Next Accreditation System (NAS)

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Goals of the NAS

- To begin the realization of the promise of the Outcomes Project
- To free good programs to innovate
- To assist poor programs in improving
- To reduce the burden of accreditation
- To provide accountability for outcomes (in tandem with ABMS) to the public



Attributes of the NAS

- Continuous program accreditation model
 - Based on annual data submitted, other data requested, and program trends
- 10 year Self-Study and site visit
 - Interim site visits as needed
- Requirements revised every 10 years
 - Categorized by outcome, core and detail
- Foster innovation
- Concentrate on problem programs to rapidly enhance performance/outcomes



The Next Accreditation System

Timeline

- Seven specialties/RC's begin "training" July 2012
 - Pediatrics
 - Internal Medicine
 - Diagnostic Radiology
 - Emergency Medicine
 - Orthopedic Surgery
 - Neurological Surgery
 - Urological Surgery
- Sponsor Visit Program begins September 2012
- The "Next Accreditation System" begins July 2013
- These seven specialties "go live" and specialties in phase II begin "training" July 2013
- All specialties/RC's using the "Next Accreditation System" 7/2014

The Next Accreditation System *Program Review*

- RC hiatus from program review July 2013 through June, 2014, except:
 - Programs with a short cycle (two years or less)
 - Proposed adverse actions
 - Programs with initial accreditation that are due for a site visit



Data Reviewed by RRC

•Most already in place

Annual ADS Update

- Program Characteristics Structure and resources
- Program Changes PD / core faculty / residents
- Scholarly Activity Faculty and residents
- Omission of data
- Board Pass Rate 3-5 year rolling averages
- Resident Survey Common and specialty elements
- Clinical Experience Case logs
- Semi-Annual Resident Evaluation and Feedback
 - Milestones

Faculty Survey

Program Attrition

- <u>General Definition</u>: Composite variable that measures the degree of personnel and trainee change within the program.
- <u>How measured</u>: Has the program experienced any of the following:
 - Change in PD?
 - Decrease in core faculty?
 - Residents withdraw/transfer/dismissed?
 - Change in Chair?
 - DIO Change?
 - CEO Change?



Program Changes

- <u>General Definition</u>: Composite variable that measures the degree of structural changes to the program.
- <u>How measured</u>: Has the program experienced any of the following:
 - Participating sites added or removed?
 - Resident complement changes?
 - Block diagram changes?
 - Major structural change?
 - Sponsorship change?
 - GMEC reporting structural change?



Scholarly Activity in NAS

- Annual summary for faculty and residents/fellows:
 - Publications (PubMed IDs and textbooks)
 - Number of presentations (conferences/grand rounds)
 - Grant activity (funding, PI)
 - Teaching responsibilities

