Keywords: ACGME compliance, GMEC, institutional requirements, special review

Table of Contents

<table>
<thead>
<tr>
<th>I. PURPOSE</th>
<th>Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>II. SPECIAL REVIEW PROCESS</td>
<td>2</td>
</tr>
</tbody>
</table>

I. PURPOSE

The ACGME Institutional requirements state that the Graduate Medical Education Committee (GMEC) must demonstrate effective oversight of underperforming programs through a Special Review process. The Graduate Medical Education Office staff shall identify programs of concern based on the following:

1. Review of ACGME correspondence
   - Any program that receives an accreditation status of "Accreditation with Warning" (whether Initial or Continued) or "Probation" will automatically require a Special Review.

2. Failure to address previous citations

3. Resident survey results demonstrating any of the following:
   - Compliance below the national average for any aspect of duty hour rules
   - For programs that are below the national specialty-specific norms, downward trends in more than 2 compliance categories
   - Greater than 10% negative overall evaluation of the program (defined by the sum of very negative, negative and neutral responses.)

Executive Committee of the GMEC shall review programs identified by the GME Office staff. The GMEC Executive Committee review may include, but is not limited to:

1. ACGME Resident and Faculty Survey results
2. ACGME Annual Updates
3. ACGME Correspondence including citations/responses to citations
4. Annual Program Evaluation
5. Duty Hour Compliance Reports
6. Procedural Numbers
7. Board pass rate

The Executive Committee shall determine whether to require the program to submit a written response to the concerns or to schedule a Special Review. If a response is requested, upon receipt of the response, the Executive Committee shall review the response to determine if the deficiencies are being properly addressed and monitored. An unsatisfactory response may result in a Special Review.

Special Review of the Sponsoring Institution

In the event that the Sponsoring Institution meets any of the following criteria, the GME Office will convene a Special Review Committee to conduct a review of the Sponsoring Institution as a whole:

© Copyright 2021 by The Johns Hopkins Health System Corporation and/or The Johns Hopkins University
1. Review of ACGME correspondence
   
   • Institutional accreditation status of "Accreditation with Warning" or "Probation" will automatically require a Special Review.

2. Failure to address previous citations

3. Institution level resident survey results demonstrating any of the following:
   
   • Downward trends in more than 2 compliance categories
   • Greater than 10% negative overall evaluation of the institution (defined by the sum of very negative, negative, and neutral responses.)

II. SPECIAL REVIEW PROCESS

1. A subcommittee of the GMEC shall be appointed to review each underperforming program, or the Institution, evaluate the deficiencies, and suggest a plan for improvement.

2. The subcommittee shall include at least 2 faculty members and one resident or fellow (all members of specialties, or sub-specialties for fellowships, different from the program being reviewed). For an Institutional review, at least one faculty member and a resident should be from a core residency program, and one faculty member and a fellow should be from a sub-specialty fellowship program.

3. In addition to reviewing the information listed below, the subcommittee shall meet with the program director, or with the DIO for an Institutional review, and additional faculty members as judged appropriate by the subcommittee. In a separate meeting, the subcommittee shall meet with at least one member from each trainee class of the program being reviewed. For an Institutional review, a representative sample of peer-selected residents and fellows will be elected by the House Staff Council and the Clinical Fellows Council to meet with the subcommittee.

4. The subcommittee shall review information it deems appropriate, to include any/all of the following:
   
   • Previous correspondence from the ACGME
   • Responses to previous citations
   • ACGME resident and faculty surveys
   • Milestones data
   • Rotation and program evaluations by residents and faculty
   • Duty hours compliance information
   • Case logs
   • Trainee evaluation processes and forms
   • Program curriculum, including conference schedules and block diagrams
   • Annual program review documentation

5. The subcommittee shall provide a report of its findings and recommendations to the GMEC. This report shall include:
   
   • Summary of the Special Review findings,
   • List of program/institutional improvement goals;
   • Proposed corrective action plan;
   • Proposed process for GMEC monitoring.

6. The GMEC may accept the subcommittee’s recommendations for corrective actions and/or suggest additional corrective actions.

7. The GMEC shall determine a plan for monitoring of the success of the action plan for under-performing programs or the Institution.

8. A program director, a departmental director, or the DIO may request a special review, based on any of the indicators defined above, or for any other concern related to the program.

© Copyright 2021 by The Johns Hopkins Health System Corporation and/or The Johns Hopkins University