

# **THE ASSOCIATION OF PROGRAM DIRECTORS IN SURGERY (APDS)**

## **Request for Proposal (RFP) in support of New Educational Quality Improvement Program (EQIP)**

### **I. EXECUTIVE SUMMARY**

#### RFP in brief:

The APDS is seeking RFPs to create a secure, interactive data repository that can drive a continuous Educational Quality Improvement Program (EQIP). The proposed EQIP is a data repository and a continuous educational quality improvement program for surgical program directors to improve the quality of surgical education/training they provide to their residents. If EQIP is shown to work as a proof of concept program through this RFP, the data repository and the underlying continuous quality improvement structure needs to be expandable to allow partnerships with other organizations.

Deadline for submission of RFP: 15 April 2020

### **II. INTRODUCTION**

#### Who is offering the RFP?

The Association of Program Directors in Surgery (APDS) is a 501(c)(3) corporation ( <http://apds.org/> ) that was founded in 1977. We currently have over 600 members and hold biannual meetings of our membership. Our mission is to advance general surgery education for the public good by developing and supporting Program Directors and their trainees. Our strategic vision is that by 2024, APDS will be the premier source of expertise and influence on general surgery resident education, delivered through professional development and mentoring programs, research efforts, sharing of standards and best practices, and input to policies and regulations. The organization has 5 purposes:

1. To provide a forum for the exchange of information and for discussion on a wide range of subjects related to post-graduate surgical education;
2. To maintain high standards of surgical residency training by improving graduate surgical education and patient care;
3. To provide advice, assistance, and support to program directors on matters pertaining to surgical education and to accreditation;
4. To encourage research into all aspects of the education and training of surgeons and surgical subspecialties;
5. To represent the interests of program directors in the education and training of high quality surgeons to other organizations, individuals and governmental agencies or regulatory bodies.

#### Why is the RFP Needed?

Currently the surgical educational space is occupied by the APDS, American Board of Surgery (ABS), American Council on Graduate Medical Education (ACGME), American College of Surgeons (ACS), Association for Surgical Education (ASE), Center for Medicare/Medicaid Services (CMS) and others. These organizations contribute educational content, best practices as determined by expert opinion, regulatory oversight, funding and data collection and reporting. The APDS has recognized an opportunity to build a data repository and continuous quality improvement structure to provide risk-adjusted data on how well residency programs prepare their surgical residents for the practice of surgery. This program could fill a need in the surgical education space and is consistent with the goals of the APDS.

This RFP is for the creation of a data repository that can drive a continuous educational Quality Improvement plan, which we have called EQIP (Educational Quality Improvement Project), modeled after the National Surgical Quality Improvement Project (NSQIP - <https://www.facs.org/quality-programs/acs-nsqip>). NSQIP is an American College of Surgeons' voluntary program for hospitals which allows hospitals to benchmark the clinical outcomes of the patients that their hospital provides care to in a risk-adjusted manner. Our EQIP proposal hopes to provide surgical residency program directors educational outcomes that their training program provides to their surgical residents in a risk adjusted manner that can inform them of how to improve their surgery training programs. Additionally it is hoped that this EQIP program could help program directors inform our national partners in surgical education of surgical education best practices using a data-informed methodology.

### **III. PROJECT GOALS**

1. Creation of a easily usable tool for surgical program directors to improve the quality of the education/training they provide their surgery residents
2. Development of a continuous quality improvement program that will improve the quality and the efficiency of surgical training and thereby improve the care of the surgical patient in modern healthcare systems
3. Creation of data repository that will allow for the ability to answer data-informed questions in the arena of surgical training

### **IV. SCOPE OF WORK AND DELIVERABLES**

#### Broad Outline of EQIP

For this proof of concept RFP, the APDS would ask that each general surgical program in the US collect 40 data points for each of their residents for a 6 year period. All of these data points would be accessible to the program in the residents file. All these data points would be selected and defined by the APDS Research Committee in collaboration with the winning RFP organization. 10 data points would describe the residents experience as a medical student, 15 data points would be about the surgical training program the resident is in and 15 data points would be particular to the individual resident. After the data is collected an analysis would be performed. Two of the data elements would be the outcome variables – these variables are the pass/fail status on two high stakes exams - the American Board of Surgery QE exam (the “qualifying exam” - a written test) and the American Board of Surgery CE (the “certifying exam” - an oral exam). Using the other 38 variables (in the first 3 years of the data collection)

we would ask that a predictive equation be developed for all programs that would predict the passing rate on the QE and the CE. With that equation we would then ask that the equation would be run against the next 3 years of data that would allow for the creation of an O/E ratio for each program that would be organized graphically as a caterpillar plot. Each program would receive this caterpillar plot with every center displayed but only they would know which program they are. This would be repeated each year with the most current 6 years being utilized – 3 for development of predictor and 3 for running the O/E. In addition to the caterpillar plot the program would also have access to a dashboard where they could perform some individual analysis of their training program.

