# ACGME/ANRC Q & A

**Association of Anesthesiology Program Administrators and Educators**

**November 11, 2016**

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*Executive Director, Anesthesiology Review Committee*

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# Objectives

- ➢ Overview of Annual Program Review process
  - ▪ Meetings and submission timeline
  - ▪ Common issues
  - ▪ Types of citations
- ➢ Describe mission and members of ACGME Coordinator Advisory Group
- ➢ Answer your questions

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# Disclaimer

- ➢ I am employed by the ACGME

- ➢ The information in these slides is intended to be used in conjunction with guidance from the Review Committee's Executive Director, and/or Senior ACGME leadership

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**Accreditation Council for Graduate Medical Education**

# Overview of Annual Program Review Cycle

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# Data for RRC Annual Program Review

- ➢ Case logs (final entry July-August)
- ➢ Annual Update (Sept-Oct)
- ➢ Major Changes, Response to Citations
- ➢ Scholarly activity
- ➢ Faculty Certifications Resident/Faculty Surveys (Jan-April)
- ➢ Board Pass Rates - ABA

*Programs encouraged to perform an update on new information, especially on any newly-certified faculty, before June 30th*

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# New RC Meeting Timeline

**Winter RC meeting**

- ➢ Agenda Priority is Annual Program Review
- ➢ Most accreditation decisions made
- ➢ January 26-27, 2017 (ACD—Oct 7th, 2016)

**Spring RC meeting**

- ➢ Follow-up on small number of programs (e.g. site visits, clarifying information
- ➢ March 30-31, 2017 (ACD-Nov 18th, 2016)

**September RC meeting** for new applications

# RC Annual Review Process

**A program is placed on the RC's Main Review Agenda**

- If it received citations since July 1, 2013 (the inception of the NAS)
- If it is currently on Continued Accreditation with Warning or Probation
- When multiple issues identified among review metrics (e.g. low resident survey scores, low faculty scholarly activity)

*Otherwise, it is usually placed on either the Consent Agenda or Consent Agenda with AFIs*

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# Post Annual Review

**RC sends Letter of Notification to every program each year:**

- Confirming accreditation status
- Indicating if additional information is needed (i.e. Site Visit, Clarifying Information, Progress Report)
- Listing citations
- Listing Areas for Improvement
- Commend exemplary performance or innovations

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# Citations

- Identify areas of noncompliance
- Must be linked to a program requirement
- Program **must** respond in ADS
- Responses reviewed annually by the RC
- Remain active until corrected
- Citations and Areas for Improvement (AFI) for Core and associated Subs will appear on Letter of Notification (LoN)
- Guide to LoN available online

[citation needed]

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# NAS Accreditation Decisions

| Pre-Review Status | Possible Post-Review Status |
|---|---|
| **Application** (Core programs will have a site visit prior to the review) | Withhold |
| | Initial Accreditation (1 or 2 years) |
| **Initial Accreditation** (After full site visit) | Continued Accreditation |
| | Initial Accreditation w/ Warning (1 year only) |
| | Withdrawal of Accreditation |
| **Initial Accreditation w/ Warning** (After full site visit) | Continued Accreditation |
| | Withdrawal of Accreditation |

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# NAS Accreditation Decisions

| | |
|---|---|
| **Continued Accreditation** | Continued Accreditation |
| | Continued Accreditation w/ Warning |
| | RC may request Focused or Full* Site Visit |
| | *After Full SV, options include: <br>-Probation w/ 1 or 2 year cycle <br>-Withdrawal of Accreditation |
| **Continued Accreditation w/ Warning** <br>(No permanent increases allowed) | Continued Accreditation |
| | Continued w/ Warning |
| | RC may request Focused or Full* Site Visit |
| | *After Full SV, options include: <br>-Probation w/ 1 or 2 year cycle <br>-Withdrawal of Accreditation |
| **Probation** <br>• Probation cannot exceed 2 consecutive annual reviews <br>• No permanent increases allowed <br>• Must have Full Site Visit before issued | Continued Accreditation |
| | Continued Accreditation w/ Warning |
| | Continued Probation, 1 year |
| | Withdrawal of Accreditation |

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# Types of Citations

**Extended:** RC determines program has not fully addressed the issue cited

**Resolved:** RC determined program has adequately addressed the issue cited

**New:** RC identified new issues during the annual review process and/or site visit that program must address

*Expectation is that program implements plans to address issues prior to next year's APR process*

*If a program receives no new citations for two consecutive years, its citations are resolved*

# Areas for Improvement

- Identifies concerning trends
- May or may not be linked to a requirement
- Not yet a significant problem unless issue persists
- Address these before they become citations

*There is no need to respond to Areas for Improvement either in ADS or in letter form.*

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# Notification Letter

**AREAS NOT IN COMPLIANCE (Citations)**
The Review Committee cited the following areas as not in substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements:

➡️ **EXTENDED CITATIONS**

Citation description *(based on citation code)*/Since: *(date citation was originally issued)*/Status: Extended
*(Citation and supporting text will be pulled into the LON – no need to reenter)*

**Continued non-compliance:** *(Date citation was extended will be entered)*

➡️ **NEW CITATIONS**
Citation description *(based on citation code)*/Since: *(date citation was originally issued)*/Status: New
**\*\* Reference in progress report** *(if applicable)* – THIS WILL APPEAR IN THE LON ONLY WHEN THE CITATION IS LINKED TO A PROGRESS REPORT WHEN POST MEETING ACTIONS ARE ENTERED

**Type of Response for Progress Report** *(if applicable)*

➡️ **RESOLVED CITATIONS**
The Review Committee determined that the following citations have been resolved.

