

Dermatology RRC Overview and Update

Nicole Owens, Chair

Eileen Anthony, Executive Director



Dermatology RRC Members

- Nicole M. Owens, MD (Chair)
- Amy Paller, MD (Vice-Chair)
- Katherine Bao-Shian Lee, MD (Resident)
- Antoinette Hood, MD (ABD Ex-Officio)
- Ron Moy, MD
- James W. Patterson, MD
- Mary Stone, MD
- R. Stan Taylor MD (Former Chair)
- Col. George W. Turiansky, MD
- John Zitelli, MD



Membership

- 4 Appointed by the AMA (CME)
- 4 Appointed by the ABD
- 1 Resident
- 1 Ex-officio from ABD (no vote)
- 6 year terms
- Chair serves for three years
- Vice chair for maximum of two



Current Members

- 3 Mohs Surgeons
- 2 Dermatopathologists
- 2 General Dermatologists
- 1 Pediatric Dermatologist
- All current or prior PDs
- Geographically represent Texas, Indiana, Iowa, Illinois, Maryland, Virginia, California and New Jersey
- 2 positions open in July 2013



ACGME

Tasks of the Dermatology RRC

- Evaluation of training programs for compliance with ACGME standards
- Update program requirements every 5 years
- Comply with oversight requirements of the ACGME
 - 5 year review by ACGME Monitoring Committee

- Represent the community of derm educators to the ACGME
- Address areas of need and work with Program Directors
- Identify outstanding accomplishments and “notable practices”
- Attempt to simplify the RRC oversight of programs process



Dermatology RRC ACGME Staff

- Eileen Anthony, MJ --Executive Director
- Sandra Benitez--Senior Accreditation Administrator
(*effective 10.1.12*)
- Gloria Rouse--Accreditation Assistant
- ADS Support --Jenna Walls



Number of Programs and Residents

	# of PROGRAMS	# of TRAINEES
Dermatology	114	1174
Dermatopathology	54	91
Procedural Dermatology	44	45

Accreditation Cycle (New Core Programs)

- Application submitted and reviewed by 2 RRC members (no on-site visit for fellowship apps)
- Presented and discussed by entire RRC
- Email (accreditation action only) within 5 days
- Letter of Notification (details) within four weeks

- Accreditation granted for 1,2 or 3 years or
- Withhold (proposed) accreditation



Accreditation Cycle (Existing Programs)

- PIF submission
- Site visit to verify/clarify information
- 2 RRC members assigned to review program
 - PIF
 - Site visitor report
 - Case log data
 - Resident/fellow survey
- Presented to and discussed by RRC
- Accreditation decision by committee



Program Accreditation

- Programs are reviewed based upon substantial compliance with program requirements
- Single sponsor programs must also comply with institutional requirements
- If found noncompliant, a citation is issued
- Suggestions/concerns may be presented but not binding/held to compliance at time of next review
- Progress report may be requested
- Commendations may also be presented



Reaccreditation Options

- 1-5 year accreditation +/- progress report
- Probation (proposed first with rebuttal option)
- Expedited Withdrawal of accreditation (catastrophic loss of resources, threats to patient safety, resident safety/well being, etc.)
- If less than 2 years, program receives warning that accreditation may be at risk



The Progress Report (if requested)

- Articulate Program's response to citation(s)
- Provide requested documentation or evidence of compliance
- Report approved by the institution's GMEC, signed by DIO, sent in by due date
- Can change cycle interval if report unacceptable (or lengthen if appropriate)
- Citations do not go away
- RRC may perform interim review of operative logs

Program Requirements

- Core Dermatology Requirement Revisions in committee
- Procedural Dermatology Requirements (2010)
- Dermatopathology Requirements (2011)

- Posted on the website
- Revisions scheduled every 10 years with NAS
- May revise procedural derm/dermpath early 2013 due to Next Accreditation System



Accessing the Program Requirements

- Go to ACGME website
- Click Program and Institutional Guidelines (top left)
- Click Dermatology tab
- Click Program Requirements (currently in effect)
- Choose Core or Fellowship PRs from list

