Obstetrics and Gynecology Review Committee: Accreditation Update & Looking Ahead

Jessica Bienstock, MD, MPH
Chair, Obstetrics and Gynecology Review Committee
Professor and Associate Dean for GME, Johns Hopkins University

Kathleen Quinn-Leering, PhD
Executive Director, Obstetrics and Gynecology Review Committee

Program Directors Meeting SMFM January 31, 2018
Disclosures

Fiduciary

Bienstock (Volunteer for ACGME)
Quinn-Leering (Full-time employee of ACGME)

Financial

None
Topics

• ACGME & Obstetrics/Gynecology Review Committee (RC)
• MFM transition to ACGME update
• Next steps for MFM programs in the ACGME accreditation process
• Annual ACGME-related program activities
• Resources
• Q&A
ACGME & Obstetrics/Gynecology RC
ACGME

• ACGME accredits 154 specialties and subspecialties
• ~10,700 ACGME accredited programs
• ~130,00 Residents & Fellows
• 29 Residency Review Committees
## Department of Accreditation Services

<table>
<thead>
<tr>
<th>Hospital-Based</th>
<th>Medical</th>
<th>Surgical</th>
<th>Osteopathic</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Louis Ling, M.D.</em></td>
<td><em>Mary Lieh-Lai, M.D.</em></td>
<td><em>John Potts, M.D.</em></td>
<td><em>Lorenzo Pence, DO</em></td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>A&amp;I</td>
<td>Colorectal Surg</td>
<td>OPC</td>
</tr>
<tr>
<td>Radiology</td>
<td>Dermatology</td>
<td>Neurosurgery</td>
<td>ONMS</td>
</tr>
<tr>
<td>Emergency Med.</td>
<td>Family Medicine</td>
<td><strong>OB-Gyn</strong></td>
<td></td>
</tr>
<tr>
<td>Medical Genetics</td>
<td>Internal Medicine</td>
<td>Ophthalmology</td>
<td></td>
</tr>
<tr>
<td>Nuclear Medicine</td>
<td>Neurology</td>
<td>Orthopaedic Surg</td>
<td></td>
</tr>
<tr>
<td>Pathology</td>
<td>Pediatrics</td>
<td>Otolaryngology</td>
<td></td>
</tr>
<tr>
<td>Preventive Med.</td>
<td>PM&amp;R</td>
<td>Plastic Surgery</td>
<td></td>
</tr>
<tr>
<td>Rad. Oncology</td>
<td>Psychiatry</td>
<td>Surgery</td>
<td></td>
</tr>
<tr>
<td>Transitional Year</td>
<td></td>
<td>Thoracic Surgery</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Urology</td>
<td></td>
</tr>
</tbody>
</table>

**Institutional**

*Kevin Weiss, MD*
RC Members

- All volunteers
- 14 Members nominated by ABOG, ACOG, AMA & AOA (6 year term)
- 1 Resident (2 year term)
- 1 Public member (6 year term) - coming soon
- 2 ex-officio members-1 each from ABOG & ACOG
RC Membership is Diverse

Current Members

- 8 Ob/Gyn
- 2 FPMRS
- 1 Gyn Onc
- 2 MFM
- 1 REI
RC Responsibilities

- Accredit new programs
- Review programs annually
- Review programs after a site visit
- Create & revise case logs; establish minimums
- Review complement change requests
- Follow up on resident/fellow complaints
- Propose new and revised (sub)specialty program requirements
RC Meetings

- Three meetings each year
  - Late January/early February
  - April
  - September
- Each meeting has an agenda closing date approximately two months before meeting
RC Staff

- Executive Director: Kathleen Quinn-Leering, PhD
- Associate Executive Director: Jenny Campbell, MA
- Accreditation Administrator: Monica Moore
- Sr. Vice President Surgical Accreditation: John R. Potts III, MD
MFM Update
First, a little background. . .

- Transition from ABOG to ACGME began in 2014
- Involved OB/Gyn RC and ABOG
- Included creation of:
  - MFM Program Requirements
  - MFM Milestones
  - MFM Application
  - MFM Case Log
Phase I: Fellowship specific program requirements written

Phase II: Fellowship specific milestones written

Phase III: Fellowship specific program applications written

Gyn Onc 8/24/2015
Gyn Onc 10/22/2015
MFM 11/19/2015
Rei 1/18/2016
MFM 3/11/2016
Rei 4/19/2016
MFM 06/2016

© 2018 ACGME
April 2017: Total # Fellowships Reviewed
  Gyn Onc: 50
  MFM: 74
  REI: 43
  Total Programs: 167

