INSTITUTIONAL ACCREDITATION UPDATE

Paul Foster Johnson, MFA
Executive Director, Institutional Review Committee
Accreditation Council for Graduate Medical Education

AHME Institute
Fort Lauderdale, Florida
May 18, 2016
I am a full-time employee of the ACGME. I have no conflicts of interest or financial relationships to disclose.
OBJECTIVES

At the conclusion of this session, the learner should be able to:

• Identify components of the Next Accreditation System (NAS) as they apply to Sponsoring Institutions
• Apply knowledge of new accreditation processes to GME oversight
• Summarize the aims and progress of the ACGME’s Sponsoring Institution 2025 initiative
• Summarize progress in the Single Accreditation System
Next Accreditation System (NAS)

- Phase I, Phase II…
- Use of outcomes in accreditation
- Annual ACGME review in parallel with annual improvement efforts within Sponsoring Institutions/programs
- Shift away from administrative process management allows flexibility to innovate
NAS FOR SPONSORING INSTITUTIONS

• Annual accreditation decisions
• Use of data to guide Institutional Review Committee (IRC) annual review of Sponsoring Institutions (Sis)
• Institutional accreditation as foundation
  – Basic functions
  – Raw processes
• Unification through the Single Accreditation System
• Self-study and 10-year accreditation site visit (no sooner than Fall 2017)
• Clinical Learning Environment Review (CLER) site visits: important for improving clinical learning environments, but unrelated to accreditation
Total Number of Requirements: 149

Core: 136
*Essential to every Sponsoring Institution.*

Outcome: 7
*Observable or measurable results of GME.*

Detail: 6
*Required process to meet a Core requirement.*
*Sponsoring Institutions on Continued Accreditation may innovate around Detail requirements.*
• Learning from self-study pilot visits, extended to Phase I and II programs to 2017
• Institutional self-study anticipated to begin Fall 2017: dates moved back by 2 years
• IRC review will assess Sponsoring Institutions’ achievement of self-defined goals
• Will be followed by a 10-year accreditation site visit
In Transition: 2015-2016 IRC Meeting Activities

- **Fall Meeting**
  - New application reviews
  - Accreditation reviews

- **Winter Meeting**
  - Application/accreditation reviews
  - Annual review begins
  - “Advancement” topic discussions

- **Spring Meeting**
  - Consent agenda
  - Remaining accreditation decisions made
GME Change Management
ACGME Data

- Available in the “Reports” tab of the SI profile
- Program- and institution-level data may be downloaded
- PDF format can convert to Excel or other formats
- Feedback welcome
  - most useful reports?
  - report format?
  - meeting your needs?
CLEARING THE AIR

• Performance indicators
• In advance of a fully defined ACGME self study process
• GMEC/DIO collaboration
• Evidence of action plan monitoring
• Executive summary
• IRC use of the AIR
ANNUAL ACCREDITATION DECISIONS

- Continued Accreditation (Keep on overseeing, improving, innovating!)
- Continued Accreditation w/ Warning
- Probationary Accreditation
- Accreditation Withdrawn
• Evidence of substantial compliance with Institutional Requirements
• Complete/accurate documentation in ADS
• DIO/GMEC/Sponsoring Institution should continue oversight process
  • Annual Institutional Reviews (AIRs)
  • Special Review Protocol
  • GMEC Minutes
  • Locally defined oversight mechanisms
CONTINUED ACCREDITATION w/ WARNING

• Not subject to ACGME appeal process
• In annual review, IRC may grant Continued Accreditation w/ Warning without site visit
• Sponsoring Institution should address concerns (and document in ADS Annual Update) before subsequent annual review
• Document corrective action and monitoring whenever possible: GMEC minutes, Annual Institutional Review, Special Review
• Subject to ACGME appeal process
• Automatic site visit within one year
• Sponsoring Institution should address concerns (and document in ADS Annual Update) before subsequent annual review
• Document corrective action and monitoring whenever possible: GMEC minutes, Annual Institutional Review, Special Review
• Subject to ACGME appeal process
• Failure to demonstrate:
  • Substantial Compliance with Institutional Requirements
  • Effective GME structure, oversight and/or support
January 2015: IRC discusses NAS review process and provides input to ACGME
October 2015: ACGME first presents data overview to IRC
November 2015: IRC working group decides on this year’s data indicators
December 2015–January 2016: Data review and case finding process
March 2016: Site visits and clarifying information
April 2016: Accreditation reviews and consent agenda
January 2016: Data Components