Questions? Contact Eileen Anthony (*now*) or Sandra Benitez (*after October 1st, 2012*)





Accreditation Council for Graduate Medical Education

Program and Institutional Guidelines	Data Collection Systems	Meetings and Conferences	Graduate Medical Education
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Hospital-Based Accreditation <ul style="list-style-type: none"> Anesthesiology Diagnostic Radiology Emergency Medicine Medical Genetics Nuclear Medicine Pathology Preventive Medicine Radiation Oncology Transitional Year 	Medical Accreditation <ul style="list-style-type: none"> Allergy and Immunology Dermatology Family Medicine Internal Medicine Neurology Pediatrics Physical Medicine and Rehabilitation Psychiatry 	Surgical Accreditation <ul style="list-style-type: none"> Colon and Rectal Surgery Neurological Surgery Obstetrics and Gynecology Ophthalmology Orthopaedic Surgery Otolaryngology Plastic Surgery Surgery Thoracic Surgery Urology 	Institutional Accreditation <ul style="list-style-type: none"> Institutional Review Review and Comment <ul style="list-style-type: none"> Archive Index Statement of ACGME Relating to November 26, 1999
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The Next Accreditation System



[Click here to visit the ACGME Next Accreditation System Microsite](#)

Upcoming Meetings and Events

ACGME Annual Educational Conference

Duty Hours







Complaints

GME Focus

CHOOSE YOUR SPECIALTY

Data Collection Systems

Dermatology



-  [Call for Resident Nominations](#)
-  [Dermatology Case Logs](#)
-  [Procedural Dermatology Case Logs](#)
-  [Most Frequent Citations for Dermatology, Procedural Dermatology, and Dermatopathology](#)
-  [Memo: Mohs College Case Logs](#)
-  [Resident Complement](#)

Program Requirements

-  [Currently In Effect](#)
-  [Dermatology](#) 7/2007
-  [Dermatopathology](#) 7/1/2011
-  [Procedural Dermatology \(minor revision 08/17/2010\)](#) 7/1/2010

-  [Approved but not in Effect](#)



PIFs



-  [New Application](#)
-  [Continued Accreditation](#)

STAFF







RC MEMBERS

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Common Resources

- [ACGME Glossary of Terms](#) 
- [Institutional Requirements](#) 
- [Common Program Requirements](#) 
- [One-Year Common Program Requirements](#) 
- [Program Director Guide to the Common Program Requirements](#)
- [Program Directors' "Virtual Handbook"](#)
- [Apply for Accreditation in Eight Easy Steps](#) 
- [Appointment Process for ACGME Review Committee Members](#) 

Case Log Data

- RRC has struggled with how to use data
- Data compared to program requirements
- Citations issued if noncompliance seen
- Large number of citations given in 2010-2011 due to deficiencies in noncore procedures (laser, sclerotherapy, botox, soft tissue augmentation)
- Adjusted how we use the data for this year



**Important Changes Regarding use of the ACGME Case Log System to Evaluate Dermatology
Residency Programs
(effective July 1, 2012)
Review Committee for Dermatology
ACGME**

A residency program will be out of compliance and a citation will be generated if, in any two out of three years, the average for more than any two Level 1 index procedures or any six Level 2 index procedures falls below two standard deviations of the national mean. Residency programs will still be required to teach residents to competency in biopsy techniques, destruction techniques, vascular lasers, excision with simple, and intermediate and complex repair techniques, including flaps and grafts (Program Requirement IV.A.5.a).(3).(a)). Use of Case Log data in this fashion will give residency programs the flexibility to select which cosmetic procedures they provide their residents (Program Requirements IV.A.5.a).(3).(b) and (c)).

