



Accreditation Council for
Graduate Medical Education

Convening Anew

ACGME
ANNUAL REPORT
2022-2023



The Accreditation Council for Graduate Medical Education (ACGME)

is a private, non-profit organization that reviews and accredits graduate medical education (residency and fellowship) programs, and the institutions that sponsor them, in the United States. In 1981, the ACGME was established from a consensus in the academic medical community for the need for an independent accrediting body. Accreditation is achieved through a peer-review process overseen by specialty Review Committees composed of volunteer physicians and public members. Institutions and programs are reviewed annually for compliance with the ACGME's Institutional Requirements, Common Program Requirements, and specialty- or subspecialty-specific Program Requirements. The ACGME also confers recognition on Sponsoring Institutions or programs in compliance with the applicable Recognition Requirements. Sponsoring Institutions or programs with or seeking ACGME recognition must be accredited by the ACGME.

Mission

The mission of the ACGME is to improve health care and population health by assessing and enhancing the quality of resident and fellow physicians' education through advancements in accreditation and education.

Vision

We envision a health care system in which the Quadruple Aim* has been realized. We aspire to advance a transformed system of graduate medical education with global reach that is:

- Competency-based with customized professional development and identity formation for all physicians;
- Led by inspirational faculty role models overseeing supervised, humanistic, clinical educational experiences;
- Immersed in evidence-based, data-driven, clinical learning and care environments defined by excellence in clinical care, safety, cost-effectiveness, professionalism, and diversity, equity, and inclusion;
- Located in health care delivery systems equitably meeting local and regional community needs; and,
- Graduating residents and fellows who strive for continuous mastery and altruistic professionalism throughout their careers, placing the needs of patients and their communities first.

Values

- Honesty and Integrity
- Accountability and Transparency
- Equity and Fairness
- Diversity and Inclusion
- Excellence and Innovation
- Stewardship and Service
- Leadership and Collaboration
- Engagement of Stakeholders

* The Quadruple Aim simultaneously improves patient experience of care, population health, and health care provider work life, while lowering per capita cost.

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Message from the President and Chief Executive Officer



I am privileged to write this letter and report on the important work completed at and by the ACGME over the last year. As you will see throughout this Annual Report, the ACGME, through its volunteers and staff members, has kept a keen focus on the Mission to improve health care and population health. As the COVID-19 pandemic continues to wane, we are returning – with new perspective informed by these difficult years – to our key functions and to convening the field around important issues helping us fulfill that important Mission. The phrase “new normal” has become somewhat popular. And while “normal” suggests a return to the way things were, we at the ACGME have focused instead on the “new.” The theme of this year’s Annual Report, *Convening Anew*, recognizes the important role of the ACGME in taking the lessons we’ve learned and the needs of both graduate medical

education and the public we serve, and using that to guide enhancements to our work, and how we accomplish it. This past year brought us back together – at our Annual Educational Conference, as Review and Recognition Committees, at national meetings such as the Nutrition Summit and recent Competency-Based Medical Education symposium, as the Board of Directors, and others. Expanded hybrid technology allowed us to collaborate and innovate with colleagues, partner organizations, and internally when some participants can gather in person while others must remain remote. Operationally, we are looking at our processes and procedures, our requirements, and our day-to-day work schedules, and finding ways to grow and improve on each of these to ensure the best for those we serve.

In the pages of this Annual Report, you will see examples of projects, programs, initiatives, and achievements of the ACGME. None of these would succeed to the extent they have without the commitment of hundreds of volunteers and the nearly 300 ACGME staff members. Expansion and innovation are the hallmarks of our Information Services group’s work toward achieving the ACGME’s Digital Transformation. You’ll read about new ways to collect, store, retrieve, and analyze key data that will help the ACGME support not just GME, but the entire medical education continuum with real-time information to improve our outcomes-based model. You’ll learn about the ACGME’s new strategic approach to the revision of Requirements, *Shaping GME*, and how the Review and Recognition Committees are looking at the future of GME in their considerations. You’ll read how the ACGME, led by our diversity, equity, and inclusion group, is continuing to work toward the critical goal of equity in medicine and medical education. A feature on the ACGME’s international footprint will shed light on the organization’s work, in alignment with our Mission, beyond the borders of the United States. You’ll also read about updates to our Clinical Learning Environment Review Program, opportunities in and for scholarship through the *Journal of Graduate Medical Education*, and the full implementation of Milestones 2.0 – a monumental accomplishment. As we have in the past several years, we highlight our great and important partnerships with other organizations on the medical education continuum that enable each to meet its own and our collective goals toward the betterment of health care and society. These and more important updates are just a sampling of the hours and efforts our volunteers and staff have contributed and continue to give.

It is my hope that you find this report helpful, and that it inspires you as it does me. We have much work to do, but also many achievements to celebrate. I am humbled and grateful for the opportunity to see these great developments first-hand and look forward to the future with optimism and hope.

Most sincerely,

Thomas J. Nasca, MD, MACP
President and Chief Executive Officer

Message from the Chair of the Board of Directors



As a Public Director and now Chair, my perspective on my role is unique, distinct from my physician and health system CEO predecessors, but informed by more than 30 years of professional experience consulting to hundreds of health care clients, as well as personal experience as a patient navigating the system on behalf of myself and my family. Historically, the ACGME has intentionally had public representation on its Board, committees, task forces, and councils. This reflects a deep commitment to the Mission to improve health care and population health. The fundamental value public members can add is a focus on the ACGME’s accountability to society. We endeavor to bring the patient’s perspective and to increase transparency. My admiration and gratitude to those who choose careers in health care delivery is enormous. Their work – to change lives for the better and to save lives – matters. The public owes them respect and gratitude. Indeed, it is this sense of

appreciation that led me to engage with the ACGME in 2012, and as I embark on my tenure as Board Chair, this motivation underscores my goals and actions. I’ll attempt here to articulate just two of these goals: expanding the public’s appreciation of medical education and the role of accreditation, as well as the role of physician learners in their care; and helping to rebuild the social contract between patient and physician, founded on the spirit of altruism that leads people to pursue careers as physicians, despite great challenges.

Part of my role is to bring the patient/public voice to those inside graduate medical education. It is also important that patients and the public understand the role residents and fellows play in their care, and why accreditation matters. Residents often spend more time caring for patients than the physicians those patients identify as “my doctor.” That’s certainly been my experience as advocate and patient. Health care can be intimidating and overwhelming to those in crisis, and people want to feel confident that all who care for them have the education, experience, and commitment to do so well. Patients and their advocates must understand that the residents and fellows who care for them are physicians, and that *GME is* medical practice supervised by experienced attending physicians. This is by design to ensure patient safety. That is the message patients and the public need to hear. The importance of the medical profession to society cannot be overstated. And while politics and social issues may challenge the public’s trust, the role of a physician to a patient or family – not the big health care industry, but an individual practitioner – is how the value of the relationship must be measured wholistically. Person by person, patient by patient, doctor by doctor – this is how we fulfill our obligation to the public.

Accreditation is a big word and it’s hard to define it succinctly. This is the Board’s charge. Our discussions and actions must always come back to ensuring that message is at the heart of what the ACGME does. ACGME accreditation matters because it safeguards the essential structures, checks, and balances in place to protect you at your most vulnerable, and it creates the environment necessary for an individual physician to learn to care for you, the patient, whenever you need that care.

This segues neatly to my second goal. Many physicians struggle to stay connected to the joy and purpose that motivated them to choose medicine as a career. The COVID-19 pandemic, political and social issues, and the challenges of the rigors of GME serve as stark and painful reminders of the difficult landscape health care workers face. It is my firm belief that the ACGME has an obligation to protect physicians’ connection to their original altruistic vision. We see it in the Common Program Requirements, the ACGME’s unrelenting efforts in national well-being initiatives, its commitment to diversity, equity, and inclusion, and initiatives like *Back to Bedside*. Capitalizing on and enhancing the ACGME’s leverage in these areas to further protect physicians’ emotional and psychological safety, allowing them to become and remain the physicians they always envisioned, must be a priority. It is the responsibility of the Board and the ACGME to protect the field, so the passion to heal that is so strong in learners is not extinguished by exhaustion, frustration, and cynicism.

These are lofty goals, but central to my core values and what connects me to the ACGME. It is a true honor to serve as Chair, and to partner with the Board and dedicated staff in support of the vital mission to improve health care and population health through accreditation and education. I am so grateful to the public members and directors who came before me for establishing the credibility of this important role and to all my colleagues on the Board for allowing me this remarkable opportunity.

Sincerely,

Claudia J. Wyatt-Johnson, MA
Chair, Board of Directors

Accreditation Update: Shaping GME

Every 10 years, each ACGME Review Committee is required to evaluate its Program Requirements for a major revision. (Note: Major revisions of all ACGME-accredited specialty, subspecialty, and sub-specialty Program Requirements are completed on a rolling basis over a 10-year period; not all sets of Program Requirements undergo a major revision at the same time.)

To ensure that Program Requirements are relevant not only for today's medical environment but also for the future, over the last several years the ACGME adopted a new process for developing major revisions to the specialty-specific Program Requirements for core specialties. "Shaping GME" uses a scenario-based strategic planning model to predict various potential landscapes in which today's residents and fellows will practice for the next 40-50 years. Once those environments are conceived, the Review Committee determines which existing requirements and what new requirements would best prepare physicians to practice medicine no matter which of those futures comes to fruition. The ACGME is currently using this process for the specialty-specific Program Requirements; subspecialty-specific Program Requirement revisions are continuing to follow the previous revision process for the time being.

Scenario-Based Strategic Planning Process

The Shaping GME process requires a writing group (composed of Review Committee members and directors from the ACGME Board, including public directors) and the specialty community to think rigorously and creatively about what the specialty will look like in the future prior to proposing any revisions, recognizing that the future is marked with significant uncertainty. For each specialty, a workshop is held in which members of the applicable specialty community, other specialties, and related fields provide insights on what practice in the specialty could look like in 2050 and beyond for each of the identified

scenarios. Following several virtual meetings during the COVID-19 pandemic, the ACGME has resumed holding these workshops in person to enhance the collaborative nature of the work.

In addition to the workshops, the Shaping GME process entails a literature review on key topics identified by the writing group, and a series of one-on-one interviews with patients, physicians who recently completed residency programs in the field, and others working in health care.

Before the writing group begins drafting revised requirements, a Themes and Insights document is posted for public comment, including a list of key questions for the community to answer about the future of the specialty and how the Program Requirements facilitate the education and training of physicians practicing in the specialty moving forward. The writing group subsequently reviews all materials gathered from the above sources and drafts revised Program Requirements, which are then distributed for public comment and reviewed and approved by the ACGME Board of Directors according to the normal Program Requirements revision process.

The current scenarios being considered in the process are:

Now You're on Your Own – A dynamic, high-technology world characterized by a novel mix of libertarian economics and progressive social policies, with a rich economy.

New New Deal – Following decades of political division and economic stagnation, this world is based on social democracy, civic unity, bold government actions, economic rebound, and public optimism.

Ex Uno, Plures – A world with a weak federal government, strong independent states, divisive culture wars, no safety nets, isolationism, and near-depression economics.

One Giant Leap – A world of rapid temperature rise and extreme weather causing havoc and widespread anxiety, and a large shift in government priorities, with sluggish economics.

Specialty Revisions

In 2021-2022, the Review Committee for Internal Medicine became the first Review Committee to complete a major revision of its specialty-specific Program Requirements using scenario planning. The Review Committee for Family Medicine followed, with its major revision approved by the ACGME Board in the fall of 2022 for an effective date of July 1, 2023.

The respective Review Committees have begun the major revision process for the Program Requirements for Colon and Rectal Surgery, Emergency Medicine, General Surgery, Pediatrics, and Vascular Surgery using the Shaping GME model. This work will continue into the next academic year. The Review Committee for Pediatrics proposed a revision for public review and comment in early 2023 and received significant feedback from the



Ophthalmology Scenario Planning Workshop participants

community; it then opted to make additional revisions and issue a second public comment period in the second half of 2023 to ensure the careful consideration of all feedback. The Review Committee for Allergy and Immunology is scheduled to begin the revision process in late 2023.

