AOA & ACGME Anesthesiology Programs in the Single Accreditation System—A Program Director's Guide

Louis Ling, MD SVP, Hospital-Based Accreditation, ACGME

Anne Gravel Sullivan, PhD Executive Director, Anesthesiology RC



Objectives for today's session

- Provide overview of the process for AOA programs to apply for ACGME accreditation as Anesthesiology programs
- Review key Anesthesiology program requirements pertinent to application process
- Describe importance of pre-accreditation status for student eligibility for ACGME residency programs
- Summarize new resident eligibility requirements that go into effect July 1, 2016
- Identify resources for Program Directors



Accreditation Council for Graduate Medical Education

Applying for Accreditation



@2014 Accreditation Council for Graduate Medical Education (ACGME)

AOA Program Application Process

- **Existing AOA-accredited programs can apply to receive Pre-Accreditation Status from 2015-2020**
- Institutions must apply for pre-accreditation before programs
- Institutional Application—Opens April 1, 2015
- Program Application—Opens July 1, 2015
 - •CBY Programs (including Transitional Year) must be ACGME-accredited
 - •AOA Internship and other programs applying for accreditation must have Initial Accreditation status before serving as CBY

AOA Program Application Process

Existing AOA-accredited programs can apply to receive Pre-Accreditation Status from 2015-2020

 Programs accredited by the AOA as of July 1, 2015 receive Pre-Accreditation status upon submission of application

•Individuals who complete a residency program after that program has achieved Pre-Accreditation status will be subject to the ACGME eligibility requirements for the relevant subspecialty that were in effect as of June 30, 2013 or July 1, 2016, whichever is less restrictive.

Pre-Accreditation Status

- "Pre-Accreditation Status" acknowledged instantly
- Importance to ACGME:
 - Programs will be in data system
 - ADS annual update
 - Case logs
 - Resident survey
 - Faculty survey
 - Milestones



Anesthesiology Programs

- 13 AOA-accredited Anesthesiology
- 383 ACGME-accredited Programs
 - 151 Core Specialty
 - 232 Subspecialties
 - Critical Care
 - Adult Cardiovascular
 - Pediatric
 - OB/Gyn
 - Pain Medicine
 - Clinical Informatics



Dually-Accredited Programs

- Refers to the programs that are accredited by *both* the ACGME and the AOA
- Dually-accredited programs may <u>not</u> need to do anything by way of application in the SAS.
- They *may* need to ask RC for complement increase if residents in the AOA program are *not* currently counted in ACGME complement.
- They may seek Osteopathic Recognition

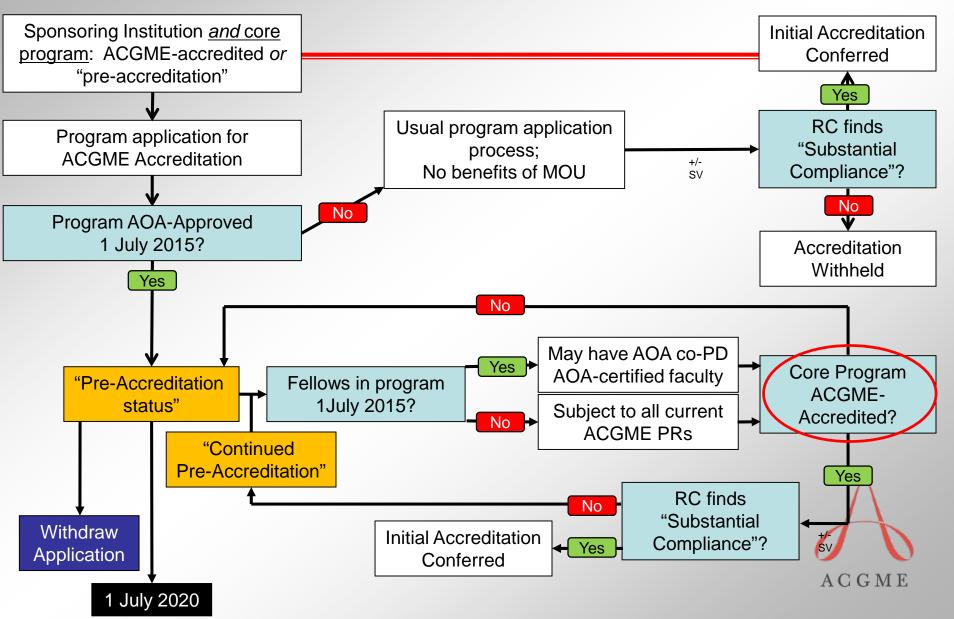


Subspecialty Programs

- There is only one AOA pediatric fellowship (subspecialty program)
- Subspecialty programs are considered dependent
- Must be associated with Core Program in the same Sponsoring Institution
- Sub can apply after core has Pre-Accreditation
- Sub can<u>not</u> be accredited until core receives Initial Accreditation

