



National Institute for Health Specialties Rubrics for Accreditation Requirements (Institutional)

GENERAL INFORMATION						
1 Institution Information						
Entity name						
City						
Date						
Requirement	Status			Evidence	Comments	
	Met	P. Met	Not Met			
DOMAIN 1: GOVERNANCE						
Component 1.1. Governance Structures						
1.1.1.	The availability of a written statement of commitment of the Sponsoring Institution's (SI) to provide the necessary educational, financial, and human resources to support GME. The statement must be signed by representatives of the SI's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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	governing body, administration, and GME leadership within a minimum of one year prior to an institutional site visit.					
1.1.2.	The availability of an organized administrative system, led by a designated institutional official (DIO) in collaboration with a Graduate Medical Education Committee (GMEC), must oversee all programs in the SI.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.1.3.	DIO appointed according to the requirements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.1.4.	GMEC constituted according to the requirements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.1.5.	GMEC voting membership include the DIO, residents and fellows nominated by their peers, representative program directors, and administrators.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.1.6.	The GMEC meet at least quarterly and maintain written minutes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.1.7.	Procedures to ensure that DIO designee can perform the duties of the DIO in his/her absence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.1.8.	The availability of GMEC annual report to the SI leadership and governing body of major participating sites. The content of the annual report is as per the requirements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 1.2. Governance Relationships						
1.2.1.	Communication mechanisms exist between the GMEC and all program directors within the institution.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.2.2.	The presence of effective communication mechanisms between program directors and the site directors at each participating site to maintain proper oversight at all clinical sites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.2.3.	Integration of training with clinical governance e.g. committees membership.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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1.2.4.	All programs has established program letters of agreement (PLA) with its participating sites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.2.5.	Effective communication with the NIHS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 1.3. Governance Processes						
1.3.1.	Availability of policy/manual for residency training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.3.2.	Availability of financial plan and budgeting for residency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
1.3.3.	Quality assurance system and plan for residency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
OVERALL ASSESSMENT OF DOMAIN 1:						
Domain 2: Training environment						
Component 2.1. Physical setting and infrastructure						
2.1.1.	Adequate clinical space, patient load, with good case mix.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.1.2.	Adequate communication resources, technological support, information system e.g. databases.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.1.3.	Adequate educational space.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.1.4.	Adequate patient support services: peripheral intravenous access placement, phlebotomy, laboratory, and transporter services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.1.5.	Adequate laboratory, pathology, and radiology services in place to support timely and quality patient care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.1.6.	Availability of medical records system that documents the course of each patient's illness, as well to support quality patient care, residents' and	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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	fellows' education, and quality assurance activities, and to provide a resource for scholarly activity.					
2.1.7.	Access to appropriate food service 24 hours a day.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.1.8.	The availability of adequate and appropriate call rooms or sleeping quarters that are safe, quiet, and private.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.1.9.	The availability of appropriate security and personal safety measures at all locations including parking facilities, on-call quarters, hospital and institutional grounds, and related facilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 2.2. Clinical governance/practices						
2.2.1.	Effective clinical governance e.g. clinical committees and policies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.2.2.	Adequate number and mix of clinical teams.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.2.3.	Appropriate education-service balance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.2.4.	Appropriate diversity of training experience, e.g. different levels of services.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.2.5.	SI and participating sites is accredited by the Joint Commission International or by another entity with reasonably equivalent standards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 2.3. Learning/training resources						
2.3.1.	Sufficient equipment and supplies for learning e.g. audio-visual aids, computers, data-show, laptop, white board, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.3.2.	Adequate IT infrastructure and systems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.3.3.	Access to specialty-/subspecialty specific and other appropriate reference material in print or electronic format. (Including electronic medical literature databases with search capabilities).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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2.3.4.	Adequate setup and facilities for research.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 2.4. Positive learning culture						
2.4.1.	Flexible collegial environment for learning e.g. reward system and recognition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
2.4.2.	Policy and process for complaints and appeal by which individual residents and fellows can address concerns in a confidential and protected manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
