

# *Teachable Moments*

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# Disclosure

Janice Piazza, MSN MBA

No Disclosures

Ron Amedee, MD

- No disclosures
- Volunteer member ACGME Institutional Review Committee (IRC)
- Volunteer member AIAMC Board – Past President
- Content of this presentation represents only my current institutional GME practices as DIO of Ochsner Health System



# Ochsner Health System

Located in New Orleans, serving the Gulf South Region

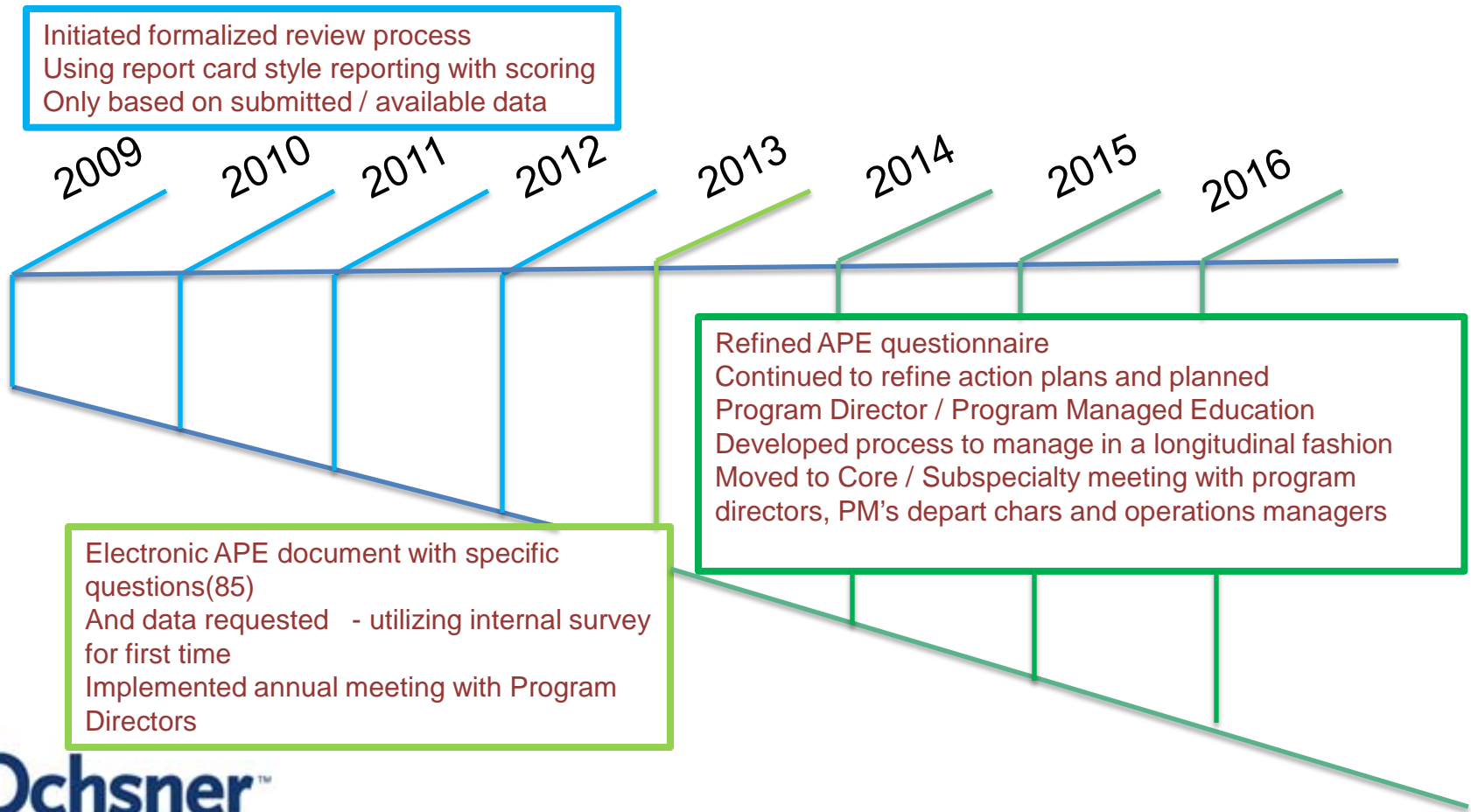
- 12 Hospitals
- 40 Clinic locations
- 1,000 employed physicians/  
80 medical specialties
- 16,000 Employees
- 1.4 Million Patient Contacts  
annually
- 400,000 Unique Patients
- \$2 Billion in Net Pt Revenue
- \$41 Million IME + DGME