Citation description *(based on citation code)*/Since: *(date citation was originally issued)*/Status: Resolved

➡️ **OPPORTUNITIES FOR PROGRAM IMPROVEMENT/CONCERNING TRENDS** *(if applicable)*
The Review Committee identified the following opportunities for program improvement and/or concerning trends:

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# Program Coordinator Advisory Group

**Charge:**

To serve as a consultative body to the ACGME administration concerning coordinator, graduate medical education, learning environment, and accreditation matters

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# Background

- Coordinators were nominated by program director or DIO
- Nearly 200 applications
- 13 members appointed May 31, 2016
- Members serve 3 year terms
- Two in-person meetings per year
- Members represent institutional, medical, surgical, and hospital-based accreditation and represent all coordinators
- ACGME sought diversity in terms of geography, specialty, and program/institution size

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# Charge

- The ACGME's goal in launching the Coordinator Advisory Group is to build a team that will engage with the ACGME to make the accreditation process more clear and effective
- All group comments and recommendations will be reviewed and evaluated by ACGME senior leadership
- Potential next steps for each recommended item will be communicated back to the group as they are considered
- The work product of the advisory group will not be statements or papers but advice to the ACGME administration and leadership in general or related to specific initiatives

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# September 2016 Meeting

**Four Major Topic Discussions:**
- Next Accreditation System
- Sponsoring Institution-2025
- ACGME Communications
- The Role of the Coordinator

**Group Recommendations**
- Developing a listserv for coordinators to collaborate
- Coordinator Training
  New Coordinator resources and training materials|
  Web-based training: shorter, subject-based
  Regional conferences to defray travel costs

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## Questions?

Thank you!

# ACGME Program Accreditation Status Decisions

| If the current status is: | It might receive... | |
| --- | --- | --- |
| | Status | |
| **Application**<br>(Core programs will have a site visit prior to review) | Withhold | Can be appealed |
| | Initial Accreditation<br>(1 or 2 years) | |
| **Initial Accreditation**<br>(After full site visit) | Continued Accreditation | |
| | Initial Accreditation w/Warning<br>(1 year only) | |
| | Withdrawal of Accreditation | Can be appealed |
| **Initial Accreditation w/Warning**<br>(After full site visit) | Continued Accreditation | |
| | Withdrawal of Accreditation | Can be appealed |
| **Continued Accreditation** | Continued Accreditation | |
| | Continued Accreditation w/Warning | |
| | Request Focused or Full* Site Visit | |
| | *After Full SV, options include:<br>  - Probation with<br>    1 or 2 year cycle<br>  - Withdrawal of Accred | Can be appealed |
| **Continued Accreditation w/Warning**<br><br>(No permanent increases allowed) | Continued Accreditation | |
| | Continued w/Warning<br><br>Request Focused or Full* Site Visit | |
| | *After Full SV, options include:<br>  - Probation with<br>    1 or 2 year cycle<br>  - Withdrawal of Accred | Can be appealed |
| **Probation**<br>• Probation cannot exceed 2 consecutive annual reviews<br>• No permanent increases allowed<br>• Must have Full Site Visit before any of the actions | Continued Accreditation | |
| | Continued Accreditation w/Warning | |
| | Continued Probation, 1 year | Can be appealed |
| | Withdrawal of Accreditation | Can be appealed |

**Creating a Coordinator ADS login.**

The Program Director or Coordinator with a login can add or replace a Program Coordinator record in ADS. A limit of two PCs may be added. Replacing a PC will disable the former PC's ADS login if one was issued. An auto-generated email notification containing the new PC's username and password will be sent to the registered email after granting access and saving the record.

**To add or replace a Program Coordinator:**

1. Log into ADS with the Program Director or Program Coordinator login.
2. From the **Program** tab, click **View Program**.
3. On the Program page, scroll down to Program Leadership section.
4. On the former coordinator record, click **Replace** or, if adding an additional coordinator, click **Add Personnel**.



5. In the *Select the New Program Coordinator* window, enter the name and email to find an existing contact record then follow the prompts to add/update the coordinator contact information.



6. When saving the record, if the PD permits the PC to obtain an ADS login, select "Yes" to the grant user access prompt.

**To create a Coordinator login for an existing Coordinator.**

Only the PD can see the Grant User button on an existing PC record. Once the PD clicks this button and confirms, a new login is created for the existing coordinator. A notification will be sent to the coordinator's registered email with their new username and password.