

Specialty Update – Colon and Rectal Surgery

Jennifer S. Beaty, MD

Chair, Review Committee for Colon and Rectal Surgery

Kristen Ward Hirsch, MBA – Executive Director

Conflict of Interest Disclosure

Speaker(s): Jennifer S. Beaty, MD; Kristen Ward Hirsch, MBA

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 health care products used by or on patients.

Discussion Topics

- ❖ Review Committee and Staff Members
- ❖ Annual Review – Overview and Data Elements
- ❖ Accreditation and Program Statistics
- ❖ Case Logs and Board Pass Rates
- ❖ Review Committee Updates
- ❖ Non-accreditation status requests
- ❖ ACGME Program Accreditation Site Visit Update
- ❖ ACGME Resources



ACGME Mission

The Mission of the ACGME is to improve health care and population health by assessing and enhancing the quality of resident and fellow physicians' education through advancements in accreditation and education.

ACGME Mission, Vision, and Values



Review Committee Members and Staff

ACGME President and CEO



Debra F. Weinstein, MD

Dr. Deb Weinstein assumed the role of ACGME President and Chief Executive Officer (CEO) on January 1, 2025.

Most recently served as Executive Vice Dean for Academic Affairs and Professor of Learning Health Sciences and Internal Medicine at the University of Michigan Medical School, and Chief Academic Officer for Michigan Medicine.

Review Committee Members

Jennifer S. Beaty, MD
Chair

Danita Collins, MBA,
FACHE
Public Member

Joshua I. S. Bleier, MD

Scott R. Kelley, MD

Jamie A. Cannon, MD

M. Shane McNevin, MD

Robert K. Cleary, MD
Vice-Chair

Stacy Ranson, MD
Resident Member



ACGME Review Committee Staff

Kristen Ward Hirsch, MBA
Executive Director

Citlali Meza, MPA
Associate Executive Director

Jennifer Luna
Associate Executive Director

Stephanie Lose
Accreditation Administrator

Deanna Eallonardo
Accreditation Administrator

Accreditation
Data System
(ADS)

Upcoming Review Committee Meetings

❖ May 2, 2025 (Deadline: March 21, 2025)

Applications with completed site visits and non-accreditation status requests accepted

❖ September 12, 2025

Applications and Initial Accreditation with completed site visits and increase in complement requests accepted

Future meeting dates will be posted to the [Colon and Rectal Surgery webpage](#).