- 280 Residents in 25  
programs
- 600 Residents Rotators from  
joint / affiliate programs
- UME: 500 student months
- Nursing: 1,000 students
- Allied Health: 1,500 students
- University of Queensland,  
Ochsner Clinical School,  
240 students at Ochsner

# Objectives

- Apply basic improvement principles to current annual program and sponsoring institution requirement for Annual Program Evaluation (APE) and Annual Institutional Review (AIR)
- Apply basic improvement principles to ACGME self study preparation
- Develop effective program Aim Statements and executable Action Plans to drive program improvement
- Create a model for embedded performance improvement education

# Ochsner's evolution in this process

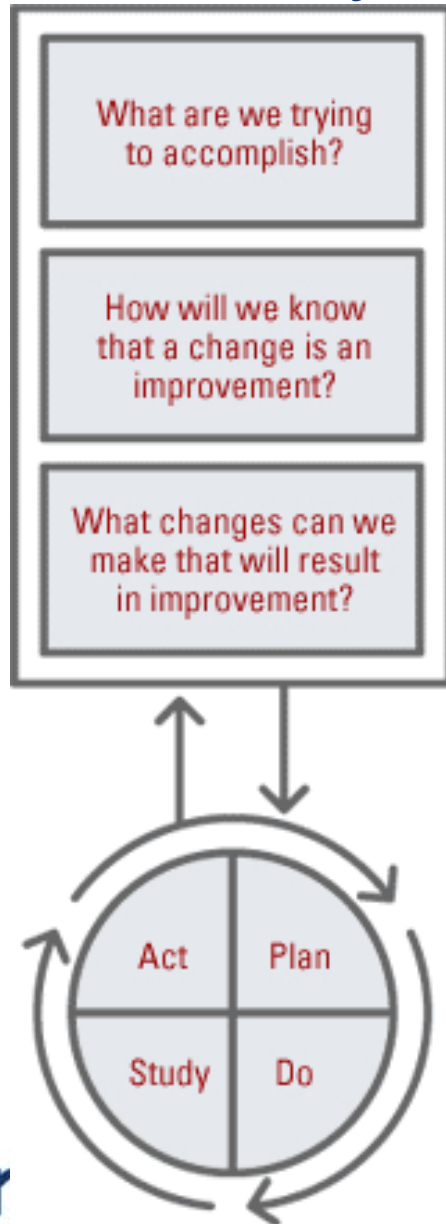


# Building to the Self Study Visit

- To be successful the elements can not be viewed as independent activities
- Think Longitudinal Continuum
- Think – we are telling a story
- Apply principles of performance improvement



# Using Small Cycles of Change - PDSA



*Think of each academic year in your Continued Accreditation a cycle of change*



# Self Study Timeline

- Review / Revise APE questionnaire April
- Publish electronically for program completion May
- Program Evaluation Committee ( PEC ) meets June - Aug
- GME Admin / DIO Review
- APE questionnaire
  - ACGME survey results
  - Internal anonymous surveys
  - Board Pass Rates
  - ADS Updates
  - Program Action Plan
- Clarifications / additional information requested by DIO Aug - Sept
- Program meetings Sept - Nov
- Final DIO Report / AIR discussion at GMEC Dec – Jan
- Approved report to Executives and Organized Medical Staff Jan - Feb



# Start with the End in Mind :

## What's your Aim Statement ?

- Key elements of a strong Aim Statement
- What is it that you aspire to be?– a stretch, but doable
- Who do you recruit?
- What do you teach?
- Who do you serve?
- What makes your program unique?
- How will you know that you have gotten there?



# Aim Statement

- Are set and revisited/revised as part of the Annual Program Evaluation (APE)
  - **Relevant considerations to include:**
    - ⊙ Who are our residents/fellows?
    - ⊙ What do we prepare them for?
      - = Fellowship
      - = Academic practice
      - = Leadership - other roles (quality/safety)
    - ⊙ Who are the patients/populations that we care for?
    - ⊙ What is the relationship between the core and related subspecialties?

# Table Exercise #1

Share Aim statements  
Identify which is the best and why



# Next Step in the Cycle: SWOT



- SWOT

- Have individuals complete prior to APE, then create an aggregate (prevents too much “group think”)
- Be critical, but also acknowledge what’s really working well and celebrate strengths
- Frame Weaknesses as Opportunities

**A Particular Challenge:** How to continue to motivate and give direction to high performers?

**The Opportunity:**

How will high level of performance be sustained (what makes it great and how do we keep doing that)? Identify drivers of great performance

What can be/should be spread to other programs?

