Call for Participants
CLE Quadruple Aim Initiative
Pilot Cycle

Introduction

Building on the success of its Clinical Learning Environment Review (CLER) Program's *Pursuing Excellence in Clinical Learning Environments* initiative, the ACGME announces a new opportunity for ACGME-accredited Sponsoring Institutions to demonstrate value and build meaningful relationships with the leaders of their clinical learning environments (CLEs). This new improvement network, the **CLE Quadruple Aim Initiative**, aims to enhance graduate medical education (GME) integration into CLE efforts to optimize patient care and advance the Quadruple Aim of simultaneously improving patient outcomes, enhancing patient experience, improving health care practitioner well-being, and reducing cost of care.

The CLER Program seeks up to 10 teams from CLEs of ACGME-accredited Sponsoring Institutions for the initial pilot cycle of this improvement network. Teams will learn from one another while engaging in a clinical quality improvement (QI) project of strategic priority to their CLE.

Each participating team will identify GME and CLE leaders who will articulate an overall aim (outcome) and associated goals that address a priority within their CLE's strategic plan that also addresses elements of the Quadruple Aim. Teams will then leverage GME insights to design and execute tests of changes and learning to achieve their identified goals. At the conclusion of the cycle, teams will be expected to submit a summary of their efforts that details their successes and lessons learned, which will be published on the ACGME website to foster widespread learning throughout the GME and CLE communities.

Initiative Overview

The CLE Quadruple Aim Initiative will engage participating teams in 15-month projects that include pre-work, improvement work, and time for consolidation of learning (see details below). Throughout the project, teams will also participate in monthly joint learning sessions, conducted via video conference. During these sessions, the teams will participate in facilitated discussion on cross-cutting topics, including prioritizing improvement efforts, aligning with organizational strategic efforts, building business plans, and using tools such as stakeholder analyses and asset mapping. Most important, the sessions will promote leadership and advance skills in developing GME/CLE collaborations and optimizing patient care. These sessions will also allow all of the teams to follow each other's progress.

The Timeframe
Each cycle of the CLE Quadruple Aim Initiative will utilize a 2+12+1 (15-month) timeframe that includes:
- two months of pre-work (i.e., commissioning and launching a team, understanding the CLE's system, developing goals that focus both on heath care improvement and GME/CLE integration, focusing collective efforts, and generating change ideas);

- 12 months of improvement work during which the teams will test changes and learn what does and does not work; and,
- one month of consolidating learning for dissemination (including producing the summary to be posted on the ACGME website).

Project Criteria

Each team project must meet the following criteria:
- Addresses a strategic objective of high priority to the CLE's executive and quality leaders that could benefit from partnering with GME and occurs in an environment that includes GME faculty members, residents, and fellows on the CLE's QI team.
- Identifies a family of measures (outcome, process, and balancing) that relate to the goals of the improvement effort and align with selected elements of the Quadruple Aim.
  - In addressing the Quadruple Aim, all projects will be expected to address the aim of improving health care practitioner well-being. Each project must also address one or more of the remaining three aims of: improving patient outcomes; enhancing patient experience; and reducing cost of care. Participants are also welcome to expand their project to address the Quintuple Aim which includes advancing health equity.
- Is sized such that the improvement activities can be accomplished within a 12-month time frame. This could mean:
  - a project that runs the entire 12-month period;
  - a smaller project that can be tested in one area during the first six months and replicated in another clinical area/unit during the following six months;
  - two smaller unrelated projects that run sequentially during 12 months; or,
  - other (provided the project(s) fit within 12 months).
- Addresses one or more of the pathways in the *CLER Pathways to Excellence* document.

Selecting the Project Topic

Individual teams will work on a QI project of their own choosing; teams do not have to address the same topic or challenge. As such, a team's project can be:
- new to the CLE's QI department;
- already ongoing within the CLE and amenable to a new phase of improvement;
- underway in the CLE but that to date has not involved GME in understanding the system and developing and testing change ideas; or,
  - part of a larger CLE QI initiative. For example: The CLE may have a system-wide initiative to improve patient throughput; this project could focus on throughput in one area, such as Emergency Department to floor, or turnaround times in the operating rooms for same-day surgery.
  - The CLE may be on a journey toward becoming a high-reliability organization (HRO) by improving efficiency and reducing unnecessary care. An example would be a project focused on one aspect of the HRO journey, such as reducing duplicate orders for radiographic studies.

The project does not need to be applicable to all GME programs/specialties in the CLE. GME participants from specialties engaged in the project will be expected to serve as role models for their GME colleagues by demonstrating and sharing the benefits of enhanced GME/CLE integration.

Criteria and Expectations for Participation

Any ACGME-accredited Sponsoring Institution with a status of Continued Accreditation is eligible to apply. Each Sponsoring Institution applicant will be asked to identify one participating site to serve as the CLE test site for the duration of the pilot.

Pilot participants will be expected to:

- Secure sponsorship from the CLE's chief executive officer.
- Secure sponsorship from the Sponsoring Institution's designated institutional official (DIO).
- Assemble an interprofessional project team co-led by at least one member of the CLE's executive leadership (e.g., chief medical officer, chief quality officer) **and** the DIO (or their designee who is a GME leader in the CLE).
- Have their project co-leads attend a 90-minute launch teleconference on November 15, 2024, and an in-person meeting on January 13-14, 2025 at the ACGME offices in Chicago. The ACGME will cover travel-related costs.
- Regularly attend and contribute to video conference sessions occurring monthly on the second Friday of every month from 10:00-11:30 a.m. Central throughout 2025 (co-leads required with other members of the project team recommended). See schedule below.
- Prepare and deliver periodic progress reports (to the improvement network and to the CLE's executive leadership).
- Submit a summary of the project upon its conclusion, to be posted on the ACGME website, sharing successful approaches and lessons learned to with the entire CLE/GME community.

Key Dates

Call for Applications Closes	October 18, 2024
Announcement of Participant Organizations	November 1, 2024
Project Launch Teleconference	November 15, 2024
Pre-Work	November 15, 2024-January 12, 2025
Project Improvement Work Kicks Off *in person at the ACGME office in Chicago*	January 13-14, 2025
Project Run Time *including monthly teleconferences the second Friday of every month from 10:00-11:30 a.m. Central*	January 13, 2025-January 12, 2026
Consolidate Learning for Dissemination	January 12-February 13, 2026

Application

The ACGME CLER Program will select pilot participants to represent a diverse range of CLEs. Applicants will be individually notified of final selection on or before November 1, 2024.

Access the application form online via the link below.

https://acgme.qualtrics.com/jfe/form/SV_6Ve4SkPi5HVXDtI

Application Deadline: October 18, 2024

For questions, please contact cler@acgme.org