Upholding the Integrity of the Program Requirements

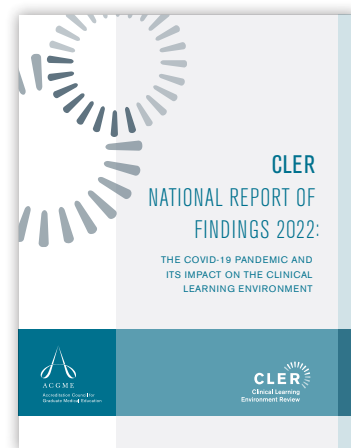
In Academic Year 2022-2023, the ACGME addressed the impact of two landmark US Supreme Court rulings on GME. In both cases, the ACGME upheld its related Program Requirements in support of the ACGME Mission to improve health care and population health by assessing and enhancing the quality of resident and fellow physicians' education through advancements in accreditation and education.

The June 2022 ruling in *Dobbs v. Jackson Women's Health Organization* revoked the federal right to abortion granted in 1973's *Roe v. Wade* decision, and thus immediately made education and training in abortion care illegal in certain states. The Review Committee for Obstetrics and Gynecology gathered input from the community and ultimately determined that ACGME-accredited programs must continue to teach residents abortion care in a clinical setting. For programs in restrictive states, residents must travel to another state to obtain that education and training. The ACGME remains committed to ensuring all residents graduating from ACGME-accredited programs have the appropriate skills to practice anywhere in the US. (Note: Individual residents may continue to opt out of abortion care education and training on religious or moral grounds.)

On June 29, 2023, the ruling in *Students for Fair Admissions, Inc. v. President and Fellows of Harvard College* deemed race-based affirmative action in university admissions to violate the Equal Protection Clause of the Fourteenth Amendment. While this ruling does not directly address GME admissions, and the decision does not require programs and institutions to change their resident selection practices, the ACGME reaffirmed its commitment to developing a diverse physician workforce to provide care that meets the needs of marginalized patients in particular, and all patients in general. The ACGME's requirement for programs to focus on mission-driven, ongoing, systematic recruitment and retention of a diverse and inclusive workforce is intended to help eliminate health care inequities and disparities. The ACGME remains committed to its role in developing a diverse and inclusive workforce that meets the health care needs of the American public and addresses implicit and explicit discrimination and bias in health care through its mechanisms of education and accreditation.

Clinical Learning Environments: Lessons Learned and Future Directions

In mid-2022, the Clinical Learning Environment Review (CLER) Program concluded a unique 18-month protocol that focused on exploring impacts of the COVID-19 pandemic on the clinical learning environments of ACGME-accredited Sponsoring Institutions. Specifically, the protocol sought to identify challenges in patient care and graduate medical education (GME) that would likely persist in the near term and present new opportunities for GME and clinical learning environment leaders to combine their efforts as they solve problems.



The *CLER National Report of Findings 2022: The COVID-19 Pandemic and Its Impact on the Clinical Learning Environment*, released in the fall of 2022, details this protocol's results.

The report identifies eight overarching themes, each of which has an important influence on the future of health care and GME. Collectively, these themes represent opportunities to reflect both on what was done well and potential opportunities to apply new approaches to learning and clinical care.

The themes coalesce around challenges, such as workforce shortages and the need for new models of patient care delivery, as well as the COVID-19 pandemic's impact on well-being within GME and across the clinical care team. One theme also highlights the dramatic increase in use of

remote technology to facilitate clinical care and learning experiences, which presents both challenges for patient safety and new opportunities to optimize learning and patient care. The report also notes that few clinical learning environments appeared to have a formal strategy or approach to identifying and eliminating health care disparities, underscoring the need to prioritize health care equity.

Importantly, this protocol and its findings reveal tremendous opportunity for GME leaders to partner with the executive leaders of their clinical learning environments to address challenges that persist beyond the acute phases of the COVID-19 pandemic and make improvements through innovation, cycles of quality improvement, and dissemination of successful practices.

To accelerate these partnerships, and in response to the growing number of Sponsoring Institutions and clinical learning environments and requests from the GME/clinical learning environment community, the ACGME is redesigning the CLER Program in a manner that will supplement its national site visit program. CLER site visits will remain the foundation of the CLER Program, and new resources and tools will be developed, including a collaborative initiative focused on improving GME/clinical learning environment integration to advance the Quadruple/Quintuple Aim*; a self-administered toolkit for formative assessment to expand reach to more clinical learning environments; and other resources curated by the ACGME for the GME/clinical learning environment community. As these resources are developed, tested, and widely shared over the coming year, the ACGME will share them with the community.

As the acute phases of the COVID-19 pandemic continue to lift and options to collaborate expand beyond participants' screens, the ACGME, through the CLER Program, looks forward to strengthening its connections with the GME community to meaningfully enhance learning and patient care.

**The Quadruple Aim simultaneously improves patient experience of care, population health, and health care practitioner work life, while lowering per capita cost. The Quintuple Aim has the additional component of health equity.*

"The pandemic has had a monumental impact on our health care environment and has presented an unprecedented opportunity for learning. This report provides the first comprehensive national look at how this experience can lead to improvements in the clinical learning environment that affect both patient care and ACGME-accredited graduate medical education." – ACGME Chief Sponsoring Institutions and Clinical Learning Environment Officer Kevin B. Weiss, MD, MPH

Building on a Foundation for Transformation

In 2021, in response to the Board of Directors' approval of the ACGME's current strategic plan, which included recognition that a digital transformation for the organization was essential for its future success, ACGME Chief Information Officer Bruce Metz introduced a comprehensive, multi-year Digital Transformation Plan. Over the past two years, the Department of Information Services has led the work toward achieving all components of this plan.

As described in previous Annual Reports, the Digital Transformation Plan is designed to help realize the ACGME's overall vision for the future of graduate medical education (GME) accreditation. It aspires to advance a dramatically changed system of GME with global reach, helping to achieve the Quintuple Aim (which simultaneously improves patient experience of care, population health, health care practitioner work life, and health equity while lowering per capita cost) by focusing on four primary areas: a reimagined accreditation ecosystem; ACGME operational excellence; harmonization of the continuum of medical education; and operation as a wholistically data-driven enterprise.

Several components of the Digital Transformation Plan have been implemented over the last two years that create a solid foundation for implementation of the more transformative initiatives during the next couple of years. A key accomplishment relates to enhancing the ACGME's existing analytic capabilities and strengthening the use of data toward development of a robust and integrated data landscape. A new Business Intelligence Center operates as the central hub to equip information consumers with data, tools, and self-service. Work on the Accreditation Improvement and Innovation initiative began during 2021-2022, continuing through this past academic year with completion of several "sprints." Work in these sprints completed over the last year includes the following updates to the Accreditation Data System (ADS) to improve layout, functionality, and ease of use:

- Additional functionality allowing Sponsoring Institutions and programs to submit progress reports and additional

information via ADS, including a designated institutional official (DIO) approval function

- Consolidation of all ADS uploads into a single "Uploads" tab to simplify user experience and reduce potential for user error
- Creation of a process for Sponsoring Institutions to request and accept the transfer of sponsorship of programs, as well as to request sponsor/program name changes
- Elimination of redundant faculty certification information in the program summary document
- Burden reduction by importing faculty members' certification information, obtained directly from the American Board of Medical Specialties and American Osteopathic Association, into the Faculty Roster, eliminating the need for manual entry by programs
- Introduction of address auto-complete functionality for institutions
- Enhancement of the Milestones Compliance Report to Excel, including the addition of names of residents/fellows being evaluated
- Improved visibility of program and institutional leadership information, including email addresses, by displaying it more prominently on the Program or Institution tab, as applicable

Progress has also been made on the Operational Excellence initiative, with implementation of Microsoft 365, SharePoint,

and more to improve and enhance staff members' work efficiency and collaboration across the organization. The numerous advances in how ACGME business is conducted, enabled by Microsoft 365, have become all the more important due to the organization's evolving hybrid work environment.

Modern Data Estate

The Modern Data Estate (MDE) initiative took a major step forward with the completion of an extensive six-month discovery phase. The importance of the MDE in ensuring the ACGME's successful digital transformation cannot be overstated. The COVID-19 pandemic further demonstrated how critical the use of data is and the power that data can have when used as a strategic asset. The pandemic also reinforced that achieving these outcomes requires coordinated action by the entire GME community and continuum of medical education, including partnerships among local, regional, national, and even global stakeholders. Data can serve as a unifying fabric to knit different stakeholder groups together.

These efforts and developments are geared toward getting more value from the wealth of data the ACGME and broad GME community have, and how, as an organization, the ACGME can unlock its data and analytics potential to make better decisions and strengthen GME writ large. There also needs to be a shift to a culture of data sharing and being data savvy that calls for the engagement of everyone, everywhere.

In keeping with the need for broad engagement, the MDE discovery phase included more than 40 collaborative, in-depth sessions with ACGME leaders, as well as internal and external stakeholders to identify the data, analytics, and research requirements of the ACGME and its community. Based largely on these sessions, a multi-year, five-phase roadmap for MDE implementation was developed, incorporating a highly advanced cloud architecture as the foundation.

Key Elements of the MDE Future State Roadmap

- Modernizing and re-platforming current reports and analytic capabilities in the cloud, providing self-service for internal and external users, including researchers, through a customizable web portal

- Developing the highest priority use cases from over 150 data, analytics, and research opportunities for transformation identified during discovery and incorporating recent, value-adding advances in artificial intelligence (AI)
- Creating an ACGME Electronic Information Exchange for timely, efficient, and secure information sharing among organizations, stakeholders, and researchers across the continuum
- Based on interest of other organizations, expanding the Information Exchange to create an Electronic Data Ecosystem across the continuum of medical education to provide similar benefits as the Exchange on a broader scale

Implementation of initial roadmap phases is scheduled to start by the end of 2023.

Reimagined Accreditation Ecosystem

Notable progress has also been made with the Reimagined Accreditation Ecosystem initiative. This initiative goes to the core of the Digital Transformation Plan by enabling a clinical and educational outcomes-based accreditation model and a more integrated medical education continuum to occur in stages over time.

Based on discovery work started in 2022, the solution architecture for a future state cloud platform to power a new outcomes-based accreditation model has been defined and is composed of three tiers:

- Advanced Components: contains new capabilities and functions pertaining to the clinical experience of residents, competency-based education, physician clinical practice outcomes, re-engineered decision making, and automated workflow and business processes
- Functional Core: deals with redesigning and reimagining existing capabilities and functions for Case Logs, Milestones, Surveys, the Clinical Learning Environment Review Program, accreditation and recognition activity and support, and other existing functions
- Technological Core: utilizes new and emerging cloud-based technologies and services, and advanced tools like AI to support and drive the other two tiers

Implementation of the technological core and the first phase of the functional core is scheduled to start by the end of calendar year 2023.

Looking to the next academic year and beyond, the ACGME is positioned to implement several major elements of the Digital Transformation Plan that have been in development over the past few years. In particular, implementations of the Modern Data Estate and the new reimagined accreditation digital platform over the next several years will help realize the ACGME's vision of a dramatically changed system for GME and, at the same time, better integrate the medical education community.

While the progress described in this report is exciting, the type of transformation called for by the ACGME Digital Transformation Plan will not happen overnight. The experiences over the past two years demonstrate that the transformation requires a strong strategic foundation that includes the widespread engagement of internal and external stakeholders. Achievements to date represent important milestones upon which to build and set the organization up for the next important advances that will enable the ACGME to effectively operate into the future in support of its Mission.

Between July 2022 and May 2023, the ACGME Communications team led a major effort to redesign the ACGME website. Working with both internal and external partners, the project began with a deep dive into and evaluation of data on the prior site design, including review of heatmaps that showed how users navigate the website and real-time recordings of user experience. This helped the redesign team understand how visitors were using the website, and what elements, sections, and pages were difficult to locate or not accessed at all. Using this information, the team identified the need to reorganize the website's architecture to make key content easier to find. A new look and feel accompanied this reorganization, providing the opportunity to reframe the ACGME's public presentation in a way that supports and elevates the organization's brand.

