

RRC NEWS

DERMATOLOGY



Accreditation Council for Graduate Medical Education

JANUARY 2009

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RRC STAFF

GEORGIA ANDRIANOPOULOS, PHD

EXECUTIVE DIRECTOR

312.755.5031

GDA@ACGME.ORG

JENNY BLOMGREN, MA

ACCREDITATION ADMINISTRATOR

312.755.5035

JBLOMGREN@ACGME.ORG

JASON ECONOMUS

ACCREDITATION ASSISTANT

312.755.7482

JECONOMUS@ACGME.ORG

RRC FOR DERMATOLOGY

515 N. STATE STREET, SUITE 2000

CHICAGO, IL 60654

312.775.7498 FAX

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Reduction in Burden Alert: Measuring Outcomes in Dermatology

The addition of the competencies as an integral part of resident education has been an evolutionary process. Initially, program directors and faculty were expected to be aware of the six competencies; then, the competencies were integrated into the goals and objectives and resident evaluations.

Now, programs must measure the outcomes of competency-based education. The RRC has made its primary goal of 2009 to identify and share standard measurement tools and notable practices with the community. These will be gathered through program review and communication with other dermatology organizations, and will be shared through this newsletter and the RRC's webpage.

Using the Case Log System to Set Procedural Standards

As part of the RRC's outcome measures initiative, the RRC will take a step back from its plan to define minimum standards for surgical procedures until more reliable data have been analyzed. (Program-level and national reports are now available to each program through its ADS profile.) The RRC will continue to pay close attention to ACGME operative reports and to cite programs that are not entering and monitoring their data; at the same time, it will re-examine the types of data that are collected. Programs are encouraged to submit suggestions to RRC staff on ways to improve data collection by sending an e-mail to the RRC Accreditation Administrator, Jenny Blomgren:

To: jblomgren@acgme.org

Subject: Suggestion Box: Dermatology Case Log System

Frequent Citations in Dermatology

As noted above, the RRC continues to cite programs in which residents are not entering complete procedural data. Program directors are also cited for not monitoring those data to ensure adequate and equivalent experiences for their residents.

Other frequent citations continue to be inadequate evaluation systems (residents and faculty must submit confidential written evaluations of the program; residents must have formal, regular evaluations with feedback for all assignments), inadequate supervision (faculty

MEETING AND AGENDA CLOSING DATES

MEETING: MAY 30-31, 2009

AGENDA CLOSING: MARCH 30, 2009

MEETING: OCTOBER 9, 2009

AGENDA CLOSING: AUGUST 15, 2009

must be on-site and readily available to see patients at all times), and insufficiently structured curriculum (basic science didactics must be included, and both faculty and residents must attend lectures and conferences).

The RRC Welcomes Three New Members in 2009

As Jeff Callen, MD, Lee Nesbitt, MD, and Resident Member Ruth Ann Vleugels, MD, all complete their RRC terms on June 30, 2009, the RRC will welcome three new members: George W. Turiansky, MD, program director of the Walter Reed residency; James W. Patterson, MD, program director of the dermatopathology fellowship at the University of Virginia; and William C. Huang, MD, resident in the Rush Medical Center residency. Their terms begin on July 1, 2009.

New Zip Code for ACGME

ACGME's zip code changed on July 1, 2008. Anything that is mailed or sent by Fed-Ex must now reference zip code 60654. Please note that our PO Box zip code, 60610, has not changed.

Internal Reviews

The sponsoring institution is required to conduct an internal review of each residency program under its purview at approximately the midpoint of the accreditation cycle (the time between the date of the most recent accreditation action and the next scheduled site visit). The institution assembles an internal review committee, which must include at least one faculty member and at least one resident, who cannot be from the program that is being reviewed. The process involves interviews with the program director, key faculty members, peer-selected residents from each level of training, and other individuals as appropriate. Frequently it includes review of data, such as how the program has addressed the citations from the last accreditation survey.