Table: Index procedures for dermatology residents grouped by Category and divided into three levels of educational experience

	Resident Case Log Index Procedures
Resident Level 1: Perform <ul style="list-style-type: none"> Residents should achieve competency in these procedures that require they act as Resident Surgeon and Assistant. Goal: didactics in all; <2 procedures <2SD below national mean for Resident Surgeon and Assistant. 	Vascular Lesion Laser
	Excision – Benign Lesion
	Excision – Malignant Lesion
	Repair (Closure) – Simple/Intermediate/Complex
	Flaps
	Grafts (Split or Full)
Resident Level 2: Observe <ul style="list-style-type: none"> Residents should have significant exposure to these procedures through direct observation or as Assistant. Goal: didactics for all; <6 procedures <2 SD below national mean for Assistant. 	<u>Mohs Micrographic Surgery</u>
	Hair Removal Laser
	Pigmented Lesion Laser
	Laser (Ablation, Resurfacing)
	Non-ablative <u>Rejuvenation</u>
	Intense pulsed light
	<u>Botulinum Toxin Chemodenervation</u>
	Soft Tissue Augmentation/Skin fillers
Chemical Peels: Superficial - <u>Epi</u>	
Resident Level 3: Didactic Education <ul style="list-style-type: none"> Faculty members must provide education in these and other cosmetic techniques but residents need not perform nor observe. Goal: didactics in all. 	Tumescent Liposuction
	Scar Revision (Acne Scar)
	<u>Dermabrasion</u>
	<u>Ambulatory Phlebectomy/Vein Surgery</u>
	Nail Procedures
	Hair Transplantation
	<u>Rhinophyma Correction</u>
	<u>Lip Excision/Wedge/Vermilnectomy</u>
Miscellaneous	

Case Log Data

- Current system may not ensure competence or “significant exposure” given 2 SDs below the mean can equate to “0”
- Immediate goal is to define “core”/ essential procedures
- Minimums for core procedures under NAS

Case Log Reports

- PDs can access national, program and resident/fellow case log reports
- Log into Case Log using PD log-in
- Click on national reports



First Page of National Report

DERMATOLOGY: NATIONAL RESIDENT REPORT (Defined Categories - Main Table)
 Reporting Period: Total Experience of Residents Completing Programs in 2010-2011
 Residency Review Committee for Dermatology
 Report Date: August 22, 2011

[PAGE 1] Number of Programs in the Nation: 109 Number of Residents in the Nation: 375

Category	RRC Procedure	SURGEON					OBSERVED				
		Natl Res AVE	Natl Res STD	Natl Res MIN	Natl Res MED	Natl Res MAX	Natl Res AVE	Natl Res STD	Natl Res MIN	Natl Res MED	Natl Res MAX
Category 1	Excision - Benign Lesion	46.8	36	0	39	199	4.1	12	0	1	154
	Excision - Malignant Lesion	60.5	41	1	53	225	4.9	10	0	1	98
	Nail Procedures	4.7	5	0	3	54	1.0	2	0	0	14
	Repair (Closure) Simple/Intermediate/Complex	133.6	83	0	120	539	20.8	32	0	6	215
	Grafts (Split or Full)	7.2	11	0	3	80	2.6	6	0	1	65
	Flaps	17.3	22	0	11	134	7.4	13	0	2	91
Category 2	Mohs Micrographic Surgery	61.1	80	0	33	604	47.1	69	0	15	395
	Mohs Micrographic Surgery (Complex/Large)	23.0	40	0	3	224	13.6	29	0	1	207
	Laser Procedures (Including Intense Pulsed Light)	26.3	36	0	15	222	8.4	15	0	2	99
Category 3	Ambulatory Phlebectomy/Vein Surgery	0.0	0	0	0	4	0.1	0	0	0	4
	Sclerotherapy	3.1	6	0	1	52	1.1	3	0	0	22
	Tumescent Liposuction	0.3	1	0	0	14	0.3	1	0	0	7
	Resurfacing Techniques (Including Laser Dermabrasion, Chemical Peel,	7.0	10	0	3	72	2.0	3	0	0	22
	Hair transplantation	0.1	1	0	0	10	0.1	0	0	0	4
	Soft Tissue Augmentation/Skin Fillers	6.1	8	0	3	43	4.5	9	0	1	68
	Scar Revision (Acne Scar/Procedure Not Listed)	0.7	2	0	0	15	0.2	1	0	0	14
	Botulinum Toxin Chemodennervation	10.9	14	0	6	110	5.8	14	0	1	161
	Other (Excluding Skin Biopsies and Skin Destruction of Benign and Malignant	20.3	148	0	1	2,407	0.7	2	0	0	24
Total	TOTAL- All Categories	429.1	294	9	356	2,856	124.9	153	0	59	785
Miscellaneous	TOTAL - Misc. (Includes Skin Biopsies and Skin Destruction of Benign and Malignant	20.5	95	0	0	842	0.3	2	0	0	25



