
Updates from the Review Committee for Dermatology

**Mary Stone, MD, Chair, Review Committee for
Dermatology**

Eileen Anthony, Executive Director

*Association of Professors of Dermatology
Friday, September 25, 2015*



Discussion of Topics

- RC-Dermatology Updates
- NAS (“Next” Accreditation System) is NOW- First year review and reflections
- Single Accreditation System (SAS)



RC-Dermatology Staff

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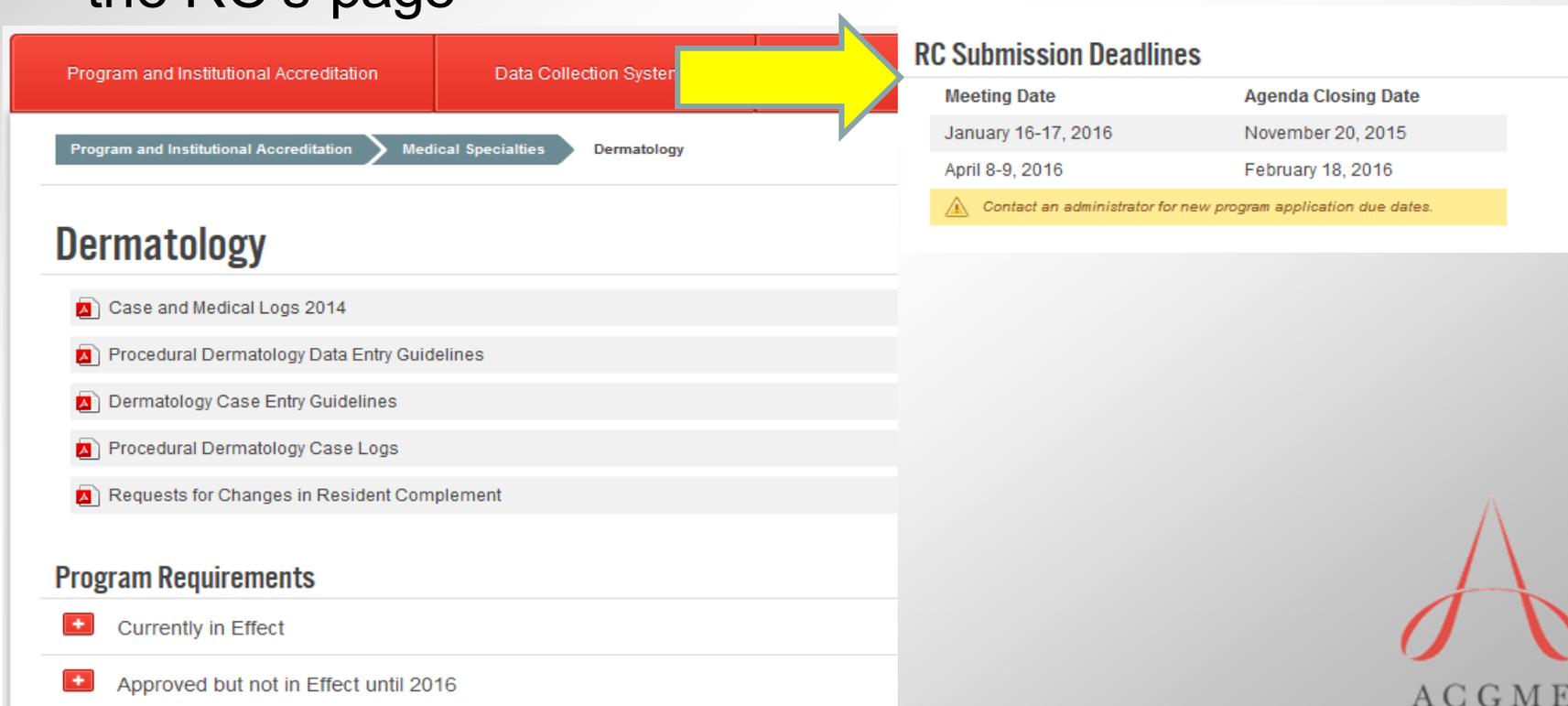
www.acgme.org

