McGaw Special Review Process Policy and Protocol
Effective 01/2016
Reaffirmed by GMEC 09/08/2023
Previous 11/2017

The ACGME Institutional Requirements state the Graduate Medical Education Committee (GMEC) must demonstrate effective oversight of underperforming residency and fellowship programs through a Special Review Process (SRP). The SRP includes a protocol that establishes criteria for identifying underperformance. A report that describes the quality improvement goals and corrective actions is generated for monitoring of outcomes by the GMEC. The goal of the SRP is to identify underperforming programs, improve the quality of our training programs, and to reduce the number of ACGME citations received.

Criteria for identifying underperformance:
Programs may be placed onto the SRP by GMEC vote according to a several criteria including, but not limited to, the following:

1. **Annual Program Evaluation (APE)**
   Programs who fail to complete the APE on time, or if information is incomplete or inaccurate, will be placed onto the SRP. Additionally, downward trends of metrics captured in the APE will result in the SRP.

2. **ACGME Status**
   Any program receiving less than continued accreditation status by the ACGME is placed automatically onto the SRP.

3. **Internal Review (IR)**
   The GMEC may vote to place a program onto the SRP based on discussion of findings from a McGaw Internal Review (IR). This decision may be based on chronicity of a longstanding issue, seriousness of a specific concern, or overall downward trends. Information reviewed at the IR may include (but is not limited to) the following:
   a. ACGME surveys
   c. Annual McGaw resident/fellow and faculty program surveys
   d. Board pass rates
   e. Case logs
   f. Duty hours
   g. Changes in participating sites
   h. Changes in curriculum or clinical experience
   i. Patient safety and quality improvement initiatives
   j. Resident wellness
   k. Anonymous portal submissions or other complaints

4. **Complaint**
   A complaint or concern raised by trainee(s) or faculty that is investigated can also lead to program entry onto the SRP. This is usually accomplished after an immediate IR and the pathway described above.
5. **ACGME Resident and Faculty Surveys**
   Surveys that demonstrate low percent program compliance in several categories, substantially low percent program compliance in critical categories related to a safe and healthy learning environment, or sustained downward trends may be placed onto SRP.

**When the GMEC votes to place a program onto the SRP, the following steps are taken:**

1. An SRP report is generated that includes a narrative summary of area(s) of underperformance, the is data reviewed by the GMEC, specific quality improvement goals and the corrective actions, and metrics for GMEC follow-up.
2. Notification of the SRP is shared with the Program Director, Department Chair, and Vice Chair of Education. The PD submits a letter of response and action plan that is reviewed and approved by the GMEC.
3. Each program on the SRP is reviewed monthly at the GMEC meeting. Based on program corrective actions and supporting documentation, the GMEC may elect to maintain the program on the SRP or vote to remove the program if the specific quality goals set by the GMEC are achieved.
4. If the program is removed from the SRP, the SRP report is finalized, reviewed, and approved by the GMEC.
5. If the program has not yet achieved the goals set by the GMEC, the program remains on special review. If a program is unable to achieve the goals set by the GMEC, options would include a letter of warning and program closure.
6. The SRP process, all programs entered onto the SRP, and summative final reports are reviewed annually at the end of the academic year by the GMEC. The data is used to identify and track progress on institutional areas of focus, is part of the Annual Institutional Review (AIR), and is presented to the McGaw Board of Directors.