Conflict of Interest Disclosure

Speaker(s):  Linda Regan, MD, MEd
            Felicia Davis, MHA

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.
Today's topics...

- Review Committee Discussions
- Shaping GME: Program Requirements Revision Work
- Emergency Medicine Accreditation
- The Review Committee
- ACGME News and Updates
Review Committee Discussions
Faculty Scholarly Activity

- Evaluated on a five-year interval
- Programs must demonstrate accomplishments in at least three domains: basic science research, QI, textbook chapters, creation of curricula, etc. (IV.D.2.a)
- Scholarship dissemination must include peer-reviewed publications and articles, presentations, posters, grant leadership, etc. (IV.D.2.b)(1)-(2)
- The Review Committee expects the majority of all faculty members to contribute

Core faculty members are defined as having a significant role in the education and supervision of residents (II.B.4.), core faculty members are engaged in a broad range of activities, therefore the Review Committee expects ALL core faculty members to participate in scholarly activity.
The Review Committee looks for the availability of required resources at each participating site

I.D.2. The program, in partnership with its Sponsoring Institution, must ensure healthy and safe learning and working environments that promote resident well-being and provide for: (Core)

I.D.2.a) access to **food** while on duty; (Core)
I.D.2.b) safe, quiet, clean, and private **sleep/rest facilities** available and accessible for residents with proximity appropriate for safe patient care; (Core)
I.D.2.c) clean and private **facilities for lactation** that have refrigeration capabilities, with proximity appropriate for safe patient care; (Core)
I.D.2.d) **security and safety measures** appropriate to the participating site; and, (Core)
I.D.2.e) **accommodations for residents with disabilities** consistent with the Sponsoring Institution’s policy. (Core)
Documenting Resources

• If the participating site is a non-hospital site (high school, private practice office, fire department, etc.), there is no expectation for resources such as a lactation room and sleep facilities to be static on site at all times.

• It is expected that these sites have a clear plan of how these resources will be provided if/when needed.

• In the Accreditation Data System (ADS), the narrative description of the site should explain the plan and, using the checkboxes, indicate that the resource is available.
Describe how this participating site is used for your program.

This site offers our fellows an opportunity to experience the range of fire-based pre-hospital care from engine paramedics (responding from the firehouse) to primary ALS response opportunities. Fellows work directly with paramedic supervisors who provide care for the most critically ill patients as well as work directly with these supervisors in providing hands-on patient care and medical oversight in the field, as well as training and assisting with quality initiatives. Medical Director is a member of the EMS Fellowship's faculty.

Which of the following are available within this site for fellows (check all that apply):

- Safe, quiet, clean, and private sleep/rest facilities available and accessible with proximity appropriate for safe patient care
- Shower
- Secure areas (lockers or rooms that can be locked)
- Access to food
- Parking accessible to site
- Internet Access
- Reasonable accommodations for residents/fellows with disabilities consistent with the Sponsoring Institution's policy
- Clean and private facilities for lactation with proximity appropriate for safe patient care
- Clean and safe refrigeration resources for the storage of human milk
Distant Sites

For rotations to sites that are considered geographically distant from the primary clinical site, the Review Committee considers the following:

- Is it needed?
- Are there closer options?
- Total time away: Number of rotations/consecutive rotations
- Impact on resident well-being

Review Committee Interpretation: A participating site is considered to be geographically distant if it requires extended travel (consistently more than half an hour each way) or if the distance between the site and the Sponsoring Institution exceeds 60 miles.
All applications will ask to provide the following:

Note: Programs using geographically distant sites may be asked to complete the assessment table currently in the emergency medicine application to provide additional information.