- RC for Dermatology Webpage
 - PRs, FAQs, etc., etc.
- ACGME Glossary of Terms
- Application Instructions
- ACGME Policies & Procedures
- Duty Hour FAQs and Resources
- Site Visit FAQs - New Programs



RC-Dermatology Webpage

- RC-Dermatology meets *twice* a year
- Meeting dates and agenda closing deadlines posted on the RC's page



The screenshot shows the RC-Dermatology webpage. At the top, there are two red navigation tabs: "Program and Institutional Accreditation" and "Data Collection System". A yellow arrow points from the "Data Collection System" tab to the "RC Submission Deadlines" section. Below the tabs, there are three dark blue navigation buttons: "Program and Institutional Accreditation", "Medical Specialties", and "Dermatology". The "Dermatology" button is selected. The main content area is titled "Dermatology" and contains a list of documents with red document icons:

- Case and Medical Logs 2014
- Procedural Dermatology Data Entry Guidelines
- Dermatology Case Entry Guidelines
- Procedural Dermatology Case Logs
- Requests for Changes in Resident Complement

Below the list is a section titled "Program Requirements" with two items:

- Currently in Effect
- Approved but not in Effect until 2016

To the right of the main content is a white box titled "RC Submission Deadlines". It contains a table with two columns: "Meeting Date" and "Agenda Closing Date".

| Meeting Date | Agenda Closing Date |
|---------------------|---------------------|
| January 16-17, 2016 | November 20, 2015 |
| April 8-9, 2016 | February 18, 2016 |

Below the table is a yellow warning box with a triangle icon and the text: "Contact an administrator for new program application due dates."



Committee Composition

- 3 appointing organizations - ABD, AMA *and* AOA (*effective July 1, 2015*)
- One public member (*effective July 1, 2015*)
- 11 voting members
- Ex-officio member from ABD (non-voting)
- 6 year terms -- except resident (2 years)
- Program Directors, Chairs, Faculty, and Public Representation
- Geographic Distribution
 - FL, IA, IL, IN, KS, MS, PA, RI, TX, WI



RC Members

- ABD

- Amy Paller, MD, Vice Chair
- Mary Stone, MD, Chair
- Erik Stratman, MD
- John Zitelli, MD

- Resident

- Brian Peterson, MD

- AMA

- Nicole Owens, MD
- William Hanke, MD
- Robert Brodell, MD
- George Elgart, MD

- AOA

- Stephen Purcell, DO, FAOCD

- Public Member

- Mary Theobald



The work of your RC

- Reviews programs with regards to common and specialty program requirements
- Determines accreditation status for programs
- Proposes revisions to program requirements
- Discusses matters of policy, issues relevant to the specialty
- Recommends changes in policy, procedures and requirements to the ACGME Council of Review Committee Chairs.



RC-Dermatology Updates

- Medical Log Discontinuation
- Focused Revisions to Core PRs
- Major Revisions to Procedural Dermatology PRs
 - Micrographic Surgery and Dermatology Oncology
- Minor Revisions to DermPath



NAS is NOW

Annual Data Reviewed by RC

- ✓ Annual ADS (Accreditation Data System) Update
 - Program Demographics – Structure and resources
 - Program Changes/Attrition
 - PD, core faculty, residents
 - Scholarly Activity – Faculty and residents
- ✓ Board Pass Rate – Provided directly by ABD
- ✓ Surveys – Faculty and residents
- ✓ Clinical Experience – Case logs
- ✓ Semi-Annual Resident Evaluation and Feedback
 - Milestones
- ✓ Ten year self-study and accreditation visits



ADS Annual Update

- “Traditionally” coordinator’s job
 - Now speaks directly to RC
- Program Director
 - Responsible for information entered
 - Should assure entries are timely, accurate, complete



Annual Data Collection

Common Mistakes

- Updated response to citation(s)
- Complete block diagram
- Participating sites
- Ensuring that all residents log cases
- Identification of core faculty/faculty credentials
- Scholarly activity
- Omissions (If it is not listed, it isn't so/didn't happen)



RC's Role in Accreditation Process

- **Change/Continue** accreditation status based upon data review:
 - the program's responses to *previous* citations
 - program data to determine substantial compliance with the requirements
- **Request** additional information from program
 - Clarifying information
 - Full or Focused Site Visit



What is a Focused Site Visit?

