

Annual Program Evaluation (APE) Tips

Core PD session SAAAPM Annual Meeting 2019

The Annual Program Evaluation (APE) is a structured, formal evaluation of the program's curriculum required completion by the ACGME on an annual basis. It is a key reference for the 10-year self-study to be completed prior to a 10-year Accreditation Site visit.

The Annual Program Evaluation (APE)/Annual review must:

- a. Include an action plan and
- b. Be distributed to and discussed with the teaching faculty and residents and the Designated Institutional Officer (DIO).

Web-ADS-web-based accreditation data system is an ongoing communication tool between programs, sponsoring institutions, resident review committees (RRCs) and the ACGME. This update is interrelated with APE and the two should be utilized to navigate change within a program.

1. What is the value of APE and how do you articulate it to your stakeholders?

- a. To identify opportunities and gaps in the program and ask for resources (faculty, trainees)
- b. To promote continuous improvement within a program (job satisfaction, CME-faculty and trainees)
- c. To train future competent, effective anesthesiologists (chair, faculty, trainees, ABA)
- d. To communicate key changes to trainees and faculty
- e. To engage faculty and residents for program improvement
- f. To promote national recognition for a program (Chair, PD, faculty, trainees)
- g. To have a successful match (chair, PD) and accreditation (ACGME/GME)
- h. Use faculty/trainee meetings and retreats to identify clear goals and vision
- i. Identify actionable items and metrics to be used

2. What kinds of data and metrics do you use in your APE?

- a. Surveys-local GME survey (if one is available), annual ACGME Survey, graduating residents' exit interviews, alumni and graduates' employers
- b. Anonymous access surveys
- c. Duty Hours, case logs, and rotation evaluations
- d. Focus groups (to be led by a neutral party, like PD from another program or chief residents)
- e. Chair small group meetings
- f. 360 evaluations

3. What do you wish others knew about the process of creating the APE?

- a. How many hours and energy it takes to accurately complete this task
- b. How many people it takes to obtain the information, process it and clearly articulate it for distribution
- c. Why this is important information (brings it back to the value of this document)
- d. How they can help with the process, team work makes this task easier to complete

4. Other Tips:

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- a. You do not have to do this alone - tap into GME, other Programs, ACGME
- b. Use qualitative Data
- c. Reframe (not only a requirement but a tool to improve your program) and reflect

FYI

Program Evaluation Committee members are appointed by the PD and should include a minimum of TWO faculty, at least one core and at least **ONE resident**. The committee:

1. Acts as an advisor to the PD through program oversight
2. Reviews program goals, guides improvements, and develops new goals and metrics to meet them
3. Performs SWOT analysis-strengths, weaknesses, opportunities, threats
4. Assesses the curriculum, prior APE, local and ACGME surveys with emphasis on
 - a. Resident and faculty well-being
 - b. Resident Milestone achievement
 - c. Workforce diversity
 - d. Faculty evaluation
 - e. Quality and safety of patient care

Reference

<https://www.acgme.org/Program-Directors-and-Coordinators/Welcome/Avoiding-Common-Errors-in-the-ADS-Annual-Update>