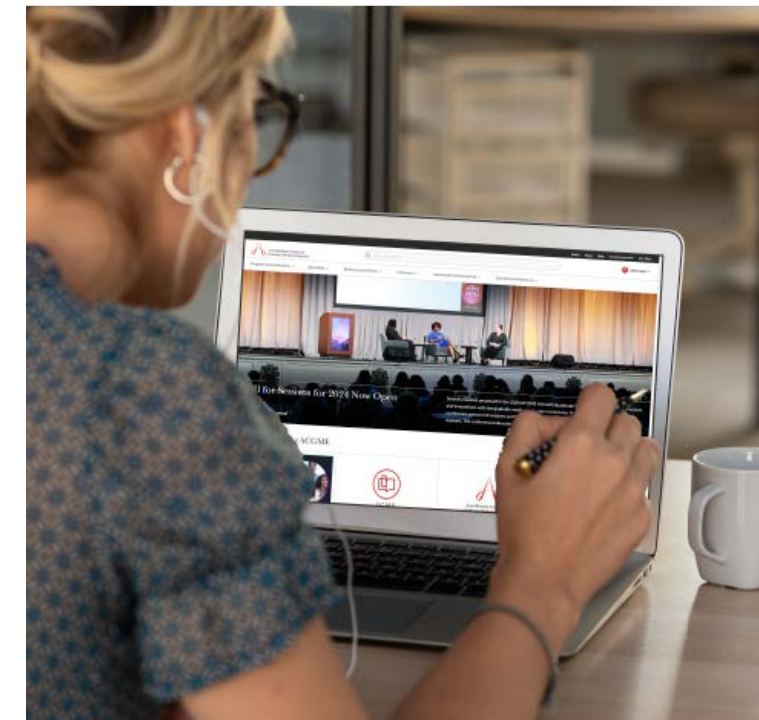
In the spring of 2023, the final phases of the redesign process were underway. These involved quality assurance testing, actual production of the new site, and a detailed tracking of content changes to ensure the new site reflected current content on the day it launched.

The fully redesigned, modern ACGME.org formally launched on May 22, 2023. The updated site features an improved overall design, an enhanced user experience, a better interface, and a modern look and feel. While most of the content was unchanged, the navigation and placement of some of the content is different.

The website's architecture was restructured to surface sought-after and key content, complemented by a clean, modern, and dynamic design, including more photos and graphics to accompany and supplement content.

Optimizing Search

In conjunction with the redesign project, the ACGME conducted a concentrated companion project to improve search functionality on the website. Search optimization will continue following the launch of the new design, but many improvements are already in place as the number of search results has been reduced to enhance relevancy, new functionality has been implemented for keyword searching, and additional keywords have been tagged to improve user experience based on the most commonly searched terms.



Commitment to Diversity: Celebrating Progress and Expanding Opportunities

The Department of Diversity, Equity, and Inclusion (DEI) continues to be at the forefront of transformative changes taking place in graduate medical education (GME). Lessons from the COVID-19 pandemic brought valuable insights about the future of GME. In particular, there is a critical need for creating environments that foster diversity, equity, and opportunities for meaningful connection and collaboration. As a result, the past academic year included expansion of the team supporting efforts to develop new tools, resources, and ways to enhance learning experiences and promote inclusivity within GME.

Inaugural ACGME Equity Matters™ Symposium

On December 14 and 15, 2022, 142 attendees from the four pilot ACGME Equity Matters Learning Communities convened to celebrate the conclusion of an 18-month program and present their capstone projects. The first ever ACGME Equity Matters Symposium was hosted at the BlueCross and BlueShield of Illinois (BCBSIL) offices in Chicago, and included representation from the Council of Medical Specialty Societies (CMSS), the Organization of Program Director Associations (OPDA), and seven Illinois hospitals/health systems, as well as DEI leaders from across the nation who participated in the ACGME's monthly Diversity Officers Leadership Forum.

Derek Robinson, MD, MBA, FACEP, CHCQM (BCBSIL), Helen Burstin, MD, MPH, MACP (CMSS) and ACGME Chief Diversity, Equity, and Inclusion Officer William A. McDade, MD, PhD kicked off the program, which featured presentations from participants, discussion groups, networking, and planning for future events. Presentation topics included resident/fellow and faculty member recruitment and retention initiatives, building inclusive learning environments, DEI training models, and strategies to advance sustainable DEI initiatives.

Expanding Department Leadership



In January 2023, Pilar Ortega, MD, MGM joined the department as Vice President, Diversity, Equity, and Inclusion. Dr. Ortega supports efforts to address harassment, discrimination, and other forms of mistreatment in the GME environment; improve retention and well-being for diverse resident and fellow physicians; and disseminate information on diversity, equity, and inclusion activities to the GME community. She is a nationally and internationally recognized expert in linguistically and culturally appropriate health care.

Convening and Inspiring at the Annual Educational Conference

The 2023 ACGME Annual Educational Conference, the first in-person conference since 2020 (see article p.23), provided opportunities for further inspiration and engagement. The Department of DEI hosted the first invitational luncheon recognizing Barbara Ross-Lee, DO, for whom the ACGME's Diversity, Equity, and Inclusion Award is named (see Award information on p.27). Dr. Ross-Lee addressed participants, acknowledging and applauding their work in DEI and delivering encouragement to persevere despite challenges. Invitees

included DEI leaders, ACGME Equity Matters Learning Community participants, and past and current Barbara Ross-Lee, DO Diversity, Equity, and Inclusion Awardees. The luncheon was immensely successful and the department is moving forward with plans to convene an invitational luncheon event with an invited speaker for the 2024 Annual Educational Conference.

The department also sponsored three educational sessions at the conference: Progress in Demographic Data Alignment in Medical Education to Advance Health Equity; Addressing Structural Racism to Promote Equity and Well-Being in the Learning Environment; and ACGME Equity Matters™ DEI Outcomes from the Learning Communities. The ACGME Hub in the Exhibit Hall proved an effective space to connect with DEI and GME leaders while raising awareness of current ACGME Equity Matters resources and previewing the ACGME Equity Matters Resource Collection (see sidebar).

Partnerships to Enhance DEI Efforts

In February 2023, the National Health Equity Grand Rounds, an external outreach initiative developed by the ACGME, the American Medical Association, the National Center for Interprofessional Practice and Education,

and RespectAbility, launched a series of presentations by national leaders and experts. Topics for these Grand Rounds have been developed to promote conversation and collaborative work toward a healthier future for all. Presentations to date have included: *History of Racism in US Health Care: Root Causes of Today's Hierarchy and Systems of Power*; and *Follow the Money! Understanding the Structural Incentives for Inequity in Health Care and Beyond*. Future sessions will address education and training for the health care workforce and data transparency.

Internally, department staff members continue to collaborate with the DEI Work Group of the ACGME's Employee Forum and Human Resources to foster conversations around inclusion and belonging in the workplace. These efforts include monthly articles and quarterly discussion groups that reinforce concepts and tools from trainings led by Dr. Christen Behzadi about allyship and managing power dynamics (*Bonded in Allyship* and *Power in Allyship*). Topics such as utilizing a cultural lens, understanding psychological safety and strategies to achieve it, and how to create inclusive conversations have been covered. Further trainings for managers in the allyship series are in development.

New ACGME Equity Matters Resources Coming Soon!



The ACGME Equity Matters™ Resource Collection is part of a comprehensive set of tools being curated by the ACGME to assist organizations with achieving their DEI goals. The ACGME Equity Matters™ Resource Collection is designed to help Sponsoring Institutions, programs, and specialties implement changes in diversifying the physician workforce, and address health care inequities and disparities in the workplace. The collection has been developed from approaches submitted by Sponsoring Institutions and GME programs through their Accreditation Data System Annual Updates, the ACGME Equity Matters Learning

Communities, ACGME Annual Educational Conference abstract submissions, literature reviews, and applications for the ACGME's Barbara Ross-Lee, DO Diversity, Equity, and Inclusion Award. The ACGME Equity Matters™ Resource Collection is planned for release in fall 2023.

Supplementing the content of the ACGME Equity Matters video modules, authors are now engaged in writing and early development of the *Fundamentals of Diversity, Equity, Inclusion, Antiracism in Graduate Medical Education*, a case study-driven textbook. Work on the textbook will continue throughout the next year and publication is tentatively projected for 2024.

The ACGME's Growing Global Footprint



ACGME Global Services and ACGME International joined World Health Organization Director-General Dr. Tedros Ghebreyesus and other participants to “walk the talk” in Geneva, Switzerland in the spring of 2023.

DEI ADVISORY COMMITTEE

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Stanford University

Patricia Wilkerson-Uddyback, MD, MBA

Vice President of Academic and
Community Affairs
Detroit Medical Center

Tyree Winters, DO

Director, Pediatric Residency Program
Medical Director, HealthStart Program
Atlantic Health System

In alignment with its Mission and core belief in the professional responsibility of sharing knowledge to improve health and health care, regardless of borders, the ACGME began its international journey in 2009 when Singapore requested assistance with its graduate medical education (GME) programs. Soon other requests were received, leading to the creation of the independent accreditation entity ACGME International (ACGME-I) – first as a limited liability corporation and most recently as a 501(c)(3). ACGME-I activities have continued to grow, with the organization now accrediting 193 GME programs in 21 Sponsoring Institutions in 11 countries.

While ACGME-I established a role as an independent accreditor of GME outside of the United States, the ACGME remains engaged with international organizations and institutions focused on GME. ACGME Global Services was created in 2018 as a department for that purpose – to support improvements in health care and population health beyond US borders through collaboration, education, information exchange, and advisory services.

Over the past academic year, the efforts of Global Services to promote GME have increased significantly:

- Organized and hosted events and fora to promote GME. One was a panel discussion session in Geneva, Switzerland, on the sidelines of the 76th World Health Assembly meeting in partnership with The Global Alliance for Surgical, Obstetric, Trauma and Anaesthesia Care (The G4 Alliance).
- Advised a national-level physical medicine and rehabilitation education and training project based in Vietnam.
- Participated in international conferences, including the Asia Pacific Medical Education Conference, the Consortium of Universities for Global Health, and the International Society of Quality in Healthcare.



ACGME Global Services and ACGME International shared a booth in the ACGME Hub at the 2023 Annual Educational Conference.

- Launched a dedicated content series on the ACGME Blog, *The ACGME and Global Health*, to advance the conversations around the global nature of GME.
- Partnered with the Singapore Ministry of Health to develop and implement a new accreditation model, the Accreditation of Postgraduate Medical Education Singapore (APMES), which commenced in 2023.

The Singapore project for Global Services serves as an exciting example of what the partnership among the ACGME, ACGME-I, and a nation's GME community can accomplish. The ACGME's long partnership with the city-state has now reached its pinnacle. Through a systematic transfer of knowledge, the external accreditation provided by ACGME-I is being replaced by a domestic accreditation system. ACGME Global Services is crucial as a strategic advisor in facilitating this transition.

Looking beyond individual projects and countries, Global Services is positioned to help the ACGME play a greater role in the wider global conversation about health and health care. Over the next academic year, this work will continue to grow and evolve.

Convening Stakeholders across the Continuum

The social contract between the public and graduate medical education (GME) requires that programs and institutions prepare graduates to meet societal needs. As the environments within which GME takes place become increasingly complex, meeting those societal needs can require the development of innovative strategies and approaches. For particularly prescient or challenging topics, the ACGME uses its unique position to convene stakeholders across the continuum of medical education to examine an issue in detail and generate recommendations and resources for the field.

Summit on Medical Education in Nutrition

One recent example is the Summit on Medical Education in Nutrition, a meeting that was the result, in part, of the ACGME Department of Communications and Public Policy's engagement with federal officials calling for improved medical education in diet and nutrition, including the Biden-Harris Administration and the Congressional Food is Medicine Caucus. In response to this call to action, the ACGME collaborated with the Association of American Medical Colleges and American Association of Colleges of Osteopathic Medicine to bring together the continuum of medical education in March 2023 to shine a light on best practices and discuss what is needed to achieve an ideal state of medical education in nutrition. Participants included representatives of both undergraduate medical education and GME, as well as specialty societies and certifying boards, physician experts in nutrition and teaching nutrition to medical students and residents, and registered dietitians and nutritionists.

As in all instances of federal engagement, the ACGME makes clear that specific aspects of the curriculum are the purview of each program, based on the standards set by the applicable specialty society, the expectations of the certifying board, and the needs of the community it serves.



An interactive discussion at the Summit on Medical Education in Nutrition

During the Nutrition Summit, attendees discussed the scope and impact of poor nutrition on the US population and the opportunity for physicians to help improve nutrition as part of a biopsychosocial approach to health. The event emphasized the importance of advancing efforts to integrate nutrition education into the curriculum, including evidence-based instruction on the relationship between diet and disease, recognition of food insecurity, available



A session at the 2022 National Learning Community of Sponsoring Institutions meeting

community resources, and how to work with dietitians and nutritionists as part of an interprofessional team. Next steps include publication of proceedings memorializing what was learned during the summit and collaborating with nutrition experts to identify competencies and subcompetencies related to nutrition.