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AOA Fellowship Applications

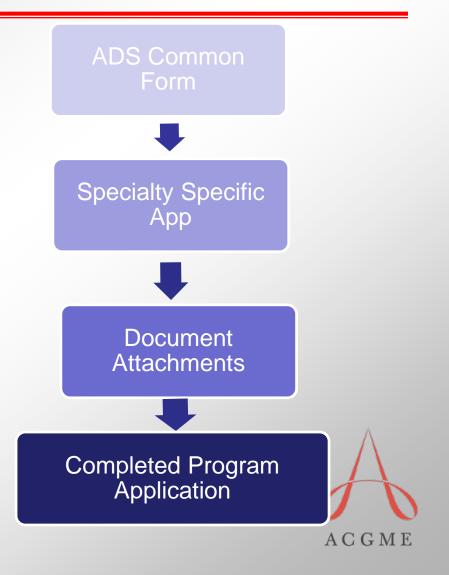


Logistics of Applying for Accreditation



Application Sections

- A completed program application contains three parts:
 - (1) ADS Common Application
 - (2) Specialty Specific Application Word document
 - (3) Attachments



Before Initiating an Application

- Identify all required program personnel
 - Program Director
 - Program Coordinator
 - Core Faculty
- Work with Sponsoring Institution's DIO to identify the required affiliated Internal Medicine and General Surgery programs
 - If not currently ACGME-accredited, have IM and GS programs notify you when receive Initial Accreditation
- Identify all participating sites at which rotations will occur

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Program Letters of Agreement

Steps to Applying for a New ACGME accredited program

- DIO initiates the application in ADS
 - DIO completes basic info such as PD name and participating sites
- ADS common application is sent electronically to PD identified in the application
 - PD completes remaining information
- PD downloads and completes specialty specific application Word document

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Steps to Applying for a New ACGME accredited program

- PD uploads completed specialty specific form into ADS
- PD uploads all requested document attachments (i.e. policy for supervision, program goals, PLAs)
- Completed application is routed back to DIO within the ADS system for DIO signoff and approval



Steps to Applying for a New ACGME accredited program

- Upon DIO approval, application form is routed to ACGME
- ACGME Staff notified of application submission and sends PD confirmation of receipt
- Department of Field Activities is notified
- Program application is scheduled for a site visit



List of Application Attachments

- Policy for Supervision of Residents Policy for supervision of residents (addresses residents' responsibilities for patient care and progressive responsibility for patient management and faculty responsibilities for supervision).[IR III.B.4]
- Program Policies and Procedures Program policies and procedures for resident duty hours and work environment including policies on moonlighting. [CPR II.A.4.j; CPR VI.G; IR IV.J]
- Overall Educational Goals Overall educational goals for the program. [CPR IV.A.1]
- Competency Goals and Objectives and Faculty Evaluation of Residents A sample of competency-based goals and objectives for one assignment at each educational level [CPR IV.A.2], a blank copy of the forms that will be used to evaluate residents at the completion of each assignment. [CPR V.A.1.a]
- Letters of Agreement All Program Letters of Agreement (PLAs) with participating sites. [CPR I.B.1]
- Semiannual and Summative Evaluations A blank copy of the form that will be used to document the semiannual evaluation of the residents with feedback. [CPR V.A.2.b.(4)], and a blank copy of the final (summative) evaluation of residents, documenting performance during the final period of education and verifying that the resident has demonstrated sufficient competence to enter practice without direct supervision [CPR V.A.3]
- **Program Specific Evaluation Tools** Blank copies of tools the program will use to provide objective assessments of competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and system-based practice. [CPR V.A.2.b.(1)] *For multiple tools, create one PDF.*
- Forms Used for Faculty and Program Evaluation Blank copies of forms that residents will use to evaluate the faculty and the program. [CPR V.B.3; CPR V.C.2.d.(1)]

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- Sample Block Diagram Provide a sample block diagram for each year of training. Use number of months for each block rotation, can find an example to help guide you and further instructions using a link in the ADS system.
- **Specialty-specific Application Questions -** Complete the Specialty-specific Application. This document can be found under "New Applications" heading on your Review Committee's page of our website.

