Partners’ Tool to Evaluate GME Program Quality & Sustainability\*

**Rationale for Metrics:** Graduate Medical Education (GME) programs continue to grow despite limited funding options. Sponsoring institutions need a process by which multiple programs can be prioritized to compete for scarce GME resources.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Points | Accreditation Status | Match Data | Number of Citations/Areas of Non- Compliance | Number of Areas on ACGME below 4.0 | % Core Faculty Scholarly\* Activity (AY) | Trainee Turnover | Faculty Turnover(average of losses and additions) | Coordinator Stability | Leadership Stability | Patient Volume | Other:Board ScoresPatient Visit Requirements |
| **5** | **Continued Accreditation x 3 years or more** | **100% filled and filled in top tier of rank list** | **None** | **None** | **100%****document at least one significant scholarly****activity** | **None** | **1+** | **Current coordinator in position more than 3 years** | **Current PD in position for more than 3 years** | **Expected to grow in next 10 years** |  |
| **4** | **Continued Accreditation x 2 years** | **>98% filled and filled in top tier or rank list** | **1** | **1** | **80%****document at least one significant scholarly****activity** | **5%** | **0** | **Current coordinator in position more than one year** | **Current PD in position more than one year** | **Expected to stay the same in the next 10 years** |  |
| **3** | **Continued Accreditation x 1 year** | **>98%****positions filled** | **2-3** | **2** | **50%****document at least one significant scholarly****activity** | **10%** | **-1** | **Current coordinator in position less than one year** | **Current PD in position less than one year** | **Uncertain** |  |
| **2** | **Continued Accreditation with Warning** | **>75%****positions filled** | **4-5** | **3** | **<50%****document at least one significant scholarly****activity** | **15%** | **-2** | **Current coordinator in position less than 6 months** | **Current PD in position less than****6-12****months** | **Expected to decrease in next 10 years** |  |
| **1** | **Probation** | **Below 75% filled** | **6+** | **4+** | **<25%****document at least one significant scholarly****activity** | **>15%** | **-3+** | **Vacant coordinator position** | **Current PD in position less than6 months** | **Expected to decrease significantly in next 10 years** |  |

\*List of Significant Scholarly Activities:

* + Paper published with PubMed number
	+ Curriculum projects, preferably published at MedEdPortal or other GME curriculum clearinghouses
	+ PI on Peer-Reviewed Grant, Quality Improvement Initiative
	+ Leadership role in national or regional academic organization

Partners’ Tool to Evaluate GME Value to Organization\*

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| --- | --- | --- | --- |
|  | **Regional and Societal****Needs** | **Financial Considerations** |  **Strategic****Initiatives** |
| *Points* | ***Health Rankings*** | ***Health Care Disparities (includes any healthcare disparity, rural or VA need)*** | ***Funding*** | ***Net Income (contribution of patient care to departmental income)*** | ***Alignment with Organizational Strategic Priorities*** | ***Impact of training program on clinical staffing******models*** | ***Recruiting Demand (averaged over 3 years)*** |
| 5 | Care that addresses 6-7 metrics | Program driven almost entirely by regional/societalneed | Fully funded by CMSreimbursements | Anticipating significant net income | Critical to more than 1 element | Essential to service line needs/plans | >90% of positions filled |
| 4 | Care that addresses 4-5 metrics | Has at least one rotation that addresses at least 1 healthcare disparityof the region | More than 75% funded by CMS reimbursements | Anticipating mild positive net income | Solidly supports more than 1 element | Adds value | <90% of positions filled |
| 3 | Care that addresses 3 metrics | Has plans for a rotation that addresses at least 1 healthcare disparityof the region | More than 50% funded by CMS reimbursements | Anticipating neutral net income | Solidly supports 1 element | Supports existing service line activity | <75% of positions filled |
| 2 | Care that addresses 1-2 metrics | Has didactics that addresses the healthcare disparities of theregion | More than 30% funded by CMS reimbursement | Anticipating mild negative net income | Indirectly may influence | Indirectly may influence | <50% of positions filled |
| 1 | Care that addresses none of the metrics | Has plans for didactics that addresses the healthcare disparities of theregion | No CMSreimbursement funding | Anticipating significant negative net income | Does not support | Does not support | No current openings in this role |

NOTE: Both of these proposed tools need to be revised to meet the needs of the sponsoring institution. The categories are suggested but not required. After stakeholder input, the final approval should take place at GMEC.

\*Adapted from Varaklis K, Parker MG, Peck JS, Bing-You RG. Aligning Strategic Interests in an Academic Medical Center: A Framework for Evaluating GME Expansion Requests. *J Grad Med Educ*. 2019;11(1):85–91.