Accreditation Council for Graduate Medical Education

Program and Institutional Guidelines	Data Collection Systems	Meetings and Conferences	Graduate Medical Education
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- Accreditation Data System
 - Resident Case Log System
 - Case Logs Statistical Reports
 - List of Specialties Using Case Logs
 - Competency Evaluation System
 - Accredited Programs and Sponsor Search
- Resident Fellow Survey
 - Frequently Asked Questions
 - Sample Specialty Specific Surveys
 - What do programs need to do



Accreditation is accomplished through a peer review process and is based upon established standards and guidelines.

The Next Accreditation System



Click here to visit the ACGME Next Accreditation System Microsite

Announcements

- ❖ The Accreditation Data System (ADS) public site will be unavailable from September 9th – September 17th.
- ❖ Welcome to the new ACGME website! The goal of the new website design is to make the site easier to navigate and to furnish up-to-date information in real time. Questions or comments about the new website should be directed to: webfeedback@acgme.org

Quick Links

RESIDENTS	PD / COORDINATORS	DIO'S
Resident Services		
Resident Survey		
Duty Hours		
Complaints		
GME Focus		

CHOOSE YOUR SPECIALTY



**Accreditation Council for
Graduate Medical Education**

ACGME

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

[Resident Case Log System](#)

Resident Case Log System

Access to the Resident Case Logs System is secured by an encryption certificate obtained through the Verisign Corporation. We use 128-bit SSL encryption to help ensure the secure transfer of information. If you are using a less secure encryption level you may experience difficulty and should upgrade.

The data you provide us will be used by ACGME for accreditation, will be maintained confidentially, and will not be distributed for commercial use.

Summary data and other information about programs, institutions, resident physicians or resident

Quick Links

- [Accreditation Data System](#)
- [Resident Fellow Survey](#)
- [Resident Case Log System](#)
- [Competency Evaluation System](#)
- [Accredited Programs and Sponsor Search](#)
- [Application Support](#)
- [Browser Compatibility](#)

ACGME Resources



Welcome to Resident Case Logs

As the ACGME works to become more responsive in its provision of timely and complete data, there will be an increasing focus on annual data collection and outcomes. To accommodate these data needs, the ACGME has designed a new integrated data system that optimizes the user experience. At this time, our system deployment is scheduled to begin on September 9th at 12am CDT. All systems (ADS, Case Logs, and Surveys) will be unavailable until September 17 at 7am CDT. During this timeframe there will be no access to our data collection systems.

For programs with site visits between (September 9 and October 5): Your assigned field representative will contact you with a plan for the date of PIF/IRD submissions. Please note that if you are early in the downtime window, you may be asked to submit your PIF/IRD early so it can be sent to the field representative before the start of the downtime. If your site visit is scheduled soon after the downtime window, your field representative may agree to a late submittal of the PIF/IRD to allow it to be completed after the downtime. Your field representative will contact you in the next few days.

Please contact your field representative or Jane Shapiro in the Department of Field Activities (312-755-5015 or jshapiro@acgme.org) about an upcoming site visit or WebADS@acgme.org with system related questions.

Please sign in

User ID:

Password:

[I cannot access my account](#)

The Accreditation Council for Graduate Medical Education (ACGME) is responsible for the accreditation of post-MD medical training programs. Accreditation is accomplished through a peer review process and is based upon established standards and guidelines.

