

Program Quality, Evaluation, and Improvement: What Have We Learned From Five Years of National Data?

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Objectives

- Be familiar with the AFMRD RPI tool and its use in the APE process
- Discuss how national data from the RPI tool may be used by family medicine residencies in program improvement efforts
- Provide feedback on how the RPI tool can be improved to best meet the needs of FM Programs
- Hopefully unveil demo of new online RPI dashboard!

Disclosures

- The presenters are both members of the AFMRD RPI task force.
- **Neither presenter has a financial relationship with or interest in a commercial interest related to the RPI.**

Who's in the Audience?

Familiarity with RPI?



Evolution of the RPI

- Developed in 2011 in response to AFMRD Strategic plan.
- Used by 130 programs in last two years.
- Currently using third version of the criteria.
- New online dashboard software to be unveiled this year to improve use.

RPI Quality Domains


- Resident patient care experience.
- ABFM certification rates.
- ACGME accreditation status.
- Scholarly/QI activities.
- Resident procedural training.
- Program leadership experience.
- PCMH status of residency clinic.
- Graduate scope of practice.

TABLE 1 RESIDENCY PERFORMANCE INDEX (RPI) QUALITY CRITERIA*		
RPI Quality Domains	RPI Data Elements	Criteria Rationale/Data Acquisition
Patient Care Experience	Volume of resident patient encounters	Minimum accreditation standards Web ADS averages for family medicine Criteria for excellence published by the AAFP's Residency Program Solutions Panel of Consultants** Chosen to reflect the comprehensiveness of family medicine training, both in terms of demographics and setting
	Resident procedural competency upon graduation	Procedure lists derived from a widely recognized source: ACGME RC-FM's proposed draft program requirements A1 list of procedures published by the STFM Group on procedural training*
	PCMH recognition level	Based on NCQA levels
Academic Environment	In-Training Examination scores	ABFM reports
	Faculty scholarly activity	ACGME Common Program Requirements Criteria for the PCMH***
	Resident scholarly activity	ACGME Common Program Requirements for the PCMH***
	Resident QI project participation	ACGME Common Program Requirements
Program Leadership and Stability	Program accreditation cycle length	ACGME designation
	PD tenure and qualifications	Measured as No. of years current PD has served Measured as No. of PDs in the last 5 y Measured as PD participation in specific family medicine fellowship training
End Product/ Graduates	Board certification pass rates (5-y average)	Derived from ACGME accreditation standards and ABFM aggregate initial certification data
	Graduate scope of practice**	Based on policy briefs published by the Robert Graham Center and the ABFM that demonstrate a declining scope of practice*** Given the importance of the PCMH model to the specialty's future, the task force chose to include whether a program's graduates were practicing in a PCMH

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Average number of face-to-face patient visits for most recent graduating residents



Tips:

- FM-RC minimum criteria is 1650 visits in 3 years, with at least 150 visits the first year.
- Benchmark: WebADS national data for FM 2010 from the ACGME indicates the mean number of visits for most recent graduates is 1864 visits.
- RPS recommends that a program of excellence provide at least quarterly feedback to residents regarding productivity, case-mix and continuity.

