

# Colon and Rectal Surgery

Jennifer S. Beaty, MD

Chair, Review Committee for Colon and Rectal Surgery

# Speaker(s): Jennifer Beaty, MD

## Conflict of Interest Disclosure

### 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.



# Housekeeping

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## Session Etiquette

- Fire Marshal Code: Attendees cannot stand against the walls or block exits
- Please refrain from placing personal items on chairs next to you
- If there is time for questions, please keep questions brief to maximize participation

## Main Locations

- Main Stage and Information Desk: Marriott Marquis
- Exhibit Hall: San Diego Convention Center

## Emergencies

- Marriott Marquis security: Call 911 first, then call 415-531-3845
- San Diego Convention Center security: Call 619-525-5911 or ext. 5911 from wall mount house phones
- In the event of an emergency, listen to intercom instructions
- To report an incident, visit the ACGME Information Desk to fill out an incident report.

# Discussion Topics

- ❖ Review Committee and Staff Members
- ❖ Annual Review –Data Elements
- ❖ Accreditation and Program Statistics
- ❖ Case Logs and Board Passage Rates
- ❖ ACGME Updates
- ❖ 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

# Review Committee Members

Jennifer S. Beaty, MD  
Chair

Danita Collins, MBA, FACHE  
Public Member

Robert K. Cleary, MD  
Vice-Chair

Kellie Mathis, MD

Jamie A. Cannon, MD

M. Shane McNevin, MD

Joshua I. S. Bleier, MD

Stacy Ranson, MD  
Resident Member



Welcome Dr. Kellie Mathis  
to the Review Committee  
of Colon & Rectal Surgery

# 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

Lucy Nicholls  
Accreditation  
Data System  
(ADS)

# Where to go for help?

## **Review Committee Staff**

[Kwardhirsch@acgme.org](mailto:Kwardhirsch@acgme.org)

[cmeza@acgme.org](mailto:cmeza@acgme.org)

[slose@acgme.org](mailto:slose@acgme.org)

- Program Requirements
- Letters of Notification
- Complement requests
- Procedural Log content

## **Milestones Staff**

[milestones@acgme.org](mailto:milestones@acgme.org)

- Milestones

## **ADS Staff**

[ADS@acgme.org](mailto:ADS@acgme.org)

- ADS
- Surveys
- Case Log System

## **Field Activities Staff**

[fieldrepresentatives@acgme.org](mailto:fieldrepresentatives@acgme.org)

- Site Visit
- Self-Study

# Upcoming Review Committee Meetings

Future meeting dates will be posted to the Colon and Rectal Surgery webpage.



- ❖ Spring Meeting: April 24, 2026
  - ❖ agenda deadline: March 13, 2026
  - Applications with completed site visits and complement increase requests accepted
  
- ❖ Fall Meeting TBD

# Annual Program 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 Passage Rate
- ❖ Surveys (Resident and Faculty)
- ❖ Omission of Data

# Major Changes and Other Updates

**Communicate to the Review Committee action plan and initial results regarding:**

Low ACGME Survey ratings

Missed procedural minimums

**Program changes:** rotations, faculty growth, best practices

**Program challenges:** action plans and results, if applicable

# Responding to Citations

- Keep in mind the audience: physician GME leader who does not know your program or institution
  - Be clear, concise, and frank
- Demonstrate that you have gotten to the root of the non-compliant area and **outline implemented action plan**
- Describe outcomes (e.g., survey trending up, procedural minimums met)
  - If goals not met, explain why and outline next steps