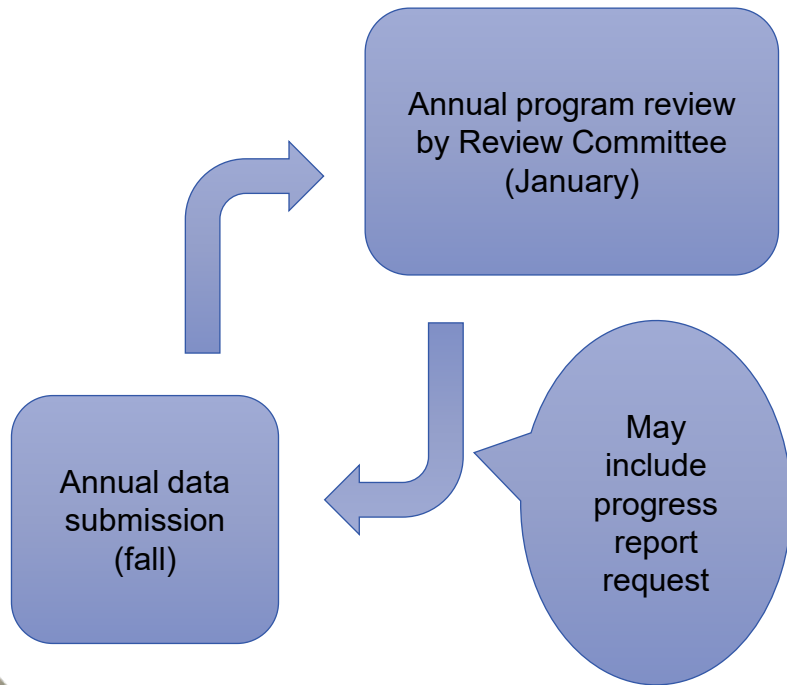


Annual Program Review

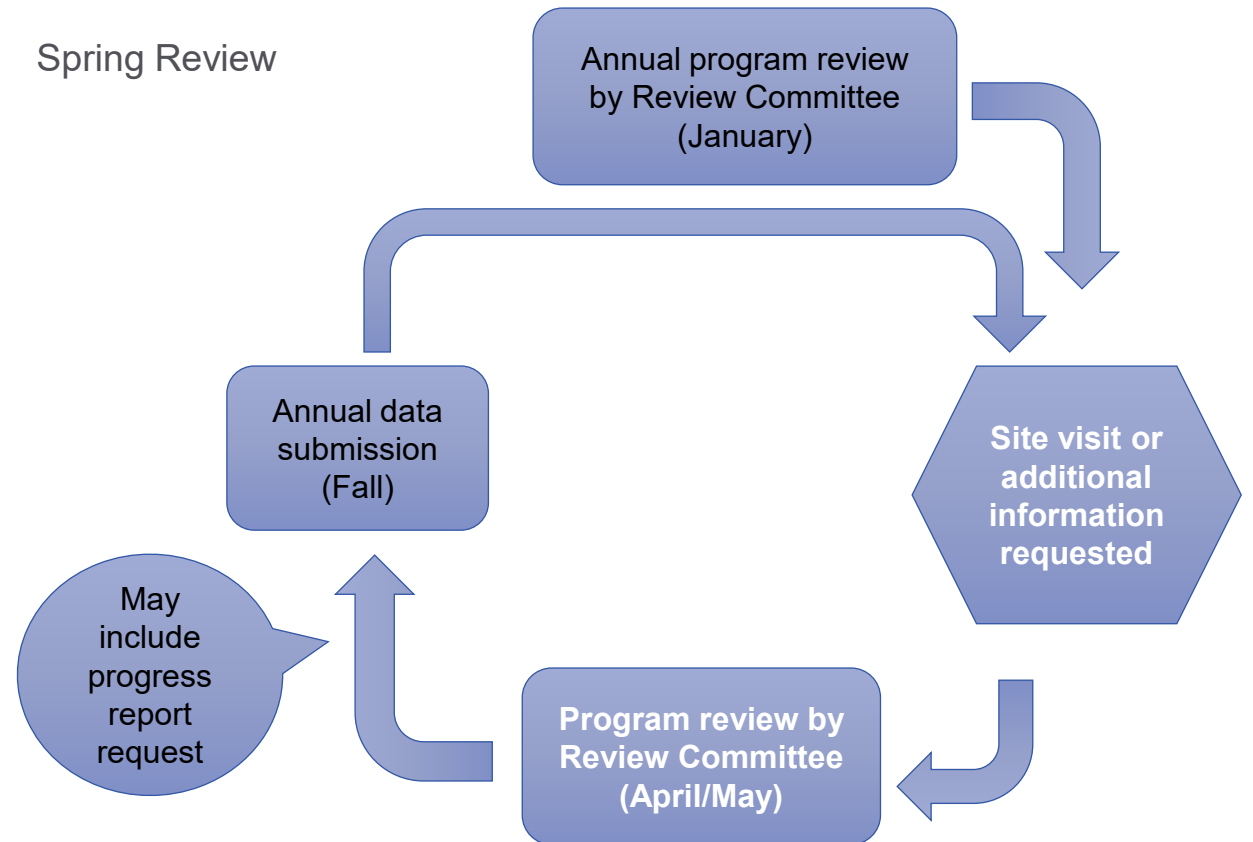
Overview and Data Elements

Annual Program Review – Overview

Winter Review



Spring Review



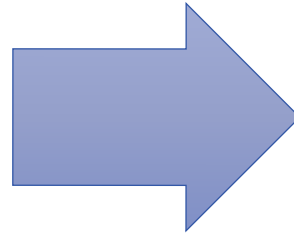
Annual Program Review – Data Elements

All data reviewed will be from the most recently completed academic year **except** for major changes and response to citations.