<table>
<thead>
<tr>
<th>Geographically Distant Site Name: Click or tap here to enter text.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and type of rotation(s) Click or tap here to enter text.</td>
</tr>
<tr>
<td>How much time is spent at the site for rotations? Click or tap here to enter text.</td>
</tr>
<tr>
<td>Explain why a closer site was not selected. Click or tap here to enter text.</td>
</tr>
<tr>
<td>Provide details for the following concerns with regard to resident well-being, including any program/Sponsoring Institution efforts to mitigate them (e.g., support for travel, accommodations):</td>
</tr>
<tr>
<td>a) safety</td>
</tr>
<tr>
<td>b) financial</td>
</tr>
<tr>
<td>c) removal from family/life</td>
</tr>
<tr>
<td>d) social impact</td>
</tr>
<tr>
<td>Click or tap here to enter text.</td>
</tr>
</tbody>
</table>

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Q: What types of circumstances and events should be included in the supervision policy to demonstrate when residents should communicate with the supervising faculty member(s)? [VI.A.2.e]

A: For clarity, the supervision policy should include some examples of circumstances and events for when residents should communicate with their supervising attending. Examples could include:

- Discussion of end-of-life/DNR decisions
- Change in patient clinical status
- Patients wishing to leave against medical advice
Shaping GME: Emergency Medicine Program Requirements Revision Process
Shaping GME: Emergency Medicine Requirements Revision Process

- The specialty-specific Program Requirements for Emergency Medicine are undergoing their scheduled revision; these will be in effect for emergency medicine residents who will be practicing from 2025-2050.

- Goal: To think rigorously and creatively about what the specialty will look like in the future, recognizing the future is marked with significant uncertainty.
The Road to Requirements Revisions...

- Literature Search 2022
- Consultant Interviews 2022
- Data Mining 2023

- Strategic Scenario Planning Workshop 2022

- Public Comment on Themes and Emergency Medicine Physician Definition 2023

- Stakeholder Summit 2023

- Writing Group Gets to Work! (ongoing)

We are here!
Strategic Scenario Planning 2022

• Consultant-facilitated/four future worlds
  o Various financial, political, social structures

• What does health care look like in this future world?

• What does emergency medicine look like in this future world?

• What *education and training* would these future emergency medicine doctors need?
Background Research

- Consultant group conducted interviews:
  - Interviews with ‘influencers’ in emergency medicine
  - Interviews with new graduates in emergency medicine
  - Interviews with patients
- Literature review
- Data mining
- Public comment on themes and definition
Stakeholder Summit 2023

• Two-day meeting in Chicago
• Participants:
  o Writing Group
  o Representatives from: AAEM, AACEM, ABEM, ACEP, ACOEP, CORD, EMRA, RSA, SAEM
  o Small programs, big programs, academic programs, community programs, recent graduates
Emergency Medicine Accreditation
# Emergency Medicine Accredited Programs 2023-2024

<table>
<thead>
<tr>
<th>Specialty/Subspecialty</th>
<th>Programs</th>
<th>Approved Positions</th>
<th>On Duty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medicine</td>
<td>287</td>
<td>10,437</td>
<td>9,670</td>
</tr>
<tr>
<td>EMS</td>
<td>82</td>
<td>161</td>
<td>111</td>
</tr>
<tr>
<td>Medical Toxicology</td>
<td>32</td>
<td>121</td>
<td>105</td>
</tr>
<tr>
<td>Pediatric Emergency Medicine (EM)</td>
<td>29</td>
<td>170</td>
<td>151</td>
</tr>
<tr>
<td>Sports Medicine (EM)</td>
<td>8</td>
<td>18</td>
<td>16</td>
</tr>
<tr>
<td>Undersea and Hyperbaric Medicine (EM)</td>
<td>8</td>
<td>19</td>
<td>13</td>
</tr>
</tbody>
</table>
Emergency Medicine Residency Programs: 2013-2023

