ACGME Update

Pamela Derstine, PhD, MHPE
Executive Director
Review Committee for Orthopaedic Surgery

Annual ARCOS Conference
March 16, 2017
San Diego CA

Disclosures

- None
Topics

- Review Committee Members and Staff
- Accreditation Statistics
- NAS Update
- Reminders
- Single Accreditation System Update
- Case Log Update
- Program Requirement Revisions

Review Committee Members and Staff

Accreditation Council for Graduate Medical Education
## Review Committee Membership: Current

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theodore W. Parsons, MD</td>
<td>Chair</td>
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<tr>
<td>Terry R. Light, MD, Vice Chair</td>
<td></td>
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<tr>
<td>R. Dale Blasier, MD</td>
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<tr>
<td>James E. Carpenter, MD</td>
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<tr>
<td>Charles F. Carr, MD</td>
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<tr>
<td>Jared L. Harwood, MD, Resident Member</td>
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<tr>
<td>Richard F. Howard, DO</td>
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<tr>
<td>Paul J. Juliano, MD</td>
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<tr>
<td>Dawn M. LaPorte, MD</td>
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<tr>
<td>Peter M. Murray, MD</td>
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<tr>
<td>James R. Roberson, MD</td>
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<tr>
<td>Public Member</td>
<td>James H. Taylor, Dman, MHA, MBA</td>
</tr>
</tbody>
</table>
ACGME Review Committee Staff

Pamela L. Derstine, PhD, MHPE
• Executive Director

Susan E. Mansker
• Associate Executive Director

Jennifer M. Luna
• Senior Accreditation Administrator

Accreditation Statistics
### Accreditation Statistics: Current

#### Total # Accredited Programs

<table>
<thead>
<tr>
<th>Category</th>
<th># Programs</th>
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<tbody>
<tr>
<td>Core</td>
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<td>Sub: Adult Reconstruction</td>
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<tr>
<td>Sub: Foot and Ankle</td>
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<tr>
<td>Sub: Hand (Ortho only)</td>
<td>68</td>
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<tr>
<td>Sub: Pediatrics</td>
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<tr>
<td>Sub: Spine</td>
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<td>Sub: Sports</td>
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<td>Sub: Trauma</td>
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<tr>
<td>Sub: Musculoskeletal Oncology</td>
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#### Program Accreditation Status (Core)

<table>
<thead>
<tr>
<th>Status</th>
<th># Programs</th>
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<tbody>
<tr>
<td>Continued Accreditation</td>
<td>149</td>
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<tr>
<td>Continued Accreditation w/ Warning</td>
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<tr>
<td>Continued Accreditation w/o Outcomes</td>
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<tr>
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<tr>
<td>Pending Applications (allopathic)</td>
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<td>Continued Pre-Accreditation</td>
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<tr>
<td>Pre-Accreditation (pending osteopathic)</td>
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### Accreditation Statistics: Current

<table>
<thead>
<tr>
<th>Subspecialty</th>
<th>Accreditation Status (#)</th>
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<tr>
<td></td>
<td>AO</td>
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<tr>
<td>Adult Reconstruction</td>
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<td>Foot and Ankle</td>
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<tr>
<td>Hand</td>
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<td>Pediatrics</td>
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<td>Spine</td>
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<td>Sports</td>
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<tr>
<td>Trauma</td>
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<tr>
<td>Musculoskeletal Oncology</td>
<td>11</td>
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</table>

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### Accreditation Statistics: January 2017

<table>
<thead>
<tr>
<th>Other Meeting Decisions</th>
<th>CORE</th>
<th>SUBS</th>
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<tbody>
<tr>
<td>Complement increases CORE</td>
<td>Permanent: # Requested/#Approved 8/4 Temporary: # Requested/# Approved 1/0</td>
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</tr>
<tr>
<td>Complement increases SUBS</td>
<td>Permanent: # Requested/#Approved 4/3 Temporary: # Requested/# Approved 0/0</td>
<td></td>
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<tr>
<td>Site Visit Requests CORE (review April 2017)</td>
<td>Full 2 Focused 1</td>
<td>Full 0 Focused 0</td>
</tr>
<tr>
<td>Site Visit Requests SUBS (review April 2017)</td>
<td>Full 1 Focused 0</td>
<td></td>
</tr>
</tbody>
</table>
Accreditation Statistics: January 2017

% Total Citations

- Institutional: 17%
- Program Director: 14%
- Curriculum: 15%
- Procedural Experience: 14%
- Evaluation: 17%
- Scholarly Activity: 5%
- Faculty: 5%
- Duty Hours/LE: 4%
- Resources: 5%
- Board Scores: 0%