# AY 2024 – 2025 Statistics

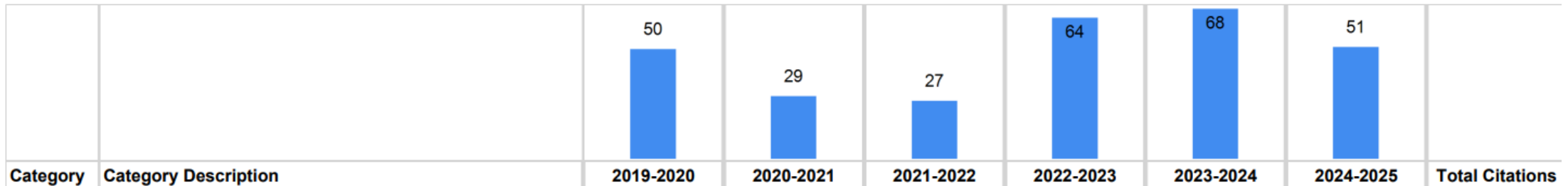
# Current Programs (AY 2024 – 2025)

Accreditation Status	# Programs
Continued Accreditation	64
Continued Accreditation with Warning	3
Initial Accreditation	7
Initial Accreditation with Warning	0
<b>Total Accredited Programs</b>	<b>74</b>

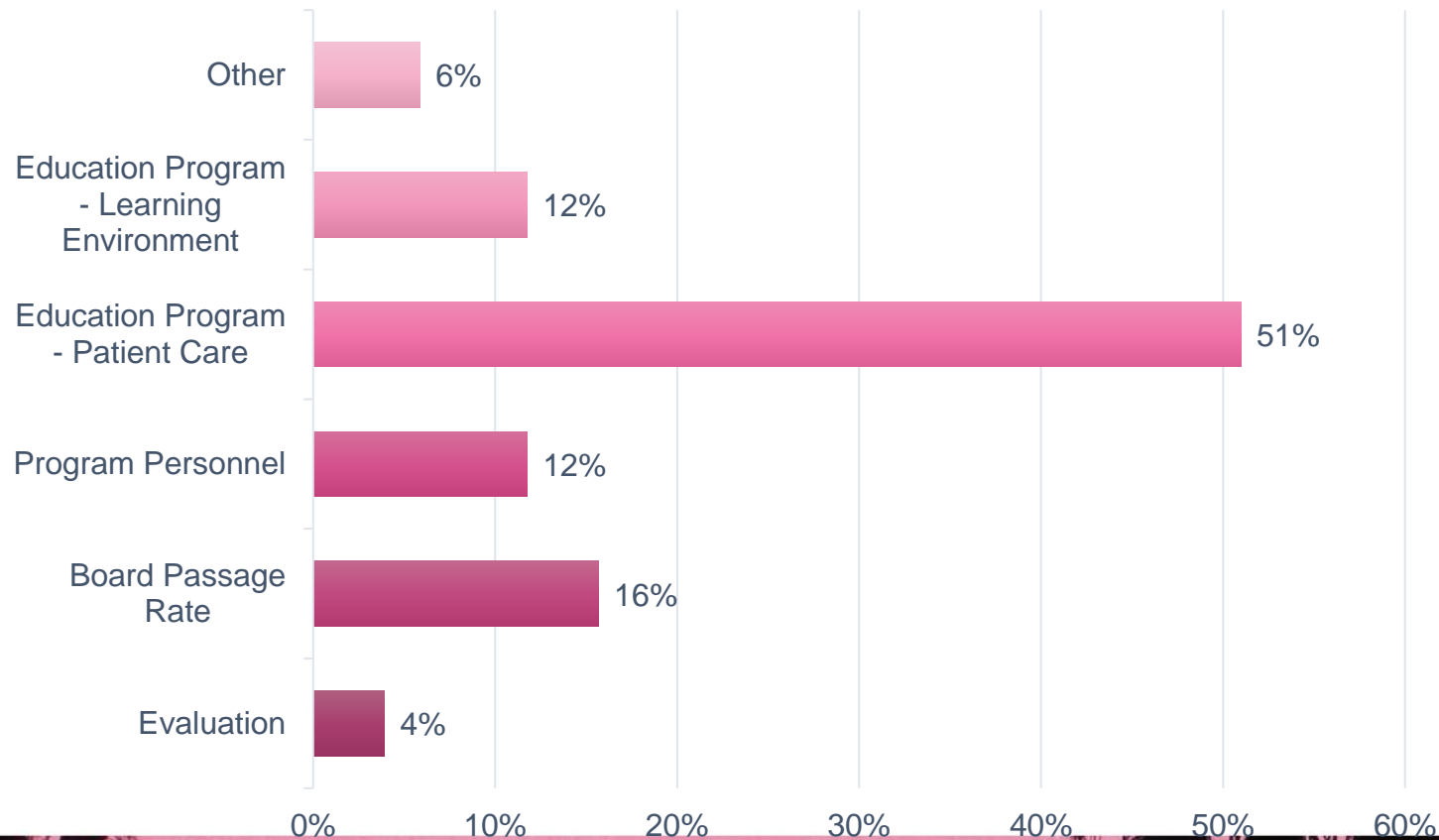
# Citation Statistics by Academic Year (2019-2025)