Phase IV:
RRC meetings and numbers of subspecialty-specific fellowships reviewed

Sept Mtg:
  Gyn Onc: 18
  09/2016

Oct Mtg:
  Gyn Onc: 3
  MFM: 12
  REI: 7
  10/2016

Feb Mtg:
  Gyn Onc: 21
  MFM: 39
  REI: 18
  02/2017

April Mtg*:
  Gyn Onc: 8
  MFM: 23
  REI: 18
  04/2017

© 2018 ACGME
MFM Accreditation Update

- 85 MFM programs with Initial Accreditation
- 368 Approved positions; 326 filled
- 5 MFM program applications
  - 2 of which are currently Osteopathic accredited
Case Log System

• Fellows required to log as of August 1, 2017
• 2017-2018 academic year is a learning year
• Starting July 1, 2018, Case Log data will be used to determine minimums
  • Earliest that minimums will be set is 2021
• Required procedures are those that are being tracked
  • Fellows can log non-tracked procedures for their own purposes
Case Log System

We heard you!
Recent Case Log Changes

• Log only abnormal ultrasounds
  • Abnormal fetal growth (<10\textsuperscript{th} or >90\textsuperscript{th} percentile)
  • Fetal malformation
  • Abnormal placentation
  • Genetic disorder
Recent Case Log Changes

• Patient visits - only log the first time patient seen for either:
  • Consult
  • Ongoing medical management of co-morbidity
• Fellows still need to indicate type of visit (i.e., consult or ongoing medical management of co-morbidity)
Recent Case Log Changes

• Co-morbidities
  • Only log bacterial infection for non-GBS infections
  • OPTION to indicate “other” if co-morbidity is not listed
    • Can further specify in comment box
  • “Other” co-morbidities are not being tracked by the RC
Case Log Resources

Obstetrics and Gynecology RC>
Documents and Resources

Accreditation Data System (ADS)>Case Logs>Reference Materials
IV.A.3. Regularly scheduled didactic sessions

- Number of hours of required fellow-specific education is 4 hours total per 4 weeks
- NOT 4 hours per week
Common
MFM
Citations
&
Areas for Improvement
Reminder
Reminder #1: Requirements

- MFM Program Requirements include:
  - Common Program Requirements (Bold Font)
  - Subspecialty Requirements (Regular Font)

IV.B. Fellows' Scholarly Activities

IV.B.1. The curriculum must advance fellows' knowledge of the basic principles of research, including how research is conducted, evaluated, explained to patients, and applied to patient care.

IV.B.2. Fellows should participate in scholarly activity.

IV.B.2 a) The goals and objectives of research rotations must be reviewed by a fellow with his/her research mentor.

IV.B.2 b) A fellow's research curriculum must include:

- biostatistics, epidemiology, research design, and research methods, including basic science techniques; (1)
- opportunities for structured basic, translational, and/or clinical research. (2)
Reminder #2: Definitions

- **Citation:** Failure to substantially comply with accreditation standard—always linked to a program requirement

- **Area for Improvement or AFI:**
  - Area of concern, concerning trend, tip and/or “heads up” about issue that could turn into a citation
  - Not necessarily linked to a requirement
Common Citation & AFI Areas

• PD Responsibilities
• Educational Program
• Evaluation
PD Responsibilities

- Not providing required information
  - Documents or information missing from the application
  - Inconsistent information (e.g., one site listed in ADS but additional sites included on block diagram)
  - Brief answers
Educational Program

- Goals and Objectives (G&Os)
  - There must be G&Os for EACH rotation at EACH PGY level even research rotations
  - Organized by the six competencies
Educational Program

• Block Diagram must clearly show when and where:
  • Minimum 3 months ultrasound & 2 months outpatient MFM
    • If longitudinal experience, indicate which blocks
  • Minimum 2 months Labor and Delivery (minimum 2 week blocks)
  • Minimum 12 months of research (minimum 1 month blocks)
Educational Program

• Procedural Volume
  • Only AFIs at this time
  • Based on RC and ABOG identified procedural count guidelines
    • MFM Guidelines posted online on OB/Gyn RC Documents and Resources
Evaluations

• Formative evaluation of fellow
  • Faculty evaluations at the end of each rotation
  • Multisource (e.g., peers, self, residents, allied health professionals)
  • Assess performance in all six competencies
Evaluations

• Semi-annual Evaluation of fellow
• Summative Evaluation of fellow
  • Must use Milestones
  • Must document performance during final period of education
  • Must verify that the fellow has demonstrated sufficient competence to enter practice without direct supervision
What other evaluations are required?

