SES091: Review Committee for Thoracic Surgery Specialty Update

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Chris Fox, PhD
Conflict of Interest Disclosure

Speaker(s): Mark Iannettoni, MD, MBA
            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 Items
  ▪ Responding to Citations
• Specialty Updates
• 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>Mark Iannettoni, MD, MBA, FACS, FCCP</td>
<td>Chair</td>
<td>Sandra Starnes, MD, FACS, FCCP</td>
<td>Vice-Chair</td>
</tr>
<tr>
<td>Thomas Beaver, MD, MPH</td>
<td>Member</td>
<td>James Jaggers, MD, FACS</td>
<td>Member</td>
</tr>
<tr>
<td>Robert Shen, MD, FACS, FCCP</td>
<td>Member</td>
<td>Mark Swofford, PhD, MHA, FACHE</td>
<td>Public Member</td>
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<tr>
<td>Stephen Yang, MD, FACS, FCCP</td>
<td>Member</td>
<td>Akshitha Vijayakumar, MD</td>
<td>Resident Member</td>
</tr>
<tr>
<td>Cameron Wright, MD</td>
<td>Ex-Officio, ABTS</td>
<td>Patrice Blair, DrPH, MPH</td>
<td>Ex-Officio - ACS</td>
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Review Committee Meetings

March 22, 2024
Agenda Close Date: January 5, 2024
New Applications Deadline: November 24, 2023

December 6-7, 2024
Agenda Close Date: September 27, 2024
New Applications Deadline: July 12, 2024
What Does the Review Committee Do?

- Peer Review
- Determination of a program’s “substantial compliance” against a defined set of standards
Review of program information, including:

- Annual/multi-year Resident/Fellow and Faculty Survey
- Program information in Accreditation Data System (ADS)
- Response to citations
- Site visit reports
- Case Log data
- Performance on certification examinations
Possible Accreditation Statuses

- Application
- Initial Accreditation
- Initial w/ Warning
- Continued w/o Outcomes
- Continued Accreditation
- Continued w/ Warning
- Probation
- Withdrawal
<table>
<thead>
<tr>
<th>Specialty</th>
<th>Accredited Programs</th>
<th>Applications (03/02/24)</th>
<th>Approved Complement (23-24)</th>
<th>Filled Complement (23-24)</th>
</tr>
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<tbody>
<tr>
<td>Thoracic Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent</td>
<td>75</td>
<td>3</td>
<td>317</td>
<td>254 (80%)</td>
</tr>
<tr>
<td>Integrated</td>
<td>34</td>
<td>2</td>
<td>318</td>
<td>256 (80%)</td>
</tr>
<tr>
<td>Congenital Cardiac Surgery</td>
<td>17</td>
<td>0</td>
<td>17</td>
<td>10 (59%)</td>
</tr>
</tbody>
</table>
## Current Accreditation Status

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Initial Accreditation</th>
<th>Continued Accreditation</th>
<th>Continued Accreditation with Warning</th>
<th>Probation/Withdrawal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thoracic Surgery</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent</td>
<td>2 (3%)</td>
<td>71 (95%)</td>
<td>2 (3%)</td>
<td>0</td>
</tr>
<tr>
<td>Integrated</td>
<td>4 (12%)</td>
<td>29 (85%)</td>
<td>1 (3%)</td>
<td>0</td>
</tr>
<tr>
<td>Congenital Cardiac Surgery</td>
<td>4 (24%)</td>
<td>13 (76%)</td>
<td>0</td>
<td>0</td>
</tr>
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</table>

#ACGME2024
Data Collection (January - September)

Executive Committee Review (November)

Review Committee Review and Decision (December and March)

Program Notification
Thoracic Surgery - Independent
2022-23 Citations (34 Total)
Thoracic Surgery - Integrated
2022-23 Citations (23 Total)
Three-Year Citation Trends: Integrated

