Developing an Institutional Compliance Dashboard

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Introduction

Each year the Accreditation Council for Graduate Medical Education (ACGME) distributes a survey to all residency and fellowship training programs across the United States. This survey tracks a variety of data used to monitor accreditation requirements. Traditionally, programs receive their own results, making it difficult to compare at an institutional level. How can we organize these data for meaningful use across the residency and fellowship programs at Spectrum Health?
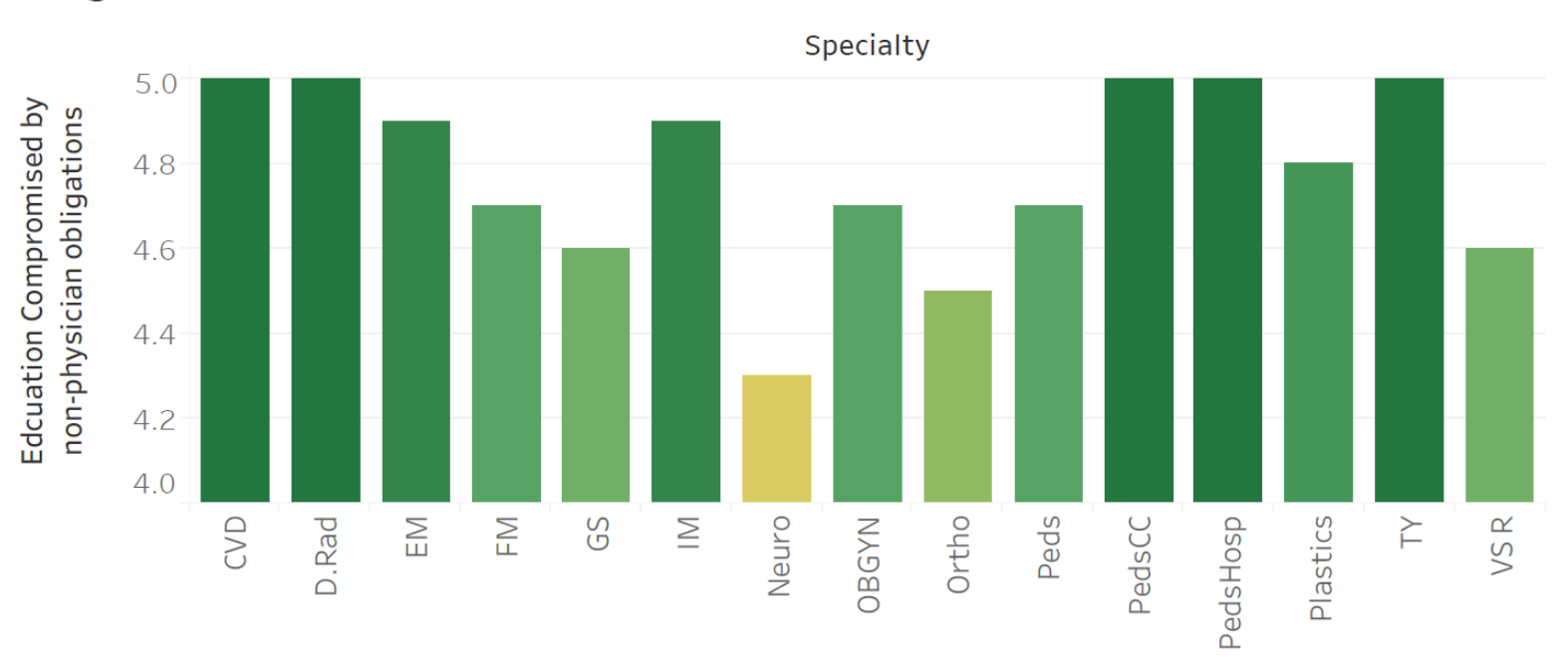
Objective

