

## **AOA TRIs & ACGME TY Programs in the Single Accreditation System—A Program Director’s Guide**

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# Objectives for today's session

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- Provide overview of the role of Transitional Year (TY) programs in the single accreditation system
- Provide overview of the process for AOA programs to apply for ACGME accreditation as TY programs
- 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

# Rationale for TY

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The objective of a Transitional Year is to provide a well-balanced program of GME in multiple clinical disciplines designed to facilitate the choice of and preparation for a specific specialty, including specialties requiring a year of fundamental clinical education as a prerequisite.

# Brief History of TY

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- Broad spectrum of clinical experience
- Robust and healthy learning environment
- Focused opportunity to fully develop basic clinical skills
  - Obtaining comprehensive medical history
  - Performing comprehensive medical exam
  - Assessing patient's problems/chief complaint
  - Appropriately using diagnostic studies and tests
  - Integrating information to develop differential diagnosis
  - Developing and implementing a treatment plan

# Similarities between AOA TRI and ACGME TY Programs

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- Different types of Preliminary/Transitional Year Programs
  - *Applicants need to determine which type of program they need to apply for to successfully complete an advanced program*
- Overseen by institutional GMEC
- Minimum four interns
- Focus on “Fundamental Clinical Skills” education
- Flexible curriculum within parameters of TY Program Requirements



# TY Programs

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- Must be sponsored by institution which is ACGME-accredited *or* in pre-accreditation status
- **Current:** Must *also* be sponsored by at least one specialty program\* which is ACGME-accredited *or* pre-accredited
  - Program should be sponsored by the same SI as the TY program
  - Originally, TYRC required two sponsoring programs
- **Note: this is a recent change the TYRC made to the requirements**
  - To be reviewed/approved by ACGME board in September 2015

\* One of those must be EM, FM, GS, IM, OBG or Peds

# Programs Requiring a Preliminary/Transitional Year

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- Anesthesiology
- Diagnostic Radiology
- Dermatology
- Nuclear Medicine
- Ophthalmology
- Physical Medicine and Rehabilitation
- Preventive Medicine
- Radiation Oncology

# Is TY the Best Option for your Internship?

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- Identify purpose of your program
  - Broad-spectrum experience
  - Degree of customization for advanced specialties
- Compare your program curriculum to that required of TY programs
  - TY Program Requirements
  - Block Diagram
  - TY FAQs



# Is TY the Best Option for your Internship?

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TY Programs must provide residents with at least **28 weeks** of rotations in disciplines offering Fundamental Clinical Skills in the primary specialties (PR IV.A.6 -Core)

- Emergency medicine, family medicine, general surgery, internal medicine, obstetrics and gynecology or pediatrics
- At least four weeks (140 hours) of FCS rotations must be in emergency medicine.

# TY Curriculum

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- Subspecialty experiences, with the exception of critical care unit experiences, must not be used to meet FCS curriculum requirements.
- Rotations must be overseen by ACGME-accredited residency programs.
- Must be at least 140 hours of documented experience in ambulatory care.
- Outpatient experiences must be provided in FM or primary care IM, general surgery, OB/gyn or pediatrics at the sponsoring institution or at participating sites.

# Is TY the Best Option for your Internship?

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- Programs serving as preliminary year for specific specialties may want to apply with advanced program
- Is a Sponsoring Program (SP) readily available?
  - IM, FM, EM, Surgery, Pediatrics, OB/Gyn
  - The SP must provide 25% of TY resident's clinical experience

# Sponsoring Programs

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- Relationship with programs currently ACGME-accredited?
- AOA IM, FM, EM, Surgery, Pediatrics, OB/Gyn programs
- Consider new partnerships
  - Look for experiences that will enhance resident education
  - Geography, case volume and resident cohort

# Applying for Accreditation as a TY Program



# AOA Program Application Process

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**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
- *Pre-accreditation status given to osteopathic programs upon submission of application*