Remember



- Print out the completed application and review for consistency
- Review document for errors
- Be sure everyone is in agreement
- In answering the questions, describe your plan to meet each requirement
- In policies, etc., use ACGME language
- Once the application has been submitted to ACGME, <u>it cannot be altered</u>
- Apply early to maximize the five-year window

COMMON APPLICATION QUESTIONS



Where do I find the specialty specific application form?

Λ	Contact About ACGME Awards
ACGME Accreditation Council for Graduate Medical Education	SEARCH
Program and Institutional Accreditation Data Collection Systems Meetings and	nd Conferences Graduate Medical Education
	Quick Links
Go A Joe III W	RESIDENTS PD / COORDINATORS DIOs Resident Services
	Resident Case Log System
	Resident Fellow Survey
The Accreditation Council for Graduate Medical Education (ACGME) is responsible for the	Duty Hours
Accreditation of post-MD medical training programs within the United States.	Complaints
Accreditation is accomplished through a peer review process and is based upon established standards	GME Focus
and guidelines.	Journal of Graduate Medical Education
	Deview and Comment

2014 ACGME Annual Educational Conference

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SEARCH...

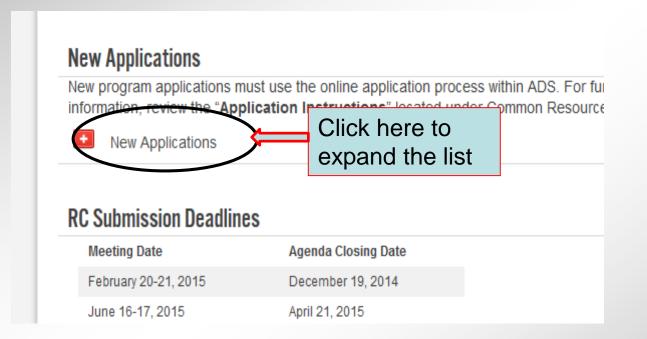
Accreditation Council for Graduate Medical Education

ACGME

nces	Graduate Medical Education
	Institutions
	Institutional Review
	Review and Comment
	Archive Index
	Common Program Requirements

Program and Institutional Accreditati	ion Data Collection	Systems Meetings and Conferenc	es Graduate Medical Education
Hospital-Based Specialties	Medical Specialties	Surgical Specialties	Institutions
> Anesthesiology	Allergy and Immunology	Colon and Rectal Surgery	Institutional Review
Diagnostic Radiology	P Dermatology	Neurological Surgery	Review and Comment
Emergency Medicine	Family Medicine	Obstetrics and Gynecology	Archive Index
Medical Genetics	Internal Medicine	Ophthalmology	
Nuclear Medicine	Neurology	Orthopsedic Surgery	Common Program Requirements
Pathology	Pediatrics	Otolaryngology	
Preventive Medicine	Physical Medicine and Rehabilitation	Plastic Surgery	Next Accreditation System
Radiation Oncology		Surgery	Milestones
Transitional Year	Psychiatry	Thoracic Surgery	Vebinars
		> Urology	Clinical Learning Environment Review Program

Locating the Specialty-Specific Application





Common Application Questions

- Who should be listed as "Core Faculty"?
 - Program Director
 - Associate PD(s)
 - Subspecialty Chiefs
 - Members of CCC and PEC
 - Faculty that spend >=15 hours per week
 - Read ADS Physician Faculty Definition for further guidelines
- Does the block diagram need to be listed using 12 months or 13 four-week blocks?
 - Use the format that works best for your curriculum we will accept either

Common Application Questions

- RC review of application will take *months*
 - Application received
 - Site visit scheduled
 - Application & site visit report to RC members
 - Next scheduled RC meeting
 - Feb 18-19, 2016 (Agenda close date: Dec 21th)