- ❖ ADS Annual Update (program changes, program attrition, scholarly activity)
- ❖ Graduate Case Log data
- ❖ Board pass rate
- ❖ Surveys (Resident and Faculty)
- ❖ Omission of data

Annual Program Review

Review Committee may cite for omission if the required survey response rates are not achieved, occurrences for incomplete Annual Update or core faculty certification



Citations for substantial **non-compliance** for *domains* may result if declining trends seen

- Substantial non-compliance means significantly below 60% for any single item in a domain or less than 70% on two items in a domain
- Individual questions may be cited at committee's discretion

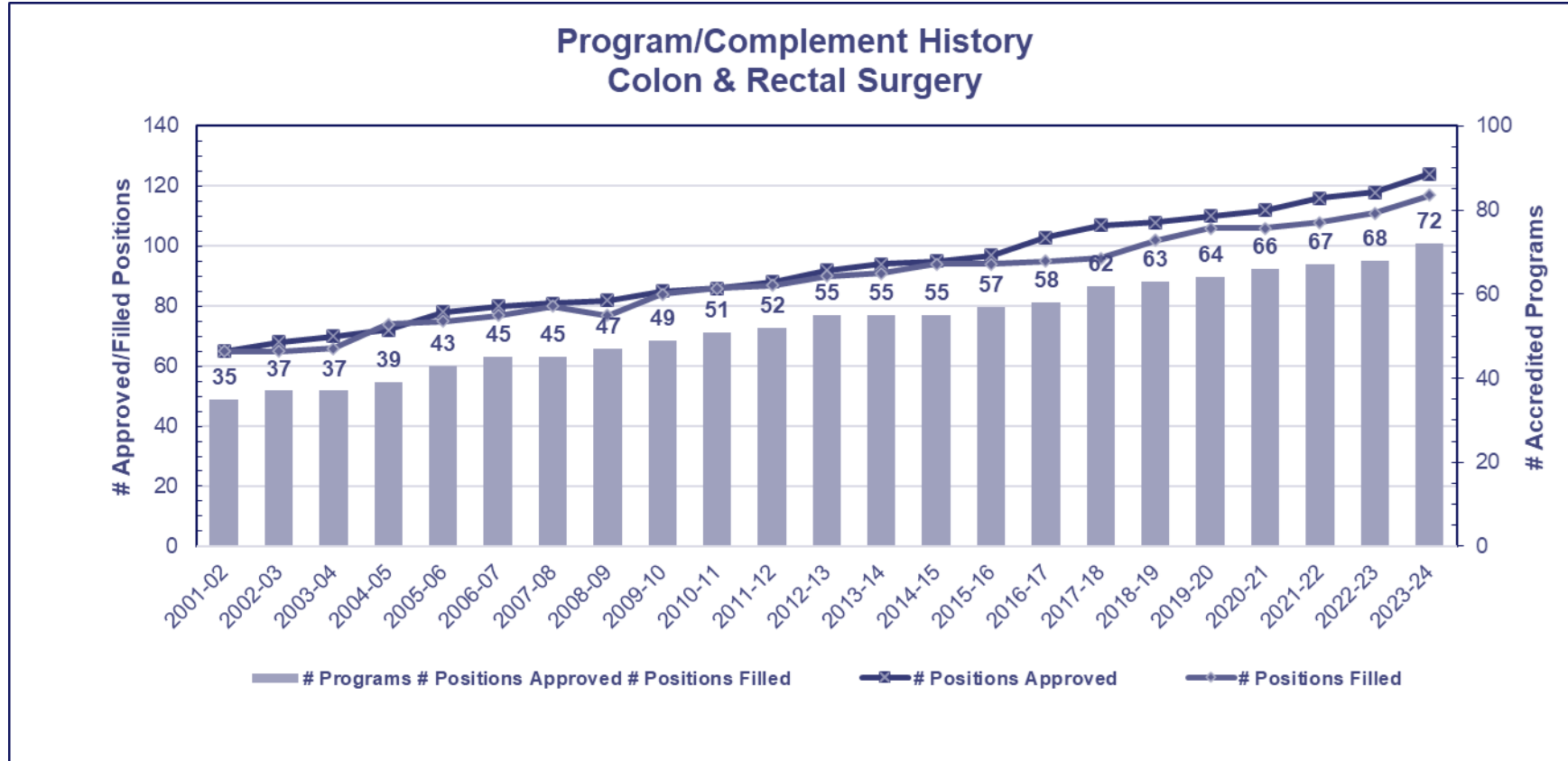


Accreditation and Program Statistics

Current Programs (AY 2023 – 2024)

| Accreditation Status | # Programs |
|--|------------|
| Continued Accreditation | 60 |
| Continued Accreditation with Warning | 4 |
| Continued Accreditation without Outcomes | 1 |
| Initial Accreditation | 4 |
| Initial Accreditation with Warning | 1 |
| Total Accredited Programs | 70 |
| New Applications | 0 |

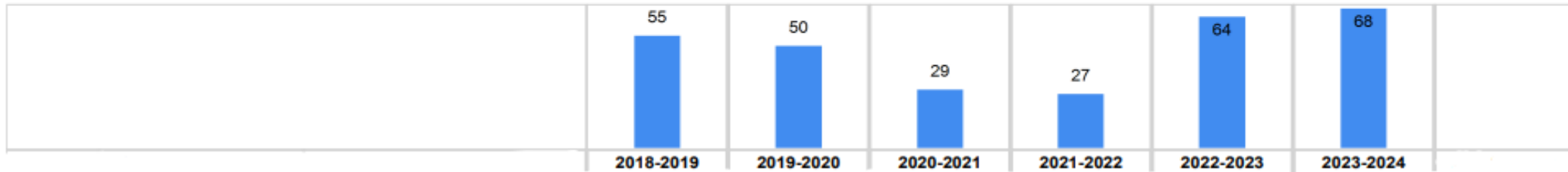
Program/Complement History (2003-2024)



