THE CLINICAL LEARNING ENVIRONMENT REVIEW (CLER)
Executive Summary

Over the years, it has become readily apparent that the clinical setting in which residents and fellows learn directly impacts the quality of their training. In order to better understand these environments, the ACGME established the CLER Program. The CLER Program is designed to provide graduate medical education (GME) leaders of Sponsoring Institutions and the executive leadership of clinical learning environments (CLEs) with formative feedback on six areas of focus:

- Patient Safety
- Health Care Quality (including health care disparities)
- Care Transitions
- Supervision
- Well-being
- Professionalism

The underlying premise of the CLER Program is that when GME leaders and the executive leadership of the CLEs are presented with detailed information on how they are addressing the six focus areas, they will use it to build upon their strengths, and identify and act on opportunities for improvement—with the ultimate goal of improving patient care while optimizing the educational experience for resident and fellow physician learners.

The site visits are structured to gather evidence that will help answer five key questions:

1. What is the clinical learning environment’s infrastructure for addressing the six focus areas?
2. How integrated is the GME leadership and faculty within this infrastructure?
3. How engaged are the resident and fellow physicians in working with the clinical learning environment’s infrastructure to address the six focus areas?
4. How does the clinical learning environment determine the success of its efforts to integrate GME into its infrastructure?
5. What areas has the clinical learning environment identified as opportunities for improvement?

The initial visits of the CLER Program revealed a number of broad, overarching themes that appeared to be common across many of the CLEs and the six focus areas:

- Clinical learning environments vary in their approach to and capacity for addressing patient safety and health care quality, and the degree to which they engage residents and fellows in these areas.
- Clinical learning environments vary in their approach to implementing GME. In many clinical learning environments, GME is largely developed and implemented independently of the organization’s other areas of strategic planning and focus.
- Clinical learning environments vary in the extent to which they invest in continually educating, training, and integrating faculty members and program directors in the areas of health care quality, patient safety, and other systems-based initiatives.
- Clinical learning environments vary in the degree to which they coordinate and implement educational resources across the health care professions.

These themes speak to the importance of taking a systems-based approach to improving the CLE. The CLER Program will continue to explore how best to address these variations in order to promote excellence in the CLE and advance patient care.