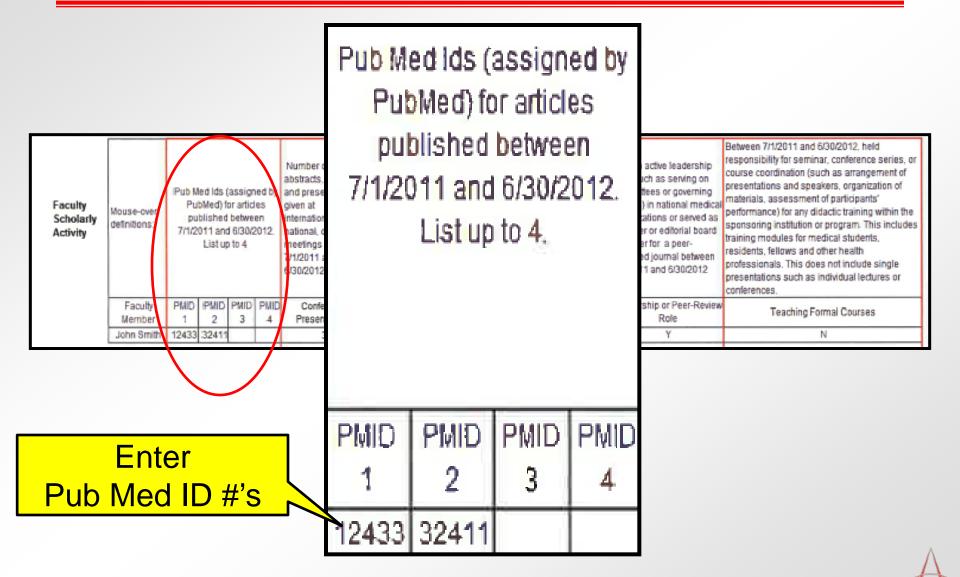


Scholarly Activity Template

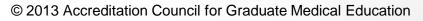
Scholarly Activity as Performance Indicator

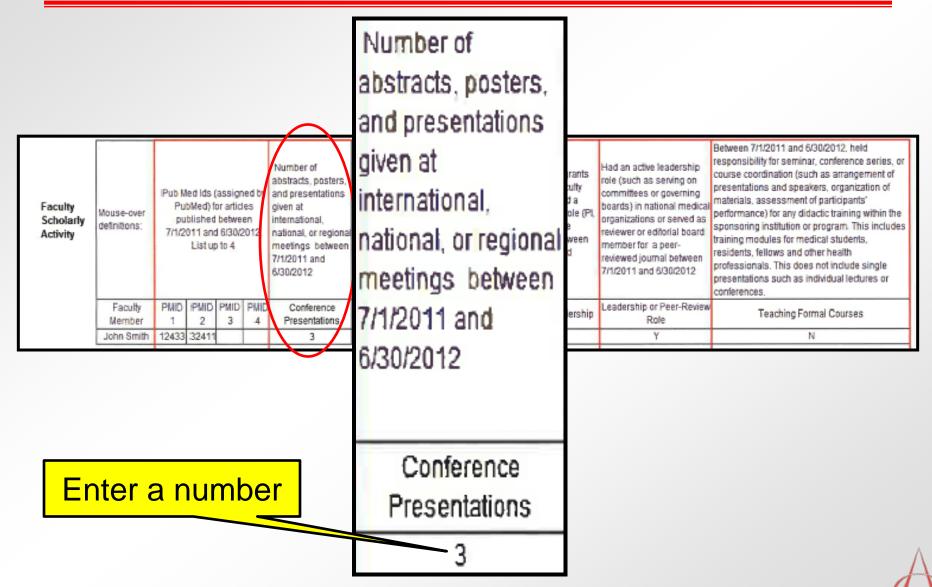
Templates for Scholarly Activity

Faculty Scholarly Activity	Mouse-over definitions:	Pub Med Ids (assigned by PubMed) for articles published between 7/1/2011 and 6/30/2012. List up to 4			des en	and presentations given at international, national, or regional	Number of other presentations given (grand rounds, invited professorships), materials developed (such as computer-based modules), or work presented in non-peer review publications between 7/1/2011 and 6/30/2012	Number of chapters or textbooks published between 7/1/2011 and 6/30/2012	Co-Pl, or site	Had an active leadership role (such as serving on committees or governing boards) in national medical organizations or served as reviewer or editorial board member for a peer- reviewed journal between 7/12/011 and 6300/2012	Between 7/1/2011 and 6/30/2012, held responsibility for seminar, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students, residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences.
	Faculty Member	PMID F	MID 2	PMID 3	PMID 4	Conference Presentations	Other Presentations	Chapters / Textbooks	Grant Leadership	Leadership or Peer-Review Role	Teaching Formal Courses
	John Smith	12433 3	2411			3	1	1	3	Y	N
Resident Scholar ly Activity	Mouse-over definitions: Resident	publi 7/1/201 L	led) fo shed l	r articl betwee 6/30/2 to 3.	les en	Number of abstracts, posters, and presentations given at international, national, or regiona meetings between 7/1/2011 and 6/30/2012 Conference		Number of chapters or textbooks published between 7/1/2011 and 6/30/2012 Chapters /	Participated in funded or non- funded basic science or clinical outcomes research project between 7/1/2011 and 6/30/2012 Participated in		Lecture, or presentation (such as grand rounds or case presentations) of at least 30 minute duration within the sponsoring institution or program between 7/1/2011 and 6/30/2012 Teaching / Presentations
		1	2			Presentations		Textbooks	research		
	June Smith	12433				1		0	N		Y
	Categories for points: Peer Review Publication 2013 Accreditation Council for Gradu				e Medical Ec	Other Scholarty		Grantsmanship	Leadership / Peer Review	Education	



