

The ACGME Site Visit: Preparing Your Faculty edition

Charlotte Wills, MD
David Duong, MD MS
Alameda Health System
Highland Hospital Emergency Medicine

While these concepts for preparing your faculty applies to a full accreditation site visit, the following can be particularly applicable to a data-prompted site visit.

Overarching Recommendations

- Preparation takes significant time and organization. Start early!
- Delegate tasks and don't go at this alone.
- Set up regular meetings with your faculty ahead of the site visit to educate them.
- Use your CORD network as your guides.

Who are your ACGME Site Visit Faculty?

While the Site Visitors want about **8 core faculty** from your department (other than the PD), involve as many core faculty in the preparation as you can. They can serve as back-up on the day of the site visit in cases of emergencies, in the event one of your original faculty members is sick or not available for any reason. It makes complete sense to have your APDs, CCC faculty, PEC faculty, and Directors (research, EMS, ultrasound, etc.) on this list of core faculty for the site visit.

You must also have rotation **site directors from each EM training site**. These may be your community ED sites, pediatric ED sites, or affiliated tertiary care sites. These faculty are not at your primary site and thus they *may need more preparation and education than your own faculty!*

The Site Visitors will also want to meet with your **Department Chair, DIO, and CMO**. They may have tight schedules, so it will be important to make sure they can meet with the Site Visitors – this is not optional! Schedule them early and send reminders.

What to educate your faculty on

****** If this is a data-prompted visit, make sure the faculty know the issues and how the program is addressing each issue.

Evaluation venues – your faculty should know all the ways they can evaluate residents, and all the ways residents can evaluate faculty and the program (including confidential ways!)

Supervision – introduce faculty to the program-specific policy on resident supervision, including the lingo of oversight, indirect, and direct supervision. Also tell them what is not acceptable from the ACGME standpoint.

Duty Hours – make sure your faculty know the basic rules

Fatigue Mitigation & Wellness – if your residents are fatigued during or after a shift, faculty need to know what to do. Also, remind them of efforts in recognizing burnout, depression, and suicidality in trainees (and fellow faculty), as well as what is in place for faculty wellness. Off-site rotation directors must also know this.

Faculty evaluations - How are your faculty evaluated as teachers? You'll need to have an example to give to Site Visitors, so you may as well have faculty look at their latest evaluations.

Faculty development - Remind them of recent activities that make them better instructors for your residents and students. Even off-site rotation directors must know this.

Go over the self-study, APE/PEC with your core faculty and off-site rotation directors. They should know what your annual action plans are, works in progress, and program aims & mission. This should include newer domains the ACGME is interested in, such as your hospital/department's efforts around eradicating healthcare disparities and efforts around diversity, equity, and inclusion.

Stress with your faculty that this is not the venue to vent or complain and that there are other channels to make more meaningful change.

How you can prepare for what your faculty need

****** Remember that your core faculty are not program directors and may know even less than residents about the residency. Use faculty meeting times and even schedule other times with your core faculty to go over what they need to know and do. Meet and talk with off-site rotation directors.

Organization – Be organized for your faculty. Residency policies and documents should be accessible to your core faculty. For instance, if they need to find their scholarship requirement. A glossary of ACGME terms (from core competencies to DIO and APE) may be helpful so your faculty aren't caught off-guard with terminology

WebADS – Have information on your core faculty listed in WebADS is accurate. Double check this info, especially for faculty who have been on staff for a long time. Your edits in WebADS are date/time stamped, so having recent updates show Site Visitors that you are on top of it. Remember that WebADS locks you out 10 days prior to your visit, and you won't be able to edit!).

5 strengths, 5 weaknesses – Site Visitors will ask your core faculty to submit 5 strengths & weaknesses of the residency program prior to their visit. PD's cannot look at it, so make sure that these are done and sent to the Site Visitors. Core faculty should be ready to discuss these as a unified group. It helps to have an APD facilitate this and ensure that all faculty know the party line.

Being honest and transparent – If there is a citation, make sure faculty know that you shouldn't deny the citation, but focus on what is being done about it. Convey to your faculty that the program is owning up & looking forward. Some advice we got from a trusted, experienced medical educator: "Admit your shortcoming and never be defensive. Remember you have a lot more to be proud of than to apologize for."

Day of the Site Visit for your Faculty – explain to them what to expect. There will be an hour meeting with your core faculty members and off-site rotation directors. They will be asked about issues surrounding citations as well as the 5 weaknesses.

There will be separate 20-minute meetings with your Department Chair, DIO, and CMO. These are not optional meetings so make sure they can be scheduled as they are busy people.

We also found that for any questions about the site visit, contacting the EM RRC was helpful!

EM RRC Executive Director: Felicia Davis, MHA fdavis@acgme.org

Associate Director, Field Activities: Andrea Chow, MA achow@acgme.org