## Citation Statistics by Academic Year

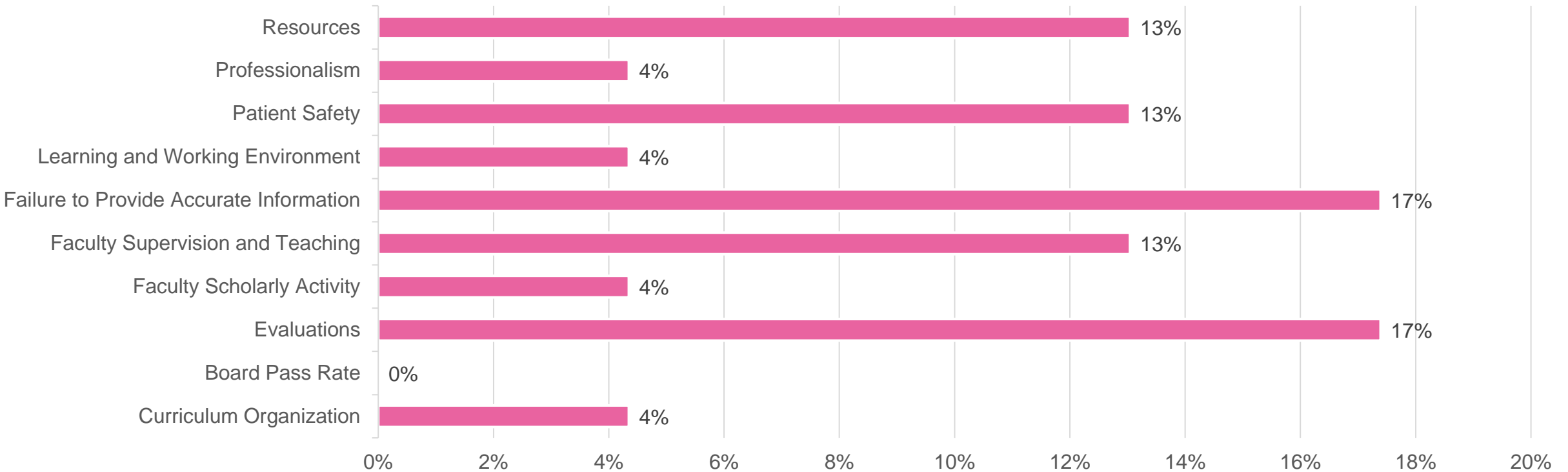
Specialty: Colon and rectal surgery  
United States



# AY24 – 25 Citations for Core (N= 51)



# AY24 – 25 Areas for Improvement (AFIs) for Core (N=23)



# Board Passage Rate

# 2025 Annual Program Review

## Board Passage 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: 2023 – 2025 = 66.67%

Oral fifth percentile: 2023 – 2025 = 66.67%

# ACGME Updates

# Implementation of Nutrition Requirements

- ❖ Due to the raising national interest in nutrition, each specialty RC has been asked to consider including (additional) nutrition requirements
- ❖ ACGME is undertaking this work across all specialty RCs this winter and spring
- ❖ Specialties that propose adding nutrition requirements will post those for public comment in April-June
- ❖ Effective date of July 1, 2027