- Build an institutional dashboard monitoring 10 ACGME Focus Areas and their sub-scores across all 33 accredited training programs at Spectrum Health.
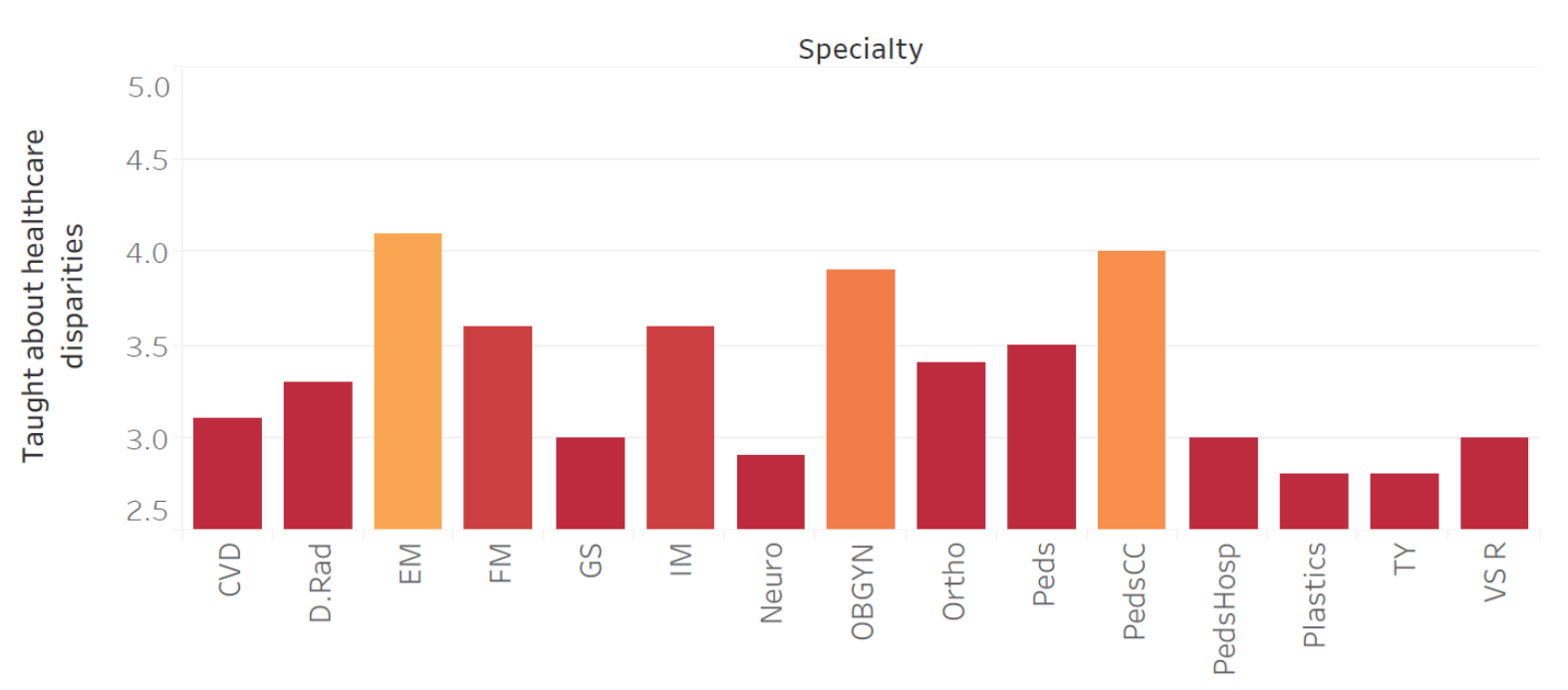
Description

Graduate Medical Education Leadership organized the data from all programs. Beginning with 77 survey questions scored 1-5, the data were narrowed down into 33 questions and organized 10 specific focus areas, aligned with ACGME requirements.