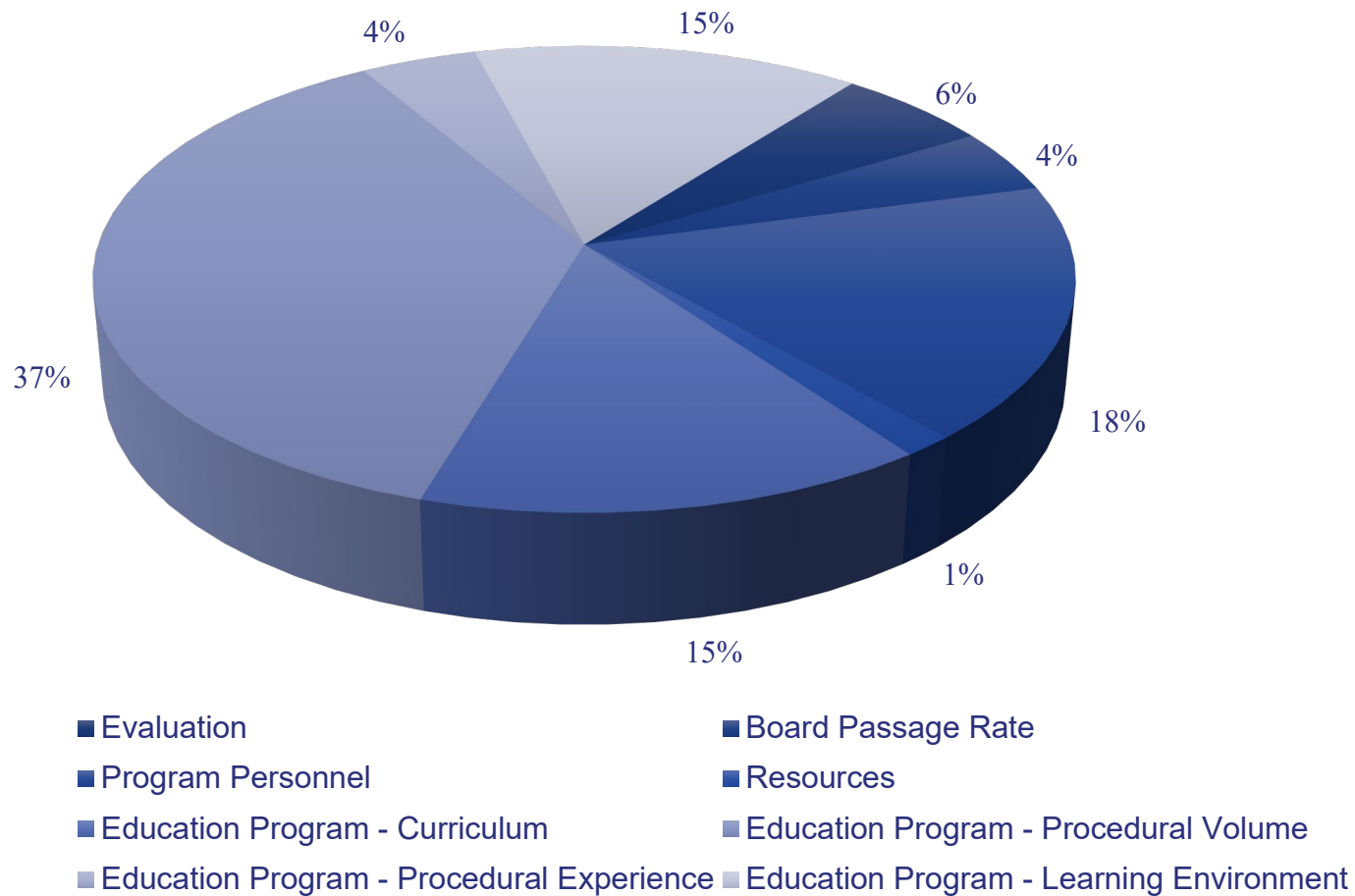
Citation Statistics by Academic Year (2018-2024)

Citation Statistics