Accreditation Council for Graduate Medical Education

NAS UPDATE
Upcoming Review Committee Meetings

- **April 28-29, 2017**
  - Agenda close: March 31, 2017

- **August 23, 2017**
  - Agenda close: July 26, 2017

- **January 19-20, 2018**
  - Agenda close: November 10, 2017

- **April 20-21, 2018**
  - Agenda close: March 23, 2018

*Interim requests only: complement changes*

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2015-2016 Annual Program Review: 2017 Review Committee Meetings

Clinical Experience – Case Logs

Minimum Number reports for 2015-2016 program graduates were reviewed
- Substantial compliance with minimum numbers expected
Board Scores

- First-time takers only during the most recent 5 years reported by ABOS to Data Dept.
  - Written: 75% pass rate
  - Oral: 75% pass rate

Resident Survey (completed Feb-Mar 2016)
- 7 survey question domains
- 70% response rate required
- Aggregated non-compliant survey responses for each domain reviewed
- Trends monitored

Faculty Survey (completed Feb-Mar 2016)
- 5 survey question domains (mirrors Resident Survey)
- 60% response rate required
- Program director and core faculty members only
- Trends monitored
- Resident/faculty member responses to same domains compared
2015-2016 Annual Program Review: 2017 Review Committee Meetings

**Resident Scholarly Activity**
- 2015-2016 ADS Update
- Residents (all levels) in program AY 2014-2015
- SA completed AY 2014-2015 reported

**Faculty Scholarly Activity**
- 2015-2016 ADS Update
- Faculty in program AY 2015-2016
- SA completed AY 2014-2015 reported

**Major Changes and Responses to Citations**
- 2016-2017 ADS Update
- Reported Fall 2016
- Locked approx. October 1, 2016

**Milestones**
- No Milestone data reported to Review Committee
Annual Program Review

Milestones

- Programs should inform both the Review Committee and ABOS if a resident’s education must be extended due to Clinical Competency Committee evaluation of his/her Milestone levels.
- Temporary increase request required if the extension is more than 3 months AND the program will exceed its total approved complement.
- Please contact the Executive Director ASAP so request can be expedited.

Self-Study/10-Year Visit Definitions

All programs and institutions must have a full accreditation site visit every 10 years.

Self-Study is a program or institution’s longitudinal, comprehensive evaluation of itself.
- Continuous process that incorporates annual program evaluations.
- Summarized and reported to the ACGME prior to the 10-year accreditation visit.

10-year visit: accreditation visit that will occur every 10 years regardless of site visits that are requested as part of the Review Committee annual program review.
Self-Study/10-Year Visit

All programs with Continued Accreditation status have an assigned Self-Study date

• Month/year when completed Self-Study uploaded to ADS
• Assigned dates June 2015-June 2025
• 68 programs (includes 36 core and 32 subspecialty programs – 3 are stand-alone subs) have submitted a Self-Study Report to date

10-year accreditation visit takes place 18-24 months later

• Pilot visits occurring now
• First 10-year accreditation visits for 11 orthopaedic surgery programs that submitted Self-Study in 2015 planned for this summer (5 core plus associated subs; no stand-alone fellowships)
• Site Visit Reports from those visits will be included in the annual program reviews next year (2018)

REMINDERS
Complement Change

Approved by year and total

Deviations from approved by year permitted as long as the total approved number is not exceeded

- Program must manage subsequent matriculants so as to not exceed total approved number
- Temporary increase requests must be anticipated in advance; approval is not guaranteed!
- Deviations from approved by year numbers should be rare

Information required for approval: see Review Committee web page

Program Director Change

Submit via ADS

- Must be approved by DIO and ABOS-certified
- Completed CV form in ADS
- Interim decision by the Executive Subcommittee
- Notification via admin LON
- If not approved, ADS information must be updated as soon as possible
Fellowship Eligibility

Requires completion of either ACGME-accredited or RCPSC-accredited core specialty residency

Exception clause:
- Completed non-ACGME-accredited core specialty residency
- Demonstrated clinical excellence compared to peers throughout training
- Additional: e.g., additional clinical or research training; demonstrated scholarship; demonstrated leadership; completion of ACGME-I accredited residency

Orthopaedic Surgery Review Committee will permit the exception

Fellowship Eligibility: IMGs

Eligible under the exception clause for all ACGME-accredited orthopaedic surgery fellowship programs
Fellowship Eligibility: AOA

2013 eligibility rules apply under the MOU
- AOA OS graduates permitted as long as they are rare, except Hand
- **Hand** Eligibility: AOA graduates of OS, PS, and GS programs are eligible