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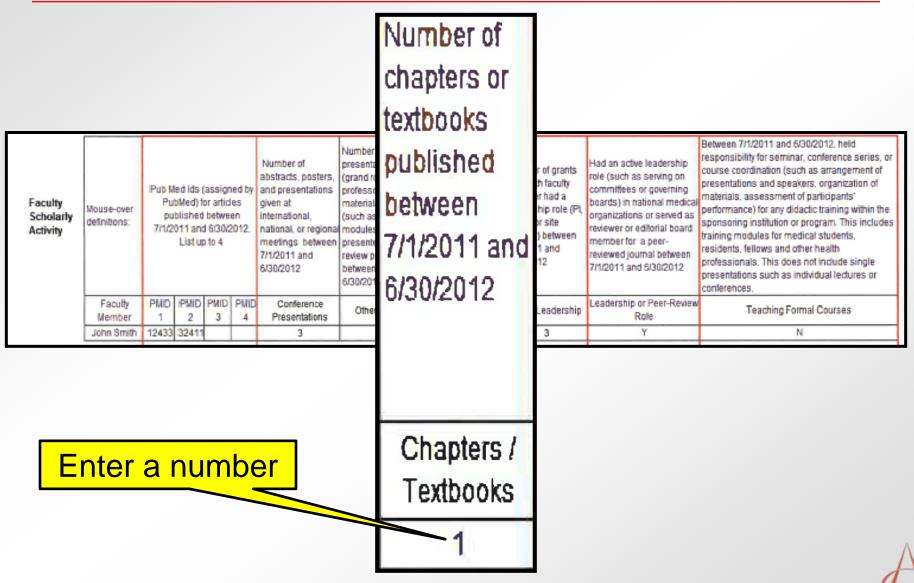




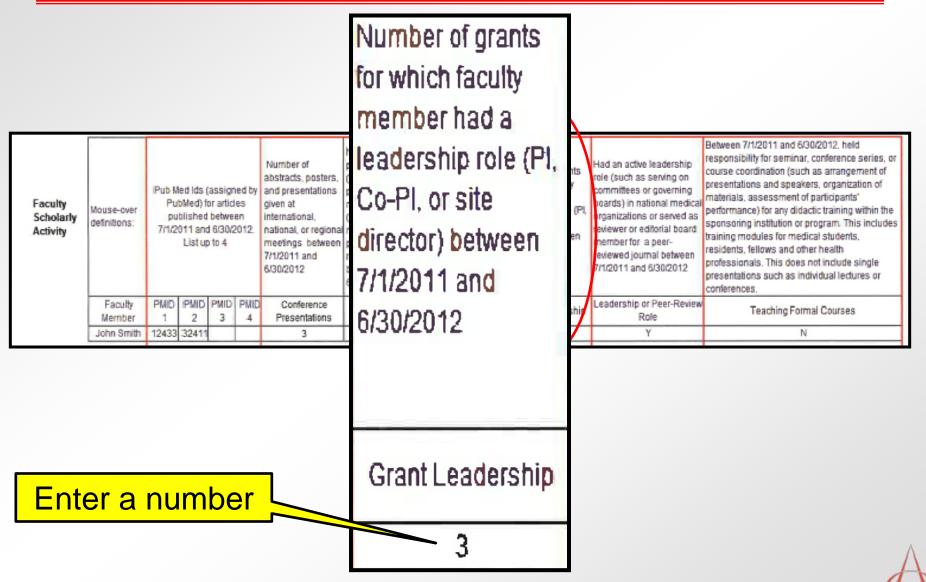
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			Number of	Number of other presentations given (grand rounds, invited professorships),	Had an active leadership	Between 7/1/2011 and 6/30/2012, held responsibility for seminar, conference series, or
Faculty Scholarly Activity	Mouse-over definitions: Faculty Member John Smith	Pub Med Ids (assigned by PubMed) for articles published between 7/1/2011 and 6/30/2012. List up to 4 PMID PMID 1 2 3 4 12433 32411	abstracts, poster and presentation given at international, national, or rego meetings betwee 7/1/2011 and 6/30/2012	review publications	role (such as serving on committees or governing boards) in national medical organizations or served as reviewer or editorial board member for a peer- reviewed journal between 7/1/2011 and 6/30/2012 Leadership or Peer-Review Role Y	course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students, residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences. Teaching Formal Courses N
•Ente	<mark>er a</mark>	number	<u></u>	between 7/1/2011 and 6/30/2012 Other Presentations 1		Λ