by Academic Year

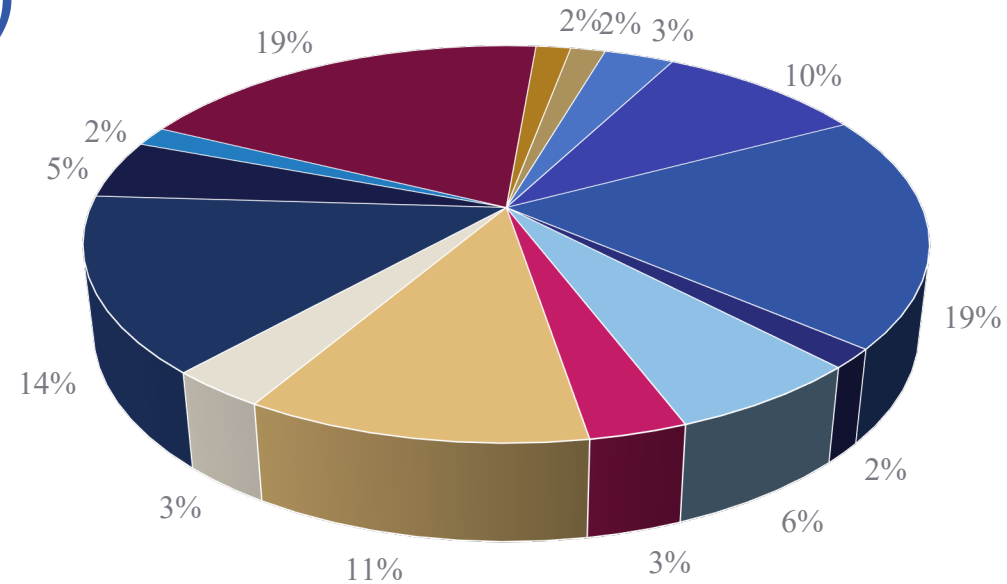
Specialty: Colon and rectal surgery
United States