OVERALL ASSESSMENT OF DOMAIN 2						
Domain 3: Residents/fellows						
Component 3.1. Recruitment and deployment						
3.1.1.	Policy on residents' eligibility and selection is available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.1.2.	Participation in transparent match system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.1.3.	Policy on residents' appointment (contracts) and recruitment is available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.1.4.	Hospital and GME orientation process in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.1.5.	Residents participate in an educational program regarding physician impairment, including substance abuse and sleep deprivation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 3.2. Competency acquisition						
3.2.1.	Supervision policy to ensure provision of safe and effective patient care and educational needs of residents and fellows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.2.2.	Residency manuals addressing curriculum of training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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3.2.3.	Mechanism for assigning progressive responsibility appropriate to residents and fellows' level of education, competence, and experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.2.4.	Evaluation policy addressing formative assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.2.5.	Mechanism/policy for resident mentorship is available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 3.3. Training procedures						
3.3.1.	Residents promotion and graduation criteria in alignment with NIHS bylaws	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.3.2.	Participation of residents in patient safety and quality of care education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.3.3.	Mechanism/s to ensure compliance on policies and procedures addressing duty hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.3.4.	Procedures for residents transfer, freezing and withdrawal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.3.5.	Policy for leave of absence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 3.4. Resident support and growth						
3.4.1.	Procedures to manage other learners.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.4.2.	Access to learning resources and support.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.4.3.	Resident participate on committees and councils whose actions affect their education and/or patient care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.4.4.	Forum for residents and fellows to communicate and exchange information on their educational and work environments, their programs, and other resident issues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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3.4.5.	Provision for leadership and career progression.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.4.6.	Procedures for counselling and wellbeing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3.4.7.	Policy to mitigate the risk of reduction and closure of programs and addresses administrative support for GME programs in the event of a disaster or interruption in patient care (should include assistance for continuation of resident/fellow assignments).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
OVERALL ASSESSMENT OF DOMAIN 3						
Domain 4: Faculty and administrative staff						
Component 4.1. Scope and recruitment						
4.1.1.	Presence of program organizational structure to support the residency training e.g. PD, APD, Faculty (core and non-core; physician and non-physician), coordinator etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.1.2.	Availability of criteria for faculty eligibility and selection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.1.3.	Procedure for recruitment and job description.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.1.4.	Hospital and GME orientation process in place e.g. faculty development training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 4.2. Support and growth of training team						
4.2.1.	Provision for time, space, and equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.2.2.	Procedures for participation of faculty in evaluation and development of the residency program e.g. participation in program committees.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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4.2.3.	Existing of faculty development program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.2.4.	Procedure in place for career progression and recognition.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 4.3. Performance management of training team						
4.3.1.	Performance appraisal system in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.3.2.	Procedures to support the faculty to balance between teaching and clinical activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
4.3.3.	The availability of institutional grievance policy including appeal procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
OVERALL ASSESSMENT OF DOMAIN 4						
Domain 5: Continuous improvement and innovation						
Component 5.1. Internal review						
5.1.1.	Existing policy and process for internal review.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5.1.2.	Issuance of internal review report by the internal review committee.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5.1.3.	Issuance of action plan for improvement by the reviewed program to be supported and approved by the GMEC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5.1.4.	Periodicity of internal review is observed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 5.2. Quality improvement culture and system						
5.2.1.	System for quality assurance in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5.2.2.	Documentation and reporting system in place e.g. clinical incidents reports, complaints, audits, tracers etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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5.2.3.	Quality indicators reported across many clinical and administrative domains.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Component 5.3. Change and innovation						
5.3.1.	Existing resources for renewal and innovation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5.3.2.	Socially responsive residency training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5.3.3.	Existence of innovative initiatives and practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
OVERALL ASSESSMENT OF DOMAIN 5						
Overall assessment of all domains:						

NAME	POSITION	SIGNATURE

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