Demystifying the Site Visit: Perspective of a Resident and Review Committee Member

At some point during their education, most residents will have the opportunity to participate in an ACGME accreditation site visit of their program or sponsoring institution. Although it is partly the job of the program to prepare its residents for the questions they may be asked, residents may not understand the goal of the site visit and its important role in program and institutional accreditation. As a new member of the Review Committee for Urology, and a resident whose program recently underwent a site visit, I have had the unique opportunity to experience the site visit from both sides of the table. I hope describing my experience will help residents better understand the site visit and how to best prepare for this crucial step of the accreditation process.

Like many residents, I approached my program’s site visit with some apprehension. I had not yet begun my Review Committee duties, and had no real understanding of how the site visit would be used in the evaluation of my program. I was concerned that I was going to answer a question “wrong” and that this would contribute to an unfavorable review of my program. I wasn’t sure if there would be factual questions that I needed to prepare for. What kind of knowledge would be tested? I was also concerned that a poor review would result in a punitive action against the program and, in the worst case, result in a decision to withdraw my program’s accreditation. Knowing what I know now, I realize that my concerns could have been allayed with a better understanding of the process and intent of the site visit.

From the perspective of the Review Committees, the site visit, program information form (PIF), Resident Survey, board performance data and, for some specialties, surgical and other Case Log data comprise the essential sources currently utilized in the accreditation process. The PIF is a detailed summary of the program, in which program directors must specifically account for each required educational element. The Resident Survey is the annual ACGME questionnaire filled out by all residents (and fellows), which asks about work hours, balance of education with service requirements, faculty member involvement in teaching, and other aspects of the educational experience.

In addition, since July 2011 ACGME site visitors have requested a confidential list of the residents’ consensus on their programs’ strengths and weaknesses for discussion.
During the site visit. The list is requested through a note to the program director and is either sent directly to the site visitor or brought to the resident interview.

The site visit has three purposes:

• to verify and clarify that the information in the PIF is accurate;
• to detail any concerns that arise in the Resident Survey; and,
• to give residents the opportunity to voice concerns that are otherwise not addressed.

The site visitor, who is an unbiased observer specifically trained by the ACGME for this purpose, follows a scripted series of questions. He or she also has the responsibility of investigating problem areas in more detail. For example, if several residents indicated in the Resident Survey that fellows were negatively affecting resident education, the site visitor would specifically inquire about why this is the case and what, if any, steps have been taken to address the matter. The site visitor communicates this information, along with answers to all of the scripted questions, to the Review Committee in a written report. The report follows the outline of the ACGME Common Program Requirements and specialty requirements or, in the case of an institutional site visit, the Institutional Requirements. The detailed Site Visit Report, the annual Resident Survey, the PIF, and other data are reviewed by Review Committee members in every accreditation evaluation.

Residents should understand that their comments during the site visit are taken seriously, so it is important to be well-informed. The ACGME and its Review Committees are strong advocates for residents and, therefore, give greater weight to any resident concerns, even if they represent a minority of the resident cohort. For example, even if only two or three out of 10 residents feel that faculty members aren’t participating enough in resident conferences, the Review Committee will seriously consider a citation, unless the program can prove otherwise. Because it may be difficult for some residents to be frank, even in a closed-door setting, the site visitor may divide the residents into smaller groups by program year or may choose to interview residents individually.

It is important for residents to understand their rights and responsibilities under their specialty’s program requirements. For example, a number of questions in the Resident Survey ask about the balance between resident education and service obligations. Many residents mistakenly equate service obligations with rounding, scrubbing in on operative cases, or working in clinic, and also mistakenly equate educational activities with purely didactic sessions.

However, from the ACGME’s perspective, all activities that contribute to competence for independent practice are educational, while service obligations refer to scheduling operating room cases, arranging clinic visits or pre-op appointments, or other clerical duties. Although the site visitor will help draw these distinctions, it is important for residents to understand what the questions mean before the site visit and interview. Residents may wish to review the program requirements for their specialty and ask their program director, site visitor, or another ACGME representative for clarification if they have any questions or concerns.

(continued on page 3)
Residents should understand that the idea of the site visit and accreditation process is to help programs identify areas for improvement and thereby strengthen them, not to punish programs that need improvement. The ACGME and its Review Committees realize that all programs have strengths and weaknesses and that no program is perfect. Most programs, and many excellent ones, receive some citations with each review, which can be used constructively to improve their residents’ educational experience. Revocation of accreditation only occurs in programs with repeated or severe violations and failed attempts at rehabilitation.

Therefore, it is in residents’ best interests to be honest in the site visit and review process. Residents should remember that the ACGME is their advocate for ensuring a balanced education and healthy work environment, so it is critical to be a partner in that effort.

In the end, my site visit experience was a very positive one. The members of my resident group had an hour and a half-long casual conversation with the site visitor, and we were responsible only for detailing what we do on a daily basis, and providing more information regarding our answers on the Resident Survey. It wasn’t a test of knowledge or facts, nor was it confrontational. I realized that there were no wrong answers, just clarifications of strengths and weaknesses, which all programs have. By the end of the session, I felt like I had a new appreciation for what my program did really well and could do better.

After having seen the site visit from the perspective of a resident and now from that of a Review Committee member, I have come to appreciate its vital role as a face-to-face appraisal of a program from the viewpoint of its most important consumers – the residents. Residents should take the opportunity to become well-informed of their rights and responsibilities and provide honest feedback to help facilitate improvement in the educational experience for themselves and their junior colleagues.

Written by Tim Daskivich, MD, a sixth-year urology resident at the David Geffen School of Medicine at UCLA and a resident member of the Review Committee for Urology.