# Common Program Requirement Revisions

## ACGME Process for Revisions



**ACGME has a 3-year timeline**



**Board appointed the Task Force in the Fall**



**Task Force meets early 2025 with new CEO**



**Article defining goals, process, timeline in JGME**



**Commissioned papers\* received – goal is to publish in 2025**

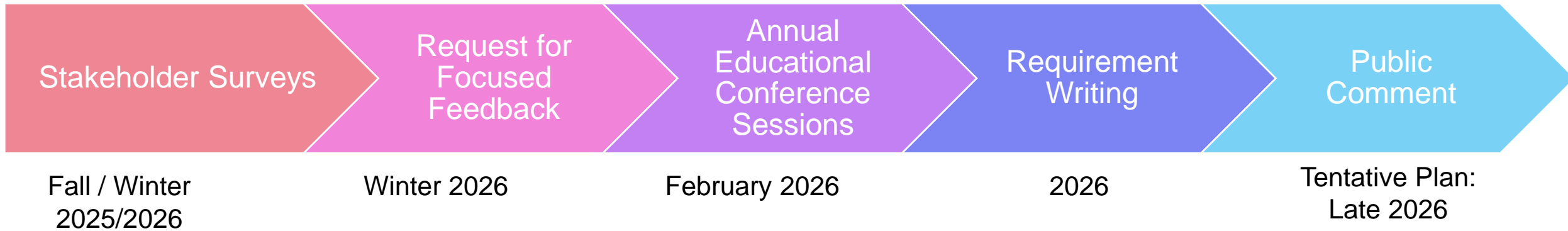


**AEC Session 2025**

### \*Commissioned papers:

- **Work Hours**
- **Rotational Transitions**
- **Time to Competence**

# Update: Projected Common Program Requirement Major Revision Timeline



# Update: Projected Common Program Requirement Major Revision Timeline - Fellowships



# Burden Reduction

- In service to ongoing burden reduction, the Common Program Requirements Task Force identified 10 requirements that are slated for deletion when the full set of new CPRs is posted for public comment in late 2026
- Given the time frame until the new CPRs are effective (likely in 2028), these 10 requirements are suspended effective February 7, 2026 (date of Board decision)

# 10 suspended requirements

- CPR 1.2 “The review committee may specify which other programs must be present at the primary clinical site”
- CPR 1.3.a “The PLA must be renewed at least every 10 years”
- CPR 2.2a “Final approval of the program director resides with the Review Committee”

# 10 suspended requirements

- CPR 2.8.c “Faculty members must administer and maintain an educational environment conducive to educating residents”
- CPR 4.2.a “[The curriculum must contain the following educational components:] a set of program aims consistent with the Sponsoring Institution’s mission, the needs of the community it serves, and the desired distinctive capabilities of its graduates, which must be made available to program applicants, residents, and faculty members”

# 10 suspended requirements

- CPR 4.2. e “[The curriculum must contain the following educational components:] formal educational activities that promote patient safety-related goals, tools, and techniques”
- CPR 5.5 f “The Program Evaluation Committee must evaluate the program’s mission and aims, strengths, areas for improvement, and threats”
- CPR 5.5 h “The program must complete a Self-Study and submit it to the DIO. ”

# 10 suspended requirements

- CPR 6.24 “A Review Committee may grant rotation-specific exceptions for up to 10 percent or a maximum of 88 clinical and educational work hours to individual programs based on a sound educational rationale. ”
- CPR 6.24 a “In preparing a request for an exception, the program director must follow the clinical and educational work hour exception policy from the ACGME Manual of Policies and Procedures”

# *Recent Requirement Revisions*

## *Focused Revision to Common Program Requirements*

### *Faculty qualifications*

- Removes specialty-specific language that does not allow for alternate qualifications

### *Resident transfers*


- Removes restrictions from specialty requirements that do not allow transfers

# Coming in July 2026!

## Frequently Asked Questions (FAQs) integration into Requirements documents

- As part of the ACGME's Digital Transformation and following the reformatting of all Requirements documents, FAQs will be integrated into the Requirements documents.
- All Common FAQs and specialty/subspecialty-specific FAQs will be available linked directly to specific requirements, where applicable.
- Except for FAQs already undergoing revision, **the content of the FAQs is not changing**, just their integration into requirements documents for ease of access.
- Revisions were also made to Resident/Fellow Transfers and Faculty Certification in many Program Requirements, effective July 1, 2026.