AY 2023-2024 Citations for Core (N= 68)



AY 2023-2024 Areas for Improvement (AFIs) for Core (N=63)



- Curriculum Organization
- Educational Content
- Evaluations
- Faculty Supervision and Teaching
- Learning and Working Environment
- Professionalism
- Resident Well-Being
- Diversity and Inclusion
- Educational Environment
- Faculty Scholarly Activity
- Failure to Provide Required Information
- Patient Safety
- Program Evaluation
- Resources



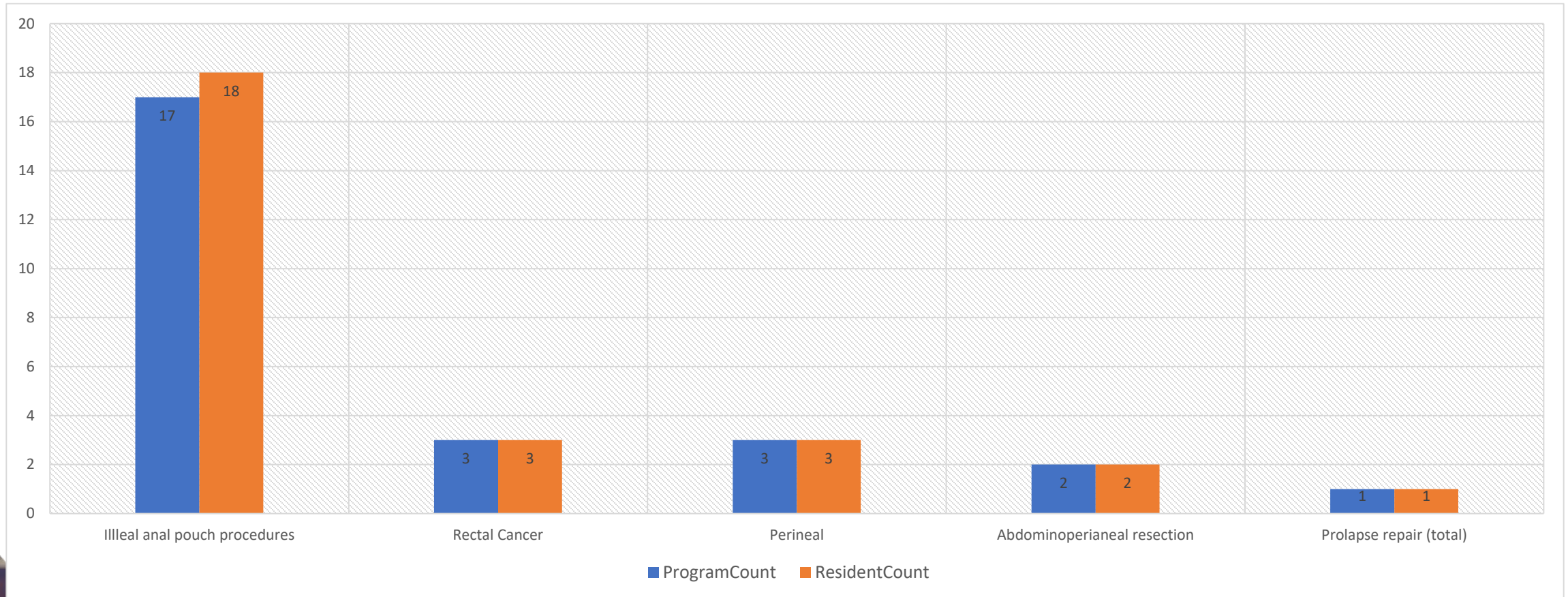
Case Log and Board Pass Rate



2024 Annual Program Review – Case Minimum Fails

| 2023-2024 Case Log Report | # Programs | # Minimums Fail |
|---------------------------|------------|-----------------|
| Colon and Rectal Surgery | 17 | 5 |

AY 2023-2024 Minimums Fail By procedure (N=17)



2024 Annual Program Review

Board Pass Rate

- First-time takers **only** during the most recent **three** years reported by American Board of Colon and Rectal Surgery (ABCRS) to the ACGME
 - Bottom fifth percentile nationally for the specialty **AND**
 - Subject to citation if <80% pass rate
- Written fifth percentile: 2022 – 2024 = 66.67%
 - 4 programs failed
- Oral fifth percentile: 2022 – 2024 = 60%
 - 10 programs failed



Review Committee Updates




Specialty Webpage

Colon and Rectal Surgery

Specialties

The Review Committee for Colon and Rectal Surgery provides these resources to accredited programs and those applying for accreditation.

Documents

Share This    

 Colon and Rectal Surgery Block Diagram

 Colon and Rectal Surgery Case Log Instructions

 Colon and Rectal Surgery Case Log Update

 Colon and Rectal Surgery Minimum Case Numbers

 Participating Site Change Guidelines