- 2013-2014: 164
- 2014-2015: 167
- 2015-2016: 179
- 2016-2017: 212
- 2017-2018: 231
- 2018-2019: 247
- 2019-2020: 265
- 2020-2021: 273
- 2021-2022: 276
- 2022-2023: 283
- 2023-2024: 287
<table>
<thead>
<tr>
<th>EM</th>
<th>Good Samaritan University Hospital Program</th>
<th>New York</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Robert Gekle, MD</td>
<td></td>
</tr>
<tr>
<td>EMS</td>
<td>Christiana Care Health Services Program</td>
<td>Delaware</td>
</tr>
<tr>
<td></td>
<td>Rick Hong, MD</td>
<td></td>
</tr>
<tr>
<td>EMS</td>
<td>Maine Medical Center</td>
<td>Maine</td>
</tr>
<tr>
<td></td>
<td>Michael Bohanske, MD</td>
<td></td>
</tr>
<tr>
<td>EMS</td>
<td>University of Pennsylvania Health System</td>
<td>Pennsylvania</td>
</tr>
<tr>
<td></td>
<td>Edward Dickinson III, MD</td>
<td></td>
</tr>
<tr>
<td>MedTox</td>
<td>UCLA David Geffen School of Medicine/UCLA Medical Center/Olive View Program</td>
<td>California</td>
</tr>
<tr>
<td></td>
<td>Evan Schwarz, MD</td>
<td></td>
</tr>
<tr>
<td>MedTox</td>
<td>University of Mississippi Medical Center Program</td>
<td>Mississippi</td>
</tr>
<tr>
<td></td>
<td>David Vearrier, MD, MPH</td>
<td></td>
</tr>
</tbody>
</table>
Most Common Citations

1. Program Director Responsibilities – Inaccurate Information
2. Evaluations – Final Evaluation “magic words,” Multisource Evaluations, Summative Evaluation
3. Institutions – Site Resources, Distant Sites, PLA
4. Key Index Procedure Minimums
5. Curriculum – Pediatrics, Peds Critical Care
Most Common Areas For Improvement

1. Educational Environment – Resident Survey
2. Evaluations
3. Program Director Responsibilities
4. Faculty Scholarly Activity
5. Board Pass Rate
The Review Committee
Member Responsibilities

- Operate under delegated authority from the ACGME Board of Directors
- Exercise fiduciary responsibility
- Evaluate program compliance with the published Program Requirements
- Revise and update the Program Requirements as scheduled
- Maintain confidentiality
- Maintain communication with programs and specialty associations
Member Terms

• Members: six-year term
  Resident member: one two-year term

• Each member evaluated by full Review Committee at end of second year

• Chair and Vice Chair elected by the Review Committee
  o Chair term = three years
  o Vice Chair term = two years
Review Committee Composition

- 3 members nominated by ABEM
- 3 members nominated by ACEP
- 3 members nominated by AMA
- 2 members nominated by AOA
- 1 public member – open call for nominations
- 1 resident member – open call for nominations

All members selected by the Review Committee from nominated candidates
## Review Committee Members 2023-2024

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution/Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Caro, MD</td>
<td>University of Florida Jacksonville</td>
</tr>
<tr>
<td>Deborah Pierce, DO</td>
<td>Albert Einstein Medical Center</td>
</tr>
<tr>
<td>Brian Clemency, DO</td>
<td>University at Buffalo (EMS)</td>
</tr>
<tr>
<td>Melissa Platt, MD</td>
<td>University of Louisville</td>
</tr>
<tr>
<td>Leah Colucci, MD</td>
<td>Yale University (Resident Member)</td>
</tr>
<tr>
<td>Kimberly Richardson, MA</td>
<td>(Public Member)</td>
</tr>
<tr>
<td>Paul Ishimine, MD</td>
<td>UCSD (Pediatric Emergency Medicine)</td>
</tr>
<tr>
<td>Linda Regan, MD (Chair)</td>
<td>Johns Hopkins</td>
</tr>
<tr>
<td>Eric Lavonas, MD</td>
<td>Denver Health (Medical Toxicology)</td>
</tr>
<tr>
<td>Jan Shoenberger, MD (Vice Chair)</td>
<td>USC</td>
</tr>
<tr>
<td>Tiffany Murano, MD</td>
<td>NY Presbyterian Columbia</td>
</tr>
<tr>
<td>Jill Stefanucci-Uberti, DO</td>
<td>St. Elizabeth Boardman</td>
</tr>
<tr>
<td>Michael Wadman, MD</td>
<td>University of Nebraska</td>
</tr>
</tbody>
</table>
# Meeting Dates

