Introduction to Accreditation Standards

Introductory GME Boot Camp 2021

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Housekeeping

All lines will be muted to ensure sound quality

When you want to talk just click 🎤 to mute or unmute yourself. Please mute your microphone when you're not speaking.

You can also choose to have your camera on or off by clicking 📷

Please feel free to use the chat box throughout. 💬

This session is being recorded and will be sent via email.

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Introductions
What is your current role and how long have you been in your role?

3

What would you like to learn from this session?

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Introduction to Accreditation Standards

Introductory GME Boot Camp 2021

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Disclosure

We have no actual or potential conflict of interest in relation to this program/ presentation.

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ACGME Mission and Purpose

Mission
We improve health care and population health by assessing and advancing the quality of resident physicians' education through accreditation.

The ACGME has a twofold purpose:
(1) to establish and maintain accreditation standards that promote the educational quality of residency and subspecialty training programs; and
(2) to promote conduct of the residency educational mission with sensitivity to the safety of care rendered to patients and in a humane environment that fosters the welfare, learning, and professionalism of residents.

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Accreditation Overview

- The ACGME:
  - Create and publish requirements
  - Monitor compliance
  - Delegate authority to Review Committees (RC)

- Institutions and programs
  - Implement the requirements then document and report outcomes

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Review Committee

Types of Review Committees
- **Specialty Review Committee**
- Institutional Review Committee.

- Specialty Committee Membership
  - Physician members
  - Resident
  - Public member

SPECIALTIES

ALLERGY AND IMMUNOLOGY	NUCLEAR MEDICINE
ANESTHESIOLOGY	OBSTETRICS AND GYNECOLOGY
COLON AND RECTAL SURGERY	OPHTHALMOLOGY
DERMATOLOGY	ORTHOPAEDIC SURGERY
EMERGENCY MEDICINE	OSTEOPATHIC NEUROMUSCULOSKEL MEDICINE
FAMILY MEDICINE	OTOLARYNGOLOGY - HEAD AND NEC SURGERY
INTERNAL MEDICINE	PATHOLOGY
MEDICAL GENETICS AND GENOMICS	PEDIATRICS
NEUROLOGICAL SURGERY	PHYSICAL MEDICINE AND REHABILIT.
NEUROLOGY	

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Review Committee Role

1. Prepare, revise, and/or recommend, Specialty specific and Institutional **accreditation standards** to reflect current educational and clinical practice

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Review Committee Role

2. Provides peer evaluation to assess the degree to which programs or sponsoring institutions comply with the **accreditation standards**

The Review Committee may use the following information to assess programs:

a. Continuous Data Collection/Review
  (1) ADS annual update
  (2) Resident Survey
  (3) Faculty Survey
  (4) Certification examination performance
  (5) Case Log data
  (6) Hospital accreditation data
  (7) Other
b. Other data (episodic)
  (1) ACGME Complaints (Section 23.10)
  (2) Verified public information
  (3) Historical accreditation decisions/citations
  (4) Institutional quality and safety metrics
  (5) Other

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Accreditation Cycle
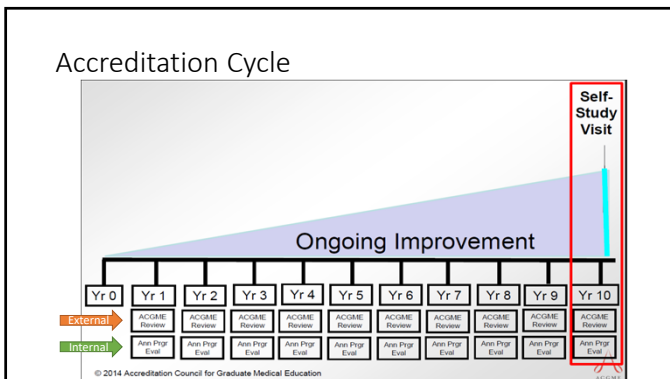
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Internal & External Review