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- April 14-15, 2016 (Agenda close date: Feb 18th)
- Notification by Executive Director

Common Application Questions

- What happens after our application is reviewed?
 - Email notification from the RC Staff within 5 days of the meeting to notify program of accreditation status
 - Within 60-days of meeting, program will receive accreditation notification letter from Executive Director



Getting Started

- Read the Anesthesiology Program Requirements
- Will my program include a Fundamental Clinical Skills year (CBY)?
- Compare current curriculum to requisite Curriculum Organization and Resident Experiences (IV.A.6)
 - Gaps
 - Differences in didactic, research and clinical requirements
 - Attend to faculty supervision and clinical setting requirements

Three-year Programs

- CA-1, CA-2, CA-3 years after resident completes CBY
- Minimum four weeks pre-operative medicine
- Two weeks post-anesthesia
- Minimum of four months critical care medicine (each no less than 1 month in duration)
- Didactic instruction that encompasses clinical anesthesiology and:
 - Related areas of basic science
 - Pertinent topics from other medical & surgical specialties
- Regular faculty engagement in clinical and didactic education

Four-year Programs

- 12 months broad education in medical disciplines relevant to practice of anesthesiology
 - Do not need to be contiguous but must be completed prior to CA-3 year
 - Resident performance of CBY residents documented and sent to advanced programs every six months
- Six months experience caring for patients in IM, FM, Peds, surgery or surgical specialties, OB/Gyn or Neurology
- No more than one month of anesthesiology
- Master the details!
- Check the July 1, 2016 PRs for changes



Accreditation Council for Graduate Medical Education

Potential Issues in Application Process



Specialty-Specific Issues

- Resident Cohort Requirement—9: Three in CA-1, CA-2 & CA-3 years (Int.C.2)-Core
- Required procedure types and numbers under Educational Program (IV)
- Scholarly activity of faculty and residents
- Preparing for site visit
 - Need to be in "substantial compliance" with Program Requirements
- Understanding responsibilities of Program Director (II.A.4)
 - AOA-Certified candidates will be considered as single Program Directors (see requirements re criteria)

Provisions in MOU

- Applicant programs which, on 1 July 2015:
 - Are AOA-approved, and
 - Have matriculated residents
- Get "Pre-Accreditation Status"
- Get relief from two Common Program Reqs:
 - AOA-certified faculty will be acceptable to RC
 - May have AOA-certified co-program director*
 - *Anesthesiology RC will consider single AOA-certified Program Director

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2014 MOU among ACGME, AOA & AACOM

Provisions in MOU

- Applicant programs which, on 1 July 2015:
 - Are AOA-approved
 - But do not have matriculated residents
- Get "Pre-Accreditation Status"
- Do not get relief from Common Program Reqs



Accreditation of AOA Programs

				Ар	prove	m AOA- ed as of , 2015	
				Ye	es	No	
		Program has matriculated residents as of July 1, 2015		1		3	
				2	2	3	
	Will have Pre-Accreditation Status		an ha A-cert co-PD	ified		A-certified systematic "acceptab	ally
1	+		+			+	
2	+					-	
3	-		-			-	

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Support for Program Director

PR-II.A. [Common Program Requirement]

The sponsoring institution and the program must ensure that the program director has sufficient protected time and financial support for his or her educational and administrative responsibilities to the program. ^(Core)

- Many RCs specify minimum support Anesthesiology:
 - Programs with one-20 residents must provide a minimum of 20% protected time for the program director. II.A.4.p).(1) (Core)
 - Programs with more than 20 residents must provide a minimum of 40% protected time for the program director; ME II.A.4.p).(2) (Core)

New Resident Eligibility Requirements (July 1, 2016)

- All prerequisite training (PGY1) must occur in:
 - ACGME-accredited programs
 - Canadian-accredited programs
- Exception for AOA Programs with "Pre-Accreditation" Status
 - Individuals who complete programs that have previously achieved pre-accreditation status will be subject to 2013 or 2016 eligibility standards, whichever is less restrictive.

