RESIDENCY ADMINISTRATIVE POLICY

ACGME-I Surveys (Faculty & Resident)

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<th>Document No.</th>
<th>Revision</th>
<th>Original Date</th>
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Process Owner: Clara Sin
Assistant COO &
Director, GME Office / Medical Affairs-Education

Approval: A/P Shirley Ooi
Designated Institutional Official (DIO), NUHS Residency

Description of Content/Change:
- New Document
- Major Content Change
- Minor Content Change
- Non-content Change
- Deletions Only

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Applicability:
- NUHS Corporate Office
- NUH
- NUS – SoM/FoD (Executive & Professional Employees Only)

1.0 Objectives

1.1 To ensure that the ACGME surveys are assessed and reviewed, and necessary actions are taken to address any issues raised.

2.0 Scope

2.1 The policy applies to any program which is surveyed by ACGME-I and report is furnished to program at the end of the survey period.

3.0 Policy

3.1 ACGME conducts 2 surveys via the Accreditation Data System (ADS) annually. They are the Residents and Faculty Survey.

3.2 Following the residency timeline, Faculty survey is usually conducted in December and Residents survey in March the following year.

3.3 When results of the survey are released, the DIO Office will centrally collate and analyze the results. Program Directors are likewise required to review the results and draw up action plans to address the issues.

4.0 Guidelines

4.1 All core faculty and residents are to complete the survey in ADS.
4.2 For the Faculty survey, the GME Office collates the results centrally and shares the results with GMEC.

4.3 For the Residents survey, all programs are to conduct a briefing for their residents 1 month before the actual survey.

4.4 When the survey results are collated and released, programs are to meet up with residents to review the results and draw up an action plan report. The report is to be written following the standard template (Appendix A) and submitted to the GME Office 2 months after the release of the results.

4.5 The submitted report is to be reviewed and passed by GMEC.

4.6 The GME Office will track progress of the follow up action plans 6 months after the report has been approved.

5.0 Procedures

5.1 One month before the Residents survey, programs are encouraged to conduct a briefing for their residents. Briefing will emphasize the importance of the survey, clarify the meaning of the questions and explain what the range of scores in the survey responses mean.

5.2 When the survey has ended, ACGME-I alerts the GME Office that the results are available in ADS for both the Faculty and Residents surveys. For the Residents survey, the report is available only for programs with more than 4 residents so as to ensure anonymity of the respondents.

5.3 Centrally, the GME Office collates and analyzes the data and sends it to the programs for review.

5.4 Programs are to review the results with their residents and to draw up follow up action plans to resolve areas that reflect 20% or more non-compliant (grey) responses. The follow up report is to be submitted to the GME Office 2 months after the results are released.

5.5 The follow up action plan reports will be reviewed at the next GMEC Meeting.

5.6 The GME Office will check the progress of the follow-up action plans 6 months after the reports have been approved.
6.0 Workflow – Resident Survey

ACGME Survey

1 month before ACGME Resident’s survey, programs to brief residents on survey

Resident’s survey (March)

After results are out, PDs meet with residents to discuss (DIO Office to be informed of the dates and venue).

DIO office analyze the results and DIO may meet with resident

POs to submit action plan based on areas with 20% or more non-compliant (grey) response 2 months after results are out.

Action plans are presented and approved at GMEC

Follow-up with action plans; All action items should close in 6 months

Results are updated at GMEC

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Updated: 10 May 2013
NUH Medical Affairs Education
## Appendix A: Standard Template for ACGME Survey Follow Up Report

**NUHS Resident Survey Follow Up Plan**

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<tbody>
<tr>
<td>Survey Date:</td>
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<tr>
<td>Total No. of Resident:</td>
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### Main Areas of Concern

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<th>Itemized Action Plan</th>
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**Program Director**

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**Reviewed by DIO**

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