The ACGME is next planning to convene experts in disaster medicine and preparedness to consider an ACGME-accredited, American Board of Medical Specialties-recognized disaster medicine fellowship.

2022 National Learning Community of Sponsoring Institutions Meeting

The ACGME held the first meeting of the National Learning Community of Sponsoring Institutions on September 7 and 8, 2022, welcoming designated institutional officials of ACGME-accredited Sponsoring Institutions and other institutional leaders for two days of networking and shared learning around improvements and innovations, with a theme of "Building Connections, Leading Change."

Approximately 300 people attended, divided equally between in-person and remote participants. More than 50 GME and other clinical leaders shared their ideas through presentations, workshops, plenary sessions, and posters. ACGME executive and senior leaders also presented innovative work in their areas of focus. Many of the educational activities emphasized the objectives of the ACGME's *Sponsoring Institution 2025* initiative: transforming education through GME innovation; optimizing health systems for learning; and demonstrating commitment to excellence in patient care.

The second National Learning Community of Sponsoring Institutions meeting will take place in the fall of 2023.

Collaborating to Meet the Mission

In the ever-evolving landscape of medical education, collaboration plays a crucial role in driving positive change. Over the past year, the ACGME actively partnered with various medical education organizations, medical associations, and specialty boards to foster innovation, knowledge exchange, and collective action in areas including diversity, equity, and inclusion (DEI); physician well-being; and improving transitions between stages of the medical education continuum; among others.

Fostering DEI

By leveraging collective expertise, the ACGME and its partners are actively working toward a more diverse and inclusive medical workforce that better represents the patient populations it serves.

In early 2023, the ACGME partnered with the American Medical Association (AMA), National Center for Interprofessional Practice and Education, and RespectAbility to create the **National Health Equity Grand Rounds**. This virtual series is designed to increase understanding and mold a national discussion around health inequities, as well as to identify opportunities to improve the health of the nation, a key element of the ACGME's Mission.

The first two events, "History of Racism in US Health Care: Root Causes of Today's Hierarchy and Systems of Power" and "Leadership Engagement and Organizational Change: Follow the Money! Understanding the Structural Incentives for Inequity in Health Care and Beyond," were held in February and May, respectively. Two more events are scheduled for the latter half of 2023. The events are recorded for later viewing and free continuing medical education (CME) credit is available for participants.

Additionally, the ACGME convened the members of the first *ACGME Equity Matters*[™] Learning Communities to share projects developed from the initiative in December 2022 as part of the *ACGME Equity Matters* Symposium. (See article p.14). More than 100 leaders in DEI from across the country attended.

The ACGME continued to leverage its partnership with the AMA to share knowledge in the DEI space. In spring 2023, the ACGME launched resources on the AMA Ed Hub, an online platform that provides high-quality CME, Maintenance of Certification, and curated education. The ACGME launched its Ed Hub presence with links to materials and modules from *ACGME Equity Matters* in Learn at ACGME. By having a presence in this large platform, the ACGME can reach more physicians around the country. Additional activities and educational resources are being considered to build out the ACGME's presence on the AMA Ed Hub in the future.

Refining the Medical Education Continuum

The need for increased communication and collaboration across the medical education continuum is vital to developing a robust pathway to practice that has the flexibility and strength to withstand challenges and disruptions.

The ACGME, Association of American Medical Colleges, and American Association of Colleges of Osteopathic Medicine launched an initiative to create a common set of Foundational Competencies for use in undergraduate medical education (UME) programs in the US to improve the transition to graduate medical education (GME). The initiative supports the work of a 2021 report from the Undergraduate Medical Education-Graduate Medical Education Review Committee of the Coalition for Physician Accountability, of which the ACGME is a member.

From fall 2022 to spring 2023, partners solicited feedback from the UME and GME communities, garnering more than 1,000 comments from diverse voices in medical education. A work group has been creating drafts of these competencies and sharing with them intermittently with the UME and GME communities in an iterative process. The Foundational Competencies are expected to begin being distributed in early 2024.

The ACGME is also working to improve education at the other end of the medical education continuum, as residents and fellows enter independent practice. A meeting in June 2023 convened stakeholders from the ACGME, the American Board of Medical Specialties, and individual specialty boards to accelerate the development of and transition to competency-based medical education (CBME).

The ACGME's first foray into CBME was in 2001 with the Outcome Project, which was successful in defining competencies, but proved challenging to operationalize and implement. Over the next decade, significant strides in concepts that facilitate CBME emerged, including development of entrustable professional activities at the UME level and the Milestones at the GME level.

Over the next year, partners will review their organizations' individual efforts to transition to CBME; identify policy, financial, and administrative facilitators that will accelerate the spread of and innovation in CBME; and work to create an updated action plan to support the widespread implementation of CBME.



Tomorrow's Doctors, Tomorrow's Cures[®]



2023 Annual Educational Conference: *Meaning in Medicine: Making a Difference*

Enhancing Physician Well-Being

Recognizing the importance of this issue, the ACGME continues to lead efforts to address physician well-being, convening and working with stakeholders across medicine to find solutions to this crisis.

In October 2022, the National Academy of Medicine (NAM) released its National Plan for Health Workforce Well-Being, which calls for immediate action to safeguard those dedicated to protecting the nation's health. The ACGME has been a longstanding member of the NAM Action Collaborative on Clinician Well-Being and Resilience, which is co-chaired by ACGME President and Chief Executive Officer Thomas J. Nasca, MD, MACP. The Plan identifies a range of actions for the near-, medium-, and long-term to achieve priority areas for health workforce well-being.

To date, the Plan has received endorsements from more than 25 organizations representing the diverse organizational membership of the Action Collaborative and the various actors needed to collectively advance the practical strategies it lays out – including the ACGME.

The Plan was unveiled during a special launch event featuring leaders of the Collaborative, including Dr. Nasca, who called for personal commitment to do the right thing for the right reason to achieve the infrastructure, culture, and policy for the well-being of every worker in the sector, noting that, “the task is large, but benefits are incalculable.”

Moving forward, the ACGME remains committed to fostering these collaborations, recognizing that progress is achieved through shared goals and concerted efforts. By working hand in hand with its partners, the ACGME endeavors to drive positive change, ensuring a vibrant, inclusive, and thriving medical education landscape that nurtures the physicians of today, those of tomorrow, and the patients they do and will serve.

After hosting one of the last pre-pandemic in-person conferences in 2020, and two subsequent conferences in an all-virtual format, the ACGME reconvened the graduate medical education (GME) community in person at the 2023 Annual Educational Conference February 23-25, 2023 in Nashville, Tennessee.

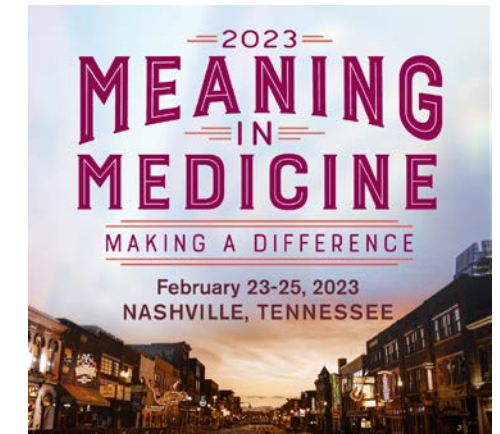
The theme of *Meaning in Medicine: Making a Difference* was chosen to reflect challenges the GME community faced while navigating continued uncertainty, and to celebrate GME's – and health care's – exceptional accomplishments during these historic times. The theme served as an important reminder to build meaning into medicine while caring for ourselves, and to make a difference as we care for others.

As always, conference sessions addressed ACGME accreditation and initiatives; preparing residents/fellows for practice; successful strategies to achieve best practices; diversity, equity, and inclusion; professional development; well-being; crisis management; assessment; and other impactful and important learning initiatives and topics. It also provided opportunities for networking, socializing, participating in wellness activities, and more.

For the 2023 conference, the ACGME replaced the Pre-Conferences with Full-Day Courses, which took place on the first day of the three-day event. The courses each catered to a particular audience: designated institutional officials; program directors; coordinators; faculty members; and those interested in learning more about Osteopathic Recognition and education.

Highlights of the full conference included:

- The Marvin R. Dunn Welcoming Poster Reception and Exhibitor Kick-Off, which featured more than 75 posters highlighting the latest in research and innovations in GME
- The return of the Exhibit Hall, which kicked off the conference with live country music and offered access to a wide range of vendors sharing the latest technology and educational software, simulation technology, and patient management solutions



- A Coordinator Networking Reception for institutional and program coordinators looking to connect with others in the coordinator community
- Four impactful Featured Plenaries on timely topics in medical education and health care: *Roe v. Wade* and the Future of Graduate Medical Education; The NAM Plan for Health Workforce Well-Being – An Interview with the US Surgeon General; Preparing Learners to Care for Patients and Communities Experiencing Substance Use Disorder; and Nutrition and Health – Developing a GME Framework
- The now annual Toast on the Terrace, which immediately followed the Closing Plenary and allowed participants to mingle with other attendees, as well as ACGME leaders and staff members, and to reflect on the conference while celebrating the connections they made
- The ACGME Hub in the Exhibit Hall, which allowed attendees to meet and network with ACGME staff members from a variety of ACGME departments, divisions, and initiatives
- Wellness and well-being activities, family-friendly activities, and a hands-on charitable event packing meals for a local organization, Second Harvest Food Bank, gave attendees opportunities for experiences outside of the educational components of the conference



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“You Can Make a Difference”

In his annual President's Plenary, ACGME President and Chief Executive Officer Thomas J. Nasca, MD, MACP called on the GME community to teach medicine to heal the body, but also to teach how medicine can heal society.

Dr. Nasca explored the connection between undergraduate and graduate medical education; revisited the three pandemics he discussed in his 2022 President's Plenary; and offered a path forward from the COVID-19 pandemic to help residents and fellows strengthen their identities as physicians.

A large cohort of learners – medical students who became residents, residents who became fellows, and residents and fellows who became independent physicians – had their medical education marked by the uncertainty, frustration, and fear of the COVID-19 pandemic.

“Their identity has been molded by this environment,” Dr. Nasca said, adding that the GME community has an imperative to acknowledge the resentment and stress borne from that experience and to reconnect learners to the reason they entered medicine in the first place: to help patients.

While acknowledging there is comfort in returning to the daily business of teaching residents and fellows, Dr. Nasca asked the audience to take the physical and emotional exhaustion of the last three years and channel it into excitement for what's ahead.

“The future of health care and physician education are in the balance, so I ask you to take these issues on each day,” he said. “You can make a difference.”

Keynote Speakers Tackle Critical Issues Facing Medicine Today and Look Ahead to What's to Come

MARVIN R. DUNN KEYNOTE ADDRESS

ACGME Chief Accreditation Officer Lynne M. Kirk, MD, MACP interviewed two physician leaders in the care of victims of violence during a powerful keynote address. A conversation among experts, *Healing from Trauma: Impacts on the Health Care Community* addressed the impact of rising violence on health and health care in the United States.

Theodore (Ted) J. Corbin, MD, MPP, professor and chairperson for the Department of Emergency Medicine at Rush University Medical Center in Chicago, Illinois, and Selwyn Rogers Jr., MD, MPH, FACS, section chief of Trauma and Acute Care Surgery at the University of Chicago Medicine, spoke from their experiences both as Black men and as physicians who treat trauma victims.

Dr. Kirk introduced the overwhelming number of deaths by guns in the United States in recent years. In 2020, 79 percent of homicides and 53 percent of suicides involved guns, she said, noting these represent the highest numbers of gun-related deaths in the US in more than 20 years. These staggering facts set the stage for a provocative discussion.

Drs. Corbin and Rogers addressed how exposure to violence affects patients, their families, and their communities; how they manage the effects of treating trauma victims on their own well-being; what physician educators should know to teach and support their learners with regard to experiencing repeated exposure to trauma; and what the ACGME and other organizations in the medical education continuum can do to effect change.



Both speakers also emphasized the criticality of understanding trauma-informed care.

