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Pathways to Completing Thoracic Surgery Residency Education

There are three pathways to completing thoracic surgery education. The most typical pathway consists of successful completion of a general surgery residency program before gaining entry into a thoracic surgery residency program.

The second pathway is the Joint General Surgery/Thoracic Surgery pathway. Residents match to one institution's general surgery residency program and successfully complete up to a year of thoracic surgery within the the five-year general surgery residency followed by formal thoracic surgery residency in the same institution. At the beginning of the PGY-5 year, residents enter the Thoracic Surgery residency program at the same institution, and complete three years of thoracic surgery education. Successful completion of this pathway allows residents to be eligible for both Surgery and Thoracic Surgery certifying examinations.

The following institutions have ACGME approval to offer education in this format:

- Brigham and Women's Hospital/Children's Hospital Program
- Duke University
- Mayo School of Graduate Medical Education
- New York University School of Medicine
- University of Maryland
- University of Rochester
- University of Virginia
- Washington University School of Medicine

The newest pathway is the Integrated program format. Medical students match directly into a Thoracic Surgery residency program and complete their education in six years. The following programs are currently accredited to offer this format:

- Stanford University
- University of Pennsylvania

Program Evaluation by Residents:

Keeping Responses Confidential When There is Only One Fellow

The ACGME requirement that residents provide confidential evaluations of their program can be a challenge for programs with fewer than two residents. Across specialties, program directors have arrived at creative methods to maintain confidentiality. Resident evaluations may be collected over a period of a few years and grouped data can then be reported every two to three years. The program director's challenge is to balance

the program's need for feedback in order to make necessary program improvements versus resident confidentiality that can result in delays of valuable feedback. Alternatively, the program coordinator or DIO (not directly involved in fellow education), may solicit feedback from the fellows, thoracic surgery residents and other residents who rotate on the service, and collate and report general findings to the program director.

Accreditation Decisions, July 2008

Thoracic Surgery – 79 Accredited Programs

20 Agenda Items

Probation	2
Propose Probation	1
Continued Accreditation	8
Other Administrative Decisions	7
Voluntary Withdrawal	2

Congenital Cardiac Surgery – 3 Accredited Programs

2 Agenda Items

Propose Withhold	2
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2009 RRC Meeting Dates and Agenda Closing Dates

RRC Meeting: January 9-10, 2009
 Agenda Closing: October 31, 2008

RRC Meeting: July 17-18, 2009
 Agenda Closing: May 8, 2009

Accreditation Data System

The ACGME's online Accreditation Data System (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 (ADS will populate

many sections of the PIF with the data entered)

Send your questions or concerns to the ADS representative for Thoracic Surgery, Emilio Villatoro, evillatoro@acgme.org.

Voluntary Withdrawal Requests

Programs must now enter requests to voluntarily withdraw accreditation (VW) using ADS only.

Programs initiate the request by answering a series of questions, including the proposed effective date, the reason for program closure, and presenting a plan to place any active residents in other programs. The request is e-mailed to the DIO for approval. After the DIO/GMEC approves the request, the RRC staff designee is e-mailed. After the program receives official notification from the RRC and the accreditation status is changed to VW, the request will automatically be removed from the report.

Program Review

The RRC meets twice a year, usually in July and January to review programs. Before each meeting, two RRC members are assigned to review each program. The paperwork is distributed over a two to three month period prior to the RRC meeting, and RRC members are expected to complete their reviews within 30 days of receiving a program. All reviews must be received in the ACGME office eight weeks prior to the meeting to allow incorporation into the reviewer book. The reviewer book is sent to the RRC members before the meeting so that RRC members may read all the reviews, and compare the two reviews for each program.

After the RRC meeting, the ACGME staff prepare the notification letters for the program directors regarding the accreditation decisions reached by the RRC. Before these are posted on ADS, however, the chair of the RRC reviews each communication and compares it with a worksheet generated during the RRC meeting, makes corrections as necessary, and then certifies the entire process by signature. This process is designed to ensure that program citations and final accreditation decisions reflect the intent of the RRC. Due to the time required to complete this process, some site visits that occur in the month or so just before an RRC meeting will likely not be reviewed at that meeting. These program reviews will probably be delayed until the next RRC meeting six months later.

The RRC asks program directors to be mindful of this potentially lengthy interval between a site visit and the

notification of a final accreditation decision.

Preparing for a Site Visit

To help ensure a successful site visit, program directors are advised to prepare thoroughly. The ACGME Field Staff recommend that program directors should be aware of changes in requirements and the site visit process; the ACGME web site, DIO News, ACGME Bulletin, and the RRC/IRC Executive Director are good resources for the most current information. Program directors should also ensure that an internal review occurs at the mid-point between the last review and the next site visit date.

Further pre-planning for a site visit should ensure that the program director, Chair, DIO, key faculty members, and peer-selected residents (as a group) are available for interviews. Program directors should plan appropriately for the site visitor to review documents, tour the facility, and allow time for clarification and concluding the session. Site visitors expect that the education and training competencies are aligned, and that goals and objectives for the program and for each rotation are sequenced in ACGME competency format.

Program directors are encouraged to invest time and effort to produce a consistent, fully completed, and accurate PIF.

“Red Flags” Help Programs Recognize Potential Issues

In the February 2008 issue of the ACGME e-Bulletin, an article entitled “[Nine ‘Red Flags’ in Accreditation Site Visits and Reviews](#)” written by members of the ACGME Field Staff provides observations that may raise questions about program quality and compliance with program and institutional requirements. This article may be of particular interest to programs preparing for upcoming site visits.

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.

The goal of the internal review is a thorough and candid assessment that identifies the program’s strengths and opportunities for improvement, and allows resolution of any concerns or problems before the program’s next accreditation site visit. The responsibility for timing and completion of the internal review lies with the sponsoring institution. At the same time, program directors and residents should be familiar with the process because they may be asked to participate in future internal reviews.

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 the review which is presented to the institution’s graduate medical education committee (GMEC). In order to ensure an unbiased assessment of program strengths and opportunities for improvement, site visitors verify that the internal review was completed in a timely manner, but they do not look at the results of the internal review.

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 2008 conference theme “Building Community, Improving Quality” emphasized how better education and better patient care can occur when individuals in diverse roles work together toward shared goals.

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.

A “specialty update” will be presented by Dr. Kron and Dr. Simpson on Friday, March 6, 2009.