Eligibility Requirements

Program and Institutional Accreditation

Data Collection Systems

Meetings and Conferences

Graduate Medical Education

Single Accreditation System for AOA-Approved Programs

On February 26, 2014, the Accreditation Council for Graduate Medical Education (ACGME), American Osteopathic Association (AOA), and American Association of Colleges of Osteopathic Medicine (AACOM) announced their agreement to a Memorandum of Understanding (MOU) that outlines a single graduate medical education accreditation system for residency and fellowship programs in the United States. Click here for the executive summary of the MOU

The single accreditation system allows graduates of allopathic and osteopathic medical schools to complete their residency and/or fellowship education in ACGME-accredited programs and demonstrate achievement of common Milestones and competencies.

Over the next five years, beginning July 1, 2015, AOA-approved programs and sponsoring institutions will have the opportunity to apply for ACGME accreditation. The ACGME and AOA have created and will continue to create elements of operations and infrastructure to ensure a smooth transition to the single system.

Click here for the timeline (Updated December 3, 2014)

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The ACGME will continue to update information on the single accreditation system as new developments unfold, and as questions arise during the systems implementation. Please return to this page periodically for updates and answers to your questions. Thank you for your interest as we work together to implement this important step forward in American graduate medical education.

Related Links

- Program Eligibility Requirements
- ACGME Glossary of Terms
- Requirements for Review and Comment

Events

Single Accreditation System for AOA-Approved Programs Main Page

E-mail questions to info@acgme.org

 Single Accreditation System for AOA-Approved Programs Main Page

Pathways (Posted December 3, 2014)

Pathways to ACGME Accreditation for AOA-Approved Programs

Education

Contact Us

Opportunities for Education about the Transition to the Single Accreditation System

Education

Application Process

The following guidelines apply to currently-AOA-approved core residency and subspecialty programs that apply for ACGME accreditation.

Application Process

Timeline (Updated December 3, 2014)

 Intent to Apply for Institutional Accreditation

News and Communications

News and Communications

FAQs

These FAQs address common areas of the



Eligibility Requirements

ACCGME ACCFE			SEARCH		Awards Publications	
Program and Institutional Accreditation	Data Collection Systems	Meetings and Con	Meetings and Conferences Graduate Medical Education		ate Medical Education	
Graduate Medical Education > Single Accredit	ation System for AOA-Approved Programs	 Eligibility Requirements 				
Specialty and Subspeci Requirements Below are the eligibility requirements for each sp and (2) in effect as of July 1, 2016. If applicable, a	ecialty/subspecialty that are (1) in effect or	n June 30, 2013;	Single A AOA-Ap	Accreditatic	on System for ograms Main Page	
also provided. Allergy and Immunology			 Single Accreditation System for AOA-Approved Programs Main Page 			
Anesthesiology			Pathways (Posted December 3, 2014)			
 Adult Cardiothoracic Anesthesiology 			 Pathways to ACGME Accreditation for AOA-Approved Programs 			
Anesthesiology Critical Care Medicine						
Clinical Informatics			Education Opportunities for Education about the Transition			
Hospice and Palliative Medicine				to the Single Accreditation System		
Obstetric Anesthesiology			Education			
Pain Medicine	۵ ۵		Application Process			
			The following guidelines apply to currently-			
Pediatric Anesthesiology	<u> </u>			AOA-approved core residency and subspecialty programs that apply for ACGME accreditation.		
 Pediatric Anesthesiology Colon and Rectal Surgery 			AOA-appr		dency and subspecialty	
			AOA-appr programs		dency and subspecialty	(

