AOA & ACGME Anesthesiology Programs in the Single Accreditation System—A Program Director’s Guide

Louis Ling, MD
SVP, Hospital-Based Accreditation, ACGME

Anne Gravel Sullivan, PhD
Executive Director, Anesthesiology RC
Objectives for today’s session

- Provide overview of the process for AOA programs to apply for ACGME accreditation as Anesthesiology programs
- Review key Anesthesiology program requirements pertinent to application process
- Describe importance of pre-accreditation status for student eligibility for ACGME residency programs
- Summarize new resident eligibility requirements that go into effect July 1, 2016
- Identify resources for Program Directors
Applying for Accreditation
AOA Program Application Process

Existing AOA-accredited programs can apply to receive Pre-Accreditation Status from 2015-2020

- Institutions must apply for pre-accreditation before programs
- Institutional Application—Opens April 1, 2015
- Program Application—Opens July 1, 2015
  - CBY Programs (including Transitional Year) must be ACGME-accredited
  - AOA Internship and other programs applying for accreditation must have Initial Accreditation status before serving as CBY
Existing AOA-accredited programs can apply to receive Pre-Accreditation Status from 2015-2020

- Programs accredited by the AOA as of July 1, 2015 receive Pre-Accreditation status upon submission of application
- Individuals who complete a residency program after that program has achieved Pre-Accreditation status will be subject to the ACGME eligibility requirements for the relevant subspecialty that were in effect as of June 30, 2013 or July 1, 2016, whichever is less restrictive.
Pre-Accreditation Status

• “Pre-Accreditation Status” acknowledged instantly

• Importance to ACGME:
  • Programs will be in data system
    • ADS annual update
    • Case logs
    • Resident survey
    • Faculty survey
    • Milestones
Anesthesiology Programs

- 13 AOA-accredited Anesthesiology Programs
- 383 ACGME-accredited Programs
  - 151 Core Specialty
  - 232 Subspecialties
    - Critical Care
    - Adult Cardiovascular
    - Pediatric
    - OB/Gyn
    - Pain Medicine
    - Clinical Informatics
Dually-Accredited Programs

- Refers to the programs that are accredited by both the ACGME and the AOA

- Dually-accredited programs may not need to do anything by way of application in the SAS.

- They may need to ask RC for complement increase if residents in the AOA program are not currently counted in ACGME complement.

- They may seek Osteopathic Recognition
Subspecialty Programs

- There is only one AOA pediatric fellowship (subspecialty program)
- Subspecialty programs are considered dependent
- Must be associated with Core Program in the same Sponsoring Institution
- Sub can apply after core has Pre-Accreditation
- Sub cannot be accredited until core receives Initial Accreditation
AOA Fellowship Applications

Sponsoring Institution and core program: ACGME-accredited or "pre-accreditation"

Program application for ACGME Accreditation

Program AOA-Approved 1 July 2015?

Yes

"Pre-Accreditation status"

"Continued Pre-Accreditation"

Withdraw Application

1 July 2020

No

Usual program application process; No benefits of MOU

RC finds "Substantial Compliance"?

Yes

Initial Accreditation Conferred

No

Accreditation Withheld

Fellows in program 1 July 2015?

Yes

May have AOA co-PD AOA-certified faculty

Subject to all current ACGME PRs

Core Program ACGME-Accredited?

Yes

No

Initial Accreditation Conferred

RC finds "Substantial Compliance"?

Yes

No

+/− sv

ACGME
Logistics of Applying for Accreditation
• A completed program application contains three parts:
  • (1) ADS Common Application
  • (2) Specialty Specific Application Word document
  • (3) Attachments
Before Initiating an Application

- Identify all required program personnel
  - Program Director
  - Program Coordinator
  - Core Faculty

- Work with Sponsoring Institution’s DIO to identify the required affiliated Internal Medicine and General Surgery programs
  - If not currently ACGME-accredited, have IM and GS programs notify you when receive Initial Accreditation

- Identify all participating sites at which rotations will occur
  - Program Letters of Agreement
Steps to Applying for a New ACGME accredited program