- **Setting for the study:** 25 ACGME Residency & Fellowship Programs, 15 with available results.
- **Survey Scale:** 5 (Very Positive) – 1 (Very Negative)
- **Study Timeline:** Survey data from February 2020
- **Examples of Focus Areas**:
  - Program Resources
  - Educational Content
  - Patient Safety
  - Well-being
- **Limits**: Programs had to have ≥4 Responses and a ≥70% survey completion rate for the data to be available annually.
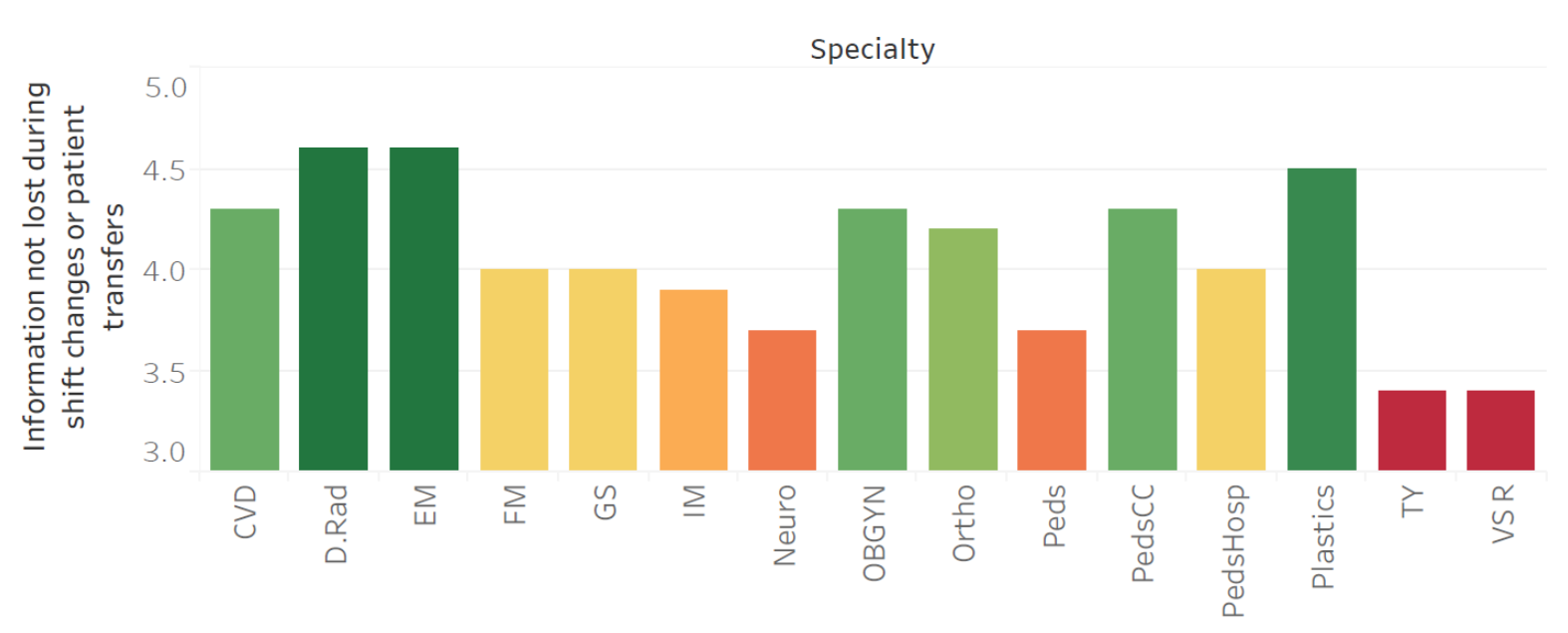

Results

By organizing and color-coding the data for each program, areas of shared concern and success become visible across the institution Examples of results.

- "Education Compromised by Non-Physician Obligations" was found to be in high compliance while previously thought to be an area of concern. (Table 1.)
- "Taught About Healthcare Disparities" demonstrated low compliance and is an area of concern across the institution. (Table 2.)
- "Information Not Lost During Shift Change or Transfers in Care" delivered mixed results with some programs as high performing and others as low. (Table 3.)

Discussion

Future initiatives are likely to be driven by these data allowing a variety of approaches to low performing programs. Best practices can be found in the highest performing programs, and institution wide tools could be developed to address areas where all programs demonstrate low or non-compliance. Through annual data collection, the dashboard will follow trends in each program, monitoring the implementation of best practices and interventions.

Conclusion

The development of an institutional compliance dashboard gives the GME office a new tool to visualize institutional data. Using this information, it is easy to see where to best allocate time and resources, ensuring compliance and high-quality education. Ultimately, we can find and address areas of concern before they show up on the ACGME's radar.