SES048: Review Committee for Plastic Surgery

Chris Fox, PhD, Executive Director
Conflict of Interest Disclosure

Speaker(s): Chris Fox, PhD

Disclosure

None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.
Objectives

• Overview of the Review Committee
• Accreditation Activity
• Citations:
  ▪ Most Frequently Cited Areas
  ▪ Responding to Citations
• ACGME Organizational Updates
  ▪ Administrative Updates
  ▪ Field Activities (Site Visits, Self-Study & 10-Year Site Visits)
  ▪ Additional Resources/Information
About the ACGME

“The mission of the ACGME is to improve health care and population health by assessing and advancing the quality of resident physicians' education through accreditation.”
# Review Committee Membership

<table>
<thead>
<tr>
<th>NAME</th>
<th>ROLE</th>
<th>NAME</th>
<th>ROLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>David H. Song, MD, MBA, FACS</td>
<td>Chair</td>
<td>Paul Cederna, MD, FACS</td>
<td>Vice-Chair</td>
</tr>
<tr>
<td>Lisa David, MD, MBA, FACS</td>
<td>Member</td>
<td>David Dellinger, DO, FACOS, CWS,</td>
<td>Member</td>
</tr>
<tr>
<td>Jeffrey B. Friedrich, MD, MC, FACS</td>
<td>Member</td>
<td>Amanda A. Gosman, MD, FACS</td>
<td>Member</td>
</tr>
<tr>
<td>Jeffrey E. Janis, MD, FACS</td>
<td>Member</td>
<td>Andrew Linkugel, MD</td>
<td>Resident Member</td>
</tr>
<tr>
<td>Joseph Losee, MD, FACS, FAAP*</td>
<td>Member</td>
<td>Andrea L. Pozez, MD, FACS</td>
<td>Member</td>
</tr>
<tr>
<td>Sheri Slezak, MD, FACS*</td>
<td>Member</td>
<td>Kyle D. Campbell, FACHE</td>
<td>Public Member</td>
</tr>
<tr>
<td>Patrice Blair, DrPH, MPH</td>
<td><em>Ex-Officio, ACS</em></td>
<td>Keith Brandt, MD, FACS</td>
<td>*Ex-Officio, ABPS</td>
</tr>
<tr>
<td>Peter Taub, MD, MS, FACS, FAAP**</td>
<td></td>
<td>*Outgoing Member July 2023</td>
<td></td>
</tr>
<tr>
<td>Ann Schwentker, MD**</td>
<td></td>
<td>**New Member – July 2023</td>
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# Review Committee Membership

<table>
<thead>
<tr>
<th>Category</th>
<th>Term</th>
<th>Role</th>
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<tbody>
<tr>
<td>Physician members</td>
<td>6-yr</td>
<td>Full review and vote</td>
</tr>
<tr>
<td>Resident member</td>
<td>2-yr</td>
<td>Full review and vote</td>
</tr>
<tr>
<td>Public member</td>
<td>6-yr</td>
<td>Full review and vote</td>
</tr>
<tr>
<td>Ex-officio members</td>
<td></td>
<td>Do not participate in program</td>
</tr>
<tr>
<td></td>
<td></td>
<td>review and do not vote</td>
</tr>
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</table>
Review Committee Meetings

May 3, 2023
Agenda Close Date: February 24, 2023
New Applications Deadline: December 30, 2022

January 25-26, 2024
Agenda Close Date: November 17, 2023
New Applications Deadline: September 22, 2023
What Does the RC Do?

- Peer Review
- Determination of a program’s “substantial compliance” against a defined set of standards.
How?

- Review of Program Information including:
  - Annual Survey/Aggregate Survey
  - Program Information in ADS
  - Response to Citations
  - Site Visit Reports
  - Case Log Data
  - Certification Examinations
What Does the RC Not Do?

• Certify Individuals

• Set requirements for resident/fellow compensation
Possible Accreditation Status

Application
Initial Accreditation
Initial w/ Warning
Continued w/o Outcomes
Continued Accreditation
Continued w/ Warning
Probation
Reduction in Complement
Withdrawal