- Minimal notification given
- Minimal document preparation expected
- Team of site visitors
- Specific program area(s) assessed as instructed by RC



What is a Focused Site Visit?

- Assesses *selected* aspects of program and may be used:
 - to address *potential* problems identified during review of annually submitted data
 - to diagnose factors underlying deterioration in program's performance
 - to evaluate complaint against program



Full Site Visits

- Application for new core program
- At end of initial accreditation period
- RC identifies broad issues/concerns
- Other serious conditions or situations identified by RC
- 30-day notification given
- Minimal document preparation
- Team of site visitors



2014 RC Decisions

- 196 (core and fellowship) programs reviewed
 - Two (2) Site Visits Requested (Core) based on annual data
 - One resulting in Probation
 - Four (4) Initial Accreditation (1 Core; 3 Mohs)
 - One Withholding of an Application (Mohs)



The Program Self-Study

- A comprehensive (internal) review of the program
 - Information on how the program creates an effective learning and working environment and how this leads to desired educational outcomes
 - Analysis of strengths, weaknesses, opportunities and threats, and ongoing plans for improvement
- **Approximately 18 months later:** the 10-Year Site Visit
 - Time lag is by design to give programs time to make improvements



After the Self Study

- Program Prepares Self-Study Summary (ADS Upload)
- Brief (4 to 5 pages ~ 2300 word) summary of key dimensions of the Self-Study
 - Aims
 - External environmental assessment (Opportunities and Threats)
 - Annual Program Evaluation and the Self-Study Process
 - Learning that occurred during the self-study (Optional!)
- Information on areas for improvement identified in the self-study not included in the Summary (internal use only)



10-Year Accreditation Visit

- Approximately 18 months after self study to allow programs to implement improvements
- A “PIF-Less” Visit
- Program updates their self-study summary and provides information ONLY on the improvements that were realized from their self-study
 - No request for information on areas that have not been resolved
- Team provides verbal feedback
 - Key strengths and suggestions for improvement
- Team prepares a written report for the RC



10-Year Accreditation Visit RC Review

- Available to the RC:
 - ADS Data
 - The program's summary from the (internal) self-study approximately 18 months earlier
 - The SVR from the full accreditation site visit, which includes information on the improvements the program has made based on areas identified during their self-study
- Review of program aims, context and the improvements made in follow-up to the self-study allows the RC to assess the effectiveness of the self-study, with data on the improvements achieved being one measure of effectiveness



Review Committee Actions

- RC provides an letter of notification following the Site Visit
 - Citations, Areas for improvement
- RC provides feedback on the Self-Study taking into consideration
 - Program aims and context
 - Improvements reported and verified during the 10-year visit
 - Effectiveness of the self-study, based on the improvements the program reported it made as a result of its self-study
- No accreditation impact for initial feedback on the self-study



Education Plan

- Self-Study Sessions at the ACGME AEC (general session and session for New Coordinators)
 - Appointment time at AEC for programs with an early self-study (Dr. Philibert and Field Staff with Self-Study pilot experience)
- Planned Webinars:
 - New Approach to Self-Study and 10-Year Site Visit, Self-Study Basics, PDSA, Program Evaluation
 - Article on rationale for approach in June issue of JGME
- Self-study webpage
 - selfstudy@acgme.org mailbox for questions and feedback



Citations vs. AFIs

- Citation
 - Must be tied directly to a Program Requirement.
 - Program Director must provide a written response as to how the citation has been corrected annually.
 - Citation will be removed only after review of PD response to determine compliance (either winter or spring meeting).



Citations vs. AFIs

- Area for Improvement (AFI)
 - Does not need to be tied directly to a Program Requirement.
 - Will appear in the Letter of Notification (LON).
 - May include areas of concern by the RC that may devolve into a citation if not addressed (e.g., case log data, Board Scores).
 - May rise to the level of a citation if persists.



