ACGME Program Requirements for Graduate Medical Education in Complex Family Planning
Summary and Impact of New Specialty Requirements

1. Describe the scope of practice of the new specialty, as well as the process involved in development of the requirements (e.g., date of recognition of the specialty by the ACGME Board, involvement of specialty boards/organizations, etc.).

The first fellowship in family planning started in 1991. There are now more than 20 complex family planning fellowships in the United States and it is expected this number will grow.

A complex family planning subspecialist is an obstetrician/gynecologist who provides consultation services and comprehensive care for women with complex reproductive health needs; has advanced knowledge of preventive, diagnostic, and therapeutic procedures necessary for optimal reproductive health, clinical contraception, pregnancy termination, and management of complications and reduction of maternal mortality; and has advanced knowledge and skills in public health, health policy and advocacy, and expertise in the application of basic, translational, and clinical research in order to provide leadership to advance the field.

In October 2018, the American Board of Medical Specialties (ABMS) approved the American Board of Obstetrics and Gynecology’s (ABOG) request to offer certification in complex family planning. Soon thereafter, ABOG submitted a proposal to the ACGME to accredit programs in the subspecialty. The ACGME Board of Directors approved accreditation of the subspecialty at its September 2019 meeting.

2. How will the proposed requirements improve resident/fellow education?

For those physicians who choose complex family planning as a career, ACGME accreditation of complex family planning programs will allow for a seamless transition from obstetrics and gynecology residency to the fellowship. In addition, graduate medical education leaders in obstetrics and gynecology departments will share the same Common Program Requirements and administrative responsibilities across programs, which will facilitate collaboration and coordination. Fellow education will also benefit from having another layer of oversight as the designated institutional official and institution’s Graduate Medical Education Committee will oversee the complex family planning fellowship at the Sponsoring Institution level and ensure programs provide high quality education and training.

3. How will the proposed requirements improve patient care and patient safety/quality?

The proposed Program Requirements clearly delineate the knowledge and skills that must be achieved by fellowship program graduates. The transition to ACGME accreditation will allow the high standards established in the existing complex family planning fellowships to continue, and will ensure excellent and safe care for women with complex reproductive needs.

4. How will the proposed requirements impact continuity of patient care?
The presence of a complex family planning fellow will enhance continuity of patient care for women with complex reproductive needs. The service team, including the attending physician, fellow, and resident, will work together to provide continuity of care for these patients.

5. Will the proposed requirements 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?

Additional clinical and didactic education resources should not be needed in established complex family planning fellowships as the proposed Program Requirements are based on documents already in use in existing programs, including the “General Requirements for a Post-graduate Program in the Subspecialty Area of Complex Family Planning,” and the “Guide to Learning in Complex Family Planning.”

There may be additional costs associated with support to meet ACGME administrative requirements (e.g., evaluation requirements). If there are costs, it is anticipated these will be minimal as established complex family planning programs have strong administrative structures in place.

The proposed Program Requirements require program directors have at least four hours per week of protected time for program administration. Additional financial support may be needed if an institution currently does not provide program directors with protected administrative time.

6. How will the proposed requirements impact other accredited programs?

Complex family planning fellowships will enhance the education of obstetrics and gynecology residents. Per the proposed Program Requirements, the fellowship must function as an integral part of an ACGME-accredited residency program in obstetrics and gynecology [PR I.B.1.a).(1)], the fellowship and residency must complement and enrich one another [PR I.B.1.a).(2)], and there must be a sufficient number and variety of patients to ensure resident education is not adversely impacted by the fellowship [PR I.D.4.a).(1)].

There should not be a negative impact on any other ACGME-accredited residencies or fellowships. On the contrary, the fellowship will enhance an institution’s ability to provide multidisciplinary patient care and education.