hours domain.
D. Annual ACGME Residents and/or Faculty Survey program means equal or below 70% in domains excluding those domains in which the majority of the programs have equal to or less than 70%.
E. Trending data from Annual ACGME or GME Resident or Faculty Surveys indicating concerns in the learning environment
F. Annual Program Evaluation and Improvement Plans that fail to satisfactorily address required elements, such as current citations, areas for improvement, and/or issues raised from prior Special Reviews.

G. Two or more changes in Program Directors during the length of the training program.

H. Request from the Designated Institutional Official, including review based on concerns raised by Residents or Faculty.

I. Request from the Program Director.

J. As per majority vote of the GMEC for all other circumstances.

Special Review may be deferred at the recommendation of the DIO with approval by the GMEC.

PROCEDURE

I. Special Reviews include the following components:
   a. Analysis of the following documents:
      1. Documentation supporting program underperformance
      2. Most recent Letter of Notification
      3. Most recent ACGME Resident and Faculty Survey
      4. Most recent GME Resident and Faculty Survey
      5. Most recent Annual Program Evaluation and Improvement Plan
      6. Program Requirements in effect at the time of underperformance
      7. Additional documents appropriate to the criteria for underperformance as determined by the Special Review Committee
   b. Interviews with those involved and/or potentially affected including Residents, Core Faculty, and other key individuals as identified
   c. Review and discussion by the Special Review Committee resulting in recommendations and remediation action plans.
      i. Action Plans will be developed by the program under review and will include recommendations to the Special Review Committee
      ii. Action Plans must contain reporting structure, monitoring procedures, and implementation timelines.
      iii. Actions Plans must include a description of the improvement goals, corrective actions, and the process for GMEC monitoring of outcomes.

II. The Special Review Committee reports to the GMEC for approval of the proposed Action Plan, and for ongoing monitoring by the GMEC to ensure Action Plan completion and effectiveness.

III. The Special Review Committee shall consist of a GMEC faculty representative, GMEC resident representative, and GME staff representative.

FORMS
SPECIAL PROGRAM REVIEW REPORT TEMPLATE

I. Program Identification

Program:
Accreditation Status:
Next Self-study date:
Resident complement:
Date of Special Review Interviews:
Date Special Review Report Approved by GMEC:

II. Membership of Special Program Review Committee by name and position including year of training for any Resident/Fellow members:

III. Names of individuals interviewed by name and position including year of training for peer-selected Residents/Fellows:

IV. Materials Reviewed

REQUIRED
Documentation supporting program underperformance
Letter of Notification
ACGME Resident and Faculty Survey
GMEC Resident and Faculty Survey
Annual Program Evaluation and Improvement Plan
ACGME Program Requirements

OPTIONAL (Check all applicable for this review)
Board Passing Rates
Block Diagrams
Case Logs
Conference Schedule
Evaluation Tools
GMEC Minutes
Goals and Objectives
Milestone Data
QI/PS projects and outcomes
Program Policies
Resident/Faculty Call Schedules
Resident Files
Other ____________________________

V. Format of Interviews
VI. Circumstance(s) requiring Special Review

VII. Status of corrective action(s) to Letter of Notification

VIII. Status of corrective action(s) to ACGME and/or GME Resident/Faculty Surveys

IX. Annual Program Evaluation and Improvement Plan

X. Concerns identified by the Special Program Review Committee from materials reviewed and interviews that must be addressed to the GMEC in a written corrective action plan

XI. Summary Statement

XII. Recommendation for submission and GMEC monitoring of Program Director’s corrective action plan to concerns identified in Section X of this report

CONFIDENTIALITY OF SPECIAL REVIEW DOCUMENTS

The Special Program Review is a peer-review activity conducted by the GMEC functioning as a Subcommittee of the Attending Staff Association and its Executive Committee. Each Special Program Review Committee member will be required to sign a statement of confidentiality.

REFERENCES

ACGME REQUIREMENTS (Institutional Requirements (I.B.6.)
I.B.6. The GMEC must demonstrate effective oversight of underperforming program(s) through a Special Review process. (Core)
I.B.6.a) The Special Review process must include a protocol that: (Core)
I.B.6.a).(1) establishes criteria for identifying underperformance; and, (Core)
I.B.6.a).(2) results in a report that describes the improvement goals, the corrective actions, and the process for GMEC monitoring of outcomes. (Core)
CONTACT

Kate Perkins, MD, PhD  
Associate Dean for Graduate Medical Education, Designated Institutional Official  
David Geffen School of Medicine, University of California at Los Angeles

REVISION HISTORY

Effective Date: 06/25/2018  
Revised:

APPROVAL

Graduate Medical Education Committee  
David Geffen School of Medicine, University of California at Los Angeles

Kate Perkins, MD, PhD  
Associate Dean for Graduate Medical Education, Designated Institutional Official  
David Geffen School of Medicine, University of California at Los Angeles

Clarence Braddock, III, MD, MPH, MACP  
Chief Medical Education Officer of UCLA Health System, and  
Vice Dean for Education UCLA David Geffen School of Medicine