“We really need to think more holistically about how to educate our learners,” said Dr. Rogers, adding, “We are in the business of relief of suffering [and] we can align to help relieve more suffering.”

Turning to hope, Dr. Corbin acknowledged that violence seems like – and is – a big thing. But while it impacts our lives, “we have so much voice in the change that can happen around this issue that continues to plague us [and] we have the capacity to make the change,” he said.

CLOSING PLENARY

In the conference's final educational session, Dr. Nasca was interviewed by two-time ACGME Award recipient Debra Weinstein, MD, executive vice dean for Academic Affairs, professor, and chief academic officer at University of Michigan Medical School and Michigan Medicine, about the future of GME.

Dr. Nasca noted that an ACGME goal is to minimize the burden and pressures on faculty members to allow them to maximize their opportunity in teaching residents and fellows. When Dr. Weinstein asked about barriers to innovation, Dr. Nasca cited time for leadership to think about innovation.

“I'm very concerned about the state of faculty [members],” he said. “We can't escape the fact that we are hemorrhaging nurses and other caregivers, and we are certainly losing doctors.” He stressed the need to listen to and support faculty members, referencing the new Clinician Educator Milestones as one tool to help them improve as educators and provide a useful framework for how they think about their careers.

The tightening physician pipeline, as medical school positions have outpaced those in GME, was another topic, and Dr. Nasca acknowledged the GME pipeline is hard to expand. Progress in this area depends on specialties, faculty members, and research efforts. He stressed that while the ACGME is limited in affecting the pipeline into medical school, it has made strides to increase opportunities for residents and fellows, such as adding the Rural Track Program designation. He stated his view that it is important that “everyone who is capable of having a residency program, have a residency program.”

Progress made through the work of *ACGME Equity Matters™* and the ACGME's Department of Diversity, Equity, and Inclusion (DEI) were also discussed. Dr. Nasca asserted that to make progress in diversifying the pipeline of learners, “the most important thing we can do is diversify the faculty.” He stressed that DEI are not goals, but values, and said that “we need to live DEI in everything we do. It's not some category on the side, it's about all of us in the same vector. It's about the hearts and minds of people welcoming everyone under the tent.”



2023 Conference by the Numbers

- Final Total Attendees: 4,131
- Attendees from Outside the US: 56
- First-Time Attendees: 1,401
- Residents/Fellows: 85
- Faculty Members: 134
- Coordinators (Program; Institutional): 1,522 (1,221; 301)
- Program Directors and Assistant/Associate Program Directors: 868
- Designated Institutional Officials (DIOs) and Assistant/Associate DIOs: 419

2023 ACGME Awards

The ACGME grants the following awards:

- John C. Gienapp Award
- Barbara Ross-Lee, DO Diversity, Equity, and Inclusion Award
- David C. Leach Award
- Debra L. Dooley GME Program Coordinator Excellence Award
- GME Institutional Coordinator Excellence Award
- Parker J. Palmer Courage to Lead Award
- Parker J. Palmer Courage to Teach Award

Joint Awards

In partnership with notable organizations, the ACGME is proud to honor exceptional work in graduate medical education (GME) through the following jointly sponsored awards:

- The ACGME and Gold Foundation DeWitt C. Baldwin, Jr. Award, in partnership with the Arnold P. Gold Foundation
- The Jeremiah A. Barondess Fellowship in the Clinical Transaction, in partnership with the New York Academy of Medicine

This year's exceptional awardees were honored at the 2023 Annual Educational Conference, which was held February 23-25 in Nashville, Tennessee.

2023 ACGME Award Winners

JOHN C. GIENAPP AWARD FOR DISTINGUISHED SERVICE

The John C. Gienapp Award is given to recognize a notable individual dedicated to GME and who has made outstanding contributions to the enhancement of GME and ACGME accreditation activities. The ACGME congratulates the 2023 John C. Gienapp Awardee:



Elias I. Traboulsi, MD, MEd
Cole Eye Institute and Cleveland Clinic
Cleveland, Ohio



PARKER J. PALMER COURAGE TO LEAD AWARD

The Courage to Lead Award honors designated institutional officials (DIOs) who have demonstrated excellence in overseeing residency/fellowship programs at their Sponsoring Institutions. DIOs have authority and responsibility for all GME programs in a teaching hospital, community hospital, or other type of institution that sponsors such programs. The ACGME congratulates the recipients of the 2023 Courage to Lead Award:

Kimberly M. Baker-Genaw, MD, FACP
Henry Ford Health
Detroit, Michigan

Susan E. Kirk, MD
University of Virginia
Charlottesville, Virginia

Antoinette Spevetz, MD
Cooper University Health Care,
Cooper Medical School of
Rowan University
Camden, New Jersey



PARKER J. PALMER COURAGE TO TEACH AWARD

The Courage to Teach Award honors program directors who find innovative ways to teach residents/fellows and to provide quality health care while remaining connected to the initial impulse to care for others in this environment. The ACGME congratulates the 2023 recipients of the Courage to Teach Award:

Karen J. Brasel, MD, MPH
Surgery
Oregon Health & Science University
Portland, Oregon

Christine S. Cho, MD, MPH, MEd
Pediatric Emergency Medicine
Children's Hospital Los Angeles
Los Angeles, California

Deborah J. Chute, MD
Pathology - Anatomic and Clinical
Robert J. Tomsich Institute of Pathology
and Laboratory Medicine, Cleveland Clinic
Cleveland, Ohio

Richard G. Ellenbogen, MD, FACS
Neurological Surgery
University of Washington
Seattle, Washington

Shashank Kraleti, MD, FAFAP
Family Medicine
University of Arkansas for Medical Sciences
Little Rock, Arkansas

Timothy R. Long, MD, FASA
Anesthesiology
Mayo Clinic
Rochester, Minnesota

Adriana K. Malone, MD
Hematology and Medical Oncology
Icahn School of Medicine at Mount Sinai
New York, New York

Alisa A. McQueen, MD
Pediatrics
University of Chicago
Chicago, Illinois

Alec B. O'Connor, MD, MPH
Internal Medicine
University of Rochester
Rochester, New York



BARBARA ROSS-LEE, DO DIVERSITY, EQUITY, AND INCLUSION AWARD

The ACGME's Barbara Ross-Lee, DO Diversity, Equity, and Inclusion Award was established to recognize efforts to achieve diversity, equity, and inclusion in the GME community. The award celebrates initiatives in which diverse learners are developed, diverse faculties are constructed, and the GME community embraces differences and highlights them as examples of what is achievable. The award recognizes those working to diversify the underrepresented physician workforce and create inclusive workplaces that foster humane, civil, and equitable environments. The ACGME honors the 2023 recipients of this important award:

Association of Pediatric Program Directors
Cleveland Clinic Lakewood Family Health Center
Family Medicine Program
Johns Hopkins University School of Medicine



DEBRA L. DOOLEY GME PROGRAM COORDINATOR EXCELLENCE AWARD

The Debra L. Dooley GME Program Coordinator Excellence Award honors and recognizes the crucial role of the program coordinator in the success of a residency/fellowship program. The ACGME congratulates the recipients of the 2023 Debra L. Dooley GME Program Coordinator Excellence Award:

Juliet A. Arthur, MHA, C-TAGME
Psychiatry
SUNY Downstate
Health Sciences University
Brooklyn, New York

Sherry Bucholz, BA, C-TAGME
Diagnostic Radiology
Providence Sacred Heart
Medical Center
Spokane, Washington

Sharon M. Ezzo, MA, C-TAGME
Epilepsy
Cleveland Clinic
Cleveland, Ohio

Bernadett R. Mahanay, C-TAGME
Anesthesiology Fellowships
Stanford University
School of Medicine
Stanford, California

Bethany J. Millar, C-TAGME
Internal Medicine
Washington University
School of Medicine
St. Louis, Missouri



GME INSTITUTIONAL COORDINATOR EXCELLENCE AWARD

The GME Institutional Coordinator Excellence Award honors and recognizes the pivotal position of the institutional coordinator. The ACGME congratulates the recipients of the 2023 GME Institutional Coordinator Excellence Award:

Leslie Caulder, MS, C-TAGME
University of Florida College of
Medicine Jacksonville
Jacksonville, Florida

Bret Stevens, MBA, C-TAGME
McLaren Health Care
Grand Blanc, Michigan

Michael A. Venten, MBA
Stony Brook Medicine
Stony Brook, New York



DAVID C. LEACH AWARD

To honor former ACGME Executive Director David C. Leach, MD (1997-2007) and his contributions to resident education and well-being, the ACGME created this award in 2008. This award is unique in that it acknowledges and honors residents, fellows, and resident/fellow teams and their contributions to GME. The ACGME congratulates the 2023 recipients of the David C. Leach Award:

Abhiram M. Kondajji, DO, MS
Surgery
Cleveland Clinic South Pointe Hospital
Warrensville Heights, Ohio

Evelyn Obregon, MD
Pediatrics
University of Florida
Gainesville, Florida

Manojna R. Prasad, MD
Internal Medicine
New York Medical College at
Saint Michael's Medical Center
Harrison, New Jersey

David R. Velez, MD
Surgery
University of North Dakota
West Fargo, North Dakota

Christina Baxter Vernace, DO
With team members:
Angelina Bernier, MD; Mary
Catherine Hart; Lindsay Thompson,
MD; Keiaria Williams
Pediatrics
University of Florida
Gainesville, Florida



2023 Joint Award Winners

THE DEWITT C. BALDWIN, JR. AWARD

The DeWitt C. Baldwin, Jr. Award is presented to Sponsoring Institutions by the ACGME and the Arnold P. Gold Foundation to recognize institutions with accredited residency/fellowship programs that are exemplary in fostering a respectful, supportive environment for medical education and the delivery of patient care, which leads to the personal and professional development of learners. The ACGME congratulates the recipients of the 2023 ACGME and Arnold P. Gold Foundation DeWitt C. Baldwin, Jr. Award:

**Hospital Alejandro Otero Lopez -
Manatí Medical Center**
Manatí, Puerto Rico

**University of Texas MD Anderson
Cancer Center**
Houston, Texas

THE JEREMIAH A. BARONDESS FELLOWSHIP IN THE CLINICAL TRANSACTION

The Jeremiah A. Barondess Fellowship in the Clinical Transaction is presented by the ACGME and the New York Academy of Medicine to enhance the ability of young physicians to conduct the essential elements of the clinical transaction, capacities required for effective clinical care. The ACGME congratulates the 2023-2025 Barondess Fellows:



Jacqueline Birnbaum, MD
University of Texas
Health Science Center
at Houston
Houston, Texas



Daniel Sartori, MD
NYU Grossman School of
Medicine
NYU Langone Hospital-
Brooklyn
Brooklyn, New York

Milestones 2.0: A Seven-Year Journey

In the last two decades, medical education reform has focused on methods to determine the ability of residents and fellows to deliver high-quality patient care and improve patient outcomes. In 2013, specialty-specific Milestones were introduced as a part of the ACGME's accreditation model to facilitate progressive evaluation of residents and fellows. In November 2016, the ACGME embarked on a journey to create the second iteration: Milestones 2.0.

Academic Year 2022-2023 marked the end of the Milestones 2.0 development, as the last specialties completed their work, signaling a major achievement in reflection, collaboration, and improvement.

"The completion of Milestones 2.0 is the result of a tremendous amount of time and effort put in by members of the graduate medical education community," said Vice President, Milestones Development Laura Edgar, EdD, CAE. "We're grateful so many people are dedicated to improving how residents and fellows are assessed so they can use that feedback to become better physicians."

Lessons Learned

As the graduate medical education (GME) community implemented Milestones 1.0, pain points and challenges began to emerge. Surveys and focus groups confirmed there were too many subcompetencies overall and too many concepts in each Milestones set.

Since the Milestones 1.0 were developed by each specialty without concern for what other specialties were developing, there was extreme variability in definitions and descriptions of subcompetencies and concepts, particularly in the competencies not related to patient care and medical knowledge. (Analysis of 26 core specialties unearthed more than 200 ways to describe professionalism and 144 ways to describe interpersonal and communication skills.)

The goal of the Milestones 2.0 development process was to address these issues and create a more concise, usable framework.

Capitalizing on Community Feedback

Working with institutional leaders, program directors, faculty members, residents/fellows, administrators, coordinators, and the public, the ACGME focused on building Milestones awareness and understanding. Including the public and other non-physicians in the process brought a fresh, more patient-centered perspective to Milestones development.