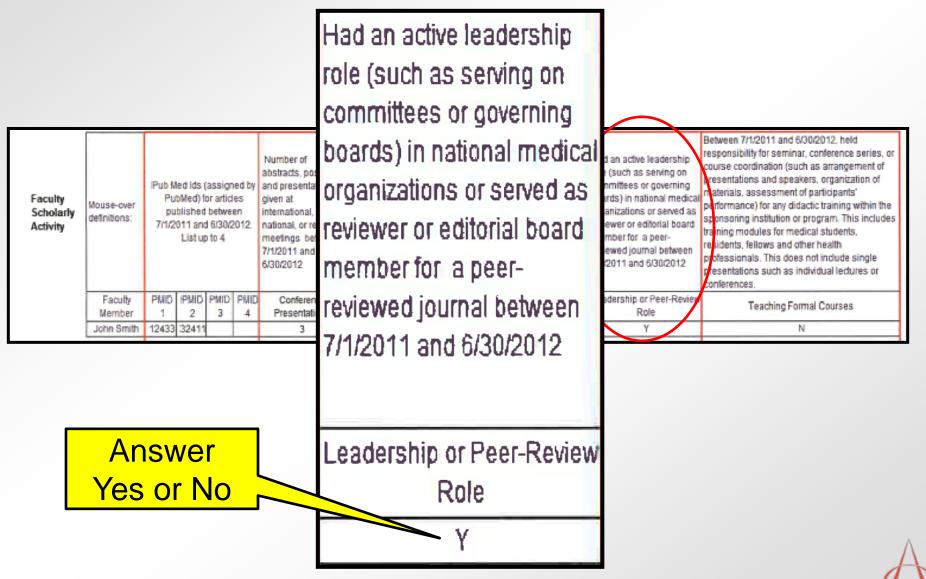
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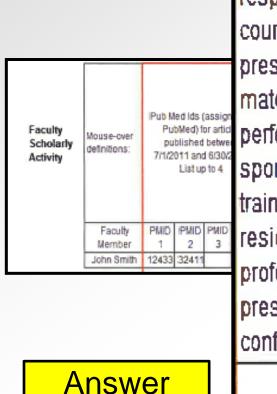
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Yes or No

Between 7/1/2011 and 6/30/2012, held responsibility for seminar, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students. residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences.

Teaching Formal Courses

Ν

Between 7/1/2011 and 6/30/2012, held responsibility for seminar, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students, residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences.



