**Phase III: Annual Program Evaluation 2017-2018**

Program Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Program Evaluation Committee (PEC) Meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **ACCREDITATION INFORMATION** |
| **Current Citations and Areas for Improvement (AFIs) from ACGME/AOA***Note: This information is found on your Letters of Notification.* Area of Program Evaluation: Program Quality, Faculty Development, Graduate Performance, Resident Performance

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| *Description of Citation/AFI* | *Reference from Requirements* | *Plans to Resolve Citation/Address AFI* | *Status of Resolution (Partial, Full, Resolved)* |
| Citation: Evaluation of Faculty: Faculty survey is somewhat below the national mean for effectiveness of graduating residents/fellows | V.C.1 | 1) Faculty evaluations will be reviewed by the PEC and revised2) PEC will track faculty evaluation compliance and report on quarterly to GMEC | Partial |
| AFI: Educational Environment: Review Committee noted that the resident survey is negative in that residents believe that education may be compromised by service obligations | NA | 1. PEC will create education regarding what is “service” as this is a common misunderstanding
2. Internal survey will address current resident opinion – results will be reported to GMEC at next update
 | Partial |
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| **FACUTY INFORMATION** |
| **Faculty Development focused on Teaching Skills**Area of Program Evaluation: Faculty Development

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| *Name of Activity* | *Which faculty attended* | *Sponsored by* | *Number of Hours* |
| Providing Feedback | Sam Sanders, DOFred Flynn, DOSamantha Silver, DO | Orange Regional Medical Center | 1.0 |
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| **Faculty Turnover**Area of Program Evaluation: Program Quality

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| *List faculty members who have either left or joined the program:**1.**2.**3.**4.* |

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| **PROGRAM** |
| **Rotation Evaluations** Area of Program Evaluation: Program Quality

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| *Rotation Name* | *Lowest Scoring Parameter (quality of teaching, quality of feedback, supervision)* | *Score* |
| *ICU* | *Quality of teaching* | *2.7* |
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| **CEE Violation Trends**Area of Program Evaluation: Program Quality

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| *Service* | *1 day in 7 Off Duty* | *80 hours per Week (averaged over 4 weeks)* | *24 + 4 hours* | *14 hours free of work after call* | *8 hours between work periods* | *Specific Issues* |
| *Labor & Delivery* | *2* | *3* | *9* | *1* | *2* | *The adoption of EMR has caused several 24+4 violations* |
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| **ITE Performance** Area of Program Evaluation: Graduate Performance (Note this may be need to be reconfigured depending on your Intraining Examination)

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| PGY Year | Average ITE Score | Areas of weakness for this training cohort |
| PGY=1 | 47% | Pathology of disease, pediatrics & oncology |
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| **Attrition of Residents**Area of Program Evaluation: Program Quality

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| *Resident Name* | *Reason for leaving program* |
| Jane Smith, DO | Personal; wanted to be closer to fiancée |
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| **GRADUATE PERFORMANCE** (IF APPLICABLE) |
| **Graduate performance** *Placement of Graduates*

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| *Name* | *Placement* |
| *Dean Sanders* | *Pulmonary Critical Care Fellowship; University of California, Irvine* |
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| Grad Year | # of Grads | # Took Written | # Passed WrittenFirst Attempt | # Passed WrittenAll Attempts | # Took Oral | # Passed OralFirst Attempt | # Passed OralAll Attempts | Percent Board Certified |
| 2018 |  |  |  |  |  |  |  |  |
| 2019 |  |  |  |  |  |  |  |  |
| 2020 |  |  |  |  |  |  |  |  |
| 2021 |  |  |  |  |  |  |  |  |
| 2022 |  |  |  |  |  |  |  |  |
| 2023 |  |  |  |  |  |  |  |  |
| 2024 |  |  |  |  |  |  |  |  |
| 2025 |  |  |  |  |  |  |  |  |

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| **SCHOLARLY ACTIVITY** |
| **Faculty Scholarly Activity**Area of Program Evaluation: Program Quality

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| *Core Faculty Member* | *PMID Publications* | *Other**(curriculum, abstracts, regional/national presentations)* | *Leadership Roles (regional, national); Peer Reviewer (Y/N)* |
| Joe Smith, DO | 1 | 4 | Y |
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| **Resident Scholarly Activity**Area of Program Evaluation: Program Quality

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| *Resident* | *PMID Publications* | *Other**(curriculum, abstracts, regional/national presentations)* | *Leadership Roles (regional, national); Peer Reviewer (Y/N)* |
| Joe Smith, DO | 1 | 4 | Y |
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| **INFRASTRUCTURE** |
| **Review of Affiliation Arrangements/PLAs**Requirement: When Participating Sites are added/deleted this needs to be approved by GMEC

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| *Participating Site* | *Date of Affiliation Agreement* | *Date of PLA* | *Identify Rotations* |
| *Greener Hospital* | *June 2015* | *June 2016* | *PGY-1/Peds EM**PGY-2/Peds EM**PGY-3/PICU* |
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**List new participating sites in 2017-2018**1.
2.

**List withdrawn participating sites in 2017-2018**1.
2.
3.
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| **SURVEY RESULTS** |

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| 1. **ACGME Survey Results (Resident and Faculty)**

**Any area that received less than 85% should be listed**

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| *Area* | *Score* | *Proposed plan to increase score* |
| *Faculty evaluations are not confidential according to the faculty survey* | *67%* | 1. *Discuss with PEC the process for keeping faculty evaluation confidential*
2. *Investigate with residents why they do not feel faculty evaluations are confidential*
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| **ACTION ITEMS** |

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| 1. **Action Items from 2017-2018 APE**

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| *Action Item* | *Identify Area of Program Improvement:*1. *Program Quality*
2. *Resident Performance*
3. *Graduate Performance*
4. *Faculty Development*
 | *Status of Action Item* | *Resolved**Carryover* |
| *Faculty evaluations, according to the ACGME Faculty survey, are not providing adequate feedback about teaching skills.*  | *Program Quality; Faculty Development* | *The faculty evaluation (2018) indicated that the faculty felt they were getting adequate feedback about teaching skills (92%)* | *Resolved* |
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| 1. **New/Carryover Action Items for 2018-2019**

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| *Action Item* | *Identify Area of Program Improvement:*1. *Program Quality*
2. *Resident Performance*
3. *Graduate Performance*
4. *Faculty Development*
 | *Person(s) Responsible* | *Potential Data Sources* |
| Faculty evaluations, according to the ACGME Faculty survey, are not providing adequate feedback about teaching skills.  | Program Quality; Faculty Development | Jim Pierce, DO (Program Director) | * ACGME Faculty Survey
* Internal Program Evaluations
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**Date Faculty Review/Approved APE and Action Items: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**