Eligibility Requirements

Eligibility Requirements

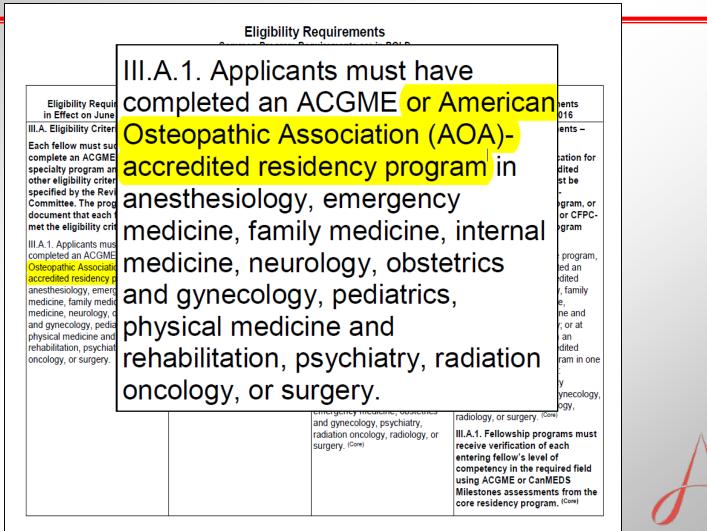
Common Program Requirements are in BOLD

Hospice and Palliative Medicine

 specialty program and/or meet other eligibility criteria as specified by the Review Committee. The program must document that each fellow has met the eligibility criteria. III.A.1. The program must document that each fellow has met the eligibility criteria. III.A.1. The program must document that each fellow has met the eligibility criteria. III.A.1. The program must document that each fellow has met the eligibility criteria. III.A.2. Applicants must have completed an ACGME or American Osteopathic Association (AOA)- accredited residency program in anesthesiology, emergency medicine, family medicine, internal medicine, neurology, obstetrics and gynecology, pediatrics, physical medicine and rehabilitation, psychiatry, radiation oncology, or surgery. detail program and/or meet other eligibility criteria as specified by the Review Committee. (^{Core}) III.A.2. Prior to appointment in the program, fellows must have completed an ACGME or American Osteopathic Association (AOA)- accredited residency program in anesthesiology, emergency medicine, neurology, obstetrics and gynecology, pediatrics, physical medicine and rehabilitation, psychiatry, radiation oncology, or surgery. definition, psychiatry, radiation oncology, or surgery. definition, psychiatry, radiation definition, psychiatry, radiation<th>Eligibility Requirements in Effect on June 30, 2013</th><th>Eligibility Requirements Effective July 1, 2014-June 30, 2015</th><th>Eligibility Requirements Effective July 1, 2015-June 30, 2016</th><th>Eligibility Requirements Effective July 1, 2016</th>	Eligibility Requirements in Effect on June 30, 2013	Eligibility Requirements Effective July 1, 2014-June 30, 2015	Eligibility Requirements Effective July 1, 2015-June 30, 2016	Eligibility Requirements Effective July 1, 2016
	in Effect on June 30, 2013 III.A. Eligibility Criteria Each fellow must successfully complete an ACGME-accredited specialty program and/or meet other eligibility criteria as specified by the Review Committee. The program must document that each fellow has met the eligibility criteria. III.A.1. Applicants must have completed an ACGME or American Osteopathic Association (AOA)- accredited residency program in anesthesiology, emergency medicine, family medicine, internal medicine, neurology, obstetrics and gynecology, pediatrics, physical medicine and rehabilitation, psychiatry, radiation	Effective July 1, 2014-June 30, 2015 III.A. Eligibility Criteria Each fellow must successfully complete an ACGME-accredited specialty program and/or meet other eligibility criteria as specified by the Review Committee. ^(Core) III.A.1. The program must document that each fellow has met the eligibility criteria. ^(Detail) III.A.2. Applicants must have completed an ACGME or American Osteopathic Association (AOA)- accredited residency program in anesthesiology, emergency medicine, family medicine, internal medicine, neurology, obstetrics and gynecology, pediatrics, physical medicine and rehabilitation, psychiatry, radiation	Effective July 1, 2015-June 30, 2016 III.A. Eligibility Criteria Each fellow must successfully complete an ACGME-accredited specialty program and/or meet other eligibility criteria as specified by the Review Committee. ^(Core) III.A.1. The program must document that each fellow has met the eligibility criteria. ^(Detail) III.A.2. Prior to appointment in the program, fellows must have completed an ACGME- or American Osteopathic Association (AOA)-accredited program in child neurology, family medicine, internal medicine, pediatrics, physical medicine and rehabilitation, or neurology; or at least three clinical years in an ACGME- or AOA- accredited graduate educational program in one of the following specialties: anesthesiology, emergency medicine, obstetrics and gynecology, psychiatry, radiation oncology, radiology, or	Effective July 1, 2016 III.A. Eligibility Requirements – Fellowship Programs All required clinical education for entry into ACGME-accredited fellowship programs must be completed in an ACGME- accredited residency program, or in an RCPSC-accredited or CFPC- accredited residency program located in Canada. (^{Core}) Prior to appointment in the program, fellows must have completed an ACGME- or RCPSC-accredited program in child neurology, family medicine, internal medicine, pediatrics, physical medicine and rehabilitation, or neurology; or at least three clinical years in an ACGME- or RCPSC-accredited graduate educational program in one of the following specialties: anesthesiology, emergency medicine, obstetrics and gynecology, radiology, or surgery. (^{Core}) III.A.1. Fellowship programs must receive verification of each



Eligibility Requirements



What about 2015-16 PGY1s?