#### Number of participating centers:

There are roughly 300 general surgery programs in the US which train residents in surgery for a 5 year period. There are approximately 5,250 residents in these training programs (all post-graduate levels of training) of which 1100 graduate each year. We expect that one-half of the training programs would want to participate. The number of surgery residents for each program is approximately 3.5 residents per year (size of programs vary from 2-3 graduating chiefs a year to 10-12 chiefs a year) and they train for 5 clinical years.

#### Technical needs:

- Data collection interface – a real time web-based interactive UI with appropriate user/roles configuration and ability of an administrator to manipulate what fields are collected
- Support of deployment – activities that help the APDS advertise the program, training users, and support initial rollout. Describe the training programs and how they would be delivered to program directors and their coordinators. What customer service would be available to registrars who have questions or issues while entering data? How do you address technical support with data entry? How registrars will have the opportunity to identify and resolve data quality issues using EQIP tools.
- A process for determination of future data fields, data definitions and data coding
- A future process for obtaining data from other sources (development of two-way interfaces) such as ACGME, ABS, and CMS.
- A plan for data security and back-up
- Data analytics – To include custom built dashboard for each program director and overarching management dashboard, O/E Model development. Plans for data analytics and initial modeling effort with a number of review cycles with experts from APDS
- A plan to allow for future research dataset to be developed as well as pre-written and customizable queries
- A participant use data file (PUF) will be prepared annually beginning one year after the start of the program. It will contain de-identified, summative data from all data fields and will allow for comparison of the program directors program to the aggregated national data (all other participating centers). The PUF will be available to any individual who has an official role at an actively enrolled EQIP center, after execution of a Data Use Agreement with the APDS. Describe the reports that would be available to users. Proposal/submissions should indicate the applicant's perspective on whether these should be static reports created at a certain time or if they should be fluid reports that would be run by the users. Similarly, applicants should suggest how often they would be updated

and specifics on how could centers review benchmarking reports, what these reports should contain and how often such reports would available?

- Describe aspects of flexibility, for example, how APDS would have access to use for research, and whether the APDS will be able to define standard reports it wishes to see.
- Ongoing annual maintenance of program – website and backend database maintenance, model updating, and other support as needed
- Act as the data coordinating center for the project. Need to meet data protections standards and be compliant with FERPA guidelines and regulations. Allow for information to integrated from other data sources.
- Act as the data repository.

Future Considerations: While these next goals are not within the scope of the current RFP the APDS would hope to expand the program in the future. It would therefore be favorable that the platform built within the context of this RFP consider and be adaptable to the following future areas of expansion:

- 1) The APDS Research committee would publish an annual Best Practices based on an analysis of the top quintile high performing programs and lowest quintile performing programs. This could inform our discussions with the ACGME and the ABS.
- 2) The database would be offered as a stepping off platform for research questions. Program driven research projects. Once the underlying platform is developed this would encompass creating a new set of fields with data collection instructions and pushing them to centers and building a new set of reports and models.
- 3) Partnership with the ACGME, ABS would allow some of the data elements to be auto-populated into the EQIP database.
- 4) Allow for an annual evaluation of the discriminatory power of each data element and consider removing it for future data collections and consider adding new data elements.
- 5) A plan for allowing EQIP consortiums to develop to share their private data to collaborate to create interventions to improve surgical training (examples of collaboratives – the rural training program collaborative, the university affiliated program collaborative, the Southwest programs collaborative).
- 6) Collect new outcome variables on post-graduation resident performance (a previous APDS RFP - community rating of surgeons in the first year postgraduation).
- 7) Allow for the possibility that other surgical specialty programs and medical training programs might use this program (contingent on approval or licensing secured from APDS).
- 8) Allow for the future collection of clinical patient related outcomes (HIPPA regulations apply) and linking this data to resident and/or program education and training.

