

# Managing the **P**rogram **I**nformation **F**orm (**PIF**)

**2011 ACR Program Administrators**

**Felicia Davis**  
**Associate Executive Director**  
**Review Committee for Internal Medicine**



# What's New?

---



- ACGME recognizes coordinators:
  - (5) GME Program Coordinator Excellence Award
  - (1) GME Institutional Coordinator Excellence Award
- ACGME in-house workshops: *The Basics of Accreditation for New Program Coordinators*
  - July 25 – IM and Subspecialties
  - Must have 2yrs or less experience
  - Online registration opens May 2011
- ACGME Annual Educational Conference:
  - New Program Administrators Pre-Course
  - Professional Development for Experienced Coordinators Pre-Course

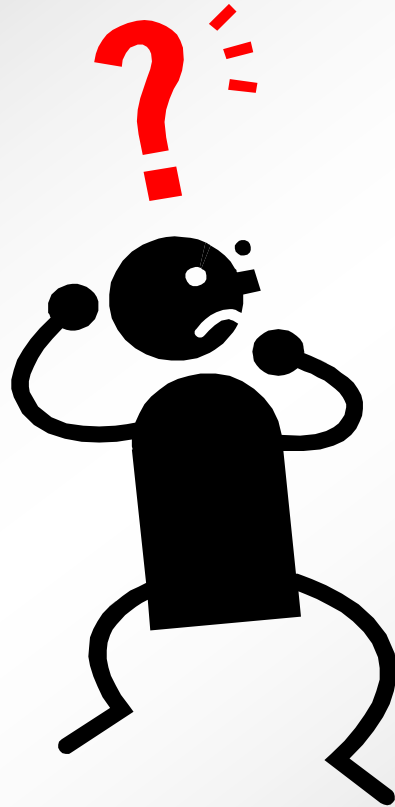
# What is the PIF?

---

- Program Information Form (PIF)
- Tool that the RRC uses to gather a comprehensive description of programs and their compliance with program requirements
- Collects data regarding all parts of your program
- Is your opportunity to present your program and its structure to the RRC

# What is a citation? How did we get it?

---



## Program Requirements

Non-compliance = **Citation**

Substantial  
Non-compliance = Shorter cycle length,  
proposed adverse action

# Program Requirement Language

---

- “Must” = A must is a must is a must, no exceptions.
- “Should” = A should is really a must, unless the program has a strong educational rationale.
- “Suggested” = Not required, won’t generate a citation.

# Anatomy of the PIF

---

- **Section 1- Common PIF**
  - Addresses all of the General Subspecialty Program Requirements
- **Section 2 – Specialty Specific PIF**
  - Specialty Specific Institutional Information
  - Specialty Specific Educational Program
  - Specialty Specific Procedure and Technical Skills



# Common **PIF** – Section 1

---

## Provides program identification information

- Sponsoring Institution
- Program Director
- Appropriate Signatures
- Accreditation Information

# Common PIF – Section 1

---

- Respond to Citations - Major Changes
- Changes in program since last review
- Outstanding features of the program
- Areas of the program that warrant strengthening

# Common PIF – Section 1

---

## Participating Sites

- Identify Primary Teaching Hospital
- Type of affiliations
- Length of rotations
- Policies

## Potential Citations

- Institutional policies
- Letters of agreement

# Common PIF – Section 1

---

## Faculty/Teaching Staff

- Program Director
- Physician /Non  
Physician Faculty  
Roster
- Physician Curriculum  
Vitae

## Potential Citations

- PD/KCF not ABIM  
certified
- Inadequate number of  
identified KCF
- Inadequate research  
participation and/or  
productivity

# Common PIF – Section 1

---

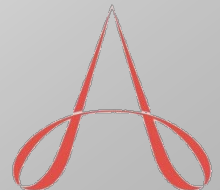
## Resident

### Appointment

- Number of Positions
- Actively enrolled residents
- Aggregated Resident Data
- Graduates
- Transferred, Withdrawn Residents

## Potential Citations

- Program has more fellows enrolled than the approved complement
- Files of Transfer fellows incomplete