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- Home/Annual Update Status
- Contact ADS Staff
- Log Out
- Update Program Info
- Update Resident Info
- Request Changes
- PIF Preparation
- Resident/Fellow Survey
- Case Log Reports**
- Site Visit Results
- Tools/Reference

CASE LOG REPORTS

2010-2011

National Level Report
Program Level Report
Fellow Level Report

View Report (requires Adobe Acrobat Reader)	Report Title
	National Level Report
	Program Level Report
	Resident Level Report
3 Reports Found	



Other Helpful Resources

- FAQs
- Assessment tools
 - Under notable practices—left hand side of Derm page
 - Optional to use
 - Direct observation, surgical assessment tool, Multisource feedback forms, Competency RX



ADS

(Site for Mandatory Reporting)

- All participating site changes (addition or deletion)
- Requests for permanent or temporary increases in resident complement
- Program director changes
- Voluntary withdrawal requests



Common Program Deficiencies

PIF completion accuracy

Requirement: The PD must prepare an accurate statistical and narrative description of the program

- Omission of information
- Not following directions (please call/e-mail if questions)
- Errors, contradictory data
- Not answering the question
- No signature by DIO

All official communication (e.g., progress reports, rebuttals to proposed adverse actions) must be signed by DIO



ACGME

Common Program Deficiencies

Core Dermatology

- Evaluation of Residents
- Responsibilities of the Program Director
- Educational Experience
- Evaluation of Program
- Goals and Objectives
- Institutional Support



Common Program Deficiencies Procedural Dermatology

- Institutional Support
- Responsibilities of the Program Director
- Curricular Development
- Goals and Objectives
- Evaluation of Program
- Evaluation of Fellow



Common Program Deficiencies Dermatopathology

- Evaluation of fellows
- Curricular Development
- Evaluation of Program
- Educational Program—Didactics
- Responsibilities of Program Director



Recommendations

- Do not rely on your program coordinator or fellow to complete PIF
- Review the final draft before sending to the RRC
- Ensure evaluations (fellow, faculty and program) are documented
- Ensure that curriculum and educational content covers all required areas



What's New or Upcoming

- Dermatopathology Curriculum Organization (2011)
- Case Log Review/Implementation (2012)
- ACGME Mandated Eligibility Criteria
- Program Requirement Revisions
 - Core Dermatology
 - Procedural Dermatology
- Name Change for Procedural Dermatology Fellowship?
- Next Accreditation System



Dermatopathology Curriculum

- Dermpath exposure throughout entire fellowship year
- 8 months of the year:
- 50% of each day averaged over one week
 - Pathology training for dermatology trained fellows
 - Clinical dermatology for pathology trained fellows
- 4 months of 100% dermpath



The Next Accreditation System

- Realize the goal of outcomes based evaluation
- Free up good programs from detailed processes
- Allow for innovation
- Assist programs in need
- Base accreditation on outcomes
 - Outcomes to be defined by RRC
- Phase II programs (Derm.) to launch 2014



The Next Accreditation System

- **Continuous Accreditation Model**
Based on annual data submitted, other data requested, program trends
- **Scheduled Site Visits replaced by 10 year Self-Study Visit**
- **Institutional Visits every 18 months**
- **Standards revised every 10 years**

Standards organized by

- Structure
- Resources
- Core Processes
- Detailed Processes
- Outcomes



Annual Data Collected and Reviewed (Focus on Existing)