# Your Application

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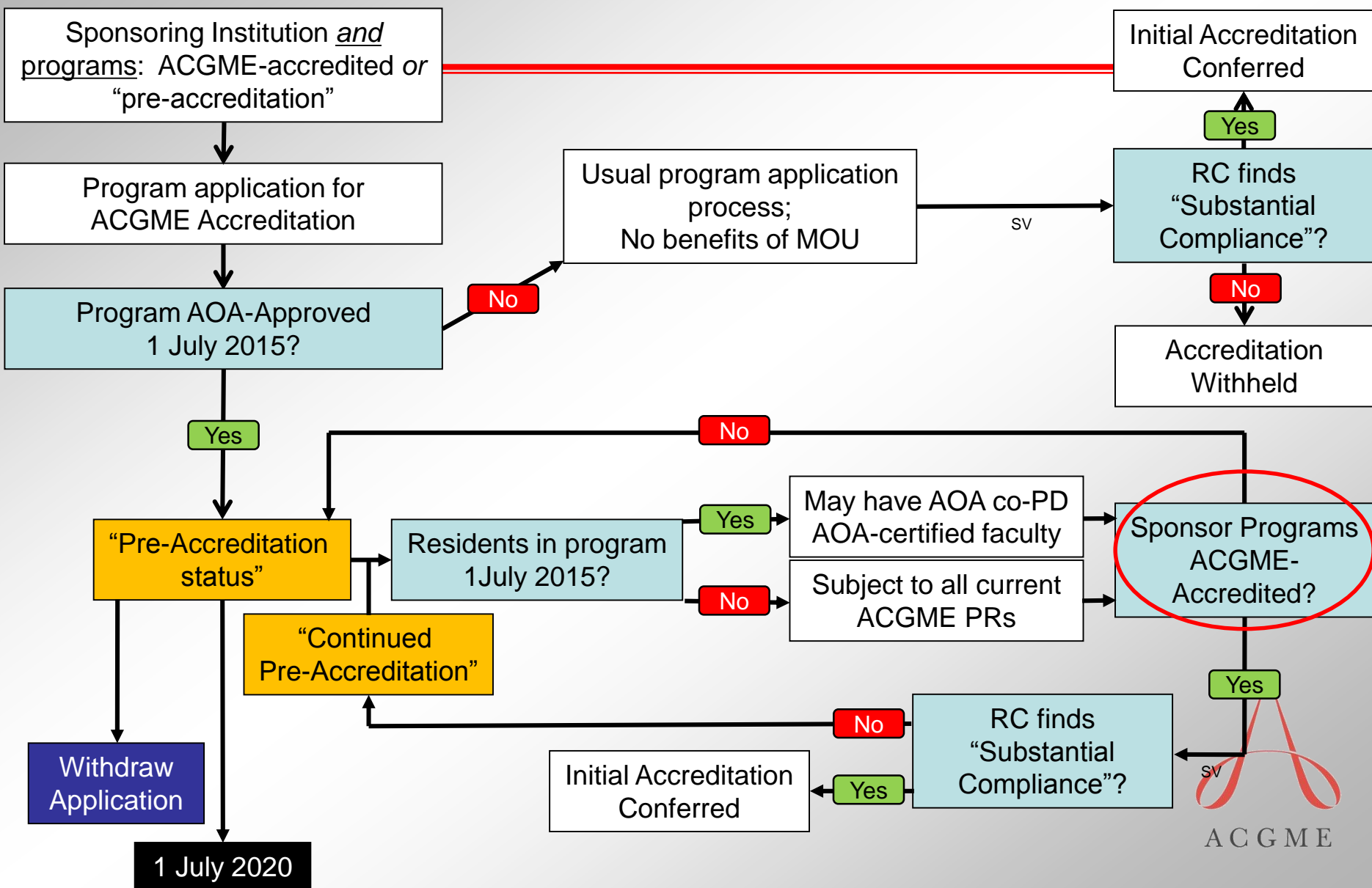
- Application in two parts:
  - General information for all programs (ADS)
  - Specialty-specific application (Word format)
- Cannot alter applications after submitting
- Describe plan to meet each requirement
- In policies, etc., use ACGME language

