# This is a template – please provide details about your program

# Key Points for ACGME Resident/FELLOW Survey

**General Information:**

* No individual responses are given to the program, program directors, faculty members, Sponsoring Institutions, or the Review Committees.
* The aggregated data will be part of the data considered by the accreditation site visitor and the Review Committee for the purposes of determining the need for an investigatory site visit or an accreditation decision.

**IMPORTANT: This is a high stakes survey on which investigatory site visits and accreditation decisions are based.**

* Think about the **entire year**, not just the last few days/weeks when responding
* Be very careful about “sometimes”, “some of the time” responses as those are considered non-compliant.

**NOTE: The questions are not in the same order as this document.**

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| Clinical Experience and Education | |
| 1. 80 hours per week 2. 4 or more days FREE in 28 (this refers to the rule that you have one day off in 7 averaged over 4 weeks)    * NOTE: In our program, we monitor this with the schedule. Sometimes you will get 2 days to get a “golden weekend” which qualifies as 4 days off in 28. 3. Taken in-hospital call more than every 3rd night (home call does not count) | 1. Less than 14 hours free after 24 hours work 2. More than 28 consecutive hours 3. Assigned additional (new patients) patient care responsibilities after 24 hours 4. Adequately manage patient care within 80 hours 5. Pressured to work more than 80 hours |
| faculty teaching and supervision | |
| 1. Faculty members interested in education 2. Faculty effectively creates an environment of inquiry    * *ACGME Info: An environment of inquiry is the educational culture of a program which emphasizes critical thinking on the scientific basis or medicine that occurs beyond structured lectures and conferences. The environment of inquiry may include, but it not limited to, ambulatory settings, during patient care rounds, or in the operating room.* | 1. Appropriate level of supervision 2. Appropriate amount of teaching 3. Quality of teaching received 4. Extent to which increasing responsibility granted |
| Evaluation | |
| 1. Given access to performance evaluations    * NOTE: In our program, the process for performance evaluation access is 2. Opportunity to evaluate faculty members at least once a year    * NOTE: In our program, you evaluate the faculty… | 1. Opportunity to evaluate program    * NOTE: We evaluate the program internally in the month of \_\_\_\_ 2. How satisfied have you been with the feedback you have received from faculty during rotations after all major educational assignments this academic year? |
| pROFESSIONALISM | |
| 1. Residents/fellows comfortable with calling supervisor with questions 2. Faculty members act professionally when teaching 3. Faculty members act professionally when providing care 4. Process in place for confidential reporting of unprofessional behavior 5. Able to raise concerns without fear or intimidation 6. Satisfied with process for dealing with problems and concerns    * NOTE: In our program we have the following pathways for resolving problems/concerns | 1. Experienced or witnessed abuse    * *ACGME Info: In answering this question, think about situations in which you have experienced or witnessed the following: public humiliation; physical harm or the threat of physical harm; sexual harassment; being denied opportunities for training or rewards and/or receiving lower evaluations or grades solely based on gender, race/ethnicity, or sexual orientation; and/or being subjected to offensive remarks/names based on gender, race/ethnicity, or sexual orientation.* |
| RESOURCES | |
| 1. Education compromised by non-physician obligations    * *ACGME Info: Non-physician obligations include duties which in most institutions are performed by nursing and allied health care professionals, transport services, or clerical staff. Examples of such obligations include transport of patients form the wards or units for procedures elsewhere in the hospital; routine blood drawing for laboratory tests; and clerical duties, such as obtaining insurance authorization.* 2. Impact of other learners on education.    * *ACGME Info: Other learners include medical students, residents/fellows from other programs, and learners in the following professions: Nurse Practitioners, Physician Assistants, Psychologists, and Pharmacists. Advanced practice providers include, for example, Nurse Practitioners, Physician Assistants, Psychologists, and Pharmacists.*   NOTE: The ACGME expects that other learners impact your learning positively | 1. Appropriate balance between your educational activities (e.g., clinical teaching, conferences, lectures) and patient care responsibilities? 2. Faculty discusses cost awareness when making patient care decisions? 3. Time to interact with patient 4. Time to participate in structured learning activities    * *ACGME Info: Protected time indicates that the resident or fellow is excused from all routine patient care activities in order to participate in scheduled educational activities including, but not limited to, lectures, conferences, asynchronous learning and simulation.* 5. Able to attend personal appointments 6. Access to mental health counseling or treatment 7. Satisfied with safety and health conditions of the institution |
| Educational Content | |
| 1. Instruction on minimizing effects of sleep deprivation 2. Instruction on maintaining physical and emotional well-being 3. Instruction on scientific inquiry principals 4. Education in assessing patient goals e.g. end of life care 5. Opportunities for research participation | 1. Taught about health care disparities 2. Program instruction in when to seek care regarding:    1. Fatigue and sleep deprivation    2. Depression    3. Burnout    4. Substance abuse |
| Patient Safety | |
| 1. Information not lost during shift changes or patient transfers 2. Culture emphasizes patient safety 3. Know how to report patient safety events 4. Interprofessional teamwork skills modeled or taught | 1. Have you participated in adverse event analysis (M&M, Tumor Board are all examples of simulated adverse event analysis) 2. Process to transition care when fatigued    * NOTE: In our program, when you are fatigued/ill and need to be to be relieved of patient care, the process is … |
| dIVERSITY (NEW AREA OF SURVEY) | |
| 1. Preparation for interaction with diverse individuals 2. Program fosters inclusive work environment 3. Diverse resident/fellow recruitment/retention | |
| overall evaluation of program | |
| 1. Overall, how would you evaluate this educational program 2. Thinking about overall educational experience, how likely would you be to choose this program again? | |
| Wellness Questions | |
| * Data is gathered for national data; will **not** be used for accreditation purposes | |