When a program has no residents/fellows enrolled at the mid-point of the review cycle, the institution must provide a modified internal review that ensures the program has maintained adequate faculty and staff resources, clinical volume, and other necessary curricular elements required to be in substantial compliance with the institutional, common and specialty-specific program requirements. After enrolling a resident/fellow, an internal review must be completed within the second six-month period of the resident's/fellow's first year in the program.

Neither the site visitor nor the RRC reviewer sees the

data from the internal review, which is not included with the program information form (PIF). Verification of the internal review during the site visit covers the date, the participants, and then the review presented to the institution's graduate medical education committee (GMEC). This information is obtained verbally or in writing. The site visitor does not look at the results of the internal review, to ensure a review that honestly assesses the program's strengths and opportunities for improvement.

Accreditation Data System

The ACGME's online ADS alerts the RRC to changes in programs. Program directors should update ADS to:

- Notify the RRC of any changes in their program (i.e., new program director or adding or deleting a site)
- Request a change which needs RRC approval (i.e., an increase in resident complement. The request for a permanent increase in the resident complement must include a copy of the institutional data for all participating sites. Only one academic or one calendar year of data is necessary.)
- Submit the academic year "Annual Update" (ADS staff will e-mail the deadline for updating faculty and resident rosters)
- Prepare for an upcoming site visit (the ADS will populate many sections of the PIF with the data entered)

Address your questions or concerns about ADS to Emilio Villatoro, the ADS representative for dermatology (evillatoro@acgme.org, 312.755.7117).

Council of Review Committee Residents

The Council of Review Committee Residents (CRCR) is composed of physicians in-training, and their unique perspective makes them invaluable members of the 28 residency review committees to which they belong. The CRCR meets in February and September, and provides advice and feedback to the ACGME Board through its chair, Karen Hsu Blatman, MD. Dr. Hsu Blatman is one of two ACGME resident directors of the ACGME Board of Directors (the AMA appoints a resident director from its Resident and Fellow Section), and she also serves on the ACGME Strategic Initiatives Committee. Adeline Deladisma, MD, vice chair, serves on the ACGME Monitoring Committee.

In recent years, the CRCR has provided feedback on the redesign of the ACGME resident questionnaire, and it has recommended a change in the institutional

requirements to allow for a fairer grievance process when the designated institutional official is also the program director. The CRCR has also voiced concerns with the Federation of State Medical Boards about its “unusual circumstance” question on the verification credentialing form.

RRC Webpage Redesign

During this past year the RRC webpages have been redesigned. The new user-friendly format has a new look for each page, and allows users to quickly locate information on the RRC pages through new menus and navigation bars; content has been organized into specific categories, and keywords have been updated to improve search engine results. A link to your RRC staff listing, along with their contact information, is located at the top of the page. The contact list is organized by subject so that you may easily access the staff member who is responsible for key areas and get your questions answered in a timely manner. The new dermatology webpage is located here:

http://www.acgme.org/acWebsite/navPages/nav_080.asp

2009 ACGME Educational Conference

March 5-8, 2009 in Grapevine, Texas

Each year, the ACGME Annual Educational Conference provides a venue for graduate medical educators to learn more about the accreditation process and ways to enhance residency program quality related to ACGME initiatives, such as general competencies, educational outcome assessment, and duty hours.

The 2009 conference theme, “Shaping the Future,” will offer more than 80 sessions clearly focused on the topics of education, assessment, the learning environment, and accreditation. The Conference will begin with an international pre-conference titled “Promoting Good Learning and Safe, Effective Care: A Five-Year Review of the ACGME’s Common Duty Hour Standards,” as well as an introductory pre-course for new program directors and coordinators.

The Dermatology specialty session will be held on Friday, March 6, from 1:45 to 2:30pm. Program directors will have the opportunity to meet ACGME staff and discuss issues of common interest.

Attendees and speakers can register here: http://www.acgme.org/acWebsite/meetings/me_EducConf_09_Speakers.asp