- Application season Fall 2014
 - Start PG 1 July 2015
 - Start PG 2 July 2016
- If you do an AOA internship that has been pre-accredited or an ACGME program, you would be eligible for an ACGME fellowship as allowed by the specialty
- Anesthesiology RC will not issue citations for programs accepting candidates from AOA program

What about 2015-16 PGY1s?

- Not all AOA programs will have had the chance to apply
- Anesthesiology RC giving flexibility to TRI and linked programs
 - Advanced programs receiving residents will not have adverse accreditation status for this year
 - Program Directors decide who to accept
- Board certification depends on the boards

What about 2016-17 PG1s?

- Application season Fall 2015
 - Start PG 1 July 2016
 - Start PG 2 July 2017
- AOA programs can declare July 1, 2015
 - Pre-accredited at time of application
 - Pre-accredited before June 30, 2016 are all eligible for ACGME PG 2 for July 2017
 - Flexibility for TRI and linked programs may or may not be extended for this year

Navigating "The Match"

- There are *numerous* match processes, including:
 - The AOA National Matching Services, Inc.
 - The National Resident Matching Program
 - The San Francisco Matching Program
 - The Joint Service GME Selection Board
- ACGME not in control of or affiliated with any match
- Programs in Pre-Accreditation are AOA-approved and must use NMS
- ACGME-accredited programs not eligible for NMS
- Program won't be in the NRMP until they receive status of Initial Accreditation

Selecting an Advanced Program

ACGME List of Accredited Programs

- State
- Specialty
- Length of program (i.e. whether it has a categorical year)
- Program Contact information

Accreditation And General Information

Original Accreditation Date: April 01, 1969 Accreditation Status: Continued Accreditation Accreditation Effective Date: February 11, 2015 Accredited Length of Training: 4 years Program Format: Standard Last Site Visit Date: November 11, 2009 Self Study Date (Approximate): October 01, 2018

Positions

Total Approved Resident Positions: 84 Total Filled Resident Positions*: 78

Complement Breakdown: Approved								
Years:	1	2	3	4	Total			
Approved:	21.0	21.0	21.0	21.0	84.0			

Questions Students Will Ask

- Do you plan on participating in the NRMP or <u>NMS</u>?
- Each match program has its own rules
- NRMP Website
 - Eligibility for non-allopathic graduates
 - All-in Policy



Board Certification of Graduates

- Will AOA or ABMS boards certify graduates in SAS?
 - Certification <u>not</u> part of the MOU
 - ACGME has <u>no</u> control over ABMS boards
 Each does and will determine eligibility criteria
 - Will AOA boards require Osteopathic Recognition?

- Many unknowns remain
- <u>Do</u> know that ACGME will recognize graduate performance on AOA boards in assessing program quality

What about the states where DO internships are required?

- FL, OK, MI, PA
- State legislatures in some of these states have been considering changes
- Osteopathic Recognition is the ACGME route to signify programs that meet standards
- Each state will have to address this



ACGME Anesthesiology Staff

- Anne Gravel Sullivan PhD, Executive Director
 - asullivan@acgme.org
 - 312-755-7032
- Sonia Sangha, Accreditation Administrator
 - ssangha@acgme.org
 - 312-755-5493







 For more details on the Single Accreditation System, please view the webinar:

> "The Transition to ACGME Accreditation: An Overview for AOA Programs" Dr. John Potts, III April 1, 2015



Resources

- Anesthesiology Program Requirement
- Anesthesiology FAQs
- Anesthesiology Milestones
- Anesthesiology Eligibility Chart
- Single Accreditation System
- <u>SAS Webinars</u>
- <u>NRMP</u>
- <u>ACGME Public Database & Reports</u> (Search for programs w/Pre-accreditation)

Questions?

Thank you!