# Your Application

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- TY Programs cannot begin their application in ADS until sponsoring program(s) has submitted their applications
  - TY Programs cannot submit their application in ADS until at least one SP has received **Pre-Accreditation**
  - TYRC will begin reviewing applications once one SP accredited in order to ensure program receives feedback



# AOA Internship → TY Applications



# Time to RC Review

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- “Pre-Accreditation Status” acknowledged instantly
  - RC review of application will take *months*
    - Application received
    - Site visit scheduled
    - Application & site visit report to RC members
    - Next scheduled RC meeting
    - Notification by Executive Director

# Potential Issues

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- Need for SP accreditation will delay TY submission and review process
- Diversity of Internship design may not fit into TY -no one model fits all
- Decision on Program Director Certification pending

# Provisions in MOU

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- 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

# Provisions in MOU

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- 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

# Support for Program Director

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## PR-I.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, e.g.:
  - **Transitional Year: 25% (10 hrs/wk) [PR-I.A.1.]**
  - Surgery: 30% [PR-I.A.2.]
  - Internal Medicine: 50% (20 hrs/wk) [PR-I.A.2.a]
  - Family Medicine: 70% (28 hrs/wk) [PR-I.A.4.a]

# TYRC SAS Agenda

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- Work with ACGME to engage in education, outreach to AOA internship stakeholders
- Subcommittee convened to assess program requirements around sponsoring programs
- TYRC Staff and ACGME Leadership to explore AOA application obstacles and facilitators

# Resources for Faculty and Medical Students

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- [Transitional Year Program Requirements](#)
- [Transitional Year FAQs](#)
- [Transitional Year Milestones](#)
- [TY Eligibility Chart](#)
- [Single Accreditation System](#)
- [SAS Webinars](#)
- [NRMP](#)
- [ACGME Public Database & Reports](#)  
(Search for programs w/Pre-accreditation)





# New Resident Eligibility Requirements (July 1, 2016)

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- 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 \(Updated December 3, 2014\)](#)



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

#### Contact Us

E-mail questions to [info@acgme.org](mailto:info@acgme.org)

#### Single Accreditation System for AOA-Approved Programs Main Page

- [Single Accreditation System for AOA-Approved Programs Main Page](#)

#### Pathways (Posted December 3, 2014)

- [Pathways to ACGME Accreditation for AOA-Approved Programs](#)



#### Education

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



ACGME

# Eligibility Requirements

[Contact](#) [About ACGME](#) [Awards](#) [Publications](#)

 **Accreditation Council for  
Graduate Medical Education**  
ACGME













SEARCH...

[Program and Institutional Accreditation](#) [Data Collection Systems](#) [Meetings and Conferences](#) [Graduate Medical Education](#)

[Graduate Medical Education](#) [Single Accreditation System for AOA-Approved Programs](#) [Eligibility Requirements](#)

## Specialty and Subspecialty Program Eligibility Requirements

Below are the eligibility requirements for each specialty/subspecialty that are (1) in effect on June 30, 2013; and (2) in effect as of July 1, 2016. If applicable, any interim requirements in effect between those dates are also provided.

- [Allergy and Immunology](#) 
- [Anesthesiology](#) 
  - [Adult Cardiothoracic Anesthesiology](#) 
  - [Anesthesiology Critical Care Medicine](#) 
  - [Clinical Informatics](#) 
  - [Hospice and Palliative Medicine](#) 
  - [Obstetric Anesthesiology](#) 
  - [Pain Medicine](#) 
  - [Pediatric Anesthesiology](#) 
- [Colon and Rectal Surgery](#) 
- [Dermatology](#) 
  - [Dermatopathology](#) 


