Update on Procedural Dermatology Fellowships

ACMS Annual Meeting
Las Vegas, NV
Saturday April 30, 2011
Participants

- Jeanne Heard, PhD, MD, Senior Vice President, Department of Accreditation Committees
- Stan Taylor, MD, Chair, Residency Review Committee for Dermatology (includes the subspecialties of dermatology)
Focus of our comments

• Update on the health of the Procedural Dermatology Fellowships
• Progress made on the Case log upgrade
• Ideas for complying with ACGME Institutional Requirements: Fellowship Advisory Committee
• Invitation to join us tomorrow morning for:
  • Overview of the ACGME accreditation process
  • Procedural Dermatology Program Requirements
  • How to complete the Program Information Form (PIF)
Number of Procedural Dermatology Fellowships continues to Increase

- Last 3 years, program number has increased from 34 to 44 (+2 granted initial accreditation March 2011).
- July 2011: 47 training positions
RRC Encourages New Applications

- Accredited Programs:
  - UMC: 27
  - PP affiliated with UMC: 13
  - PP w/o UMC affiliation: 4

- ACMS Directors who have not applied
  - UMC: 11
  - PP affiliated w/ UMC: 0
  - PP w/o UMC affiliation: 25 (5 non-US)
Most Common Citations in Procedural Dermatology

- Evaluation of Program – i.e., not completed annually, no documentation of the meeting, not inclusive
- Responsibilities of the Program Director- i.e., inaccurate or incomplete PIF, not monitoring supervision
<table>
<thead>
<tr>
<th>Cycle Duration</th>
<th># of Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 yrs</td>
<td>21</td>
</tr>
<tr>
<td>4 yrs</td>
<td>1</td>
</tr>
<tr>
<td>3 yrs</td>
<td>9</td>
</tr>
<tr>
<td>2 yrs</td>
<td>12</td>
</tr>
<tr>
<td>1 yr</td>
<td>1</td>
</tr>
</tbody>
</table>
What’s New

News from the Derm RRC

1st Quarter 2011 News items for Program Directors

Prepared by: Stan Taylor, MD (Chair of the Dermatology RRC)

- **Number of Procedural Dermatology programs reaches a new high**
  - As of the beginning of this year, 44 Procedural Dermatology programs have received ACGME accreditation. This is up from 39 programs last year. Additional applications are under review and accreditation decisions regarding these applications will be announced following the March 25th meeting of the Dermatology RRC.
  - 45 fellows are presently in training.

- **Procedural Case Log Work Group**
  - After a thorough review of the case log data entry workflows and reporting functionality, multiple proposed changes were approved by the work group and forwarded to the ACGME.
  - The ACGME has agreed to make all requested changes and will provide the work group with the updates in the next 2 months for beta testing.
  - A new tutorial is also being prepared in time for the July 1, 2011 roll out of the updated case log.
  - The Dermatology RRC wants to thank the work group members for the work they will be performing over the next few months to bring this project to a successful conclusion. Work group members include: Clark Otley (ABD), Steve Padilla (ACMS), Sumaria Aasi (ACMS), Hugh Gloster (ACMS), Ron Moy (RRC), William Huang (RRC) and Stan Taylor (RRC).

- **Drs. Levenberg and Heard to speak at the ACMS 2011 meeting in Las Vegas on how new Program Directors can negotiate the ACGME accreditation process**
  - Sunday May 1, 2011 from 10:00 to 12:00
  - Their comments will focus on:
    - An overview of the ACGME accreditation process.
    - Update on Institutional Requirements for single site sponsors. Most Mohs fellowships fall into this category and they will provide clarification on how your program can comply with these requirements.
ADS Case Log System Update

• Present Problems
  • Data entry screens are not intuitive
    • Slow and laborious
    • Multiple opportunities for errors
  • Reports are not ideal
    • Tabulate irrelevant data
    • Do not follow the formats requested by ACMS & ABD
  • Both resident and fellow case logs
ADS Case Log System Update

- Upgrade Process
  - RRC Workgroup (Spring 2010)
    - Members:
      - Sumaira Aasi (ACMS), Hugh Gloster (ACMS), Steve Padilla (ACMS), Clark Otley (ABD), Ron Moy (RRC), Stan Taylor (RRC)
  - Reviewed system & identified issues (Summer 2010)
  - Discussed changes w/ACGME IT (Fall 2010)
  - Changes made by ACGME IT (Winter 2010/2011)
    - Made programming changes
    - Began work on tutorials on how to use the new system
  - Beta Testing (May & June 2011)
  - Planned roll out July 1, 2011.
RRC Encourages New Applications

- Accredited Programs:
  - UMC: 27
  - PP affiliated with UMC: 13
  - PP w/o UMC affiliation: 4
- ACMS Directors who have not applied
  - UMC: 11
  - PP affiliated w/ UMC: 0
  - PP w/o UMC affiliation: 25 (5 non-US)
ACGME Accredits Institutions and Programs

• Unlike the ACMS tradition of accrediting the trainer and their program, the ACGME accredits programs which are sponsored by an “institution”.
• ACGME also accredits sponsoring institutions (SI)
• The SI is responsible for assisting the program director with compliance and providing local oversight.
Types of Sponsoring Institutions