**ALL AOA ORTHOPAEDIC SURGERY PROGRAMS HAVE APPLIED**
AOA-approved programs began applying for ACGME accreditation 7/1/2015

Programs that have applied are listed on the ACGME website with a Pre-Accreditation status

Programs with Pre-Accreditation status must participate in:
- ADS Annual Update
- Case Log reporting
- Resident and Faculty Surveys
- Milestone assessment and reporting

Programs will have a site visit prior to Review Committee review of application

Programs that do not achieve Initial Accreditation will retain Pre-Accreditation status and may reapply

Programs that do not achieve Initial Accreditation by 6/30/2020 will no longer be AOA-approved
## Osteopathic Program Application Status

### Surgical Program Status Decisions to Date

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Pre-Accreditation</th>
<th>Continued Pre-Accreditation</th>
<th>Initial Accreditation</th>
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<tbody>
<tr>
<td>Neurological Surgery</td>
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<tr>
<td>Obstetrics and Gynecology</td>
<td>17</td>
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<tr>
<td>Ophthalmology</td>
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<td>1</td>
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<tr>
<td>Orthopaedic Surgery</td>
<td>9</td>
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<tr>
<td>Otolaryngology</td>
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<tr>
<td>Surgery</td>
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<tr>
<td>Urology</td>
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<td>4</td>
<td>6</td>
</tr>
</tbody>
</table>
Changes to Defined Case Categories

Specific CPT codes for Trauma have been identified and mapped to 3 new categories:
- Closed reduction and splinting/casting
- Open reduction and internal fixation-simple
- Open reduction and internal fixation-complex

These 3 categories will replace the trauma “blue bar” in the percentile report.

CPT codes assigned to the 3 new categories will continue to map to the same anatomic area.

CPT code mappings will be announced in a Case Log Update later this spring.

Changes are now in effect.
No impact on required minimums.
Review of percentiles for potential citation will begin with 2017-2018 graduates.
Program Requirement II.B.6.-6.a)

Faculty members, including the program director, must regularly participate in faculty development activities related to resident education, including evaluation, feedback, mentoring, supervision, or teaching. (Core)

- The program must maintain documentation of faculty member participation in these activities, and provide it on request. (Core)
What are examples of faculty development activities acceptable to the Review Committee?

The Review Committee will accept a wide variety of activities that are specifically related to improve faculty members' skills as educators. Examples of national opportunities include participation in the annual AOA/CORD meetings, AAOS Orthopaedic Educators Course, AOA webinars devoted to topics related to evaluation, feedback, mentoring, supervision, and teaching, and ACGME faculty development workshops. Offerings at a regional or local level that seek to improve faculty skills in these areas are also acceptable. For example, discussions of Milestones at a faculty meeting could involve an exercise in helping members of the faculty to achieve a common understanding of review criteria. Activities specifically related to improving faculty members' specialty-specific knowledge – while important – would not be acceptable.

How often should a faculty member participate in faculty development activities related to resident education?

Each core faculty member should participate in at least one such faculty development activity every three years.
How should programs document faculty member participation in faculty development activities related to resident education?

Faculty members should include this information as part of their CV, which is already updated annually by most faculty members as part of their departmental annual performance review. At the time of the 10-year accreditation visit, the CVs would be inspected by the site visitor. In the interim, the Review Committee could request copies of core faculty CVs if a concern arises regarding faculty members’ commitment to resident education. Additionally, minutes from a faculty meeting detailing such faculty development activities/discussions during the meeting, along with an attendance roster, would constitute appropriate documentation.

Program Requirement II.B.6.-6.a)

FAQ

Program Requirement V.C.2.c).(1-2)

80 percent of a program’s eligible graduates from the preceding five years taking Part I of the ABOS certifying examination for the first time should pass. (Outcome)

75 percent of a program’s eligible graduates from the preceding five years taking Part II of the ABOS certifying examination for the first time should pass. (Outcome)
Program Requirement V.C.2.c).(3-4)

80 percent of a program’s eligible graduates from the preceding five years taking the Part I written examination of the American Osteopathic Board of Orthopaedic Surgery (AOBOS) orthopaedic surgery certifying examination for the first time should pass. (Outcome)

75 percent of a program’s eligible graduates from the preceding five years taking the Part II oral examination of the AOBOS orthopaedic surgery certifying examination for the first time should pass. (Outcome)

Subspecialty Program Requirements

Major revision to Program Requirements for all 8 subspecialties has begun

Please send comments by e-mail to the Executive Director by April 21, 2017

Proposed Timeline

- Post for public comment January 2018
- Board approval September 2018
- Effective July 1, 2019