External Review of Data by RC	Internal Review of Data by Program
• Accreditation Data System (ADS) Annual Update • Case Logs • ACGME Resident & Faculty Survey • *Milestones* *All data for RC is entered and collected online.*	Program Evaluation Committee (PEC) generates Annual Program Evaluation (APE) *Internal data for program is entered and collected on New Innovations. This is NOT sent to RC.*

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Online Data Entry

- ADS Annual Update
  - Yearly entry/validation of data to demonstrate a program is meeting requirements
- Resident Case Log System
  - Recording and tracking mechanism for procedures
  - More heavily used in surgical subspecialties
- Milestones
  - ACGME only monitors milestone completion
  - Data from milestones is reviewed and analyzed at a national level.

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ACGME Survey

- Resident Survey
- Faculty Survey
- Metric used by RC to monitor clinical education and environment
- Provides early warning of potential non-compliance with ACGME accreditation requirements.
- All accredited programs (regardless of size) are required to participate in these surveys each academic year between the months of January and April.

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Review Committee Role

3. Confers an accreditation status annually with regard to meeting **accreditation standards**.
   - Continued or Initial Accreditation with/**without** warning or Outcomes
   - Adverse status (i.e., withheld, probation, etc.)

The Review Committee will issue a citation(s) based on findings that an institution or program fails to demonstrate substantial compliance with any <u>accreditation standard(s)</u> or ACGME policy or procedure.
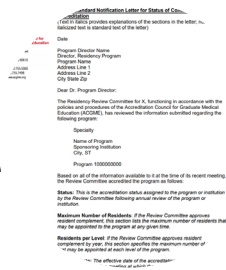
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Accreditation Standards

Types of Review Committees	Accreditation Standards
Specialty Review Committee	• Common Program Requirements (CPR) • Specialty Specific Requirements
Institutional Review Committee	Institutional Requirements

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Accreditation Standards: CPR

Common Program Requirements (CPR)
- Foundational elements for all GME programs
- Three versions
  - Residency
  - Fellowship
  - One year Fellowship
- Embedded in the requirements of your specialty/subspecialty
- CPRs are easily recognizable because they **are in bold font**

I.D.3.	**Residents must have ready access to specialty-specific and other appropriate reference material in print or electronic format. This must include access to electronic medical literature databases with full text capabilities.** (Core)
I.D.4.	**The program's educational and clinical resources must be adequate to support the number of residents appointed to the program.** (Core)
I.D.4.a)	Patient Population
I.D.4.a).(1)	The patient population must have a variety of clinical problems and stages of disease. (Core)
I.D.4.a).(2)	There must be patients of both sexes, with a broad age range, including geriatric patients. (Core)
I.D.4.b)	There must be services available from other health care professionals such as nurses, social workers, case managers,

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Accreditation Standards: Specialty Requirements

Text that are **Not** bolded are specialty/Sub-specialty specific.

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Non-Citable Content in Requirements

- Statements of philosophy
(*Text in Italics*)

II.B. Faculty
Faculty members are a foundational element of graduate medical education – faculty members teach residents how to care for patients. Faculty members provide an important bridge allowing residents to grow and become practice-ready, ensuring that patients receive the highest quality of care. They are role models for future generations of physicians by demonstrating compassion, commitment to excellence in teaching and patient care, professionalism, and a dedication to lifelong learning. Faculty members experience the pride and joy of fostering the growth and development of future colleagues. The care they provide is enhanced by the opportunity to teach. By employing a scholarly approach to patient care, faculty members, through the graduate medical education system, improve the health of the individual and the population.

- Statements of background and intent
(set off by boxes)

Background and Intent: While the ACGME recognizes the value of input from numerous individuals in the management of a residency, a single individual must be designated as program director and made responsible for the program. This individual will have dedicated time for the leadership of the residency, and it is this individual's responsibility to communicate with the residents, faculty members, DIO, GMEC, and the ACGME. The program director's nomination is reviewed and approved by the GMEC. Final approval of program directors resides with the Review Committee.

