

Special Review

Charge

The GMEC and the DIO must demonstrate effective institutional oversight of underperforming program(s) through a Special Review Process. (ACGME IR 1.B.6., 2018.). This policy establishes criteria for underperformance and addresses the procedure to be utilized when a training program undergoes a Special Review. The intent of the review is to provide supportive, targeted feedback aimed at the quality improvement of the program.

Steps to Special Review

The DIO and the GME Office review program performance based on the Criteria listed below. The DIO will notify the program director of the intention to conduct a Special Review, based on the identified criteria of underperformance. The DIO will then assemble a Special Review team and arrange the review meeting with the program.

Composition

Special Reviews are conducted as an ad hoc subcommittee to GMDEC. The Special Review team will include the DIO, the GME coordinator, and from GMDEC, two faculty, a program coordinator, and a resident. The reviewers will be from outside of the program being reviewed. The DIO will ask one of the faculty to chair the Special Review team.

Criteria for Identifying Underperformance

ACGME Letters	Citations, concerns, areas for improvement
ACGME Resident Surveys	Less than 100% response, < 85% overall approval rating (“somewhat positive” and “very positive” combined), 2 or more categories \leq 70% compliance, or <10% below specialty compliance, downward trends over the last three years
ACGME Faculty Surveys	Less than 100% response, < 85% opinion of the program (“somewhat positive” and “very positive” combined), 2 or more categories \leq 70% compliance, or <10% below specialty compliance, downward trends over the last three years
WebADS Reports	Milestones <100% compliance, Incomplete reporting
Procedures, %ile	Graduates’ numbers fall below the required minimums (if applicable)
Overall Board Pass Rate	<Specialty board pass rate, <85% over 3-5 years
Annual Program Reviews	Insufficiently conducted, SWOT analysis concerns
PD meetings with DIO	Following APR presentation to GMDEC
Attrition	Pattern of faculty or resident attrition
Newly Accredited Programs	Within 12 months after starting new residents or fellows
Recruiting	Recurring unfilled positions after NRMP Main Match

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Resident Complaints To ACGME or by anonymous report to DIO

Materials and data to be used in Special Reviews

Materials listed above in the Criteria for Underperforming Programs
The ACGME Requirements – IR, CPR, & specialty/subspecialty program requirements
Accreditation letters of notification and progress reports sent to the ACGME
Previous Annual Program Reviews
Results from internal surveys conducted by the program

Format

The Special Review team will meet with the DIO prior to the review to identify and discuss program areas of underperformance. The chair will lead the team in conducting interviews with the program personnel. The chair may delegate questions to team members to ask during the review. Following the interviews, the team will convene to summarize their findings and to discuss recommendations for program improvement. The team will then meet with the program director.

Interviews

The Special Review team will conduct interviews with the program director and the program administrator, available key clinical faculty, and peer-selected residents at each level of training in the program based on the total complement of residents (≤ 10 all residents; 11-20, 6-8 representatives; 21-40, 10-12 representatives). The program director should be last person interviewed in the order. The Special Review team may elect to conduct an interview with the Chair of the training program's department.

Report

The Special Review team will present a brief verbal report to the program director, department chair (optional), program administrator, and a resident representative at the time of the review. The review team chair will send a written report within 30 days of the Special Review to the program director and department chair. The report should follow this format of the template below. Within 30 days of receiving the review, the program director will send a corrective action plan as a response to the Special Review to the chair of the Special Review team and to the DIO. The program director should identify additional resources needed to make these corrective actions. The chair of the Special Review will present the report summary to GMDEC. The program director will attend this meeting to discuss planned corrective actions and the timeline for anticipated completion of each action. The GMDEC minutes will indicate that the report was approved by the voting members. The program director will provide a follow up written and verbal progress report on corrective actions to GMDEC at four month intervals until all the corrective actions have been addressed.

Confidentiality

The Special Review report and work plans are confidential and protected under the Tennessee Patient Safety and Quality Improvement Act of 2011 (TCA § 68-11-272). The reports will not be shared with RC site visitors. To confirm compliance with this policy document and ACGME institutional requirements, Special Review reports are included in the Institutional Review Questionnaire (IRQ) and examined by the ACGME Institutional Review Committee at the time of periodic institutional accreditation evaluation to verify that we are following approved Special Review policy, protocol, and procedure.

Special Review

Special Review Report

Date of review:

Program reviewed:

Reviewers: Chair, faculty representatives, resident representative, program coordinator representative, GME Coordinator

Program individuals interviewed-

Program Director:

Program Coordinator:

Chair (optional):

Faculty representatives:

Resident representatives:

Source(s) used to identify underperformance:

Criteria used to identify underperformance:

Summarized findings in each area of underperformance:

Areas of Underperformance:

- 1.
- 2.
- 3.
- 4.

Corrective Actions Suggested

- 1.
- 2.
- 3.
- 4.

Corrective Actions Taken to date by the Program

- 1.
- 2.
- 3.
- 4.

GMDEC Approved January 10, 2019
GMDEC Revised and Approved April 8, 2021
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