# Frequently Asked Questions (FAQs) integration into Requirements documents



ACGME Program Requirements for  
Graduate Medical Education in  
Anesthesiology with FAQs

**Revision Information**

ACGME-approved interim revision September 3, 2025; effective September 3, 2025

ACGME-approved interim revision September 29, 2025; effective July 1, 2026

**Definitions**

For more information, see the [ACGME Glossary of Terms](#).

**Core Requirements:** Statements that define structure, resource, or process elements essential to every graduate medical educational program.

**Detail Requirements:** Statements that describe a specific structure, resource, or process, for achieving compliance with a Core Requirement. Programs and sponsoring institutions in substantial compliance with the Outcome Requirements may utilize alternative or innovative approaches to meet Core Requirements.

**Outcome Requirements:** Statements that specify expected measurable or observable attributes (knowledge, abilities, skills, or attitudes) of residents or fellows at key stages of their graduate medical education.

**Osteopathic Recognition**

For programs with or applying for Osteopathic Recognition, the Osteopathic Recognition Requirements also apply ([www.acgme.org/OsteopathicRecognition](http://www.acgme.org/OsteopathicRecognition)).

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Anesthesiology with FAQs  
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# Frequently Asked Questions (FAQs) integration into Requirements documents

1.2. The program, with approval of its Sponsoring Institution, must designate a primary clinical site. (Core)

1.2.a. The Sponsoring Institution must also sponsor or be affiliated with ACGME-accredited residencies in at least the specialties of general surgery and internal medicine. (Core)

[See FAQ in Appendix]

Anesthesiology with FAQs

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## 7. Frequently Asked Questions: Anesthesiology

Review Committee for Anesthesiology

ACGME

### Section 1: Oversight

Questions concerning "The Sponsoring Institution must also sponsor or be affiliated with ACGME-accredited residencies in at least the specialties of general surgery and internal medicine. (Core)" (1.2.a)

**Q:** How can affiliation with ACGME-accredited general surgery and internal medicine residency programs be demonstrated?

**A:** If the program's Sponsoring Institution does not sponsor ACGME-accredited residencies in both general surgery and internal medicine, affiliation can be demonstrated to the Review Committee as to the relationship between the programs through an affiliation agreement, program letter of agreement (PLA), or an explanation of how affiliation is demonstrated through the integration of resident education with each of the specialties.

Questions concerning "Residents should not be required to rotate among multiple participating sites. (Detail)" (1.6.a.1.a)

**Q:** Why should residents not be required to rotate among multiple participating sites?

**A:** The intent of this requirement is to ensure residents are not required to travel unnecessarily to hospitals or other clinical sites for education or training that could reasonably be provided locally by the Sponsoring Institution's affiliated sites. The Review Committee understands that some programs, such as those sponsored by institutions in rural areas based on a consortium model, will by necessity have residents rotate across three to four sites to achieve the required rotations. The focus of the requirement is to protect the residents from being used to meet the service needs of multiple hospitals/clinical operations.

Anesthesiology with FAQs

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# Programs on Continued Accreditation (CA) random sampling site visits

- The ACGME conducts site visits annually for programs with a Continued Accreditation status through a random sampling process.
- For the current academic year, 250 site visits were selected and will be scheduled between April and October 2026.

Academic Year	Number of Randomly Selected Site Visits	Number of Completed Site Visits	<u>Post Site Visit Accreditation Decisions</u>
2023-2024	150	148*	<ul style="list-style-type: none"> <li>• 140 Continued Accreditation</li> <li>• 7 Continued Accreditation with Warning</li> <li>• 1 Probationary Accreditation</li> </ul>
2024-2025	200	198*	Decisions in progress
2025-2026	250	In progress	Decisions in progress

\*Several programs voluntarily withdrew their accreditation after selection or were pulled for other types of site visits.