# Common PIF

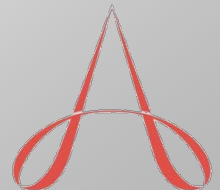
---

## Evaluation

- Residents
  - Evaluated on performance for each learning experience
  - Documented in written or electronic format
  - Methods used in assessing competence in each of 6 competencies
  - Identify evaluators

## Potential Citations

- Multiple evaluation methods not used
- Evaluations not documented
- Less than 2 identified evaluators



# Common PIF

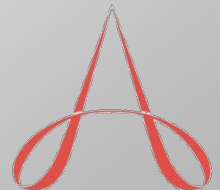
---

## Evaluation

- How are evaluators trained so that residents are evaluated fairly and consistently
- How residents are informed of performance criteria
- System that ensures faculty evaluate in timely manner
- Process used to complete and document written semiannual resident evaluations

## Potential Citations

- Verbal feedback at the end of rotation
- Summative evaluation
- Semi-annual meeting with program director



# Common PIF

---

## Evaluation

- System used by residents to provide annual confidential written evaluations of faculty
- System for evaluating and providing feedback to the teaching faculty
- Approach used for program evaluation
- Example of how results from annual program review were used to improve the program
- Example of program improvement efforts based upon the ACGME resident survey

## Potential Citations

- Lack of Confidentiality
- No Improvement Plan



# Common PIF – Section 1

---

## Resident Duty Hours

- Collects program data for all fellows
- Collects program responses to standard ACGME duty hour requirements
- Faculty supervision of fellows in patient care activities

## Potential Citations

- 10-hour break
- Number of full days off per week
- Supervision



# Specialty Specific PIF – Section 2

---

## Participating Sites - Additional Information

- Fellow consult responsibilities
- PD coordinate day-to-day activities
- Policy defining fellows responsibility for non-teaching pts

## Potential Citations

- Lack of non-teaching patient policy
- Program Director oversight

# Specialty Specific PIF – Section 2

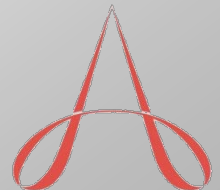
---

## Administration of the Fellowship

- PD salary support
- Adequate facilities
- Adequate administrative and secretarial support for the program
- PD reporting relationship

## Potential Citations

- Sponsoring institution does not provide adequate salary support for PD
- Inadequate conference rooms, on-call rooms
- No administrative support for the program director
- Sub PD does not have a reporting relationship with core IM PD



# Specialty Specific **PIF** – Section 2

---

## Graduates of the Program

- ABIM take rate

## Potential Citations

- Less than 80% take rate
- Track graduate performance
- Less than 75% of fellows from ACGME internal medicine residency pgms



# Specialty Specific **PIF** – Section 2

---

## Rotation Schedule Year 1 & 2

- Identify name of each rotation at each site
- Identify duration of experience

## Potential Citations

- Inadequate required rotations
- Allocated research time

# Specialty Specific PIF – Section 2

---

## Rotation Schedule Narrative

- Educational rationale for less than 10-hour breaks
- How program ensures compliance for 24+6 rule
- How program monitors home-call compliance with 80 hr/wk
- Explain how program addresses fellow fatigue in patient care responsibilities

## Potential Citations

- Violation of duty hour requirements.

# Specialty Specific PIF – Section 2

---

## Continuity Clinic

- Site Name
- Number of ½ day sessions per week
- Number of pts seen per session
- Percent of female patients

## Potential Citations

- Inadequate patients per session
- Patient gender mix

# Specialty Specific PIF – Section 2

---

## Research and Scholarly Activity

- Percent of fellows participating in research
- Protected time for research
- Research mentor

## Potential Citations

- No protected time for research either concurrent or in blocks

# Specialty Specific **PIF** – Section 2

---

## Research & Scholarly Activity - Graduates

- List of graduate's scholarly activity over the past three years

## Potential Citations

- Less than 51% of graduates have research products over the past three years prior to submission of the **PIF**



# Specialty Specific PIF – Section 2

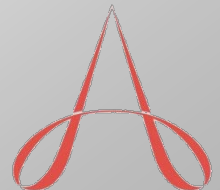
---

- **Evaluation – Additional Information**

- Does the PD evaluate logs for minimum number of procedures?
- Opportunities for academic due process?
- Are there written records of: Semiannual CC evals, Other PD counseling sessions, Teaching attending evals of the fellows' performance

- **Potential Citations**

- Response of “NO” to any of these questions.