• DIO initiates the application in ADS
  • DIO completes basic info such as PD name and participating sites
• ADS common application is sent electronically to PD identified in the application
  • PD completes remaining information
• PD downloads and completes specialty specific application Word document
Steps to Applying for a New ACGME accredited program

• PD uploads completed specialty specific form into ADS
• PD uploads all requested document attachments (i.e. policy for supervision, program goals, PLAs)
• Completed application is routed back to DIO within the ADS system for DIO signoff and approval
Steps to Applying for a New ACGME accredited program

• Upon DIO approval, application form is routed to ACGME
• ACGME Staff notified of application submission and sends PD confirmation of receipt
• Department of Field Activities is notified
• Program application is scheduled for a site visit
List of Application Attachments

• **Policy for Supervision of Residents** - Policy for supervision of residents (addresses residents’ responsibilities for patient care and progressive responsibility for patient management and faculty responsibilities for supervision).[IR III.B.4]

• **Program Policies and Procedures** - Program policies and procedures for resident duty hours and work environment including policies on moonlighting. [CPR II.A.4.j; CPR VI.G; IR IV.J]

• **Overall Educational Goals** - Overall educational goals for the program. [CPR IV.A.1]

• **Competency Goals and Objectives and Faculty Evaluation of Residents** - A sample of competency-based goals and objectives for one assignment at each educational level [CPR IV.A.2], a blank copy of the forms that will be used to evaluate residents at the completion of each assignment. [CPR V.A.1.a]

• **Letters of Agreement** - All Program Letters of Agreement (PLAs) with participating sites. [CPR I.B.1]

• **Semiannual and Summative Evaluations** - A blank copy of the form that will be used to document the semiannual evaluation of the residents with feedback. [CPR V.A.2.b.(4)], and a blank copy of the final (summative) evaluation of residents, documenting performance during the final period of education and verifying that the resident has demonstrated sufficient competence to enter practice without direct supervision [CPR V.A.3]

• **Program Specific Evaluation Tools** - Blank copies of tools the program will use to provide objective assessments of competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and system-based practice. [CPR V.A.2.b.(1)] *For multiple tools, create one PDF.*

• **Forms Used for Faculty and Program Evaluation** - Blank copies of forms that residents will use to evaluate the faculty and the program. [CPR V.B.3; CPR V.C.2.d.(1)]

• **Sample Block Diagram** - Provide a sample block diagram for each year of training. Use number of months for each block rotation. You can find an example to help guide you and further instructions using a link in the ADS system.

• **Specialty-specific Application Questions** - Complete the Specialty-specific Application. This document can be found under "New Applications" heading on your Review Committee’s page of our website.
Remember

- Print out the completed application and review for consistency
- Review document for errors
- Be sure everyone is in agreement
- In answering the questions, describe your plan to meet each requirement
- In policies, etc., use ACGME language
- Once the application has been submitted to ACGME, it cannot be altered
- Apply early to maximize the five-year window
COMMON APPLICATION QUESTIONS
Where do I find the specialty specific application form?
Locating the Specialty-Specific Application

New Applications
New program applications must use the online application process within ADS. For further information, review the “Application Instructions” located under Common Resources.

Click here to expand the list

RC Submission Deadlines

<table>
<thead>
<tr>
<th>Meeting Date</th>
<th>Agenda Closing Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 20-21, 2015</td>
<td>December 19, 2014</td>
</tr>
<tr>
<td>June 16-17, 2015</td>
<td>April 21, 2015</td>
</tr>
</tbody>
</table>
Common Application Questions

- Who should be listed as “Core Faculty”?
  - Program Director
  - Associate PD(s)
  - Subspecialty Chiefs
  - Members of CCC and PEC
  - Faculty that spend $\geq 15$ hours per week
  - Read ADS Physician Faculty Definition for further guidelines

- Does the block diagram need to be listed using 12 months or 13 four-week blocks?
  - Use the format that works best for your curriculum – we will accept either
Common Application Questions