Example of Report



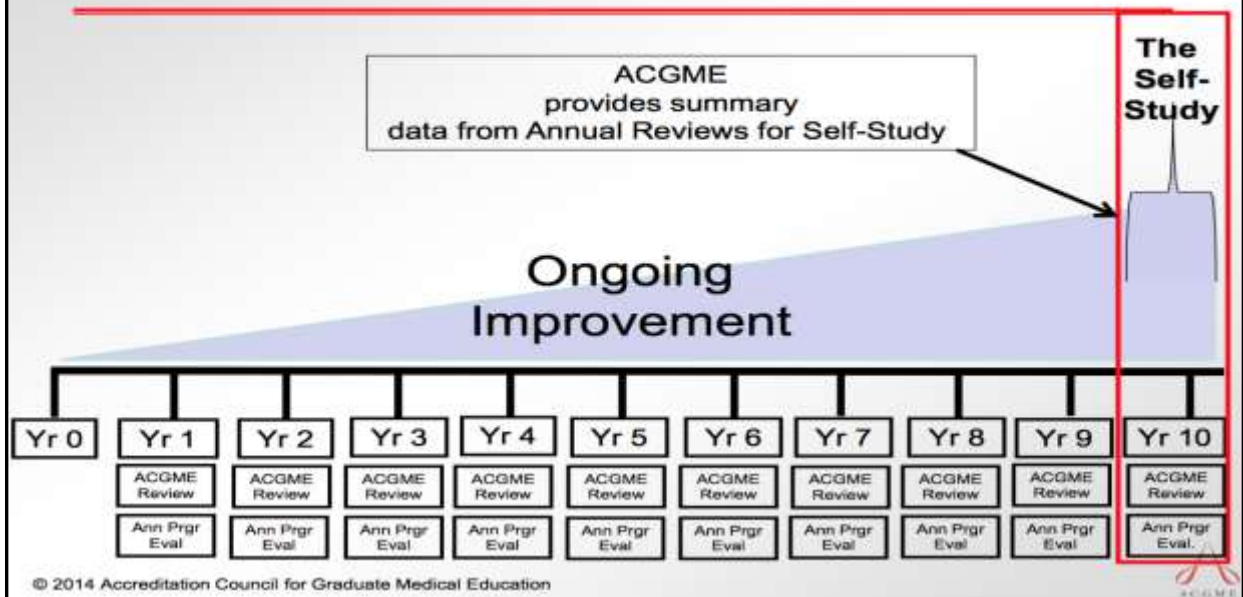
Evolution of RPI (cont.)

- Two peer reviewed publications (JGME, 2014, Educ. In Primary Care, 2016).
- Paired up with RPS Criteria for Excellence to promote FM in NAS.
- Reiterated as a Strategic Priority by AFMRD in 2015/16.

What has worked?

- Early on AFMRD saw where “puck was going” with program quality:
- GME dollars likely to be tied to GME outcomes – thus ACGME’s PEC/APE process.
- Many RPI domains = PEC/APE domains

Ten Year Self-Study: Conceptual Model



What has worked?

- Ten year APE to self study cycle needed tools for programs to demo PDSA cycles.
- RPI fits into this rubric for programs similar to how METRIC helps with QI activities.
- RPI is unique amongst GME specialties in that no other has a national tool like this.

What has worked?

- Effective communication tool
- Appeals to data-minded leadership
 - Dashboards are familiar

What about the data?

- National Median data are available to RPI task force to analyze.
- Changes in some criteria over time make some year to year comparisons difficult.
- Changes in the burden of tracking and managing data may have led to burnout.

What about the data?

- Most years the majority of criteria are in yellow or green for national median.
- Only national median data consistently in red zone was for GYN procedural training.
- Only two criteria moved from yellow to green: Adult inpt encounters and ABFM exam take rate.
- Program data collection became more reliable.

What are the challenges?

- Participation has plateaued after initial enthusiasm.
- Still concerns that data will be used against programs.
- Data management fatigue, duplication of work, struggles to obtain reliable data.

What are the challenges?

- Timing of survey, delay in getting reports, lack of year to year comparison in reports.
- Green, yellow, red targets cause angst amongst report recipients.
- Inability to analyze data and show that programs move from red/yellow to green.

Opportunities

- Moving to **online** dashboard software vendor will free up staff time.
- Will allow for **real time** visualization of data and criteria and year to year **comparisons**.
- Will allow for some **customization** of program reports for APE/PEC.

Opportunities

- Partnership with RPS and new Criteria for Excellence.
- Revision of criteria to include different key performance indicators.

Opportunities

- Publication of learnings from data analysis and national trends.
- Compliment to work of national graduate survey

DEMO

<https://afmrd.onqpr.com>

Questions at this point?

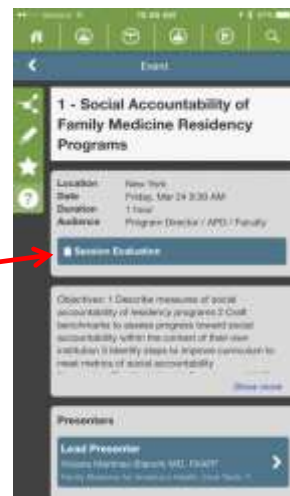
Feedback from you...

23

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Please...
Complete the
session evaluation.

Thank you.



24

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