To include more junior and mid-level faculty members in Milestones 2.0 development, a Call for Volunteers was issued, allowing those who wished to participate in the process to self-identify. Applications came from a variety of volunteers from across the country, from diverse clinical settings, and who had varying levels of clinical and GME experience. This ensured a high-quality outcome for

each Milestones set. All told, more than 1,700 volunteers participated in the Work Groups to review and create Milestones 2.0.

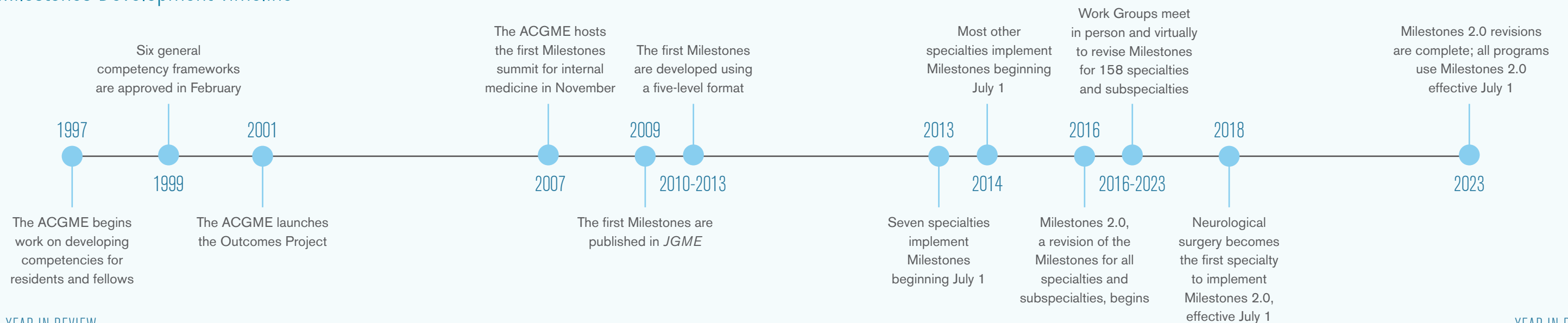
The Work Groups were only one way the ACGME involved the GME community in developing Milestones 2.0. Surveys were also distributed to each specialty community at key points throughout the development process. Before each Work Group convened, a survey

Core Competencies

The Milestones are organized by the six Core Competencies, which provide a systematic framework to think about both curriculum and assessment. Subcompetencies fall under each of these six domains.

- Patient Care
- Medical Knowledge
- Systems-Based Practice
- Practice-Based Learning and Improvement
- Professionalism
- Interpersonal and Communication Skills

Milestones Development Timeline



New—and Renewed—Opportunities for the *Journal of Graduate Medical Education*

of the specialty and/or subspecialty community helped identify problematic areas with the current Milestones. Once the groups created drafts, those were circulated for public feedback, which was considered and incorporated into the final versions. (Note: In a few instances, major revisions prompted the ACGME to ask the community for a second review before publication.) This ongoing conversation resulted in a more collaborative set of documents and increased adoption by the community.

Harmonized Milestones

To reduce confusion and variability among Competencies, the ACGME created “Harmonized Milestones” for the Core Competencies of Systems-Based Practice, Practice-Based Learning and Improvement, Professionalism, and Interpersonal and Communication Skills. Four groups of interdisciplinary and interprofessional volunteers from a range of specialties and roles in GME were convened to create Milestones for these four domains.

The drafts were shared for public feedback and received many positive comments. These cross-specialty Harmonized Milestones were then provided to each of the Milestones 2.0 Work Groups with the intent that each specialty would tailor the language to fit their needs. For example, the language for communicating with patients and families would look different for pediatrics versus pathology. This approach allowed individual specialties to balance the need for customized subcompetencies with creating a shared mental model across all specialties.

Real-World Examples in a Dynamic Document

To address concerns about how the Milestones can be applied in real-world situations, Milestones 2.0 include a companion specialty-specific Supplemental Guide. Created to assist programs to more fully comprehend each subcompetency, the Supplemental Guides offer tangible examples of what an evaluator could expect to observe, along with suggested assessment models and resources.

The Supplemental Guides are Word documents, available on the ACGME website, for programs to download and tailor to local needs and circumstances.

Milestones 2.0 by the Numbers

1,711 volunteers

831 meetings

361 in-person meetings

470 meetings over Zoom

158 Milestones sets developed

150 Supplemental Guides created

3,209 subcompetencies written

6,201 themes within subcompetencies

Looking to the Future

In support of Milestones 2.0, the Milestones team is updating supplemental materials and guidebooks to make them more accessible and user friendly, incorporating feedback from the GME community into those improvements.

In the fall of 2022, the ACGME distributed a quality assurance feedback questionnaire asking about the challenges of implementing Milestones 2.0 and suggestions for improvement. These data, reported in a [Journal of Graduate Medical Education article](#), will serve as a foundation to better inform upcoming evaluation research on the Milestones.

Beginning in late 2023, a multi-year program evaluation will consider all aspects of the Milestones. These data will be used to ensure the Milestones continue to meet the needs of the residents, fellows, faculty members, and patients. The process will continue to incorporate stakeholders’ voices through focus groups, interviews, and surveys to ensure that, just as residents and fellows evolve their knowledge and skills to become better physicians, the Milestones continue to evolve to best serve the GME community.

In 2022-2023, the *Journal of Graduate Medical Education (JGME)* renewed its presence at medical education conferences, enhanced its visual abstracts initiative by adding visual media resident editors to its Editorial Board, and announced a call for papers to be published in a supplement issue on climate and graduate medical education (GME). The *JGME* podcast, *Hot Topics in MedEd*, continued to offer a forum for authors and editors to discuss research published in the journal.

Renewed Presence at Medical Education Conferences

In the fall of 2022, *JGME* staff members and editors resumed travel for a renewed presence in person at medical education conferences for the first time since 2020. *JGME* had an exhibit booth at the International Conference on Residency Education (ICRE) in Montreal, Canada, and at Learn, Serve, Lead: The Association of American Medical Colleges Annual Meeting in Nashville, Tennessee. These represented the first opportunity to display the journal’s new booth display materials since *JGME* rebranded in 2020. At ICRE, *JGME* continued its collaboration with the Royal College of Physicians and Surgeons of Canada to award Top Research in Residency Education and Top Resident Research abstracts. In February 2023, *JGME* had a robust presence at the ACGME Annual Educational Conference in Nashville, at which *JGME* editors conducted two workshops, a *JGME* Reviewer and Editor Reception was held, and for the first time, *JGME* had a booth in the ACGME Hub in the Exhibit Hall.

Visual Abstracts

In 2022, *JGME* increased the creation of visual abstracts (graphic summaries that convey key findings of specific articles) by adding three visual media editors to the Editorial Board. The new editors have created guidelines for making visual abstracts, as well as a template for authors. Using the template, they have worked with authors of accepted manuscripts to create the abstracts,

which are showcased on the *JGME* website and used for dissemination. The editors also led a session at the ACGME Annual Educational Conference on making visual abstracts. Because of these efforts, the journal has greatly increased the number of visual abstracts developed for each issue.

Supplement on Climate and Graduate Medical Education

JGME editors recognized an urgent need for future physicians to be prepared for climate-related health issues, but found little in published literature about the intersection of climate health and GME. In response, the Editorial Board issued a call for papers of all types on climate change and GME to be published in a supplement issue in 2024. The announcement of the call for papers, released in April 2023, was accompanied by an editorial from the journal’s editorial leadership and a blog post on the ACGME Blog, as well as a podcast episode that featured conversations with the supplement’s editors. Submissions will be accepted throughout 2023, and the supplement is scheduled to be published in late 2024.

Hot Topics in MedEd Podcast

Since 2019, *JGME*’s podcast, *Hot Topics in MedEd*, has been an integral resource for GME discourse and a place for authors to expand on their research published in the journal. All episodes of *Hot Topics in MedEd* can be found on [jgme.org](#), Apple Podcasts, and Spotify.



JGME editors at the journal's booth at the 2022 AAMC meeting

In the most listened to episode of 2022, Toren Davis, DO shares his story of reclaiming the title of “Disruptive Physician.” His work to dismantle systemic racism and fight for equity in his health care system led him to write to the local newspaper, send letters to the Attorney General, organize signature campaigns and a town hall with community non-profit organizations, and more. He also speaks about where others can start with their own advocacy work and how to build it into curriculum for learners.

In 2023, Hot Topics in MedEd episodes are focusing on the journal's Diversity, Equity, Inclusion, and Justice section. In the episode “Vulnerable yet Unprotected: The Hidden Curriculum of the Care of the Incarcerated Patient,” Michelle Suh, MD, MAT, Marc David Robinson, MD, and Nicole Deiorio, MD discuss the hidden curriculum around incarcerated patients in GME and how people can educate learners and themselves with facts and resources about caring for this vulnerable population. They offer firsthand experience of lessons

learned and guidance on how listeners can get involved with advocating for the standard of care these patients deserve. Another episode focuses on the Health of Indigenous Peoples and GME, in which Editor-in-Chief Gail Sullivan, MD speaks with Mary Owen, MD, Marghalara Rashid, PhD, and Victor Lopez-Carmen. They cover the current state by examining the research from Dr. Rashid et al.'s scoping review and discuss a path forward to a safer, more equitable environment through education and trust building.

A third episode focuses on climate and GME and reinforces the call for papers for the forthcoming supplement. Matthew G. Tuck, MD and Rebecca Philipsborn, MD discuss the intersection of climate health and GME, including the direct effects of climate change on patients, residents and fellows, and health care systems, as well as the need for educational tools to prepare physicians for future climate-related health problems.

With a strong emphasis on lifelong learning and continuous improvement, the ACGME offers a variety of courses, programs, and resources designed to enhance the skills and knowledge of graduate medical education (GME) professionals. The ACGME's educational initiatives aim to equip health care professionals with the tools they need to provide high-quality care and contribute to the advancement of GME.

Tools for Putting Diversity, Equity, and Inclusion into Practice

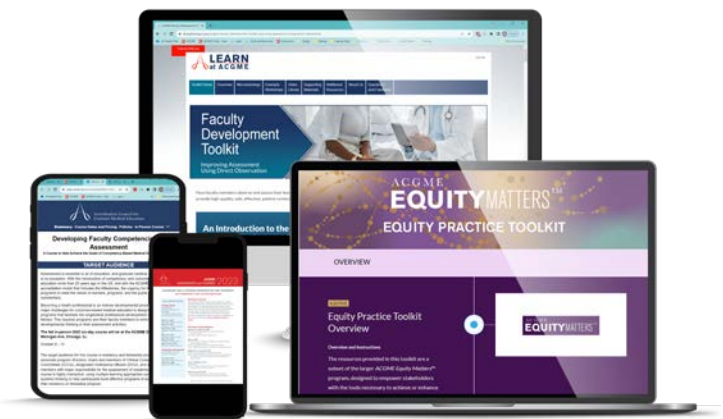
In October 2022, the ACGME added an Equity Practice Toolkit to its *ACGME Equity Matters™* online educational materials. The toolkit has five components: Environmental Equity Assessment; The Power of Culture; Allyship: Foundations, Skills, and Frameworks; Acting to Dismantle Racism; and Protocols for Building Bias Response. Each section includes a brief overview of the resource and tools, and several contain educational videos. The toolkit is supported in part by a Josiah Macy Jr. National Foundation President's Grant.

The Holistic Recruitment Toolkit, published in February 2023, was designed to provide historical context for understanding bias in medical education admissions; identify processes and practices to move toward holistic review; and share approaches for developing rubrics for learner evaluation, understanding outcomes, and sustaining meaningful change.

Holistic review is an approach to creating mission-aligned admissions or selection processes that take into consideration applicants' experiences, attributes, and academic metrics, as well as the value an applicant would contribute to the practice and learning environment. The toolkit, created in collaboration with the Association

of American Medical Colleges, is designed to assist programs in creating admissions/selection processes that consider the “whole” applicant, rather than disproportionately focusing on any one factor. Continuing medical education credit is available.

Both toolkits are accessible in the ACGME's online learning portal, Learn at ACGME.



Resuming In-Person Learning

This year represented a return to in-person education offerings, after nearly three years of virtual-only programming due to the COVID-19 pandemic.