Most Common AFIs

- Case Log Data (*minimums not in effect until graduates of 6.30.17, but data should reflect progression to meeting minimums*)
- Faculty Scholarship
- Resident and Faculty Survey



Program Statuses

- Existing programs
 - Continued Accreditation
 - Continued Accreditation w/Warning - **Not appealable**
 - Probationary Accreditation - **Appealable action**
 - Withdrawal of Accreditation - **Appealable action**
- New programs
 - Accreditation Withheld - **Appealable action**
 - Initial Accreditation
 - Initial Accreditation w/Warning - **Not appealable**
 - Continued Accreditation without Outcomes



Core and Dependent Fellowships

Fellowships must have a relationship with a core residency program

- Self-study visits occur at the same time
- Adverse action in core results in the same status for their associated fellowships
 - Withdrawal of core means administrative withdrawal of all associated fellowships
- New fellowships can only be granted Initial Accreditation status if core status is on Continued Accreditation (*not on Probation*)



Single Accreditation System

- Important Dates:
 - April 2015 – Application for Institutions
 - July 2015 – Application for Programs
- 5-year window for “Pre-accreditation” Status
- 30 Osteopathic core programs
 - *2 Dermatopathology; 3 Mohs*



Single Accreditation System

Timeline for Accreditation

- To apply, programs must be associated with an ACGME-accredited sponsoring institution or institution with “Pre-Accreditation Status”
- Window for Institutional Accreditation –
April 1, 2015 - June 30, 2020



Single Accreditation System

- AOA-approved programs may apply for ACGME accreditation July 1, 2015
- To achieve Initial Accreditation, programs must demonstrate substantial compliance with specialty Program Requirements
- All core program applications require a site visit prior to RC review
- Application window closes June 30, 2020
- AOA ceases accreditation \leq June 30, 2020



SAS Things to consider...

Program Director Qualifications

- Although ABD certification is not required, proposed program directors will be considered based upon their experience level, academic credentials/scholarly activity and participation/leadership in educational/academic and dermatology associations



SAS Things to consider...

Faculty/Resource Requirements

- Each program must have a director of surgical training. This individual must have completed a one-year procedural dermatology/Mohs training fellowship. Alternative qualifications may be considered by the RC but approval is not guaranteed.
- Each program must have a director of dermatopathology. This individual must have completed a dermatopathology fellowship-training program.



SAS Things to consider...

Faculty/Resident Scholarship

- Majority of faculty members and residents must show evidence of ongoing scholarly activity.
- Scholarly activity includes:
 - authorship of studies, textbook chapters, review articles
 - participation in sponsored clinical or basic science research
 - presentations at regional or national meetings
 - leadership roles in dermatology or GME organizations (regional or national)



SAS Things to consider...

Resident Eligibility

The RC for Dermatology understands that during this transition period to the single accreditation system, programs may wish to consider applicants in AOA-accredited programs that are not yet pre-accredited or accredited by the ACGME to satisfy PR III.A.1.

Core programs will not jeopardize their accreditation status if they accept these individuals.

III.A.1. Prior to appointment in the program, residents must have successfully completed a broad-based clinical year (PGY-1) in a program, accredited by the ACGME, or in such a program located in Canada and accredited by the Royal College of physicians and Surgeons of Canada, in emergency medicine, family medicine, general surgery, internal medicine, obstetrics and gynecology, pediatrics, or the transitional year. (Core)



SAS Website

The screenshot displays the SAS website interface. At the top right, there is a navigation bar with links for 'Contact', 'About ACGME', 'Awards', and 'Publications'. On the left, the ACGME logo is shown next to the text 'Accreditation Council for Graduate Medical Education'. A search bar is located in the top right corner. Below the navigation bar, there is a horizontal menu with four red buttons: 'Program and Institutional Accreditation', 'Data Collection Systems', 'Meetings and Conferences', and 'Graduate Medical Education'. The main content area features a large heading 'Single Accreditation System for AOA-Approved Programs'. The text below the heading describes an agreement between ACGME, AOA, and AACOM to create a single accreditation system for residency and fellowship programs. It includes links for an executive summary of the MOU and a timeline. On the right side, there is a sidebar with sections for 'Contact Us', 'Single Accreditation System for AOA-Approved Programs Main Page', 'Education', and 'Application Process', each with a list of links.

Contact About ACGME Awards Publications

SEARCH...

ACGME Accreditation Council for Graduate Medical Education

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](#)

Contact Us

E-mail questions to info@acgme.org

Single Accreditation System for AOA-Approved Programs Main Page

- Single Accreditation System for AOA-Approved Programs Main Page

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

Questions