• **Multiple Program Sponsoring Institutions (MPSI)**
  - 377 sponsor from 2 to 120 programs
  - ACGME Institutional Review Committee provides accreditation review and status decision based on compliance with Institutional Requirements

• **Single Program Sponsoring Institutions (SPSI)**
  - 304 sponsor one core program or one core program and its fellowships
  - ACGME RRC provides accreditation review and status decision based on compliance with the program requirements and the Institutional Requirement(portions)
  - Accreditation status and cycle length of the SPSI is the same as the cycle of the program
Institutional Requirements

• Contain elements that standardize components of the learning environment

• Requirements that specify for institutions the responsibilities needed to sponsor residency programs:
  • Commitment and support
  • Facilities and resources
  • Educational program and evaluation methods
  • Resident/fellow affairs (eligibility, financial, benefits, etc)

• Implemented at the sponsoring institution (SI) through a Graduate Medical Education Committee (GMEC) with oversight from a ‘designated institutional official’ (DIO)
Types of Standards

- Institutional Requirements
  - Compliance Assessed by Institutional Review Committee or by RRC for Single Program SI

- Specialty-Specific Program Requirements
  - Compliance Assessed by Residency Review Committee (Specialty Committee)

- Common Program Requirements
Requirements for Single Program Single Sponsor Institutions (SPSI)

- Programs who choose not to affiliate with a UMC or teaching medical center are responsible for complying with the Institutional Requirements.
- Programs must show evidence of compliance with these requirements to the RRC (application) or ACGME site visitor (for continued accreditation).
Institutional Requirements (Single Program SIs)

• Have an institutional statement of commitment:
  • to educational, financial & human resources to support program
  • signed by SI’s governance, administration, and GME leadership

• Include written protocols or policies on:
  • Periodic evaluation of educational quality (curriculum, fellow performance, faculty development) & compliance with the program requirements
    • Undergo an internal review by the midpoint of the accreditation cycle.
  • Fellow selection, evaluation, promotion, dismissal
  • Fellow support, benefits and conditions of employment - fellow contract or agreement (handbook)

• Grievance (due process) procedures available to fellow
  • composition of grievance committee & how complaints are handled.
  • avoid conflict of interest (e.g., program director should not be part of decision-making body)
Common Requirements

The same requirements for all specialties/subs:

- Program director responsibilities
- Supervision and duty hours
- Balance of service vs education
- Competency based education & evaluation
  - Interpersonal & Communication Skills
  - Medical Knowledge
  - Practice Based Learning & Improvement
  - Systems Based Practice
  - Patient Care
  - Professionalism
- Faculty qualifications
- Program evaluation and improvement
Major ‘Stumbling Blocks’ to Accreditation

- Compliance with Institutional Requirements for SPSI
- Providing ‘evidence’ to the RRC (applications) or ACGME site visitor of institutional oversight
Ideas for How to Address the Issues

- Affiliate with a MPSI
- ‘Borrow or purchase oversight services’
- Form a special interest group to develop the documents (samples commitment statements, contract, policies)
- Form a ‘Fellowship Advisory Committee’ for your program
Fellowship Advisory Committee Goals

• To ensure compliance with the SPSI requirements
  • Institutional statement of commitment
  • Fellow contract (handbook) has all elements
  • Necessary policies (eligibility, grievance, others)
  • Mid-cycle internal review

• To ensure compliance with the fellowship’s common program requirements
  • Approval of ACGME documents
  • Formal periodic evaluation of the program
Fellowship Advisory Committee Composition

- Consists of at least 5 individuals to include faculty, external members, supervisors, and at least one resident representative,
- Program director would act as an ex officio member,
- Majority of the members would have their primary affiliation outside the sponsoring institution,
- Members would be actively practicing procedural dermatology, involved in procedural dermatology training in an ACGME accredited dermatology residency or procedural dermatology fellowship program or be knowledgeable about specialty education in procedural dermatology,
- FAC Chair would be a physician other than the program director and would have his/her primary affiliation outside the SPSI.
Fellowship Advisory Committee Responsibilities (SI)

- Meets at least semiannually
- Advises and assists the program director to (comply with SPSI requirements):
  - develop/update a written fellowship mission statement that describes goals and objectives of the fellowship and commits educational, financial, human resources (‘institutional statement of commitment’)
  - approve the fellow contract
  - develop the program (SI) policies
    - FAC oversees the grievance process
  - conduct the SI’s internal review of the program
Fellowship Advisory Committee Responsibilities (program)

• Advises and assists the program director to (comply with program requirements):
  • develop appropriate educational experiences and clinical rotations;
  • Conduct annual review of the program (formal, systematic)
    • curriculum
    • written, confidential fellows’ evaluations - faculty and program
    • faculty development
    • written action plan to improve
  • review the PD’s evaluations of individual fellows
Please Join Us
Tomorrow Morning

• If you are interested in submitting a new application for ACGME accreditation.
  • We will provide an overview of the ACGME process.
  • We will ‘walk through’ the application for initial accreditation.
• If you have unanswered questions.
• 10:00 am to noon