# Table Exercise #2

## Institutional SWOT



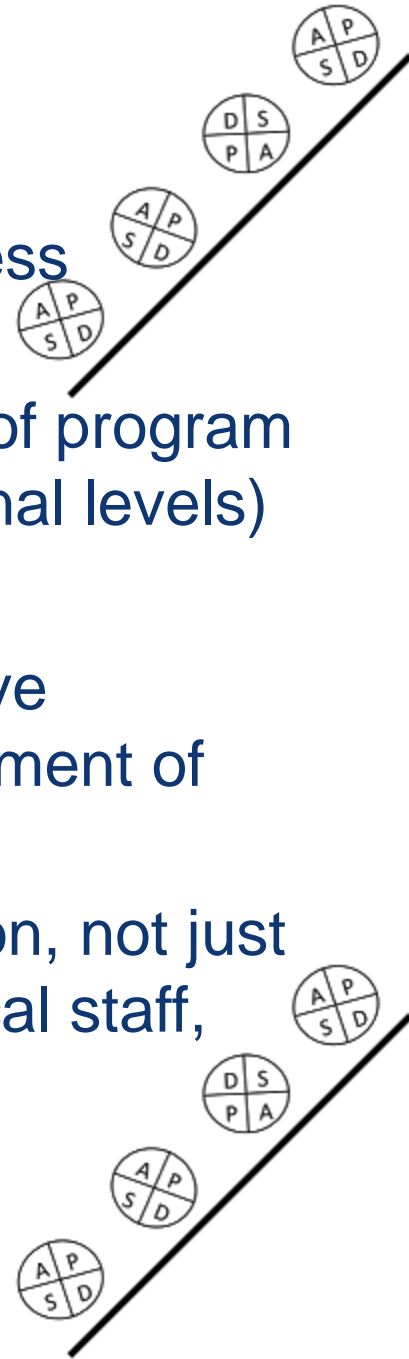
# Table Exercise #3

- What's your action plan?
  - Base action plan on SWOT developed at your table
  - Develop 2 goals/metrics for the sponsoring institution presented



# Next Step in the Cycle

- Integrate cores and subspecialties in the process together - through action plans
- Define a process for monitoring and follow up of program specific action plans (at program and institutional levels)
- Schedule for recurring review
- Critique process annually to continue to improve outcomes and relationship to ongoing improvement of your Clinical Learning Environment
- Share AIR at multiple levels of your organization, not just within GME - annual report to organized medical staff, department chairs, and governing body



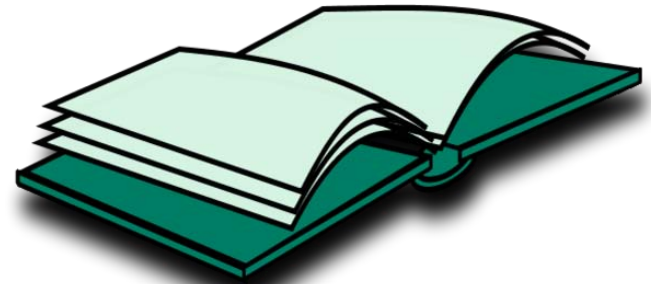
# How to think about the Annual Program Evaluation

- Each APE conducted during the programs accreditation cycle is a component of your Self Study (a chapter in your story)
- The Aim Statement should be the primary point of assessment much like the mission statement of the organization – the base for continued program development
- The first piece of information reviewed by the PEC should be ***prior years action plan*** – did we do what we said we would – if yes – document the out comes – if not , why not



# Putting the pieces together

- The Self – Study will require a narrative describing the achievements and challenges during the accreditation period
- If you write this summary every year – doing the self study narrative becomes much easier - think of it as writing a book with each academic year as a chapter
- This creates the longitudinal continuum -- if approached every year – at the time of the self study visit – the work is done



# Annual Program Evaluation Meeting Minutes

CPR: V.C.2. The program, through the PEC, must document formal, systematic evaluation of the curriculum at least annually, and is responsible for rendering a written, annual program evaluation. (Core)

Academic Year (AY)

Program:

Meeting Date:

## I. Resident/Fellow Complement:

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
Positions Approved	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Filled	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## II. Program Aim:

## III. Program Year in Summary – (past academic year):

## IV. Major Program Changes: (check all that apply)

- Program Director Change (eff. date: )
  Change in Curriculum  
 Program Complement Increase
  Added New Rotation  
 Program Complement Decrease
  Added New Participating Site  
 Other, please explain:

## V. Review of ACGME Resident annual Survey Results: (if applicable)

3- Highest Scoring	Score	3- Areas for Improvement	Score
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## VI. New Innovations Annual Survey Results: (Overall findings)

vi.a. Areas for improvement not identified above from ACGME survey

vi.b. Trends for significant issues identified in survey written comments:

