

## Anesthesiology RRC Update: Spring 2006

Here are highlights from the RRC's March 30<sup>th</sup> – April 1<sup>st</sup> meeting:

- *The General Competencies Do Count:* Starting July of this summer, the RRCs for all specialties will be required to assess the programs' progress in integrating the ACGME's core competencies into the curriculum and evaluation procedures. These assessments must be considered in developing final accreditation decisions.

It is clear that our program directors are going to have to be reminded and fully understand that competencies matter and will be assessed by the RRC. Therefore, we have a series of communications planned to help pass this word along. We'll use electronic communications as well as several workshops (at ASA and SAAC/AAPD) for this purpose. Program Directors should also regularly visit the SEA web site for information on the competencies.

- *Changes to the Program Information Form (PIF):* The RRC performed a preliminary review of the current PIF and recommended a number of changes to reduce the paperwork volume associated with its completion. In addition, the RRC will begin working with the ACGME in the coming year to develop an electronic version of the full PIF, making it easier for the programs to complete and for the RRC members to review.
- *New Program Requirements and New Programs:* The ACGME approved the newly-revised core anesthesia program requirements. These will take effect July 1, 2008.

The ACGME also approved program requirements for Adult Cardiothoracic Anesthesiology and Multidisciplinary Pain Medicine. The Adult Cardiothoracic program requirements are effective immediately. A PIF for this new program will be developed by June 2006. Programs will be notified as soon as the PIF is available. They may apply as soon as it is available.

- *Requirements for Multidisciplinary Pain Medicine programs* will be effective July 1, 2007. A PIF for this program is being developed by the advisory workgroup, which is chaired by David Brown, M.D. Staff will be working to prepare a web-based format for the PIF. It is anticipated that the new PIF will be available to pain medicine programs that will be surveyed during the late summer and fall of 2007.
- *Innovative Proposals:* The RRC is encouraging submission and review of innovative educational proposals. The RRC web site describes the process. The RRC will work to provide a prompt review and response to all proposals. Since November 2005, the RRC has considered 4 innovative proposals, approving two in full and one in part.

- *Residency Consultation Program:* The ASA is working to develop a Residency Assistance Program. This program, which is in the early stages of development, will provide residency programs with resources when they seek guidance or advice. The assistance program will use past RRC members and/or successful program directors as consultants. The program will be designed to provide non-threatening, helpful assessments and suggestions for improvement.
- *Institutional Time and Resources for Program Directors:* By September, the RRC will likely develop a requirement that institutions provide time and resources for program directors. We anticipate that this requirement will provide a baseline level of resources and time for all programs, supplemented by additional time and resources for larger compared to smaller programs.
- *A SAAC/AAPD and SEA Initiative.* The RRC will encourage SAAC/AAPD and SEA to form a workgroup that would periodically review all program requirements. This workgroup would then provide the RRC with suggestions, constructive criticisms, and comments for the RRC's consideration.
- *Setting number of fellows in the subspecialties.* At this time, the RRC establishes numbers of fellows only in the pain medicine fellowship. It does not -- and does not anticipate in the near future -- establishing number of fellow positions in critical care medicine and pediatric anesthesiology. Why? Data to define national norms for experiences in these latter two fellowships are not readily available currently. Thus, the RRC does not believe it is appropriate to set numbers for critical care medicine or pediatric anesthesiology at this time.
- *Out of Country elective rotations:* Programs that wish to send residents out of the country for elective rotations should petition the ABA to allow credit for these experiences for each participating individual resident.