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Requirement Categorization

I.B.2.   There must be a program letter of agreement (PLA) between the program and each participating site that governs the relationship between the program and the participating site providing a required assignment. (Core)

*Core Requirements: Statements that define structure, resource, or process elements essential to every graduate medical educational program.

†Detail Requirements: Statements that describe a specific structure, resource, or process, for achieving compliance with a Core Requirement. Programs and sponsoring institutions in substantial compliance with the Outcome Requirements may utilize alternative or innovative approaches to meet Core Requirements.

‡Outcome Requirements: Statements that specify expected measurable or observable attributes (knowledge, abilities, skills, or attitudes) of residents or fellows at key stages of their graduate medical education.

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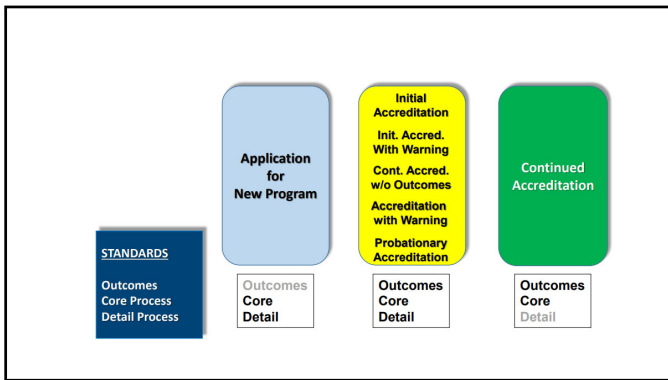
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Accreditation Requirements Breakdown

I.   Oversight
II.   Personnel
III. Resident/Fellow Appointment
IV.   Educational Program
V.   Evaluation
VI.   The Learning and Working Environment

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I. Oversight

Summary
- Participating site and Program Letter of Agreement requirements.
- Program/Institutional Resources

Key Terms
- Program Letter of Agreement (PLA)
- Participating Site
- Sponsoring Institution (SI)
- Designated Institution Official (DIO)
- Graduate Medical Education Committee (GMEC)

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I. Oversight: General Tips

- PLA's are managed by the program and GME office
- Information on PLA must be kept up to date.
- Information on PLA must match the information on the programs Accreditation Data System (ADS)
- All new sites must be reviewed and approved by the GME and the GMEC

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II. Personnel

Summary
- Role and responsibility of the Program Director, faculty and program administrator
- FTE requirements for PD/PA role

Key Terms
- Program Director (PD)
- Core Faculty
- Faculty Development

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II. Personnel: General Tips

- If considering succession planning pay close attention to qualification requirements for PD.
- Review the roles and responsibly of Program Director, Program Administrator, Faculty and Core Faculty
- Review Faculty development requirements

II.B.2.g)	pursue faculty development designed to enhance their skills at least annually; (Core)

Background and Intent: Faculty development is intended to describe structured programming developed for the purpose of enhancing transference of knowledge, skill, and behavior from the educator to the learner. Faculty development may occur in a variety of configurations (lecture, workshop, etc.) using internal and/or external resources. Programming is typically needs-based (individual or group) and may be specific to the institution or the program. Faculty development programming is to be reported for the residency program faculty in the aggregate.

II.B.2.g).(1)	as educators; (Core)
II.B.2.g).(2)	in quality improvement and patient safety; (Core)
II.B.2.g).(3)	in fostering their own and their residents' well-being; and, (Core)
II.B.2.g).(4)	in patient care based on their practice-based learning and improvement efforts. (Core)

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IV. Educational Content

Summary
- Breakdown of the curriculum and educational content.
- Specialty specific competencies
- Didactic curriculum
- Faculty and Trainee Scholarly Activity

Key Terms
- Mission
- Aims
- Goals and Objectives (G&O)
- ACGME Competencies

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IV. Educational Content- General Tips

- Annually review program specific mission and aims
- Up-to-date Goals and Objectives for each educational assignment.
  - G&O's should be progressive and level base
- Review and be familiar with specialty specific competencies
- Review specialty specific requirements for didactics.