# Accreditation of Combined Programs

- Existing combined programs listed in ADS were offered an opt-in
  - 130 of 133 were assigned Initial Accreditation
  - RC review in 2027 (after site visit), for programs to achieve Continued Accreditation
- New program applications are open (2 already processed)
- No format-specific program requirements
  - Programs expected to adhere to specialty-specific requirements, w/ conflicts addressed in (general, not format-specific) combined program requirements
  - Block diagram should communicate adherence to posted certifying board curricula
- Residents in combined programs only in that program's ADS roster
- Feedback on this new process is welcome
- See [combined programs webpage](#) or contact [accreditation@acgme.org](mailto:accreditation@acgme.org)



# ACGME Resources



 Listening  Information  News  Collaboration

*Register today! After registering you'll receive a confirmation with "Add to Calendar" option*

Your monthly connection to ACGME updates and collaboration

- ✓ Stay informed on important updates and initiatives
- ✓ Engage in interactive activities
- ✓ Provide feedback and share ideas
- ✓ Visit the page on [acgme.org](https://www.acgme.org/education-and-resources/acgme-linc/) to view upcoming sessions and register: <https://www.acgme.org/education-and-resources/acgme-linc/>



[Add to Calendar\(.ics\)](#) | [Add to Google Calendar](#) | [Add to Yahoo Calendar](#)



# ACGME Cloud

*Reducing Burden | Reimagining GME*

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## ***ACGME to Launch Next Phase of ACGME Cloud with New Features in April including a Unified User Experience and ACGME Cloud | Analytics Additions and Enhancements!***

Learn More and connect with the ACGME team at the conference:

- Visit the ACGME Cloud team at the ACGME Hub in the Exhibit Hall
- Attend two key sessions on Friday, February 20
  - Featured Plenary SES003, Harnessing AI Agents in the GME Office: Innovations and Future Directions
  - SES022, ACGME Cloud: Progress, Next Steps, and Ways to Stay Engaged

Contact [Cloud@acgme.org](mailto:Cloud@acgme.org) with questions.

The logo for ACGME Cloud features a stylized red 'A' icon to the left of the text 'ACGME Cloud' in a bold, red, sans-serif font. A thin horizontal line is positioned below the text.

# ACGME Cloud

*Reducing Burden | Reimagining GME*

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## **New ACGME Cloud features launching in April will offer:**

- Unified User Experience – simplified, streamlined navigation across ACGME Cloud and the Accreditation Data System (ADS), including a user-friendly way to switch between products and an AI-powered smart search to find information in ADS and complete tasks.
- ACGME Cloud | Analytics Additions and Enhancements – additional dashboards for the annual Resident/Fellow and Faculty Surveys, operational dashboards, and Milestones dashboards.

Visit the ACGME Cloud team at the ACGME Hub in the Exhibit Hall to learn more!

Contact [Cloud@acgme.org](mailto:Cloud@acgme.org) with questions.



## FUNDING OPPORTUNITY FOR RESIDENT AND FELLOW LEADERS



### OPPORTUNITY DESCRIPTION

Resident- or fellow-developed and led projects to enhance meaning in clinical learning environments by fostering the physician-patient relationship



### PROJECT ASSESSMENT CRITERIA

- Strengthens relationships with patients
- Sustainable
- Adaptable to other programs or contexts
- Innovative and cost-effective



### PROJECT FUNDING

Additional travel stipend available to offset costs to attend Learning Collaborative meetings in Chicago, Illinois and the 2028 ACGME Annual Educational Conference in Orlando, Florida.

### FUNDING OPTIONS

- 1: up to \$10,000
- 2: up to \$5,000



**SCAN QR CODE  
FOR MORE INFO**

**PROPOSALS DUE:  
APRIL 20, 2026**



**Questions?**



Thank you!