 Report Form for Institutional Data

 Requests for Changes in Resident Complement

New Case Log Minimums and Implementation

| SURGICAL MANAGEMENT | Min # |
|---|----------|
| Anorectal Procedures | |
| Abscess procedures | 2 |
| Condyloma / High Resolution Anoscopy procedures | 2 |
| Fistula procedures | 15 (↓15) |
| - Complex repairs | 10 |
| Fecal incontinence procedures | 2 |
| Fissure procedures | 4 (↑2) |
| - Internal sphincterotomy | 2 |
| Hemorrhoid procedures | 10 (↓10) |
| - Excisional hemorrhoidectomy | 5 (↓5) |
| Pilonidal procedures | 5 |
| Transanal excision | 5 (↓5) |

New Case Log Minimums and Implementation

| | |
|---|--------|
| Abdominal / Pelvic Procedures | |
| Segmental colectomy | 50 |
| Minimally invasive resections | 30 |
| Low anterior resection | 20 |
| Abdominoperineal resection | 5 |
| Ileal anal pouch procedures | 3 (↓2) |
| Prolapse procedures | 6 |
| - Perineal | 2 (↓1) |
| Stoma procedures | 20 |
| - Stoma complications (fistula, hernia, prolapse, retraction, stenosis) | 5 |





New Case Log Minimums and Implementation

| | |
|--|-----|
| Anoscopy / Endoscopy Procedures | |
| Anoscopy / Proctoscopy | 30 |
| Colonoscopy | 140 |
| - Interventional | 30 |

New Case Log Minimums and Implementation

| DISEASE MANAGEMENT | Min # |
|--|----------|
| | |
| Anorectal / Pelvic Floor & Functional GI Disorders | |
| Anal fissure | 5 (↓10) |
| Anal fistula | 10 (↓15) |
| Condyloma | 2 |
| Hemorrhoids | 5 (↓10) |
| Pelvic floor evaluation (AR manometry, rectal compliance, balloon expulsion, PNTML, ultrasound, defecography) AND functional GI disorders (constipation, incontinence, rectocele, pelvic pain, diarrhea) | 15 (↓25) |
| Pilonidal | 2 |

