

## ***SPECIAL EDITION;*** February 2007; Vol. 1, S1

### ACGME Approves Revised Institutional Requirements

At its February 12-13, 2007 meeting, the ACGME Board of Directors approved a revised version of the Institutional Requirements that will become effective on July 1, 2007. Although very similar to the proposed draft that had been posted on the ACGME website for comment in November 2006, *the final version includes some changes that were made in collaboration with the ACGME Committee on Requirements during the course of review.* The final definitive version of the Requirements will be posted on the ACGME website within the next several weeks.

#### Transition Time Line

- **IRC to review final Board version of Requirements and create transition plan: April, 2007**
- **DIO News to publish details of transition plan : May 2007**

Although the Requirements will be effective July 1, 2007 the IRC recognizes that Institutions' transition planning for compliance with the new requirements will take time. Designated Institutional Officials (DIOs) and Graduate Medical Education Committees (GMECs) presently revising resident contracts, housestaff manuals, etc., *should use the Institutional Requirements currently in effect.* The Institutional Review

Committee (IRC) will provide details regarding transition planning for compliance with the revised Requirements after its April 18-19, 2007 meeting. In addition to dates for transition planning, DIOs can expect other helpful clarifications in a regular edition of *DIO News* to be published in May. The IRC provides official guidance regarding such transitions and the interpretation of other Requirements that have been significantly revised. Until the IRC reviews the new Requirements, which include some additional revisions made during the ACGME meeting, the IRC staff cannot answer specific questions.

#### **Institutional Review Document (IRD)**

With the revised Institutional Requirements approved by the ACGME, the IRC is now able to focus on revising the IRD. Greater use of electronic data collection is under review. Further information regarding the revised IRD will also be available in the next edition of *DIO News*.



*...on behalf of the Institutional Review Committee to the DIOs, the Association of American Medical Colleges, the American Medical Association, and all those throughout the GME community who provided comments to the draft Institutional Requirements. The IRC reviewed all comments during its January business meeting, and read each comment aloud during discussion in order to clarify and understand each thoughtful suggestion more fully. While not all suggestions could be accommodated in the present revision, all comments were carefully considered. The IRC believes your comments led to a much stronger document. We all benefited from your contributions.*

*Gratefully,*

*The IRC*

## ACGME Approves Revised Common Program Requirements

In addition to the revised Institutional Requirements, the ACGME Board of Directors also approved the revised Common Program Requirements at its February 12-13, 2007 meeting. DIOs may not be aware of the extensive reconciliation process which led to this revised document. A Committee to Reconcile the Common Program Requirements (CPRs) and Institutional Requirements had been appointed by the ACGME in 2005 to recommend changes meant to increase consistency and eliminate needless redundancy between the two documents. In addition to its work on the CPRs, the Reconciliation Committee, in turn, suggested revisions to the Institutional Requirements that were reviewed by the Institutional Review Committee (IRC). Most of these changes were subsequently accepted by the IRC and incorporated into the proposed Institutional Requirements which were sent for comment to the entire GME community in late November 2006.

In addition to increasing consistency with the Institutional Requirements, the Reconciliation Committee recommended additional revisions to the CPRs. The ACGME's Council of Review Committee Chairs (CRCC) (the ACGME body responsible for the CPRs) reviewed the Reconciliation Committee's recommendations at its September 2006 meeting; the resulting draft revision was also posted for review and comment in accordance with ACGME procedures. At the conclusion of the review and comment period, the Reconciliation Committee considered all the comments received regarding the draft requirements. It recommended several additional changes to the CPRs in response to those comments and forwarded a summary of the comments and its responses to the CRCC. Finally, a CRCC subcommittee reviewed the comments and the Reconciliation Committee responses, made only a few recommendations for revision, and approved the document for final draft on behalf of the

CRCC; the final draft then went forward from the Reconciliation Committee to the ACGME. This highly complex process underscores the fact that the CPRs were not reviewed in a vacuum. The resulting document is meant to achieve greater consistency and eliminate unnecessary redundancy.

Further information regarding implementation of the CPRs will be forthcoming from the ACGME through the *E-Bulletin*, the *ACGME Bulletin*, and other information sources.

## Additional Program Requirements Approved

In addition to the revised Common Program and Institutional Requirements, At its February 13, 2007, meeting, the ACGME Board of Directors also approved the following major revisions and/or new program requirements:

- *Allergy & Immunology*, major revision—effective July 1, 2007
- *General Program Requirements for the Subspecialties of Emergency Medicine*, major revision—effective July 1, 2007
- *Pediatric Emergency Medicine (Pediatrics & Emergency Medicine)*, major revision—effective July 1, 2007
- *Dermatology*, major revision—effective July 1, 2007
- *Pathology*, major revision—effective July 1, 2007
- *Molecular Genetic Pathology*, major revision—effective July 1, 2007
- *Medical Genetics*, major revision—effective July 1, 2007
- *Medical Biochemical Genetics*, new requirements—effective February 13, 2007
- *Diagnostic Radiology*, major revision—effective July 1, 2008
- *Neuroradiology (Diagnostic Radiology)*, major revision—effective July 1, 2007