The Leadership Skills Training Programs for Chief Residents returned to its traditional format in 2023. Six in-person workshops took place in Chicago, Illinois, and two additional in-person workshops were held in Philadelphia, Pennsylvania. In 2020 and 2021, the program was offered virtually, and in 2022, limited in-person sessions were available.

Hosted by the ACGME since 2010, the program is designed to provide a transitional experience into the role of chief resident, imparting additional skills critical to success and satisfaction as both a clinician and leader. The in-person experience elevates the level of engagement of the chief residents, as small-group sessions and exercises help them increase understanding of their personal leadership styles, strengths, and weaknesses, as well as develop knowledge and appreciation of group and interpersonal behavior.

For seasoned GME faculty members, the ACGME's Developing Faculty Competencies in Assessment course had two options for participants: a weeklong in-person course or an online option. Led by ACGME senior staff members and select expert instructors from around the country, this popular course helps participants build effective assessment programs for their residency or fellowship. Sessions are highly interactive and use multiple learning approaches, including virtual simulations, to provide participants with approaches and tools for effective assessment.

By offering these educational opportunities and resources, the ACGME helps to ensure graduate medical educators and other health care professionals can cultivate lifelong learning habits, contribute to improvements at their Sponsoring Institutions and programs, better educate residents and fellows, and ultimately provide better care to patients.

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Society to Improve
Diagnosis in Medicine

COMMITTEES AND ACCREDITED SPECIALTIES AND SUBSPECIALTIES

Committee	Specialized Areas	Appointing Organizations
Allergy and Immunology		American Academy of Allergy, Asthma & Immunology American Board of Allergy and Immunology American College of Allergy, Asthma and Immunology
Anesthesiology	Addiction Medicine Adult Cardiothoracic Anesthesiology Anesthesiology Critical Care Medicine Clinical Informatics Hospice and Palliative Medicine	Obstetric Anesthesiology Pain Medicine Pediatric Anesthesiology Pediatric Cardiac Anesthesiology Regional Anesthesiology and Acute Pain Medicine
Colon and Rectal Surgery		American Board of Colon and Rectal Surgery American College of Surgeons
Dermatology	Dermatopathology Micrographic Surgery and Dermatologic Oncology	Pediatric Dermatology
Emergency Medicine	Addiction Medicine Clinical Informatics Emergency Medical Services Medical Toxicology	Pediatric Emergency Medicine Sports Medicine Undersea and Hyperbaric Medicine
Family Medicine	Addiction Medicine Clinical Informatics Geriatric Medicine	Hospice and Palliative Medicine Sports Medicine
Institutional	Health Care Administration, Leadership, and Management	Recognition of Sponsoring Institutions with Non-Standard Training Programs for J-1 Visa Sponsorship
Internal Medicine	Addiction Medicine Adult Congenital Heart Disease Advanced Heart Failure and Transplant Cardiology Cardiovascular Disease Clinical Cardiac Electrophysiology Clinical Informatics Critical Care Medicine Endocrinology, Diabetes, and Metabolism Gastroenterology Geriatric Medicine Hematology Hematology and Medical Oncology	Hospice and Palliative Medicine Infectious Disease Internal Medicine-Pediatrics Interventional Cardiology Medical Oncology Nephrology Pulmonary Critical Care Pulmonary Disease Rheumatology Sleep Medicine Transplant Hepatology
Medical Genetics and Genomics	Clinical Biochemical Genetics Clinical Informatics Laboratory Genetics and Genomics	Medical Biochemical Genetics Molecular Genetic Pathology
Neurological Surgery	Neurocritical Care Neuroendovascular Intervention	
Neurology	Brain Injury Medicine Child Neurology Clinical Neurophysiology Epilepsy Neurocritical Care Neurodevelopmental Disabilities	Neuroendovascular Intervention Neuromuscular Medicine Pain Medicine Sleep Medicine Vascular Neurology
Nuclear Medicine		American Board of Nuclear Medicine Society of Nuclear Medicine and Molecular Imaging
Obstetrics and Gynecology	Addiction Medicine Complex Family Planning Female Pelvic Medicine and Reconstructive Surgery	Gynecologic Oncology Maternal-Fetal Medicine Reproductive Endocrinology and Infertility
Ophthalmology	Ophthalmic Plastic and Reconstructive Surgery	
Orthopaedic Surgery	Adult Reconstructive Orthopaedic Surgery Foot and Ankle Orthopaedic Surgery Hand Surgery Musculoskeletal Oncology	Orthopaedic Sports Medicine Orthopaedic Surgery of the Spine Orthopaedic Trauma Pediatric Orthopaedic Surgery

The American Medical Association's Council on Medical Education is an appointing organization for all committees except for the Institutional Review Committee, Transitional Year Review Committee, Review Committee for Osteopathic Neuromusculoskeletal Medicine, and Osteopathic Recognition Committee.

Committee	Specialized Areas	Appointing Organizations
Osteopathic Neuromusculoskeletal Medicine		ACGME Board of Directors American Osteopathic Association
Osteopathic Recognition	Recognition of programs providing requisite training in Osteopathic Principles and Practice	ACGME Board of Directors American Osteopathic Association
Otolaryngology – Head and Neck Surgery	Neurotology Pediatric Otolaryngology	American Board of Otolaryngology – Head and Neck Surgery American College of Surgeons American Osteopathic Association
Pathology	Blood Banking/Transfusion Medicine Chemical Pathology Clinical Informatics Cytopathology Dermatopathology Forensic Pathology	Hematopathology Medical Microbiology Molecular Genetic Pathology Neuropathology Pediatric Pathology Selective Pathology
Pediatrics	Addiction Medicine Adolescent Medicine Child Abuse Pediatrics Clinical Informatics Developmental-Behavioral Pediatrics Hospice and Palliative Medicine Internal Medicine-Pediatrics Neonatal-Perinatal Medicine Pediatric Cardiology Pediatric Critical Care Medicine Pediatric Emergency Medicine	Pediatric Endocrinology Pediatric Gastroenterology Pediatric Hematology-Oncology Pediatric Hospital Medicine Pediatric Infectious Diseases Pediatric Nephrology Pediatric Pulmonology Pediatric Rheumatology Pediatric Transplant Hepatology Sleep Medicine Sports Medicine
Physical Medicine and Rehabilitation	Brain Injury Medicine Neuromuscular Medicine Pain Medicine	Pediatric Rehabilitation Medicine Spinal Cord Injury Medicine Sports Medicine
Plastic Surgery	Craniofacial Surgery	Hand Surgery
Preventive Medicine	Addiction Medicine Aerospace Medicine Clinical Informatics Medical Toxicology	Occupational and Environmental Medicine Public Health and General Preventive Medicine Undersea and Hyperbaric Medicine
Psychiatry	Addiction Medicine Addiction Psychiatry Brain Injury Medicine Child and Adolescent Psychiatry Consultation-Liaison Psychiatry	Forensic Psychiatry Geriatric Psychiatry Hospice and Palliative Medicine Sleep Medicine
Radiation Oncology	Hospice and Palliative Medicine	
Radiology	Abdominal Radiology Clinical Informatics Interventional Radiology Musculoskeletal Radiology	Neuroendovascular Intervention Neuroradiology Nuclear Radiology Pediatric Radiology
Surgery	Complex General Surgical Oncology Hand Surgery Pediatric Surgery	Surgical Critical Care Vascular Surgery
Thoracic Surgery	Congenital Cardiac Surgery	
Transitional Year		ACGME Board of Directors American Osteopathic Association
Urology	Female Pelvic Medicine and Reconstructive Surgery Pediatric Urology	American Board of Urology American College of Surgeons American Osteopathic Association

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2022-2023 Statistical Highlights

Institutions

There are 886 institutions that sponsor graduate medical education programs. Of these, 65.8 percent sponsor multiple programs, while 26.7 percent sponsor a single program. Seven-point-five percent of Sponsoring Institutions have no accredited programs, the majority of these representing newly accredited sponsors with programs that have not yet applied for or achieved Initial Accreditation. In the last year, the number of accredited Sponsoring Institutions increased by 15. Sponsoring Institutions use 9,242 participating sites to teach residents and fellows.

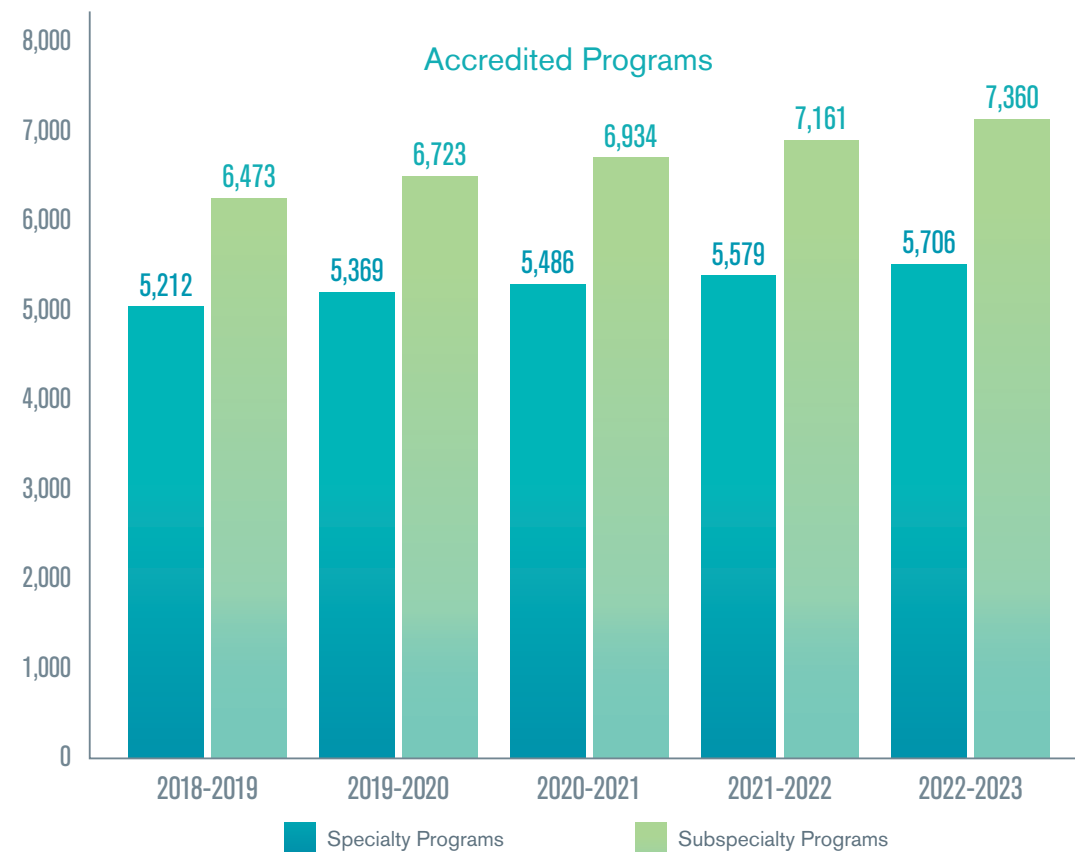
Sponsoring Institutions		
Multiple-Program Sponsors	583	65.8%
Single-Program Sponsors	237	26.7%
Sponsors with No Programs	66	7.5%
TOTAL	886	100%

Programs

Accredited Programs

During 2022-2023, there were 13,066 accredited programs, of which 5,706 were specialty programs and 7,360 were subspecialty programs. Additionally, 401 programs were newly accredited during the academic year. Sixty-six programs closed or voluntarily withdrew their accreditation, and of these, 13 had the status of Accreditation Withdrawn.

During the 2022-2023 annual review cycle, Review Committees issued 11,246 accreditation decisions. The majority of programs (75 percent) did not require an in-depth examination by their respective Review Committee. The remaining programs were assessed by the Review Committees with or without an accreditation site visit. Most programs received a status of Continued Accreditation. Less than two percent of programs were granted a status of Continued Accreditation with Warning or placed on Probationary Accreditation.