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# Program Overview

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Accredited Programs</th>
<th>Applications (2/1/23)</th>
<th>Approved Complement 22-23</th>
<th>Filled Complement 22-23</th>
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</thead>
<tbody>
<tr>
<td>Plastic Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent</td>
<td>49</td>
<td>1</td>
<td>285</td>
<td>202 (71%)</td>
</tr>
<tr>
<td>Integrated</td>
<td>88</td>
<td>1</td>
<td>1251</td>
<td>1113 (89%)</td>
</tr>
<tr>
<td>Craniofacial Surgery</td>
<td>9</td>
<td></td>
<td>11</td>
<td>5 (45%)</td>
</tr>
<tr>
<td>Hand Surgery</td>
<td>19</td>
<td>29</td>
<td></td>
<td>27 (93%)</td>
</tr>
<tr>
<td>Specialty</td>
<td>Initial Accreditation</td>
<td>Continued Accreditation</td>
<td>Continued Accreditation with Warning</td>
<td>Probation/Withdrawal</td>
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</tr>
<tr>
<td>Plastic Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent</td>
<td>1 (2%)</td>
<td>46 (92%)</td>
<td>2 (4%)</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>Integrated</td>
<td>9 (10%)</td>
<td>76 (86%)</td>
<td>3 (3%)</td>
<td>0</td>
</tr>
<tr>
<td>Craniofacial Surgery</td>
<td>0</td>
<td>8 (100%)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Hand Surgery</td>
<td>2 (11%)</td>
<td>16 (89%)</td>
<td>0</td>
<td>0</td>
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</tbody>
</table>
Annual Data Review
Data Collection (January - September)

RC Executive Committee Review (November)

RC Review & Decision (January, April/May)

Program Notification
Total Citations - Trends

Plastic Surgery Independent
Total Citations

Plastic Surgery - Integrated
Total Citations
Plastic Surgery (Independent)
2021-2022 Citations (23 Total)
Plastic Surgery (Independent)
5-Year Citation Trend
Most Frequent Citations

Feedback- Evaluation of Residents
Most Frequent Citations

Program Director Responsibilities
(Able to raise problems and concerns without fear of intimidation or retaliation)
Most Frequent Citations: Environment

80 Hours

1 day free in 7
Most Frequent Citations

Responsibilities of Faculty
(Faculty interest in education)
Most Frequent Citations

Service to Education Imbalance
Most Frequent Citations

Board Pass Rate
Board Pass Rate - 5\textsuperscript{th} Percentile (2022)

*The Board Pass Rate will CHANGE each year
**Must achieve higher than the 5\textsuperscript{th} percentile \textbf{OR} 80% 

\textbf{Plastic Surgery Independent:}
- ABMS Written: 50.00%
- ABMS Oral: 50.00%

\textbf{Plastic Surgery Integrated:}
- ABMS Written: 76.50%
- ABMS Oral: 74.11%
Responding to Citations

- In reviewing responses to citations, the Review Committee considers:
  - Does the program understand the problem/reason they are not in compliance?
  - Is there an explicit statement of how the program engaged the faculty/residents/fellows/institution in the identification of the problem(s) and creation of an action plan?
  - Are there actionable items implemented by the program and/or institution that directly addressed the program requirement(s) out of compliance?
  - Is there an explicit identification of how the program will monitor and sustain improvement?
- Citation responses are taken into consideration, along with supporting materials (most recent resident and faculty surveys, updated program information, performance metrics, case logs, etc.)
Major Changes and Other Updates

- Use Major Changes and Other Updates to communicate directly to the RC
- *Low ACGME Survey ratings? Missed minimums? Worse than expected performance on the Board exam?* Tell the RC how the issue is being addressed!
- **TIP:** Keep a running document during the year of program highlights, changes, and challenges
Joint Plastic Surgery Hand Surgery (JPSHS) 5+1 Program

The Review Committee for Plastic Surgery will consider proposals from Integrated Plastic Surgery Programs for the Joint Plastic Surgery/Hand Surgery (JPSHS) program. The JPSHS program is an accelerated pathway leading to ABPS certification in both Plastic Surgery and Hand Surgery. Completion of this pathway includes attainment of all requirements for both the plastic surgery residency training and hand surgery fellowship training, at the same institution. Plastic Surgery residents will be required to complete 72 months of training to be eligible for ABPS certification, however, the 12 months of Hand Fellowship training is permitted to be counted for both certification in Plastic Surgery and Hand Surgery. The JPSHS pathway allows for flexibility in plastic surgery residency training to accelerate qualified individuals into hand surgery specialization. Individuals selected to participate in JPSHS program must demonstrate completion of program requirements as outlined in the curricular requirements below. Institutions who have an approved JPSHS program, may matriculate residents effective July 1, 2023, or on July 1 of the academic year following program approval.
Crosswalk of Survey/Requirements

Resident/Fellow Survey

https://www.acgme.org/Portals/0/PFAssets/ProgramResources/ResidentFellow%20Survey-Common%20Program%20Requirements%20Crosswalk.pdf

Faculty Survey

https://www.acgme.org/Portals/0/PFAssets/ProgramResources/Faculty%20Survey-Common%20Program%20Requirements%20Crosswalk.pdf
Complement

- Categorical Positions are by training year
- Preliminary Positions are by total
- Requests for temporary increases are reviewed on an ad hoc basis
- Requests for permanent increases are reviewed only at full RC meetings

New “Uploads” Tab in ADS

Used for site visits, progress reports, and other documents requested by the ACGME
Site Visits/Self-Study

Combination of Virtual and In-person

There will be a new mechanism for visiting programs that have not had a data prompted site visit for a prolonged period of time.