# Specialty Specific PIF – Section 2

---

## Evaluation –Additional Information and Narrative

- Are teaching attendings evaluated by fellows?
- Are they written and confidential?
- Are these evals communicated to faculty?
- Does the PD use eval results to counsel faculty and selection for teaching assignments?

## Potential Citations

- Response of “NO” to any of these questions.



# Specialty Specific PIF – Section 2

---

## Performance Improvement

- Describe an ongoing performance improvement (PI) activity related to the competencies

## Potential Citations

- Lack of PI project
- Project does not have measurable improvements
- Both fellows and faculty do not participate in all aspects of the activity



# Specialty Specific PIF – Section 2

---

## Institution Information (For each site)

- Availability of medical records
- Autopsy reports
- Availability of facilities and resources

## Potential Citations

- ~~Fellows' do not routinely review/obtain autopsy reports~~
- Inadequate facilities, response of “NO”

# Specialty Specific **PIF** – Section 2

---

## General Competencies – Internal Medicine

- Describe a learning activity that describes how fellows' learn each of the competencies

## Potential Citations

- Described activity does not effectively teach the intended competency

# Specialty Specific **PIF** – Section 2

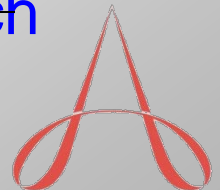
---

## Educational Program Part 1

- Written curriculum

## Potential Citations

- Curriculum is not competency based
- Curriculum is not specific to each educational level
- ~~G&O not reviewed by the faculty with the fellows at the beginning of each rotation~~



# Specialty Specific PIF – Section 2

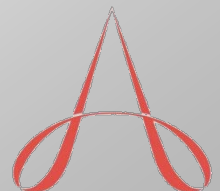
---

## Educational Program Part 2

- Core curriculum conferences
- Case conferences
- Research conference
- Journal Club
- Verify whether the program provides formal instruction in the required topics

## Potential Citations

- Not enough core conferences offered
- Fellows do not receive formal instruction in any of the required topics
- Fellows required to present at conferences with no faculty involvement



# Specialty Specific PIF – Section 2

---

## Educational Program Part 3

- Verify whether formal instruction/education provided all identified areas

## Potential Citations

- Fellows are not educated in any of the identified specialty specific areas

# Specialty Specific PIF – Section 2

---

## Educational Program Part 4

- Verify whether fellows receive formal instruction, clinical experience and demonstrate competence in all required disorders

## Potential Citations

- Fellows do not receive formal instruction, clinical experience or achieve competence in any of the required specialty specific disorders

# Specialty Specific PIF – Section 2

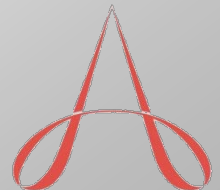
---

## Educational Program Narrative

- Describe methods for fellows to make up core conferences
- Describe the conduct of core conference series
- Describe how faculty and fellows are educated about fatigue and its effects

## Potential Citations

- Program has no method to allow fellows to make up conferences
- Program does not formally educate fellows and faculty about fatigue/sleep deprivation



# Specialty Specific PIF – Section 2

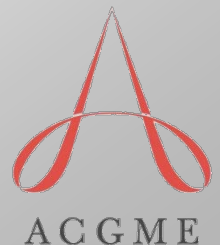
---

## Procedures & Technical

- Indicate whether instruction is provided for all listed procedures
- Percent of fellows who have achieved proficiency

## Potential Citations

- Fellows indicate they do not receive formal instruction or achieve proficiency in any of the identified procedures



# Preparing the PIF

---

- Divide and Conquer – Coordinate PIF efforts with program director and other faculty
- Organize the sections
- Know the requirements
- Set a timeline
- Review, review, review before submission



# PIF Disasters

---

- Unnecessary citations
- Shorter cycle length
- Adverse actions
- Misplaced PIF
- Not going to finish the PIF by the due date
- “I’ll just use the PIF from our last review”



# Questions