IV.C.5.c)	Didactic conferences must be attended by residents and core faculty members, and the list of conferences must include the date, conference topic, the name of the presenter(s), and the names of the faculty members and residents present for each conference. (Core)

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V. Evaluation

Summary
- Various Evaluation types and requirements for each (faulty of Resident/ faculty evaluation, etc.)
- Program level committees tied to evaluations (CCC and PEC)
- Board Pass Rate Requirements
- Self-Study Information

Key Terms
- Clinical Competency Committee (CCC)
- Program Evaluation Committee (PEC)
- Annual Program Evaluation (APE)

- Self-Study

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CCC

- Clinical Competence Committee (CCC)

- Minimum of three faculty members
- Duties
  - Review all resident evaluations semi-annually
  - Prepare Milestone evaluations semi-annually
  - Advise the PD regarding resident progress, including promotion (graduation), remediation, dismissal

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PEC

- Program Evaluation Committee (PEC)

- At least 2 faculty and 1 resident/fellow
- Duties
  - Act as an advisor to the program director, through program oversight
  - Actively participate in planning, developing, implementing, and evaluating educational activities
  - Review and revise curriculum goals and objectives
  - Address areas of non-compliance with ACGME standards
  - Review the annual program evaluation (APE) in a formal, systematic manner

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V. Evaluation- General Tips

- Meet with your rogram administrator to ensure the program:
  - has required evaluation forms
    - Faculty Evaluation of Resident
    - Multiple Source (nurse, patient, peer, self)
    - Semi-annual evaluation
    - Summative Evaluation
    - Final Evaluation (by GME)
    - Faculty Evaluation
    - Program Evaluation
  - Evaluations are set up at the correct frequency
    - Faculty evaluation of Residents: Rotation >3 every 3M; Longitudinal every 3M and the end
- Ensure faculty are being evaluated in the required areas.

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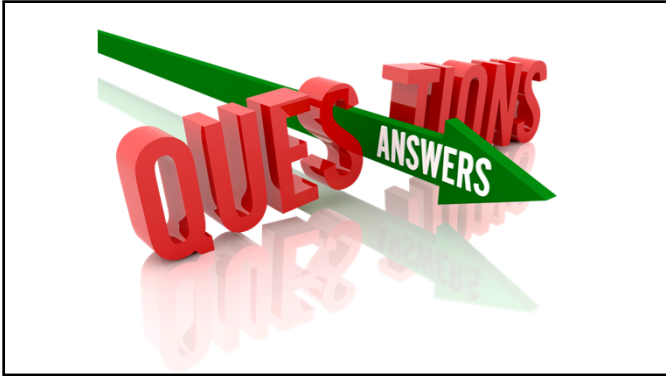## Navigating the ACGME Website

https://www.acgme.org/

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Additional Readings/Resources

- Review GME Program Leadership Virtual Handbook

- ACGME Guide to the Common Program Requirements

- ACGME Site Visit Checklist

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Introductory GME Boot Camp Series

Didactic
- Wed Jan 20, 2021 4:30 pm – 5:30 pm | Intro to Accreditation Standards
- **Tues Feb 2, 2021 4:00 pm – 5:00 pm |Role of the PD**
- Wed Feb 3, 2021 4:30 pm – 5:30 pm | Resident Remediation
- Wed Feb 17, 2021 4:30 pm – 5:30 pm |GME Finance

Workshop
Wed March 24, 2020 **4:00 pm – 6:00pm**

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Thank You!
*Please provide feedback
using the evaluation link in
the chat.*

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