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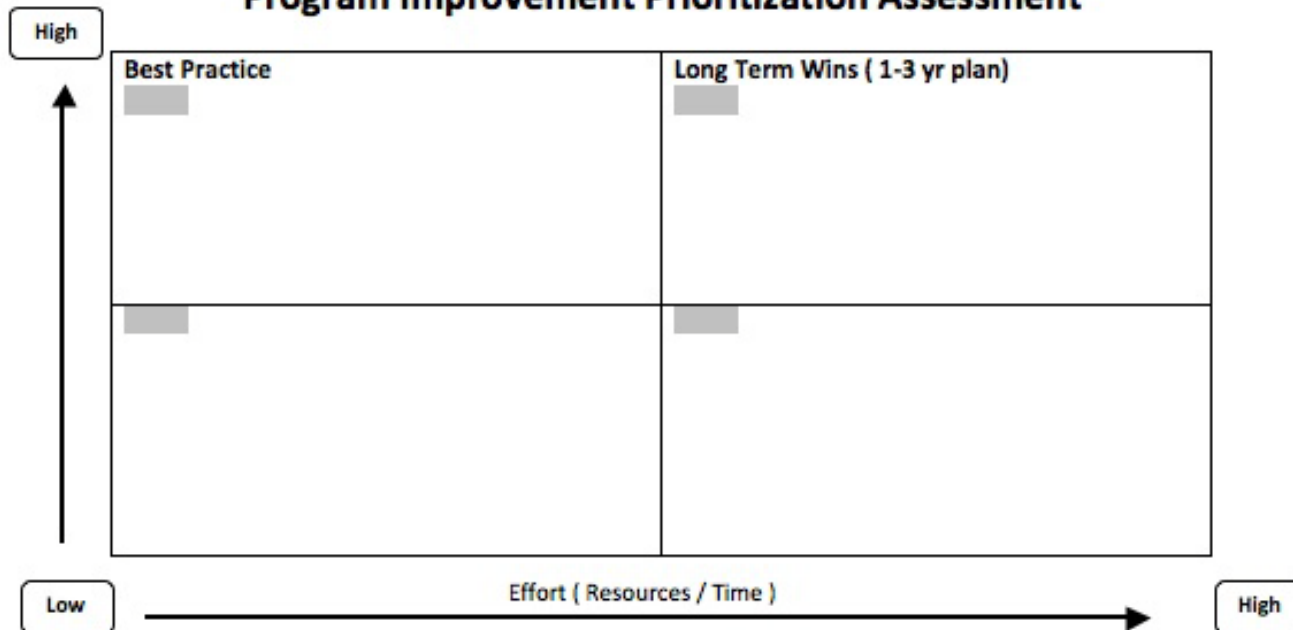
**vi.b Trends for significant issues identified in survey written comments:**

# SWOT

Strengths	Weaknesses
Opportunities	Threats

PQ - Program Quality, GP - Graduate Performance, RP - Resident Performance, FD - Faculty Development

## Program Improvement Prioritization Assessment



[Log Out](#)

[Action Item List](#)

### Action Item Details

\*\*\* Indicates Required Data

\*\*\* Program:

\*\*\*

Category:

Improve curriculum content to more effectively meet the learning needs of the fellows, improvement evidenced by \_\_\_\_\_

\*\*\* Goal:

Outcomes

[Add Outcome](#)

Reviewer Notes

[Add Reviewer Note](#)

\*\*\* Status:

\*\*\* APE & I Year:

[Save Action Item](#)

[Cancel](#)

[Delete Action Item](#)

Last Update:

Date Completed:

[ACGME Area of Concern](#)

### Objectives

	Objective	Status
<a href="#">Select</a>	Include more current literature in curriculum and presentations	Progressing
<a href="#">Select</a>	Increase the number of device conferences and paper presentations to _____ by _____	Progressing

[Add Objective](#)

### Category

	Category	A.O.C.
<a href="#">Delete</a>	Program Quality	N/A
<a href="#">Delete</a>	Resident Performance	N/A

[Add Category](#)



Thank you for your kind attention

Questions????

# References:

1. Philibert I. The annual program evaluation, self-study, and 10-year accreditation site visit: Connected steps in facilitating program improvement. *J Grad Med Educ.* 2017; 9(1):147-149.

doi: <http://dx.doi.org/10.4300/JGME-D-17-00047.1>

2. Philibert I, Nasca TJ. The program self-study and the 10-year site visit: rationale for a new approach. *J Grad Med Educ.* 2015;7(2):310–312.



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