- Fellow evaluation of the faculty
- Evaluation of the program by the fellow and faculty
Evaluation Committees

Clinical Competency Committee (CCC)

- Must meet at least twice a year to review fellows
- Coordinator can attend, but cannot be a member
Evaluation Committees

Program Evaluation Committee (PEC)

- Must meet at least once a year to conduct in-depth review of program
- There must be at least one fellow member
- Coordinator can be a member
- Review Requirement V.C. to ensure the annual review is fully compliant with requirements
ACGME Accreditation Process
Accreditation Process

Application for ACGME Accreditation

Initial Accreditation (1-2 yrs)

Continued Accreditation (option: without outcomes)

Initial Accreditation with Warning (1 yr)

Withdrawal of Accreditation

Site Visit

Site Visit
Accreditation Process

Application for ACGME Accreditation

Initial Accreditation (1-2 yrs)

Continued Accreditation (option: without outcomes)

Initial Accreditation with Warning (1 yr)

Probationary Accreditation (2 yrs max)

Continued Accreditation with Warning

Following Year & Subsequent Yrs

Site Visit

Site Visit
WHAT YOU NEED TO KNOW
MFM Programs: Next Steps

• Each program will be notified within the next two years of a site visit (~60 days notice)

• Prior to the site visit, program must:
  • Update information in ADS
  • Update specialty specific application & upload in ADS
  • Upload most (but not all) of the same documents into ADS (e.g., evaluations, policies)
Updated Application

Provide clear, succinct, accurate and updated program information.

Not in Updated Application = Doesn’t Happen
Major Changes Section

- *Not just for major changes!*
- Use this area to directly communicate to the RC
- Outline how program is addressing ANY area of concern (e.g., AFIs, survey results)
Site Visit

- Checking compliance with MFM program requirements
- Half-day
- Site Visitor is member of ACGME Field Staff
- Meets with leadership, faculty, fellows and DIO
- Document review (e.g., policies, fellow files)
RC Reviews Program

• After the site visit, RC reviews program at next meeting
• Review focused on compliance with MFM program requirements
After RC Review

• After RC meeting:
  • Right after meeting: Email sent with accreditation status decision
  • Within 60 days: Letter of Notification with any citations and AFIs

Key Takeaway:
Ensure program is substantially compliant with MFM Program Requirements & this is communicated in updated application.
Looking down the road past Initial Accreditation
Annual Review

• Program data collected January-September (e.g., Resident & Faculty Surveys, scholarly activity, citation responses, Board exam performance)

• RC reviews programs at January/February or April meeting

• Programs receive notification of accreditation status and any citations/AFIs
Self-study & 10-Year Site Visit

• Fellowships will participate in the self-study & 10 Year Site Visit

• Fellowships on the same schedule as affiliated core program
  • For some fellowships, this will mean participation within a couple years of achieving Continued Accreditation
Accreditation Timeline

Once program is past Initial Accreditation Period
Annual ACGME Activities
and
Resources
Annual ACGME Activities

- Beginning of Academic Year:
  - Update ADS for new academic year
  - Ensure graduate case logs are complete before archive
- November-December: Milestones evaluations of fellows
- January-April: ACGME Fellow and Faculty Surveys
- End of academic year:
  - Ensure ADS is accurate for current academic year before archived
  - Milestones evaluations of fellows
Annual ACGME Activities

Program due dates can be found in ADS
Obstetrics and Gynecology

Overview
The documents and resources within this section are provided by the Review Committee for Obstetrics and Gynecology and its staff at the ACGME to assist ACGME-accredited programs and those applying for accreditation. Specialties and subspecialties information is found in each of the links listed below, as applicable.

OBSTETRICS AND GYNECOLOGY SUBSPECIALTIES
Female Pelvic Medicine and Reconstructive Surgery
Gynecologic Oncology
Maternal-Fetal Medicine
Reproductive Endocrinology and Infertility

OTHER ACCREDITATION RESOURCES
Single GME Accreditation System
Common Program Requirements
Self-Study and Site Visit
Clinical Experience and Education (formerly Duty Hours)
Review and Comment
Osteopathic Recognition

Contact Us:
Executive Director for RCS of Obstetrics and Gynecology, Ophthalmology, and Urology
Kathleen Quinn-Leering, PhD
kquinn@acgme.org
312.755.5013

Associate Executive Director for RCS of Obstetrics and Gynecology, Ophthalmology, and Urology
Jenny Campbell, MA
jcampbell@acgme.org
312.755.5026

Accreditation Administrator/Executive Assistant for RCS of Obstetrics and Gynecology, Ophthalmology, and Urology
Monica Moore
mmoore@acgme.org
312.755.7420

Data Systems Technical Support
ads@acgme.org
312.755.7474

acgme.org>Specialties>Obstetrics and Gynecology

© 2018 ACGME