New Case Log Minimums and Implementation

| | |
|---|----------|
| Abdominal / Pelvic | |
| Carcinoma of the colon | 15 (↓2) |
| Carcinoma of the rectum | 25 (↑10) |
| - Rectal cancer dissections | 15 (↓5) |
| Genetic neoplasia | 3 |
| Diverticular disease | 15 (↓5) |
| Crohn's disease | 20 |
| Ulcerative colitis | 15 |
| Ileal anal pouch management (bleeding, fistula, leak, neoplasia, obstruction, pouchitis, prolapse, stricture, volvulus) | 3 |
| Rectal prolapse | 10 |

Program Requirement Revision Update

- The revision process for Program Requirements for Graduate Medical Education in Colon and Rectal Surgery began in spring 2023.
- Proposed Program Requirements were posted on the public ACGME website for comment in fall 2024.
- Approved by the Committee on Requirements (standing committee of the ACGME Board of Directors)
 - Expected to go into effect **July 1, 2026**.



ACGME Program Accreditation Site Visit Update 2025

Background

Previously, all programs with a status of Continued Accreditation, Continued Accreditation with Warning, and Continued Accreditation without Outcomes received a Self-Study date and a 10-Year Accreditation Site Visit date. The review of the program Self-Study was incorporated into the 10-Year Accreditation Site Visit process.

- Between March 2020 and October 2023, program Self-Studies and 10-Year Accreditation Site Visits were postponed and delinked.
- Effective October 2023:
 - The ACGME discontinued 10-Year Accreditation Site Visits for programs.
 - The program Self-Study will continue to be a program requirement (V.C.2.) but it will no longer be linked or reviewed during a site visit.
 - All program Self-Study and 10-Year Accreditation Site Visit dates in the Accreditation Data System (ADS) were removed in fall 2023.



Updated Model for Site Visits for Programs on Continued Accreditation Statuses

- The ACGME has developed an updated sustainable model for improvement and assurance for its more than 11,000 accredited programs on Continued Accreditation statuses.
- In 2024, the ACGME conducted site visits for 149 programs on Continued Accreditation that have not had a site visit in approximately nine years or more. These site visits were identified through a sampling process and will support the ACGME's assurance responsibility to the public.
- For 2025, ACGME chose 200 programs for these randomly selected site visits and notifications were sent out in November with future approximate site visit target dates ranging from April to October 2025.
- For these programs, Field Activities initiates the scheduling process by requesting site visit blackout dates.
- Separately, Review Committees may request site visits for programs on Continued Accreditation statuses at their discretion after the annual review of data or in response to a complaint.

The Program Self-Study

- The ACGME encourages programs to incorporate a self-study into the Annual Program Evaluation process and track ongoing progress and program improvements as outlined in the **Common Program Requirements** (V.C.2.).
- For questions regarding Graduate Medical Education Committee (GMEC) oversight (**Institutional Requirements** I.B.4.a).(4)) relating to the program Self-Study, contact Institutional Review Committee staff (irc@acgme.org).

Other Related Updates/Questions

- Institutional Self-Studies and 10-Year Accreditation Site Visits will proceed according to the **Institutional Review Committee's current process**.
- Programs with Osteopathic Recognition will have a 10-Year Recognition Site Visit, without completion of a Self-Study.
- Questions can be directed to accreditation@acgme.org.
- **Site Visit FAQs** are located on the ACGME website.



ACGME Resources

Mental Health and Well-Being During Transitions

Studies indicate that the transition from medical school to residency is particularly difficult

- This new resource aims to help ease that transition
- Easy-to-implement systems- and individual-oriented strategies
- Designed to help Sponsoring Institutions and programs support first-year residents
- Access the resource from “Well-Being” on the home page of Learn at ACGME

Claim Your CME Today!

Complete the Evaluation for CME or Certificate of Completion!

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

Evaluations are tied to your registered sessions.

Register/un-register for sessions in the Conference Mobile App.

Deadline – **March 14, 2025**

Questions? cme@acgme.org

Questions?