

ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION FACT SHEET

What is the Accreditation Council for Graduate Medical Education?

The ACGME is a private, nonprofit organization that accredits about 8,800 residency programs in 130 specialties and subspecialties. These programs continue the medical education of physicians who have graduated from medical school. The ACGME's mission is to improve health care by assessing and advancing the quality of resident physicians' education through exemplary accreditation.

How many residents are there in programs accredited by the ACGME?

The number of active full-time and part-time residents is more than 110,000.

What is a residency program?

A residency program is a period of education in a chosen specialty that physicians undergo after they graduate from medical school. Most residency programs last from three to seven years, during which residents care for patients under the supervision of physician faculty and participate in educational and research activities. When physicians graduate from a residency program, they are eligible to take their board certification examinations and begin practicing independently. In most states, receiving a license to practice medicine requires completing at least one year of an ACGME-accredited training program, but it does not require completing a full residency program in a designated specialty. Residency programs are sponsored by teaching hospitals, academic medical centers, health care systems and other institutions.

Why was the ACGME established?

The ACGME was established in 1981 out of a consensus within the medical community that an independent accrediting organization for graduate medical education programs was needed. Early in the 20th century, medical specialty boards took on the responsibility of assuring the public that physicians were qualified in specific areas. Later in the century, Residency Review Committees (RRCs) began evaluating and accrediting education programs in different specialties. However, no organization was responsible for accrediting educational programs for the entire profession. Five groups led the effort that eventually created the ACGME: the American Medical Association, the American Board of Medical Specialties, the American Hospital Association, the Association of American Medical Colleges and the Council of Medical Specialty Societies.

How does the accreditation process work?

The work of reviewing specific programs and making accreditation decisions is carried out by 27 Residency Review Committees, one for each major specialty, as well as one for transitional year programs. Another group, the Institutional Review Committee, accredits institutions that sponsor residency programs. RRC members are volunteer physicians appointed by the appropriate medical specialty organization, medical specialty board and the AMA Council on Medical Education.

ACGME field staff representatives conduct one-day site visits to programs once every two to five years, depending on the strength of the program. About one-third of the programs are visited each year. The field staff representatives write objective narrative reports about the programs they visit based on lengthy interviews with the program directors, faculty and residents, as well as a review of supporting documents.

The RRCs, which on average meet three times a year, review the site visitors' reports, along

with data provided by the programs. The RRC members then discuss and vote on the appropriate accreditation action for each program on the agenda for that meeting.

New programs are given initial accreditation, while continuing programs are given full accreditation if they substantially comply with the ACGME common and specialty-specific requirements. Programs that have deficiencies may be given accreditation with warning or probationary accreditation, and programs that subsequently fail to demonstrate that they have corrected their deficiencies may have their accreditation withdrawn.

Programs can appeal adverse accreditation actions to an appeals panel composed of volunteer physicians in the appropriate specialty. Although withdrawal of accreditation is usually preceded by probationary accreditation, programs which have egregious violations of program standards or experience a catastrophic loss of resources may lose accreditation more quickly. Programs may also request voluntary withdrawal of accreditation if, for example, the program becomes inactive or merges with another program. Accreditation may be administratively withdrawn from a program if it is delinquent in paying fees, does not provide information to the review committees, does not maintain current data on the ACGME Accreditation Data System, or does not follow directives of an accreditation action.

Is accreditation voluntary or mandatory?

Accreditation is voluntary. However, programs must be ACGME-accredited in order to receive graduate medical education funds from the federal Center for Medicare and Medicaid Services. Residents must graduate from ACGME-accredited programs to be eligible to take their board certification examinations. In addition, many states require completion of an ACGME-accredited residency program for physician licensure.

How is the ACGME governed?

The members of the ACGME Board of Directors are nominated in equal number (four each) by the five groups that created the council: the American Association of Medical Colleges, the American Board of Medical Specialties, the American Hospital Association, the American Medical Association and the Council of Medical Specialty Societies. In addition, the Board includes two members who are residents, three representatives of the public, the chair of the Council of Review Committees (see below), one to four at-large directors, and two non-voting federal representatives appointed by the Department of Health and Human Services and the Veteran's Administration.

The ACGME governance structure includes a Council of Review Committees, consisting of the chairs of the 28 Review Committees, and a Council of Review Committee Residents, comprising resident members of the Review Committees.

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