What should programs do for now?

Continue to conduct and document high quality annual program evaluations.
Common Program Requirements

Revised **Common** Program Requirements (CPRs) in effect July 1, **2023**

Number of CPRs reduced

Programs can soon review revisions on website under “Future Effective Date”

TIP: Use tracked changes copy

A few revisions may impact programs, e.g., annual program evaluation requirements significantly reduced
Clinician Educator Milestones

- Joint effort of the ACGME, ACCME, AAMC, and AACOM
- Designed to help develop teaching skills
- **Not** an ACGME requirement
- Available at acgme.org > What We Do > Milestones > Resources

### Universal Pillar 1: Reflective Practice and Commitment to Personal Growth

<table>
<thead>
<tr>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
<th>Level 4</th>
<th>Level 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accepts responsibility for personal and professional development by establishing goals</td>
<td>Demonstrates openness to performance data (feedback from learners and other input) to inform goals</td>
<td>Seeks performance data episodically, with adaptability and humility</td>
<td>Consistently solicits specific performance data, with adaptability and humility, including from learners, that leads to behavior change</td>
<td>Role models consistently seeking performance data with adaptability and humility and making positive behavior changes</td>
</tr>
<tr>
<td>Identifies the factors that contribute to gap(s) between expectations and actual performance</td>
<td>Analyzes and reflects on the factors that contribute to gap(s) between expectations and actual performance</td>
<td>Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance</td>
<td>Challenges personal assumptions and considers alternatives in narrowing the gap(s) between expectations and actual performance</td>
<td>Facilitates the design and implementation of learning plans for others</td>
</tr>
<tr>
<td>Actively seeks opportunities to improve</td>
<td>Designs and implements a learning plan, with prompting</td>
<td>Independently creates and implements a learning plan</td>
<td>Uses performance data to measure the effectiveness of the learning plan and, when necessary, improves it</td>
<td>Coach others on reflective practice</td>
</tr>
</tbody>
</table>

Comments: [Not Yet Completed Level 1]
Resident/Fellow and Faculty Surveys

Surveys opened on **February 13, 2023, for 8 weeks**

This year, programs remain responsible for notifying and reminding residents/fellows and faculty to complete survey.

Starting in **2024**, likely that **ACGME** will **notify** residents/fellows and faculty when the survey opens.
Data Resource Book

Visit our learning portal at dl.acgme.org or scan the QR code below.

The ACGME’s Online Learning Portal

Learn at ACGME

We offer Faculty Development in Assessment and Evaluation, the Basics of ACGME Accreditation, and more. Visit our library of videos from our Annual Educational Conference, Baldwin Seminar Series, and other events. Connect with others in the graduate medical education community by joining a role- or topic-based discussion forum.

Have a question or need assistance? Contact desupport@acgme.org
These self-directed curricula provide the fundamentals of DEI and will enable participants to move through progressively more complex concepts.

- Trauma-Responsive Cultures
- Steps Leaders Can Take to Increase Diversity, Enhance Inclusion, and Achieve Equity
- Naming Racism and Moving to Action Part
- Women in Medicine
- Exposing Inequities and Operationalizing Racial Justice
- Patient Safety, Value, and Healthcare Equity: Measurement Matters
- American Indian and Alaskan Natives in Medicine
- And many more!

The ACGME designates this enduring material for a maximum of 18.0 AMA PRA Category 1 Credits™.
Faculty Development Courses

- Foundations of Competency-Based Medical Education
- Managing your Clinical Competency Committee
- Multi-Source Feedback
An ACGME listening session focused on creating a space for program directors to share experiences and hear from peers regarding issues related to program director well-being.

Join the event for an open discussion of challenges faced by program directors and potential solutions.

- April 11, 2023
- Registration required
Surgery Accreditation Team

Chris Fox, PhD
Executive Director,
cfox@acgme.org
312-755-5499

Kelsey Sill, MHA
Associate Executive Director,
ksill@acgme.org
312-755-5784

Caleb Mitchell
Accreditation Administrator,
cmitchell@acgme.org
312-755-7067

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The evaluation can be found in the mobile app and a link will be sent post-conference by email to attendees.

Evaluations are tied to your registered sessions.

Register/un-register sessions in the mobile app.

Deadline: March 24, 2023

Questions? cme@acgme.org
Thank You!