### Contact Us

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# Eligibility Requirements

## Eligibility Requirements

Common Program Requirements are in BOLD

### Hospice and Palliative Medicine

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
<p><b>III.A. Eligibility Criteria</b></p> <p>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.</p> <p>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 oncology, or surgery.</p>	<p><b>III.A. Eligibility Criteria</b></p> <p>Each fellow must successfully complete an ACGME-accredited specialty program and/or meet other eligibility criteria as specified by the Review Committee. <sup>(Core)</sup></p> <p>III.A.1. The program must document that each fellow has met the eligibility criteria. <sup>(Detail)</sup></p> <p>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. <sup>(Core)</sup></p>	<p><b>III.A. Eligibility Criteria</b></p> <p>Each fellow must successfully complete an ACGME-accredited specialty program and/or meet other eligibility criteria as specified by the Review Committee. <sup>(Core)</sup></p> <p>III.A.1. The program must document that each fellow has met the eligibility criteria. <sup>(Detail)</sup></p> <p>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 surgery. <sup>(Core)</sup></p>	<p><b>III.A. Eligibility Requirements – Fellowship Programs</b></p> <p>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. <sup>(Core)</sup></p> <p>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, psychiatry, radiation oncology, radiology, or surgery. <sup>(Core)</sup></p> <p>III.A.1. Fellowship programs must receive verification of each entering fellow's level of competency in the required field using ACGME or CanMEDS Milestones assessments from the core residency program. <sup>(Core)</sup></p>



# Eligibility Requirements

## Eligibility Requirements

Common Program Requirements as in RPLD

<p>Eligibility Requirements in Effect on June 1, 2016</p>	<p><b>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 oncology, or surgery.</b></p>	<p>ments 016</p>
<p><b>III.A. Eligibility Criteria</b> Each fellow must successfully complete an ACGME specialty program and other eligibility criteria specified by the Review Committee. The program document that each fellow must submit must meet the eligibility criteria. <b>III.A.1. Applicants must have completed an ACGME or American Osteopathic Association (AOA)-accredited residency program in anesthesiology, emergency medicine, family medicine, neurology, obstetrics and gynecology, pediatrics, physical medicine and rehabilitation, psychiatry, radiation oncology, or surgery.</b></p>		<p>ments – ation for dited st be - gram, or or CFPC- gram program, ed an dited , family e, he and , or at an dited ram in one y ynecology, ogy,</p>

and gynecology, psychiatry, radiation oncology, radiology, or surgery. (Core)

radiology, or surgery. (Core)

**III.A.1. Fellowship programs must receive verification of each entering fellow's level of competency in the required field using ACGME or CanMEDS Milestones assessments from the core residency program. (Core)**



# What about 2015-16 PGY1s?

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- Application season Fall 2014
  - Start PG 1 July 2015
  - Start PG 2 July 2016
- If you complete an AOA internship that has been pre-accredited or an ACGME program, you may be eligible for an ACGME residency *if allowed by the specialty*

# What about 2015-16 PGY1s?

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- Flexibility for TRI and linked programs
  - Receiving programs 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?

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- 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”

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- 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

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- Are you planning to apply for ACGME accreditation/pre-accreditation?
- How far along are you in the process? (i.e. have you submitted an application?, have you looked at the TY requirements?)
- Do you have two sponsoring programs?
- Have any of your graduates gone on to ACGME programs in my specialty?



# Questions Students Will Ask

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- Do you plan on participating in the NRMP or [NMS](#)?
- Each match program has its own rules
- [NRMP Website](#)
  - [Eligibility for non-allopathic graduates](#)
  - [All-in Policy](#)

# Board Certification of Graduates

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- Will AOA or ABMS boards certify graduates in SAS?
  - Certification not part of the MOU
  - ACGME has no control over ABMS boards
    - Each does and will determine eligibility criteria
  - Will AOA boards require Osteopathic Recognition?
  - Many unknowns remain
- Do know that ACGME will recognize graduate performance on AOA boards in assessing program quality

# What about the states where DO internships are required?

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- 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 Staff

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## TYRC staff

- Cheryl Gross, MS, Executive Director
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  - 312-755-5491



# Questions?

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Thank you!