- RC review of application will take *months*
  - Application received
  - Site visit scheduled
  - Application & site visit report to RC members
  - Next scheduled RC meeting
    - Feb 18-19, 2016 (Agenda close date: Dec 21th)
    - April 14-15, 2016 (Agenda close date: Feb 18th)
  - Notification by Executive Director
What happens after our application is reviewed?
- Email notification from the RC Staff within 5 days of the meeting to notify program of accreditation status
- Within 60-days of meeting, program will receive accreditation notification letter from Executive Director
Getting Started

• Read the Anesthesiology Program Requirements
• Will my program include a Fundamental Clinical Skills year (CBY)?
• Compare current curriculum to requisite Curriculum Organization and Resident Experiences (IV.A.6)
  • Gaps
  • Differences in didactic, research and clinical requirements
  • Attend to faculty supervision and clinical setting requirements
Three-year Programs

- CA-1, CA-2, CA-3 years after resident completes CBY
- Minimum four weeks pre-operative medicine
- Two weeks post-anesthesia
- Minimum of four months critical care medicine (each no less than 1 month in duration)
- Didactic instruction that encompasses clinical anesthesiology and:
  - Related areas of basic science
  - Pertinent topics from other medical & surgical specialties
- Regular faculty engagement in clinical and didactic education
Four-year Programs

• 12 months broad education in medical disciplines relevant to practice of anesthesiology
  • Do not need to be contiguous but must be completed prior to CA-3 year
  • Resident performance of CBY residents documented and sent to advanced programs every six months
• Six months experience caring for patients in IM, FM, Peds, surgery or surgical specialties, OB/Gyn or Neurology
• No more than one month of anesthesiology
• Master the details!
• Check the July 1, 2016 PRs for changes
Potential Issues in Application Process
Specialty-Specific Issues

• Resident Cohort Requirement—9: Three in CA-1, CA-2 & CA-3 years (Int.C.2)-Core
• Required procedure types and numbers under Educational Program (IV)
• Scholarly activity of faculty and residents
• Preparing for site visit
  • Need to be in “substantial compliance” with Program Requirements
• Understanding responsibilities of Program Director (II.A.4)
  • AOA-Certified candidates will be considered as single Program Directors (see requirements re criteria)
Provisions in MOU

• Applicant programs which, on 1 July 2015:
  • Are AOA-approved, and
  • Have matriculated residents
• Get “Pre-Accreditation Status”
• Get relief from two Common Program Reqs:
  • AOA-certified faculty will be acceptable to RC
  • May have AOA-certified co-program director*

*Anesthesiology RC will consider single AOA-certified Program Director

2014 MOU among ACGME, AOA & AACOM
Provisions in MOU

• Applicant programs which, on 1 July 2015:
  • Are AOA-approved
  • But do not have matriculated residents
• Get “Pre-Accreditation Status”
• Do not get relief from Common Program Reqs

2014 MOU among ACGME, AOA & AACOM
## Accreditation of AOA Programs

<table>
<thead>
<tr>
<th></th>
<th>Program AOA-Approved as of July 1, 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>
| Program has matriculated residents as of July 1, 2015 |    1 |    3
|                      |    2 |    3

<table>
<thead>
<tr>
<th></th>
<th>Will have Pre-Accreditation Status</th>
<th>Can have AOA-certified co-PD</th>
<th>AOA-certified faculty systematically “acceptable”</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>2</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>3</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>
Support for Program Director

PR-II.A. [Common Program Requirement]
The sponsoring institution and the program must ensure that the program director has sufficient protected time and financial support for his or her educational and administrative responsibilities to the program. (Core)

- Many RCs specify minimum support
  Anesthesiology:
  - Programs with one-20 residents must provide a minimum of 20% protected time for the program director. II.A.4.p).(1) (Core)
  - Programs with more than 20 residents must provide a minimum of 40% protected time for the program director. II.A.4.p).(2) (Core)
New Resident Eligibility Requirements (July 1, 2016)

- All prerequisite training (PGY1) must occur in:
  - ACGME-accredited programs
  - Canadian-accredited programs
- Exception for AOA Programs with “Pre-Accreditation” Status
  - Individuals who complete programs that have previously achieved pre-accreditation status will be subject to 2013 or 2016 eligibility standards, whichever is less restrictive.
Single Accreditation System for AOA-Approved Programs

On February 25, 2014, the Accreditation Council for Graduate Medical Education (ACGME), American Osteopathic Association (AOA), and American Association of Colleges of Osteopathic Medicine (AACOM) announced their agreement to a Memorandum of Understanding (MOU) that outlines a single graduate medical education accreditation system for residency and fellowship programs in the United States. Click here for the executive summary of the MOU.