- Sponsoring Institution accreditation status
- Unresolved complaints
- Referrals from specialty Review Committees
- DIO/CEO changes in past year
- Program Director changes in past year
- Institution-level 2014–2015 Resident Survey results
- Performance of programs in the aggregate
Process for Review

• Included 361 Sponsoring Institutions
• Excluded single-program SIs and SIs with Initial Accreditation or Pre-Accreditation
• Identified SIs with one or more indicator
  – 0 indicators: 264
  – 1 indicator: 75
  – 2 indicators: 18
  – 3+ indicators: 4
• One or two IRC members reviewed every program with two or more indicators and/or SI accreditation statuses with warning or probation
MATERIALS AVAILABLE FOR IRC REVIEW

- Sponsor History Summary (table)
- Sponsor History Details with Citations and Complaints
- Institutional Data from ADS
- Summary of Program-Specific Citations (f/k/a “Attachment 1”)
- Personnel Change (CEO/DIO and PD Changes)
- Institution-level Resident/Fellow Survey
- Institution-level Faculty Survey
- Most Recent Institutional Notification Letter
- Other Correspondence from IRC
- Site Visit Report w/ Addenda (if applicable)
Other IRC Reviewer Materials

• ADS information
  – # of Programs
  – # of Residents
  – Updated response to citations
  – Other data reporting (e.g., PS/QI participation)
  – Narrative response to three questions
    • Oversight of SI
    • GMEC function
    • Professional Development DIO
Next Step: IRC April Meeting

- Evidence of substantial compliance with ACGME Institutional Requirements: Consent Agenda
- Data necessitated Sponsoring Institution clarification: Clarifying Information Requested
  - GMEC minutes, progress in addressing citations, other information
- Data prompted request for further information: Full or Focused Site Visit Requested
Annual Review Status

• Consent Agenda: 342 (94.7%)
• Clarifying Information Requested: 7 (1.9%)
• Site Visit Requested: 6 (1.7%)
• Annual Accreditation Decision Made July 2015-January 2016: 6 (1.7%)
• At the April 27–29 IRC meeting, accreditation decisions were made for the virtually all of the 361 Sponsoring Institutions reviewed.
**WHAT THIS MEANS FOR SIs**

- If you received an email with an accreditation decision (or a request for clarifying information), your Sponsoring Institution was reviewed by the IRC this year.
- Continued Accreditation allows Sponsoring Institutions to focus on specific, self-determined goals without burdensome submissions to ACGME.
- The IRC expects SIs to keep their ADS data—including responses to citations—up to date.
- Early identification and improvement of program issues remains important.
By June 2017, the IRC will resolve all citations issued prior to July 1, 2013 for Sponsoring Institutions that have Continued Accreditation for two (2) consecutive years.
The IRC is working on equitable review of single-program Sponsoring Institutions in future annual reviews.
The IRC’s transition to NAS is still underway. Annual data reviews—including the indicators used in the case finding process—may change from year to year.
Eligibility Requirements for Residents

III.A.1.a): All prerequisite postgraduate clinical education required for initial entry or transfer into ACGME-accredited residency programs must be completed in ACGME-accredited residency programs, or in Royal College of Physicians and Surgeons of Canada (RCPSC)-accredited or College of Family Physicians of Canada (CFPC)-accredited residency programs located in Canada. Residency programs must receive verification of each applicant’s level of competency in the required clinical field using ACGME or CanMEDS Milestones assessments from the prior training program.
IRC Membership

- James Zaidan, MD, succeeded by Carol Rumack, MD, DIO of University of Colorado, Denver
- 1 member transition in 2017
- Nominations for term beginning 2017 accepted in Fall 2016
- Some selection factors
  - Current or previous DIO or dean-level GME appointment
  - SI in Continued Accreditation
  - Experience with medical education leadership organization
  - Time commitment
  - Computer skills
  - Geographic mix
April 1, 2015-June 30, 2020: term of the ACGME’s memorandum of understanding (MOU) with the American Osteopathic Association (AOA) and the American Association of Colleges of Osteopathic Medicine (AACOM)

ACGME creates Osteopathic Neuromusculoskeletal Medicine requirements and RC, and Osteopathic Recognition process for programs

May 2015: First IRC review of applications under the MOU; SIs accredited

September 2015: First residency programs achieve Initial Accreditation
**Transitional Statuses: SIs**

- **Pre-Accreditation:** The Sponsoring Institution (SI) submitted an application, but the application has not yet been reviewed by the IRC. An SI with Pre-Accreditation status may open and submit ACGME accreditation applications for residency and fellowship programs. Must participate in data reporting.