Scholarly Activity Template

Scholarly Activity as Performance Indicator

Templates for Scholarly Activity

Fac Sch Acti	olarly	Mouse-over definitions:	Pub Med Ids (assigned by PubMed) for articles published between 7/1/2011 and 6/30/2012. List up to 4			n n	Number of abstracts, posters, and presentations given at international, national, or regional meetings between 7/1/2011 and	professorships), materials developed (such as computer-based)	Number of chapters or textbooks published between 7/1/2011 and 6/30/2012	Number of grants for which faculty member had a leadership role (PI, Co-PI, or site director) between 7/1/2011 and 6/30/2012	Had an active leadership role (such as serving on committees or governing boards) in national medical organizations or served as reviewer or editorial board member for a peer- reviewed journal between 7/1/2011 and 6/30/2012	Between 7/1/2011 and 6/30/2012, held responsibility for seminar, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students, residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences.
		Faculty Member	PMID 1	2	PMID 3	PMID 4	Presentations	Other Presentations	Chapters / Textbooks	Grant Leadership	Leadership or Peer-Review Role	Teaching Formal Courses
		John Smith	12433	32411			3	1	1	3	Y	N
Resident Scholar ly Activity	Mouse-aver definitions:	Put	ed ids (; bMed) fo blished 011 and List up	betwee 6/30/2	n n	Number of abstracts, posters, and presentations given at international, national, or regional meetings between 7/1/2011 and 6/30/2012		Number of chapters or textbooks published between 7/1/2011 and 6/30/2012	Participated in funded or non- funded basic science or clinical outcomes research project between 7/1/2011 and 6/30/2012		Lecture, or presentation (such as grand rounds or case presentations) of at least 30 minute duration within the sponsoring institution or program between 7/1/2011 and 6/30/2012	
		Resident	PMID 1	PMID 2	PMB	03	Conference Presentations		Chapters / Textbooks	Participated in research		Teaching / Presentations
		June Smith	12433				1		0	N		Y
Categories for points:		Peer Review Publication			tion	Other Scholarty			Grantsmanship	Leadership / Peer Review	Education	



Board Certification

- RRCs working with ABMS boards
- Composite pass rate only, not individual scores
- Multi-year rolling rates for small programs



Resident Survey

- Emphasis on themes
 - De-emphasize individual questions
- High level
- Minimize single resident impact
- Only significant deviation from compliance are indicators
- Trend data
- Domains: Duty hours, Faculty, Educational Content, Evaluations, Resources, Patient safety, Teamwork

Faculty Survey

- "Core" faculty only because they are most knowledgeable about the program
 - dedicate an average of 15 hours/week
 - trained in the evaluation and assessment of the competencies;
 - spend significant time in the evaluation of the residents
 - advise residents w/ respect to career and educational goals
- Similar domains as the Resident Survey
- Will be administered at same time as Resident Survey
 - Start in winter-spring 2013 for 2012-2013 for Phase 1



Clinical Experience

- Procedure Logs
- Review the number and mix of procedures
 - How do you know what your residents are doing?
- Correct incomplete data entry
 - Need all (not just minimum) numbers
 - Tracking incomplete reporting



Review of Annual Data: Decisions Available to the RC

- <u>Confirm</u> existing accreditation status based on data review
- <u>Change</u> existing status based on data review
- Request clarifying information prior to rendering an accreditation decision
 - Request progress report
 - Request focused site visit
 - Request full site visit



Accreditation Status Options: Core/Subspecialty and SIs

Applications

- Initial Accreditation
- Initial Accreditation with warning New
- Accreditation Withheld (adverse)



Accreditation Status Options Core/ Subspecialty and SIs

- Continued Accreditation
- Continued Accreditation with warning -New
- Probationary Accreditation (adverse)
 - can't exceed 2 years new
- Withdrawal of Accreditation (adverse)
 - does not require probation first new
- Administrative Withdrawal



Focused Site Visit

- Assesses selected aspects of a program and may be used:
 - to address *potential* problems identified during review of annually submitted data;
 - to diagnose/explore factors underlying deterioration in a program's performance
 - to evaluate a complaint against a program



Full Site Visits

- <u>May</u> be scheduled:
 - To review an application
 - When review of continuous data identifies broad issues and/or concerns
 - For other serious conditions or situations at the discretion of an RC
- <u>Must</u> be scheduled:
 - at the end of initial accreditation



Along with an accreditation decision...