<table>
<thead>
<tr>
<th>Meeting Dates</th>
<th>Agenda Close</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 7-9, 2024</td>
<td>October 20</td>
</tr>
<tr>
<td>April 18-20, 2024</td>
<td>February 9</td>
</tr>
<tr>
<td>August 28-29, 2024</td>
<td>June 14</td>
</tr>
</tbody>
</table>

Completed application = Common application + specialty-specific application + Site Visit Report
Congratulations!

Barbara Ross-Lee, DO Diversity, Equity, and Inclusion Award
The Barbara Ross-Lee, DO Diversity, Equity, and Inclusion Award honors ACGME-accredited Sponsoring Institutions and programs, as well as specialty organizations and non-profit organizations working to diversify the underrepresented physician workforce and create inclusive workplaces that foster humane, civil, and equitable environments.

The 2024 recipients include:

• American Board of Emergency Medicine (Specialty Organization)

• Baylor College of Medicine, Henry JN Taub Emergency Medicine Residency (Program)
Debra L. Dooley GME Program Coordinator Excellence Award
The Debra L. Dooley GME Program Coordinator Excellence Award is given to program coordinators in recognition of their in-depth understanding of the accreditation process, excellent communication and interpersonal skills, and projects to improve residency and fellowship programs. Congratulations to:

Graceann Endicott
Cooper University Health Care/Cooper Medical School of Rowan University; Camden, New Jersey; Emergency Medicine
ACGME News and Updates
ACGME Site Visits – Continued Accreditation Status

- The program 10-Year Accreditation Site Visit program has been discontinued
- Program Self-Study currently paused, but will be reconfigured and no longer linked to a site visit
- All related dates have been removed from all program profiles in ADS
- Starting in 2024, the ACGME will conduct site visits annually for approximately 1-2 percent of programs with Continued Accreditation that have not had a site visit in approximately 10 years or more
- These site visits will be identified through a sampling process
- All selected programs for 2024 were notified in January of the site visit target date (May-July 2024)

Questions can be directed to accreditation@acgme.org. Site Visit FAQs are located on the ACGME website.
Learn at ACGME Redesign
Coming Soon!

Visit dl.acgme.org or scan the QR code.

Have a question or need assistance? Contact us! desupport@acgme.org
Remediation Toolkit

- 11 modules authored by renowned experts in the field
- Equips participants with tools for addressing needs of struggling learners
- CME offered after completion

If You Build It, They Will Come:
Designing a Centralized Remediation Program

Karen M. Warburton, MD, FACP, FASN
Associate Professor of Medicine
Director, Clinician Wellness Program
Director, GME Advancement
University of Virginia School of Medicine

The ACGME designates this enduring material for a maximum of 5.25 AMA PRA Category 1 Credits™.
Applying for Program Accreditation Course

- Three-part course and step-by-step guide

- For those new to the process, as well as a refresher for experienced users

- Explanation of key steps, timeline, and the review process after submission
Faculty Development Toolkit: Improving Assessment Using Direct Observation

- Faculty development materials around direct observation and feedback
- Evidence-based video prompts
- Answer keys and facilitator guides
- Microlearning lessons with associated slides and guides
Program Coordinator Course

- For **new and seasoned** coordinators
- Covers a **wide range of topics** important to program coordinators
- **Videos** from working coordinators
- **Summer 2024**
Questions?
Thank You