- **Continued Pre-Accreditation:** The IRC reviewed the application and determined that the SI is not in substantial compliance with Institutional Requirements. An SI with Continued Pre-Accreditation status may open and submit ACGME accreditation applications for residency and fellowship programs.

- **Initial Accreditation**

*ACGME Policies and Procedures §18.120*
**Transitional Statuses: Programs**

- **Pre-Accreditation**: The program submitted an application, but the application has not yet been reviewed by the specialty RC. Must participate in data reporting.

- **Continued Pre-Accreditation**: The specialty RC reviewed the application and determined that the program is not in substantial compliance with Institutional Requirements.

- **Initial Accreditation—Contingent**: The program is in substantial compliance but the SI remains in Pre-Accreditation or Continued Pre-Accreditation. The SI must receive Initial Accreditation within 2 years.

*ACGME Policies and Procedures §18.120*
A SINGLE ACCREDITATION SYSTEM

• Application is the same for all SIs
• IRC applies same substantial compliance standard to all SIs
• IRC requests response to Continued Pre-Accreditation via response to citations or reapplication
• Variety of accredited SIs; most commonly teaching hospitals and Osteopathic Postdoctoral Training Institutions (OPTIs)
• IRC membership includes a DIO from an osteopathic Sponsoring Institution
A SINGLE ACCREDITATION SYSTEM

- 116 new Sponsoring Institutions have started applications
- By October 2016, the IRC will have reviewed more than 90 applications through the Single Accreditation System
- As of April 2016, 44 SIs have achieved Initial Accreditation
- Our learning continues…
Sponsoring Institution 2025

• 18-month project commissioned by the ACGME Board of Directors
• Will develop a future vision for accredited Sponsoring Institutions
• 20-member task force including DIOs, CEOs, CMOs, a CNO, residents, public members
• Spring/Summer 2016: Data gathering and listening sessions
• Final report will guide institutional accreditation and improvement processes
The Accreditation System After the "Next Accreditation System"

Thomas J. Nasca, MD, MACP, Kevin B. Weiss, MD, James P. Bagian, MD, PE, and Timothy P. Brigham, MDiv, PhD

Abstract

The Accreditation Council for Graduate Medical Education (ACGME) and the American Board of Medical Specialties and its member boards introduced the six domains of physician competency in 1999. This initiated a national dialogue concerning the elements of competency of the physician, and incorporation of these elements into the framework of evaluation of residents and fellows, as well as the educational programs within which they are trained. The next step in this process will be the ACGME's Next Accreditation System, which the authors describe in this commentary. Recognizing that there are already developments in the assessment of medical education that will influence future models of accreditation, the authors consider some of these innovations and discuss how they may shape the next accreditation system after the Next Accreditation System.
NAS, CLER, Milestones: tools, not ends in themselves

• Common Program Requirements: Major Revision
  – Section VI
  – Sections I-V

• Institutional Requirements: Major Revision, 2017

• Completion of Single Accreditation System, 2020
SI2025 Task Force

Co-Chairs

- John Duval, MBA, Chief Executive Officer, Virginia Commonwealth University Hospitals
- Lawrence M. Opas, MD, Associate Dean for Graduate Medical Education and Designated Institutional Official, Keck School of Medicine, University of Southern California

Vice Chair

- Thomas J. Nasca, MD, MACP, Chief Executive Officer, Accreditation Council for Graduate Medical Education
SI2025 Task Force