...a Review Committee may:

- Recognize and commend exemplary performance or innovations
- Identify opportunities for improvement
- Identify concerning trends
- Issue citations
- Acknowledge correction of previous citations

• Increase or reduce resident complement[®] 3 Accreditation Council for Graduate Medical Education

Self Study

- Departmentally coordinated effort
- Respond to active citations
- Evaluate program performance against goals
- Review previous 10 year annual program evaluations
- Demonstrate effectiveness of modifications of the program over time/Continuous improvement
- Establish program goals for the future



Self Study Visit

- Team of site visitors
- Review the self-study of the core and subs
- Conduct a PIF-less site visit
- Validate annual data submitted
- Potentially serve as a vehicle for:
 - Description of salutary practices
 - Accumulation of innovations in the field

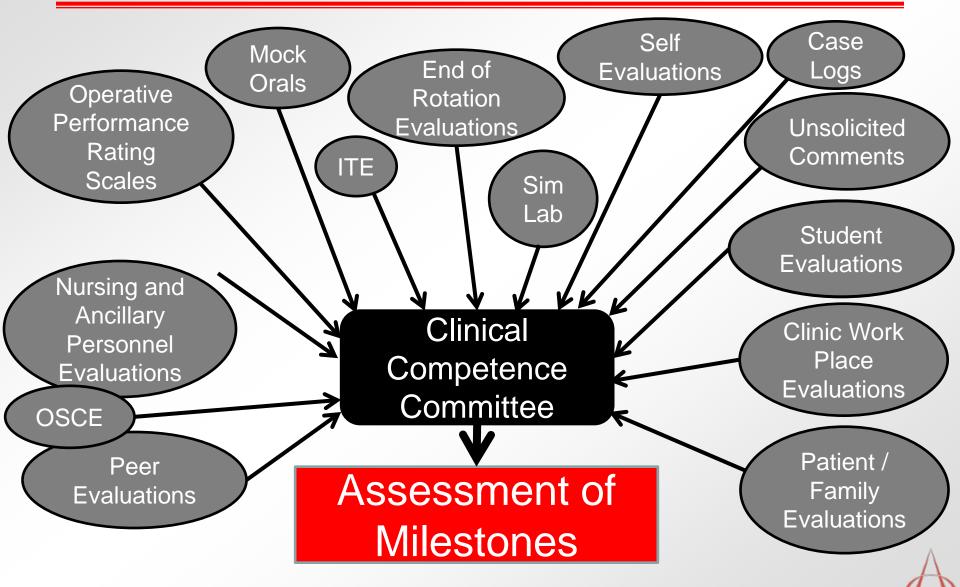


Clinical Competency Committee

- May already be in place under a different name
- Start thinking about the composition, procedure, data elements
- What should be reviewed:
 - Continue to look at current methods of evaluations: OSCE, simulation, 360-degree evaluations
 - Milestones, Entrustable Professional Activities, narratives