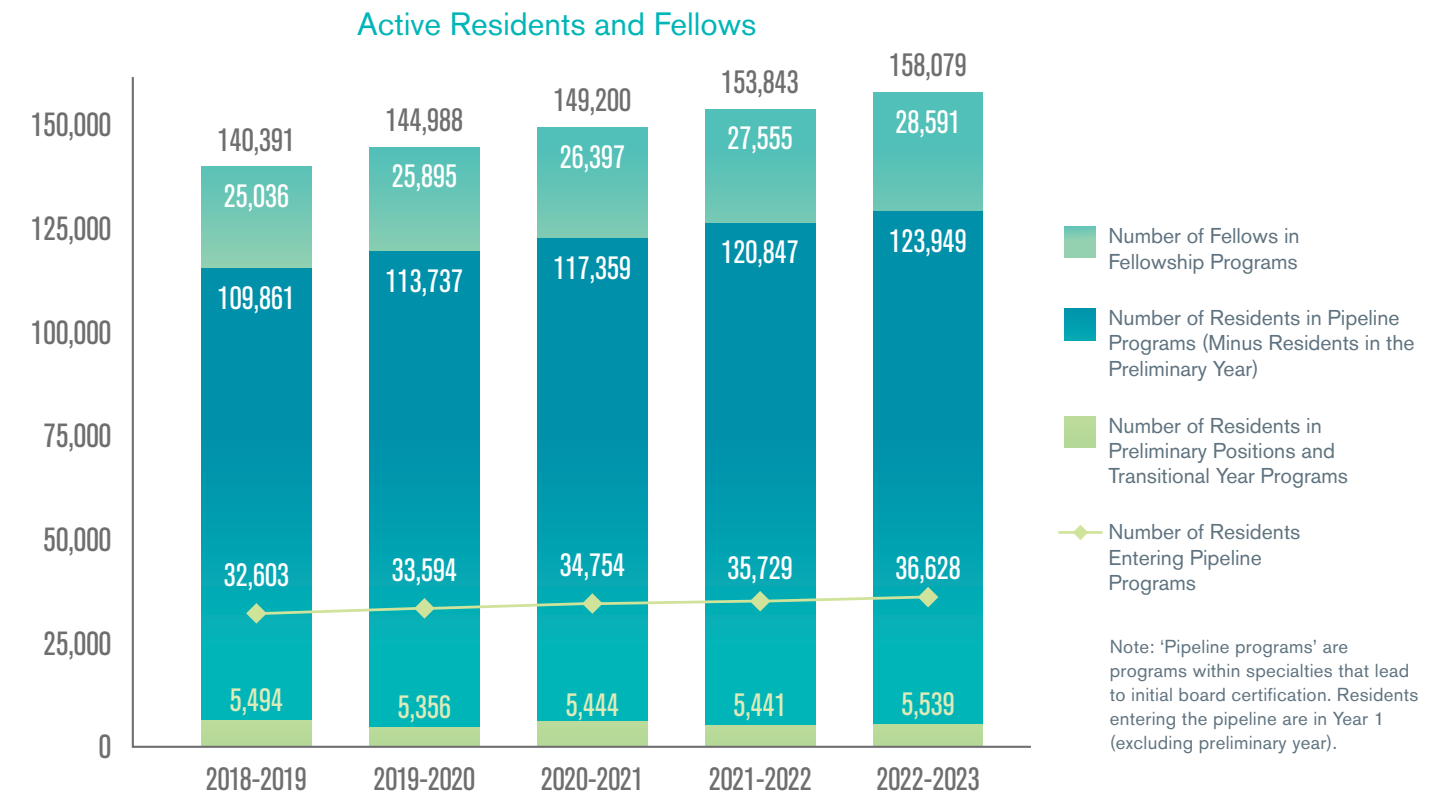
Specialty Program: A structured educational activity comprising a series of clinical and/or other learning experiences in graduate medical education, designed to prepare physicians to enter the unsupervised practice of medicine in a primary specialty.

Subspecialty Program: A program that provides advanced education and training in progressive levels of subspecialization following completion of education and training in a primary specialty and, if applicable, a related subspecialty. It is a structured educational activity comprising a series of clinical and/or other learning experiences designed to prepare physicians to enter the unsupervised practice of medicine in a subspecialty or sub-subspecialty.

Residents and Fellows

Active Residents and Fellows

In Academic Year 2022-2023, there were 158,079 active residents and fellows in 13,066 programs. This represents an increase of 4,236 from last year.



Active Residents and Fellows by Medical School Type

Of the 158,079 active residents and fellows in ACGME-accredited programs during Academic Year 2022-2023, the majority, at 59.2 percent, graduated from Liaison Committee on Medical Education (LCME)-accredited medical schools in the US. International medical school graduates make up 22.9 percent, while 17.8 percent are graduates of osteopathic medical schools.

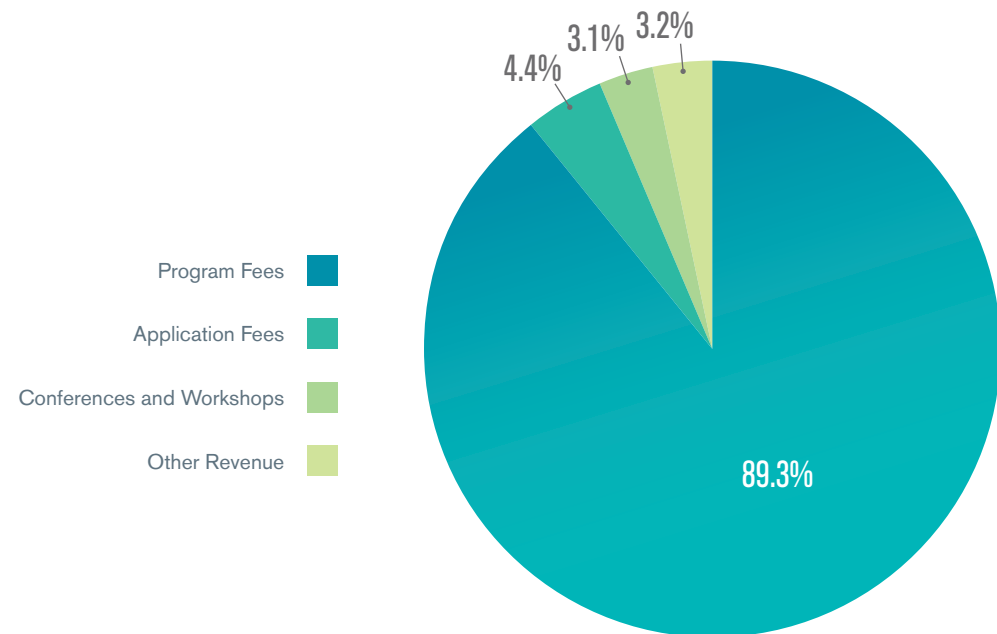
Medical School Type	Number of Residents/Fellows
US LCME-Accredited Medical School	93,609
International Medical School	36,155
Osteopathic Medical School	28,170
Canadian Medical School	134
Medical School Unknown	11

Note: Additional data and further details are provided in the ACGME's *Graduate Medical Education Data Resource Book*, which can be found on the ACGME website.

During 2022, total operating revenues for the ACGME amounted to \$73.1 million.

The majority of operating revenues (89.3 percent) were obtained from annual fees paid by accredited programs at the beginning of the calendar year. New program application fees contributed 4.4 percent of the operating revenues, while Conferences and Workshops accounted for 3.1 percent. Other Revenue included \$0.8 million from ACGME Global Services, \$0.7 million in management fees received from ACGME International, and \$0.3 million from Non-Standard Training Recognition program application fees.

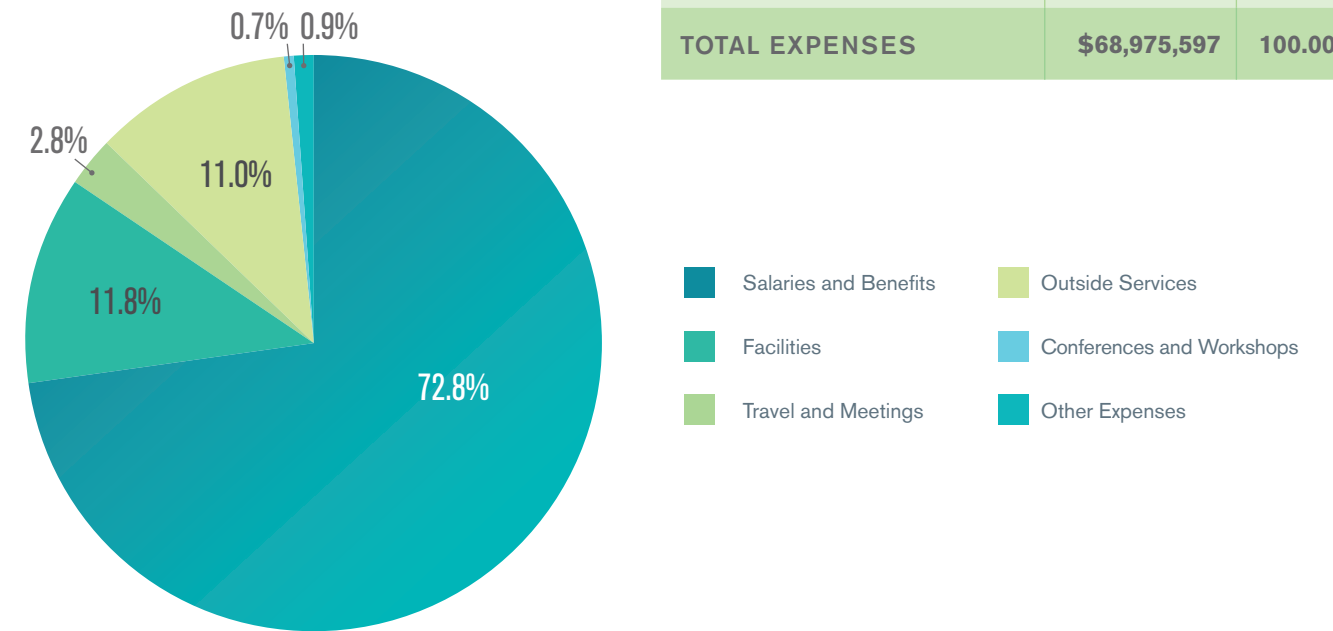
2022 Operating Revenue		
Program Fees	\$65,259,100	89.3%
Application Fees	\$3,236,800	4.4%
Conferences and Workshops	\$2,290,597	3.1%
Other Revenue	\$2,321,773	3.2%
TOTAL REVENUES	\$73,108,270	100.00%



During 2022, total operating expenses amounted to \$69.0 million.

The largest expense was salaries and benefits, comprising 72.8 percent of the annual expenses. Travel and meetings accounted for 2.8 percent of the expenses, reflecting the impact of COVID-19 travel restrictions.

2022 Operating Expenses		
Salaries and Benefits	\$50,221,045	72.8%
Facilities	\$8,132,647	11.8%
Travel and Meetings	\$1,917,822	2.8%
Outside Services	\$7,575,692	11.0%
Conferences and Workshops	\$524,383	0.7%
Other Expenses	\$604,008	0.9%
TOTAL EXPENSES	\$68,975,597	100.00%



Other Income/Expenses of (\$7.0) million included a net investment loss of \$8.2 million and grants of \$1.5 million, partially offset by a \$2.8 million decrease in post-retirement benefit obligations.

Based on Operating Results and Other Income/Expenses, Net Income in 2022 was (\$2.9) million. This includes \$4.1 million of Net Earnings from Operations and (\$7.0) million from the net of Other Income/Expenses.

Summary of Results	
Operating Revenues	\$73,108,270
Operating Expenses	\$68,975,597
NET EARNINGS FROM OPERATIONS	\$4,132,674
Other Income and Expenses (Investment and Other)	(\$7,015,305)
Net Income	(\$2,882,631)

MEMBER ORGANIZATIONS

Each of the Member Organizations of the ACGME nominates individuals to be considered to serve on the ACGME Board of Directors.

American Board of Medical Specialties

American Hospital Association

American Medical Association

Association of American Medical Colleges

Council of Medical Specialty Societies

American Osteopathic Association

**American Association of Colleges
of Osteopathic Medicine**

The ACGME accredits Sponsoring Institutions and residency and fellowship programs, confers recognition on additional formats or components, and dedicates resources to initiatives addressing areas of importance in graduate medical education. The ACGME employs best practices, research, and advancements across the continuum of medical education to demonstrate its dedication to enhancing health care and graduate medical education.

The ACGME is committed to improving the patient care delivered by resident and fellow physicians today, and in their future independent practice, and to doing so in clinical learning environments characterized by excellence in care, safety, and professionalism.



Accreditation Council for
Graduate Medical Education

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