<table>
<thead>
<tr>
<th>Category</th>
<th>2020-21</th>
<th>2021-22</th>
<th>2022-23</th>
</tr>
</thead>
<tbody>
<tr>
<td>PD Responsibilities</td>
<td>3</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>Faculty Responsibilities</td>
<td>3</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Education</td>
<td>3</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Environment</td>
<td>3</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Service to Education</td>
<td>3</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Feedback</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Board Exams</td>
<td>2</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Institutional/Resources</td>
<td>0</td>
<td>1</td>
<td>2</td>
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</tbody>
</table>
Board Pass Rate - Fifth Percentile (2023)

*The board pass rate will CHANGE each year
**Must achieve higher than the fifth percentile OR 80%

Thoracic Surgery - Independent:
ABMS Written: 0%
ABMS Oral: 35%

Thoracic Surgery - Integrated:
ABMS Written: 66.67%
ABMS Oral: 36.66%

Congenital Cardiac Surgery:
ABMS Written: 30%
ABMS Oral: 50%
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/Fellow and Faculty Surveys, updated program information, performance metrics, Case Logs, etc.)
Review Committee Updates
## Three Pathways

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Existing Thoracic Pathway</th>
<th>Existing Cardiothoracic Pathway</th>
<th>New Cardiac Pathway</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Subtotal</td>
<td>Total</td>
<td>Subtotal</td>
</tr>
<tr>
<td><strong>CONGENITAL HEART DISEASE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Congenital Heart Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Surgeon</td>
<td>10</td>
<td>20</td>
<td>5</td>
</tr>
<tr>
<td>First Assistant</td>
<td>10</td>
<td>15</td>
<td></td>
</tr>
<tr>
<td><strong>ADULT CARDIAC</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acquired Valvular Heart Disease</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Aortic Valve Repair/Replacement</td>
<td>15</td>
<td>30</td>
<td>25</td>
</tr>
<tr>
<td>Mitral Valve Repair/Replacement</td>
<td>5</td>
<td>15</td>
<td>10</td>
</tr>
<tr>
<td>Mitral Valve Repair</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Mitral Valve Replacement</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Tricuspid Valve Repair/Replacement, Anuloplasty</td>
<td>5</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>TAVR as primary</td>
<td></td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>TAVR as assistant</td>
<td>5</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Transcatheter Mitral/Tricuspid Intervention</td>
<td></td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>
Robotic Checkbox

Has been added to the Case Log System
Transcatheter Aortic Valve Replacement (TAVR)

Changes to logging cases:
TAVR/transcatheter aortic valve implantation (TAVI) with checkbox for the type of approach:

- transfemoral
- trans axillary
- trans carotid
- open transaortic
- open transapical
4+3 Joint Surgery/Thoracic Surgery Programs

Remember to designate which experiences count toward general surgery and thoracic surgery during the PGY-4 and PGY-5 levels.
Accreditation and Recognition Site Visits

March 2024 and beyond

- ACGME decision to no longer schedule 10-year accreditation site visits for programs as previously conducted pre-March 2020
- Review Committees will request site visits for programs on any Continued Accreditation status at their discretion (e.g., site visits may be prompted by the annual data review, a complaint, or for assurance)
- Review of program Self-Study will not be connected to a site visit; program Self-Study will continue to be required per Common Program Requirements (V.C.2.) and Institutional Requirements (I.B.4.a).(4)); Institutional Review Committee (IRC) will develop guidance for designated institutional officials (DIOs) and program directors regarding program Self-Study
Accreditation and Recognition Site Visits

Site visit modality (in person and remote)

- Both modalities of site visits
- Assignment ~25% random in-person site visits
Survey Crosswalk

Resident/Fellow Survey

• https://www.acgme.org/globalassets/pfassets/programresources/residentsurvey_cprcrosswalk.pdf

Faculty Survey

• https://www.acgme.org/globalassets/pfassets/programresources/facultysurvey_cprcrosswalk.pdf
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, CME 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
Program Coordinator Course

➢ For **new and seasoned** coordinators

➢ Covers a **wide range of topics** important to program coordinators

➢ **Videos** from working coordinators

➢ **Summer 2024**
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Questions?
Thank You