Session 006
Updates from the Review Committee for Pediatrics

Suzanne K. Woods, MD, Review Committee Chair
Caroline Fischer, MBA, Executive Director
Joseph Gilhooly, MD, ACGME Field Staff

#ACGME2017
Disclosure

No conflicts of interest to report
Review Committee Composition

4 appointing organizations
- AAP, ABP, AOA, AMA

15 voting members

6-year terms – except resident (2 years)

Generalists, subspecialists, 1 public member

1 ex-officio (non-voting) member each from AAP, ABP and AMA
Geographic Distribution of the Review Committee

Current members: CA, CT, FL, GA, IL, MI, NJ, NY, NC, OH, TX, UT, VT and VA

Incoming members: MD and PA
Review Committee Composition

Carl R. Backes, DO, FACOP
Dona S. Buchter, MD
Ann E. Burke, MD
Dalya L. Chefitz, MD
Alan H. Friedman, MD
Lynn Garfunkel, MD
Rani Gereige, MD, MPH, FAAP
Bruce Herman, MD

Dustin Hipp, MD
Deepak Kamat, MD, PhD, FAAP (Vice Chair)
Richard B. Mink, MD, MACM
Victoria F. Norwood, MD
Judith S. Shaw, EdD, MPH, RN, FAAP
Julie Kim Stamos, MD
Suzanne K. Woods, MD (Chair)
Congratulations!

New Review Committee members
- Stephanie Dewar, MD
- Judy-April Oparaji, MD

ACGME Courage to Teach Award (honoring program directors)
- Dona S. Buchter, MD

ACGME Program Coordinator Excellence Award
- Thea Stranger-Najjar

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# 2017 Status Decisions

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Citations vs. Areas for Improvement (AFIs)
AFIs/Citations - Core Programs

Duty hours  
Board pass rate  
Procedural experience  
Faculty supervision and teaching

Educational content
- Appropriate balance for education
- Education compromised by service
AFIs/Citations - Subspecialty Programs

Evaluations
- Timeliness of feedback
- Used for program improvement
- Confidential

Faculty supervision and teaching
Faculty scholarly activity/scholarly environment

Resources
- Fellows can raise concerns without fear
- Satisfied with process to deal with problems/concerns

Educational content
- Appropriate balance for education
- Education compromised by service
2015-2016

Data Review by Staff

RC Meeting 1

2016-2017

Data Review by Staff

RC Review

RC1 LONs

RC Meeting 2

RC Review

RC2 LONs
AFIs

- Major Changes section expanded so programs can include improvements and/or innovations implemented to address potential issues identified (AFIs) during the Annual Program Review

- Written response to AFIs not required, but encouraged
Alternate Qualifications for Faculty

- If faculty members are not board certified, explain “Equivalent Qualifications for RC Consideration” in ADS
- Alternate qualifications will not be accepted for individuals who have completed ACGME-accredited residency education within the United States and are not eligible for certification by the American Board of Pediatrics (ABP), who have failed the ABP certifying exam, or who have chosen not to take the ABP certification exam
- Recent graduates are expected to take and pass the next certifying exam
Program Letters of Agreement (PLAs)

- Must have a PLA with each site that is not under the governance of the Sponsoring Institution that provides required rotations/assignments
- Required with the primary site if it is not under the governance of the Sponsoring Institution
- Not required for rotations to faculty offices

#ACGME2017
First Task Force convened to review the Resident Learning and Working Environment requirements

- Review of literature
- Request for organizational positions
- National Congress in March 2016
- Review and comment period was November/December 2016
- Approved by the ACGME Board in February 2017
- Effective date of July 1, 2017
Common Program Requirements Phase 2 Task Force

- A Common Program Requirements Phase 2 Task Force has been appointed to review Sections I-V
- Input from the graduate medical education community was solicited, as well as a general call for comments in the ACGME e-Communication
- Proposed changes will be posted for review and comment later this year
Pediatrics Program Requirement Revisions

- Take rate for ABP certifying exam removed
- Requirement regarding pass rate of (AOBP) American Osteopathic Board of Pediatrics examination added:
  - At least 70 percent of a program’s graduates from the preceding five years who take the American Osteopathic Board of Pediatrics certifying examination for the first time should pass. (Outcome)
Internal Medicine-Pediatrics Program Requirement Revisions

Program Requirements under revision
Review and comment period through April 12
Tentative effective date: July 1, 2018
Pediatric Subspeciality Program
Requirement Revisions

Revision of the individual subspecialty requirements to start this spring

Review and comment period in winter/spring 2018

Tentative effective date: July 1, 2019
Milestones 2.0

- Multidisciplinary Milestones for Practice-based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, and Systems-based Practice in development
  - Post for review and comment this spring
  - Goal is to keep common themes across specialties and modify as needed
  - Optional for specialties to use
Milestones 2.0

- Phase I specialties review specialty-specific Milestones in 2017-2018
  - Program directors will be surveyed about the Patient Care and Medical Knowledge Milestones
  - Working group will include representation from the Review Committee, ABP, Association of Pediatric Program Directors, and American Osteopathic Association, as well as resident member, public member, and self-nominated individuals
  - Draft Milestones will be posted for review and comment
  - Subspecialty Milestones reviewed after specialty Milestones completed, but timeline may be more protracted
Studies focus on two areas of validity

- Content validity – content experts review the language in the Milestones and subcompetencies