The single accreditation system allows graduates of allopathic and osteopathic medical schools to complete their residency and/or fellowship education in ACGME-accredited programs and demonstrate achievement of common Milestones and competencies.

Over the next five years, beginning July 1, 2015, AOA-approved programs and sponsoring institutions will have the opportunity to apply for ACGME accreditation. The ACGME and AOA have created and will continue to create models of operations and infrastructure to ensure a smooth transition to the single system. Click here for the timeline (Updated December 3, 2014).

The ACGME will continue to update information on the single accreditation system as new developments unfold, and as questions arise during the systems implementation. Please return to this page periodically for updates and answers to your questions. Thank you for your interest as we work together to implement this important step forward in American graduate medical education.

Related Links

- Program Eligibility Requirements
- ACGME Glossary of Terms
- Requirements for Review and Comment

Events

FAQs

These FAQs address common areas of the
Eligibility Requirements

Specialty and Subspecialty Program Eligibility Requirements

Below are the eligibility requirements for each specialty/subspecialty that are (1) in effect on June 30, 2013, and (2) in effect as of July 1, 2016. If applicable, any interim requirements in effect between those dates are also provided.

- Allergy and Immunology
- Anesthesiology
- Adult Cardiorespiratory Anesthesiology
- Anesthesiology Critical Care Medicine
- Clinical Informatics
- Hospice and Palliative Medicine
- Obstetric Anesthesiology
- Pain Medicine
- Pediatric Anesthesiology
- Colon and Rectal Surgery
- Dermatology
- Dermatopathology
# Eligibility Requirements

Common Program Requirements are in **BOLD**

## Hospice and Palliative Medicine

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>III.A. Eligibility Criteria</td>
<td>III.A. Eligibility Criteria</td>
<td>III.A. Eligibility Criteria</td>
<td>III.A. Eligibility Criteria – Fellowship Programs</td>
</tr>
<tr>
<td>Each fellow must successfully complete an ACGME-accredited specialty program and/or meet other eligibility criteria as specified by the Review Committee. The program must document that each fellow has met the eligibility criteria.</td>
<td>Each fellow must successfully complete an ACGME-accredited specialty program and/or meet other eligibility criteria as specified by the Review Committee. (Core)</td>
<td>Each fellow must successfully complete an ACGME-accredited specialty program and/or meet other eligibility criteria as specified by the Review Committee. (Core)</td>
<td>All required clinical education for entry into ACGME-accredited fellowship programs must be completed in an ACGME-accredited residency program, or in an RCPSC-accredited or CFPC-accredited residency program located in Canada. (Core)</td>
</tr>
<tr>
<td>III.A.1. Applicants must have completed an ACGME or American Osteopathic Association (AOA)-accredited residency program in anesthesiology, emergency medicine, family medicine, internal medicine, neurology, obstetrics and gynecology, pediatrics, physical medicine and rehabilitation, psychiatry, radiation oncology, or surgery.</td>
<td>III.A.1. The program must document that each fellow has met the eligibility criteria. (Core)</td>
<td>III.A.1. The program must document that each fellow has met the eligibility criteria. (Core)</td>
<td>Prior to appointment in the program, fellows must have completed an ACGME- or RCPSC-accredited program in child neurology, family medicine, internal medicine, pediatrics, physical medicine and rehabilitation, or neurology, or at least three clinical years in an ACGME- or RCPSC-accredited graduate educational program in one of the following specialties: anesthesiology, emergency medicine, obstetrics and gynecology, psychiatry, radiation oncology, radiology, or surgery. (Core)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>III.A.2. Prior to appointment in the program, fellows must have completed an ACGME- or American Osteopathic Association (AOA)-accredited program in child neurology, family medicine, internal medicine, pediatrics, physical medicine and rehabilitation, or neurology; or at least three clinical years in an ACGME- or AOA-accredited graduate educational program in one of the following specialties: anesthesiology, emergency medicine, obstetrics and gynecology, psychiatry, radiation oncology, radiology, or surgery. (Core)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>III.A.1. Fellowship programs must receive verification of each entering fellow’s level of competency in the required field using ACGME or CanMEDS Milestones assessments from the core residency program. (Core)</td>
</tr>
</tbody>
</table>
Eligibility Requirements