Clinical Competence Committee



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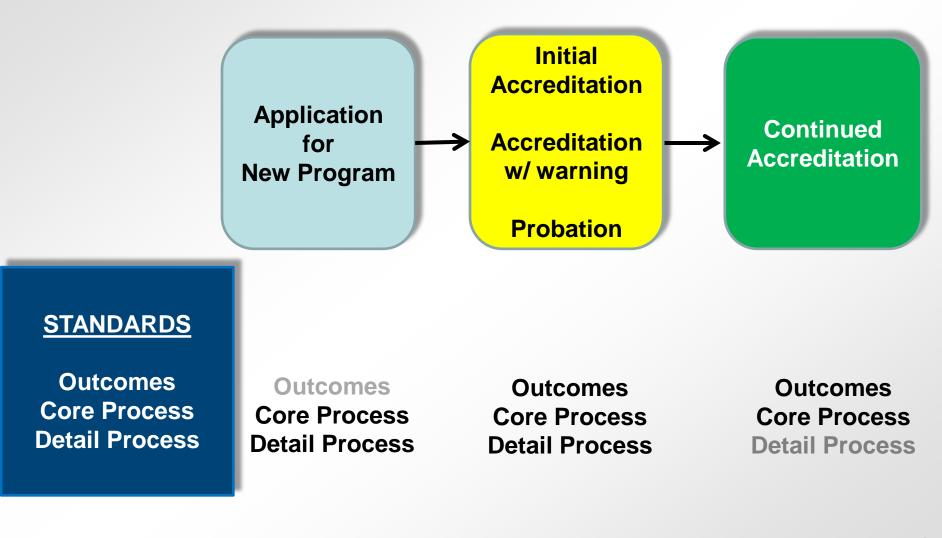
- Decision for PD
- Consider.
 - Sufficient number for broad consensus
 - Representation from each major site
 - Subspecialty representation
 - Dedication to education



Categorization of All Requirements

- Standards (CPRs and Specialty specific) Organized by
 - Core (Structure, Resource, Process)
 - Followed by all programs
 - Detail (Structure, Resource, Process)
 - Way to achieve compliance with "Core" requirements
 - Good programs allowed to innovate/use alternate methods
 - Outcomes
 - The Competencies and Sub-competencies which are tied to the Milestones

Decisions on Program Standing in NAS





The Clinical Learning Environment Review (CLER) Program

- Focus on institutional environment not individual programs
- Six focus areas

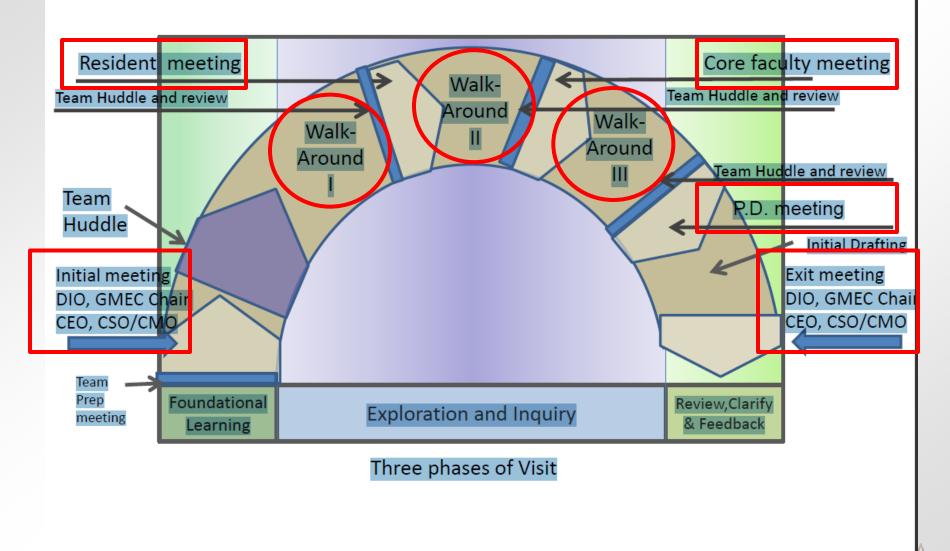


CLER Program

- Integration of residents/fellows (along with demonstration of impact) into:
 - <u>1. Patient Safety Programs</u>
 - <u>2. Quality Improvement Programs</u>
 - Reduction of Disparities in Health Care Delivery
- <u>3. Supervision</u>
- <u>4. Transitions in Care</u>
- <u>5. Duty hours policy</u>, fatigue management and mitigation
- <u>6. Professionalism</u> (including Honest and Accurate Reporting of Information, Scientific Integrity and Issues of Mistreatment)

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SCHEMATIC OF FLOW OF CLER SITE VISIT



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Future Educational Sessions

- Completed/posted: CLER and NAS
- Future ACGME webinars
 - Milestones
 - Self-study
 - Phase 1 specialties
- Previous webinars available for review at: <u>http://www.acgme-nas.org</u>under "ACGME Webinars".