- Response process validity - processes by which the data is collected, i.e. observations of the residents, and collated and interpreted locally to make final Milestones ratings prior to sending them to the ACGME
  - Two studies completed in internal medicine and neurological surgery – results to be published
  - Starting a new study with pediatrics, family medicine, emergency medicine, and internal medicine

Ultimately, we wish to explore the degree to which Milestones data can predict meaningful clinical performance, but these initial studies have to be done first
Milestones Assessment Resources

- New Assessment Toolbox being developed
  - updated list of assessment tools
  - background on how to select the best assessment tool for your purpose
  - guidance on developing or revising tools
- Entrustable Professional Activities (EPAs) are innovative way of linking observations of resident performance with Milestones ratings
  - The ACGME is not doing anything specific on EPAs across all specialties
  - The use of EPAs is up to the community

#ACGME2017
The ACGME, in partnership with the American Foundation for Suicide Prevention and Mayo Clinic, launched an initiative to prevent physician and medical trainee suicides.

A library of educational resources intended to help physicians and medical trainees is available on the ACGME website, and includes:

- A four-minute video that advises medical students, residents and fellows on how to support each other, express concern to peers, and encourage help-seeking behavior.
- A comprehensive guide to help graduate training programs respond to a resident death by suicide.
- Additional information and access to support.
CLER Updates

- Completing second visits to Sponsoring Institutions with 3+ programs (summer 2017)
- Ongoing first visits to Sponsoring Institutions with 1-2 programs (through 1st Q 2018)
- Planned release of *Pathways to Excellence* v1.1 in May 2018
  - Focus area of “Duty Hours, Fatigue Management” evolved to “Well-being”
- *National Report of Findings 2016* posted on ACGME website

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Elements of the Self-Study

Program Aims

Assessment of internal factors (SVOT/SLOT analysis)
- Strengths, areas for improvement/limitations/vulnerabilities

An environmental assessment
- Opportunities and threats

A five-year look back at changes in the program

A five-year look forward
- Plans/considerations for the future
Program Aims

A way to differentiate programs and create priorities for improvement

Relevant considerations:

- Who are our residents/fellows?
- What do we prepare them for?
- Measurable

Ultimate goal: Intentionality in program design

- Stakeholder input, both internal and external
The Self-Study Summary

Brief (~5 pages; 2550-2800 words) summary of key dimensions of the self-study

- Program aims
- Elements of the environmental assessment (omitting areas for improvement)
- Five-year look back and look-forward
- Self-study process (who was involved, data collected and interpreted)

Document uploaded to ADS
Timeline

Self-studies for Phase I programs started in April 2015

- Programs receive approximately 9 months advance notice
- Self-study summary uploaded to ADS on the last day of the month of the program’s first scheduled site visit in the Next Accreditation System

The 10-year accreditation site visit is scheduled 12 to 18 months later

- Programs receive 90 days advance notice of their 10-year site visit
- First Phase I 10-year site visits scheduled February 2017
10-Year Accreditation Site Visit

- A full accreditation site visit with review of compliance with all applicable Program Requirements
- 12-18-month period after the self-study to allow programs to implement improvements
- Programs submit “Summary of Achievements” detailing improvements made as a result of the self-study
- Site visit opens with the review of the self-study to provide the context for the accreditation section of the site visit
The Summary of Achievements

ACGME template completed and uploaded to ADS

- ~ 1500 words, describing (1) program strengths, (2) key improvements accomplished from the self-study
- Areas identified during the self-study where the program has realized improvements
- No information collected on areas not improved

Program may provide an update to its self-study summary

- Changes in aims, context, or future plans
RC Review of the 10-Year Visit

Review Committee provides a Letter of Notification from the 10-year (full accreditation) site visit

- Citations and Areas for Improvement

Formative feedback (no accreditation impact) for the Review Committee assessment of the self-study

- “Formative only” envisioned for 5-7 years, as the GME community and Review Committees learn more about program improvement

- Focus will be on the on “improvement process,” not the priorities the program has selected

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Program Resources

www.acgme.org

Website redesign (webfeedback@acgme.org)
ACGME Policies and Procedures
Milestones and Clinical Competency Committee Guidebooks
List of accredited programs
Accreditation Data System (ADS)
FAQ documents (e.g., Milestones, Common Program Requirements)
General information on site visit process and your site visitor
Program Resources cont.

Pediatrics web pages

- Complement increase policy
- Program Requirements, FAQ documents, and application forms
- Milestones
- Presentations

Weekly e-Communication

- Contains general GME information, accreditation-related updates, announcements regarding Program Requirements, updates from the Review Committee on ACGME issues/initiatives, etc.
ACGME Contacts

ADS: ads@acgme.org
   Tessa Banks (tbanks@acgme.org)
   312.755.7449

Site Visit:
   Ingrid Philibert (iphilibert@acgme.org)
   312.755.5003

   Jim Cichon (jcichon@acgme.org)
   312.755.5015

   Penny Iverson-Lawrence (pil@acgme.org)
   312.755.5014

Requirements, Forms, or Notification Letter:
   Caroline Fischer (cfischer@acgme.org)
   312.755.5046

   Denise Braun-Hart (dbraun@acgme.org)
   312.755.7478

   Kim Rucker (krucker@acgme.org)
   312.755.7054

   Luz Barrera (lbarrera@acgme.org)
   312.755.5077
Questions?