

**ACGME Program Requirements for Graduate Medical Education
in Brain Injury Medicine
Summary and Impact of Focused Requirement Revisions**

Requirement #: **IV.C.1.a)-b)**

Requirement Revision (significant change only):

Assignment of rotations must be structured to minimize the frequency of rotational transitions, and rotations must be of sufficient length to provide a quality educational experience, defined by continuity of patient care, ongoing supervision, longitudinal relationships with faculty members, and meaningful assessment and feedback. ^(Core)

Clinical experiences should be structured to facilitate learning in a manner that allows fellows to function as part of an effective interprofessional team that works together longitudinally with shared goals of patient safety and quality improvement. ^(Core)

1. Describe the Review Committee's rationale for this revision:
The requirements reflect the need for programs to consider the impact of frequent rotational transitions, such as occurs when fellows are scheduled for a series of short rotations, and the resulting disruption in supervisory continuity, on patient care and fellow education. They are also intended to address the impact of assigning supervising faculty members for very brief assignments.
2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
The intent of the requirements is to ensure that programs consider the impact of frequent rotational changes and the accompanying lack of supervisory continuity on patient care. This new requirement prioritizes patient safety and education in curriculum planning.
3. How will the proposed requirement or revision impact continuity of patient care?
The requirements are intended to minimize the frequency of rotational transitions and emphasize the importance of supervisory continuity. It is expected that this will have a positive impact on continuity of patient care.
4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
It is not anticipated that additional resources will be needed.
5. How will the proposed revision impact other accredited programs?
Not applicable