Accreditation Council for Graduate Medical Education

ACGME Role and Vision

The Next Accreditation System





The Accreditation Council for Graduate Medical Education is a private, non-profit council that evaluates and accredits more than 9,000 residency programs in 135 specialties and subspecialties in the United States, affecting more than 116,000 residents. Its mission is to improve health care in the U.S. by assessing and advancing the quality of graduate medical education for physicians in training through accreditation.

This website shares background and detail regarding the ACGME's next accreditation system, an outcomes-based accreditation process through which the doctors of tomorrow will be measured for their competency in performing the essential tasks necessary for clinical practice in the 21st century.

Recent News

NAS FAQs (Updated 12-2012) 🔼

ACGME Board Approved Policies and Procedures for the Next Accreditation System (Effective date: 7/1/2013)

Key Dates for Phase I Specialties 🔊

NAS Slideshow – ACGME Conference Presentation by Dr. Nasca 🔊

ACGME Webinars - The Next Accreditation System (NAS)
ACGME Webinar 2: Implementing the Next Accreditation System: Download Slides
Register to view slides and audio

ACGME Webinar 1: The Clinical Learning Environment Review (CLER) Program: Early Experiences:

Perspectives on the Next Accreditation System



The Next Accreditation System: Rationale and Benefits

Thomas J. Nasca, MD, MACP Chief Executive Officer

Accreditation Council for Graduate Medical Education

Professor of Medicine, Jefferson Medical College of Thomas Jefferson University



Kathleen Klink, MD Director, Division of Medicine and Dentistry

Bureau of Health Professions

Health Resources and Services Administration



Eric Holmboe, MD Chief Medical Officer

American Board of Internal Medicine



Carol A. Aschenbrener, MD Chief Medical Education Officer

Association of American Medical Colleges



James Bagian, MD, PE Chief Patient Safety and Systems Innovation Officer

University of Michigan



Kevin B. Weiss, MD, MPH President and Chief Executive Officer American Board of Medical



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•Key Dates for Phase II specialties under NAS

ACGME News and Reviews, J Grad Med Educ, 2012; 4(4): 562 •http://www.acgme-nas.org/assets/pdf/KeyDatesPhase1Specialties.pdf

Month & Year	ACGME Activities	Program and Institutional Activities			
Spring 2013	PRs categorized into detail and core processes, and outcomes				
July 1, 2013 – June 30, 2014		Programs provide: annual ADS, RS, FS, Case Log data, SA			
Spring 2014	Final SVs in the current system completed for newly accredited or with short cycle length				
June 2014		Phase II Programs form CCC and prepare to assess milestones			
July 2014	Phase II Specialties and Subspecialties Begin Operating in NAS				

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Key Dates for Phase II specialties under NAS

ACGME News and Reviews, J Grad Med Educ, 2012; 4(4): 562 http://www.acgme-nas.org/assets/pdf/KeyDatesPhase1Specialties.pdf

7/1/14-6/30/15		Milestones assessments begin for core programs
Fall 2014	RRCs review annual data from Academic year 2013-2014 (without milestone data)	
December 2014		Core Programs submit the first set of milestones assessments to ACGME
June 2015		Programs submit 2 nd set of milestones assessments to ACGME
Fall 2015	First self study SVs for programs with 2015 self study date	
Fall 2015	RRCs review annual data from 2014-2015 (with milestone data)	

Questions???