III.A.1. Applicants must have completed an ACGME or American Osteopathic Association (AOA)-accredited residency program in anesthesiology, emergency medicine, family medicine, internal medicine, neurology, obstetrics and gynecology, pediatrics, physical medicine and rehabilitation, psychiatry, radiation oncology, or surgery.
What about 2015-16 PGY1s?

- Application season Fall 2014
  - Start PG 1 July 2015
  - Start PG 2 July 2016
- If you do an AOA internship that has been pre-accredited or an ACGME program, you would be eligible for an ACGME fellowship as allowed by the specialty
- Anesthesiology RC will not issue citations for programs accepting candidates from AOA program
What about 2015-16 PGY1s?

• Not all AOA programs will have had the chance to apply
• Anesthesiology RC giving flexibility to TRI and linked programs
  • Advanced programs receiving residents will not have adverse accreditation status for this year
  • Program Directors decide who to accept
• Board certification depends on the boards
What about 2016-17 PG1s?

- Application season Fall 2015
  - Start PG 1 July 2016
  - Start PG 2 July 2017
- AOA programs can declare July 1, 2015
  - Pre-accredited at time of application
  - Pre-accredited before June 30, 2016 are all eligible for ACGME PG 2 for July 2017
  - Flexibility for TRI and linked programs may or may not be extended for this year
Navigating “The Match”

- There are *numerous* match processes, including:
  - The AOA National Matching Services, Inc.
  - The National Resident Matching Program
  - The San Francisco Matching Program
  - The Joint Service GME Selection Board
- ACGME not in control of or affiliated with any match
- Programs in Pre-Accreditation are AOA-approved and must use NMS
- ACGME-accredited programs *not* eligible for NMS
- Program won’t be in the NRMP until they receive status of Initial Accreditation
Selecting an Advanced Program

- ACGME List of Accredited Programs
  - State
  - Specialty
  - Length of program (i.e. whether it has a categorical year)
  - Program Contact information
Questions Students Will Ask

• Do you plan on participating in the NRMP or NMS?
• Each match program has its own rules
• NRMP Website
  • Eligibility for non-allopathic graduates
  • All-in Policy
Board Certification of Graduates

- Will AOA or ABMS boards certify graduates in SAS?
  - Certification **not** part of the MOU
  - ACGME has **no** control over ABMS boards
    - Each does and will determine eligibility criteria
  - Will AOA boards require Osteopathic Recognition?
  - Many unknowns remain
- **Do** know that ACGME will recognize graduate performance on AOA boards in assessing program quality
What about the states where DO internships are required?

- FL, OK, MI, PA
- State legislatures in some of these states have been considering changes
- Osteopathic Recognition is the ACGME route to signify programs that meet standards
- Each state will have to address this
ACGME Anesthesiology Staff

- Anne Gravel Sullivan PhD, Executive Director
  - asullivan@acgme.org
  - 312-755-7032

- Sonia Sangha, Accreditation Administrator
  - ssangha@acgme.org
  - 312-755-5493
Important Reminder

• For more details on the Single Accreditation System, please view the webinar:

“The Transition to ACGME Accreditation: An Overview for AOA Programs”

Dr. John Potts, III

April 1, 2015
Resources

• Anesthesiology Program Requirement
• Anesthesiology FAQs
• Anesthesiology Milestones
• Anesthesiology Eligibility Chart
• Single Accreditation System
• SAS Webinars
• NRMP
• ACGME Public Database & Reports
  (Search for programs w/Pre-accreditation)
Questions?

Thank you!