- Linda B. Andrews, MD, Senior Associate Dean for Graduate Medical Education and Designated Institutional Official, Baylor College of Medicine
- Donald Wayne Brady, MD, Associate Dean for Graduate Medical Education and Designated Institutional Official, Vanderbilt University
- Michael G. Glenn, MD, Chief Medical Officer, Virginia Mason Medical Center
- Linda Hunt, Chief Executive Officer, Dignity Health
- Charles M. Kilo, MD, MPH, Vice President and Chief Medical Officer, Oregon Health and Science University Healthcare
- Victoria Konold, MD, PGY-2 Resident, Pediatrics, Advocate Lutheran General Hospital
- Richard D. Krugman, MD, Distinguished Professor, University of Colorado School of Medicine
- William A. McDade, MD, PhD, Deputy Provost for Research and Minority Issues, University of Chicago
SI2025 Task Force

- Mary G. Nash, PhD, RN, Chief Nurse Executive and Associate Vice President for Health Sciences, The Ohio State University Wexner Medical Center
- Carmen Hooker Odom, Public Member
- Kristy Rialon, MD, PGY-5 Resident, Surgery, Duke University Hospital
- Karen Sanders, MD, Deputy Chief Academic Affiliations Officer, Veterans Health Administration (Ex Officio)
- Howard M. Shulman, DO, FACP, Associate Dean for Postdoctoral Education and Designated Institutional Official, Midwestern University Osteopathic Postdoctoral Training Institution
- George Thibault, MD, President, Josiah Macy, Jr. Foundation
- Keith Watson, DO, President, Pacific Northwest University of Health Sciences
- Paulette Wehner, MD, Senior Associate Dean for Graduate Medical Education and Designated Institutional Official, Marshall University School of Medicine
- Rowen Zetterman, MD, Director of Faculty Mentorship Programs, University of Nebraska Medical Center
SI2025 Task Force

- Full Task Force meeting February 2016
  - Planning for information gathering phase
  - Scenario planning activity on healthcare and GME
- Split into groups to conduct regional sessions
- Full Task Force meeting October 2016
  - Synthesizing information
  - Determining findings/recommendations
  - Commence writing of report
SI2025 Task Force: Potential Focus Areas

- Linking GME accreditation with other accreditation and certification activities
- Coordinating efforts to improve patient care in residents’ and fellows’ clinical learning environments
- Facilitating transitions from UME into GME and GME into post-GME clinical practice
- Setting expectations for skill acquisition, professional behaviors and lifelong learning
- Advancing interdisciplinary learning
- Advancing interprofessional team-based education
SI2025 Task Force: Potential Focus Areas

• Championing resident, fellow and faculty involvement with patient safety and quality improvement strategies around systems-based practice
• Coordinating and/or overseeing simulation-based learning, including activities related to interprofessional team-based practice
• Overseeing and supporting resident/fellow assessment
• Promoting resident, fellow and faculty well-being
• Supporting faculty development
• Facilitating scholarly work in the GME environment, including clinical and education research
**SI2025 Listening Sessions**

May 11-12, 2016: Chicago  
June 15-16, 2016: Washington, DC  
July 6-7, 2016: Houston  
August 4-5, 2016: Los Angeles  
September 14-15, 2016: New York  

* Plus activities to capture feedback from SIs (e.g., rural or small) and stakeholders that are underrepresented at the regional events.*
**SI2025 : Chicago Listening Session**

- Protocol guided by Task Force with input from IRC discussion and ACGME Annual Education Conference session
- Feedback from 91 individuals including Deans, Senior Hospital Leaders, DIOs and GME Staff, Program Directors and Coordinators, Residents, Fellows, Nurses, Nurse Practitioners, Pharmacy, Medical Students
- Participants are prompted to discuss future focus areas in healthcare and GME
- Lessons learned will refine process
SI2025 Listening Session Components

1) Learning Visit
   A. Teams visit 2-3 Sponsoring Institutions for 5 hours
   B. 45-minute guided discussions with senior leaders, DIO/GME, PDs, Residents, Fellows, Interprofessional Team Members, Other Learners

2) Focus Group
   A. 2-hour discussion
   B. Task Force members interview specific stakeholder group

3) Open Forum
   A. 2-hour discussion
   B. Mix of stakeholder interests
How to Participate in SI2025

• SI2025@acgme.org
• Regional listening sessions this spring/summer
  – Sponsoring Institution learning visits
  – Stakeholder focus groups
  – Open forums
• Surveys
• Public comment
THANK YOU

IRC@ACGME.ORG