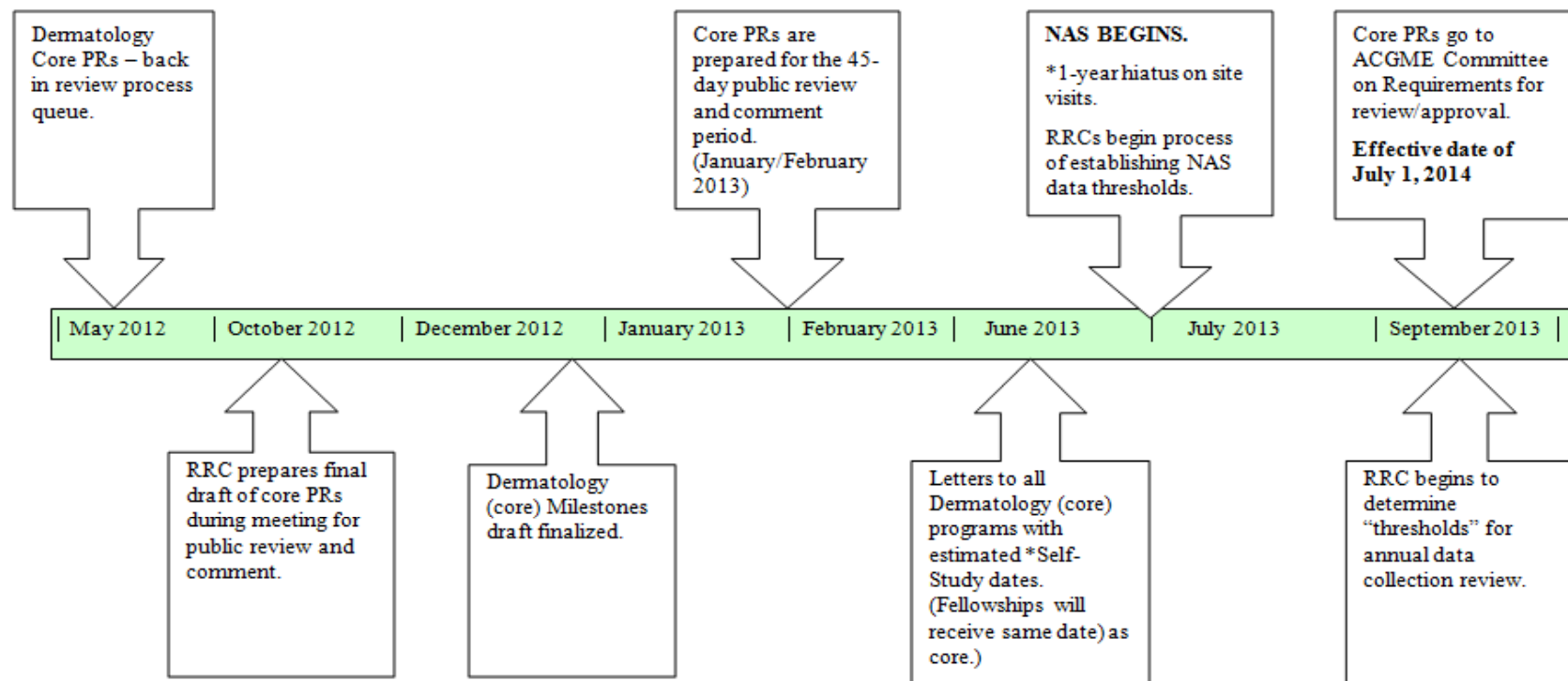
1. Annual ADS Update - Streamlined
 1. Program Attrition
 2. Program Characteristics – Structure and Resources
 3. Scholarly Activity
2. Board Pass Rate – Rolling Rates
3. Clinical Experience
4. Resident Survey
5. Faculty Survey – Core Faculty
6. Semi-Annual Resident Evaluation and Feedback
 1. Milestones
 2. Clinical Competency Committees
7. Sponsor Site Visit (CLER) TBD-total picture



Dermatology Timeline

NAS Transition

Dermatology - Phase II



*After first Self-Study, programs begin 10-year "reaccreditation" process. New Applications and programs with a current cycle of ≤ 3 years will undergo traditional site visit/RRC review process.

Program Requirement Revisions

- Core Dermatology Fall 2013
- Procedural Dermatology scheduled 2015
 - Likely 2013 due to next accreditation system
- Requirements will determine outcomes/data to be gathered
- Requirements will be divided into outcomes, core processes and detailed processes
- Detailed processes examined for new and troubled programs only



Making Case Log Data Public

- Outside forces pushing for transparency
- Publication of data likely in future
- MUST have accurate data, all procedures logged
- Case log data may be used by public and/or other specialties
- Objections to publication may be overruled by outside entities



Questions?