## V. PROJECT TIMELINE

RFP offered: 15 January 2020

RFP submission deadline: 15 April 2020 - no later than 5 p.m. (EST)

Notification from APDS of winning RFP submission: 15 May 2020

Deadlines for RFP work-product

Software design, input interface completion: 1 September 2020  
Data analysis plan: 1 September 2020  
Plan for site education and help with data submission: 1 July 2020\*  
Data analysis – pilot data on first 25 submitting centers: 1 January 2021  
Creation of output reports for all participants: 1 September 2021  
Completion of all deadline for RFP: 1 October 2021

\*Data submission period from participating centers 1 October 2020-1 February 2021

## **VI. STRUCTURE OF THE VENDOR PROPOSALS (RFP)**

Section 1: Executive Summary

Section 2: Background Information

Section 3: Proposed services and Deliverables

- Data collection and data storage
- Data analysis, creation of predictive models
- Program level registrar/coordinator training
- Output to program directors
- Quality Improvement program

Section 4: Timeline and Budget

- Itemized cost of each portion of the EQIP proposal
- Provide a list of enhancements and associated costs for items that may be desirable but are not specifically outlined in this RFP
- Provide an estimate of the annual recurring cost to participating programs if EQIP went forward as a subscription service

Section 5: Portfolio of Your Company's Other Work

- Describe your company and why it is best suited for this project
- Provide information about your team. How many people are at the company and what is their background. Who would be assigned to work with the APDS and in what capacity?
- Provide examples of other similar work your organization has completed

Section 6: Supporting Documents

- Please include three letters of reference from companies/associations you have provided comparable services for in the past 18 months.
- A critical path timeline outlining deadlines for implementation.
- Listing of all additional services and related costs that the company can provide.

## **VII. OTHER**

### **EVALUATION METRICS**

The APDS will evaluate bidders and proposals based on the following criteria:

- Previous experience/past performance history
- Samples and/or case studies from previous projects
- Projected costs
- Experience and technical expertise

### **PROPOSAL TERMS & CONDITIONS**

Association of Program Directors in Surgery Confidential and Proprietary

- This invitation to bid does not in any way obligate the APDS to accept any proposal.
- The APDS reserves the right to reject all or any part of your proposal.
- Price and other factors will be considered and may be negotiated with the company whose bid is most advantageous.
- When submitting quotations, additional suggestions covering reductions in cost should be offered wherever possible. However, these suggestions should not be offered in lieu of addressing a specification of this proposal.
- The information provided in this proposal is proprietary. APDS requests this information be kept company confidential. This information should not be distributed or reproduced, except for the purpose of collaboration on the proposal, without the express written consent of the APDS.

### INTELLECTUAL PROPERTY

Association of Program Directors in Surgery (APDS) is the sole owner of all data/content collected or received, and any vendor selected pursuant to this RFP shall not have any rights in the data. APDS sees itself operating to protect all data/content collected or received on behalf of the person(s)/entity(ies) that provide the data, who APDS recognizes shall have full rights to use their own data without restriction. In this role, in any cases where requests for access to any data may be received from parties other than the person(s)/entity(ies) that provided the data, the APDS shall solely determine, in consultation with such providing person(s)/entity(ies), to the greatest extent possible how said data/content is distributed, to whom and under what restrictions. Any vendor selected pursuant to this RFP shall not have any rights regarding the data/content, and said data/content may not be used by or distributed to a third party without the express written permission of the APDS.

Distinct from the data itself, all work product completed by a selected vendor for this EQIP project, e.g. programming written, IT protocols, reports and functionality shall, without exception, be considered as, and ownership ceded to APDS as ‘work for hire.’

### INDEMNIFICATION

The event capture vendor will indemnify and hold harmless the APDS against and from any and all claims, liabilities, damages, fines, penalties, or costs of whatsoever nature (including attorney’s fees), and whether by reason of death or injury to any person or loss of or damage to any property or otherwise, arising of or in any way connected with this agreement, the services provided by registration company or any sub-contractors of chosen registration company, its agents, servants, employees, licensees, or invitees, and whether or not occurring during the term hereof occasioned or contributed to by the negligence of any APDS agent, employee, director, officer or staff.

### **VIII. PRINCIPLE POINT OF CONTACT**

For questions and for final submission:

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