Getting to Know Your Review Committee Team

Eileen Anthony
Executive Director, Review Committee for Dermatology and Family Medicine

DAAG Annual Meeting, October 7, 2016
Objectives

- Gain a better understanding of who and what the Review Committee for Dermatology does.
- Gain a better understanding of your role as administrator, coordinator, etc., in the accreditation process.
- Gain a better understanding of the annual accreditation process.
- Know who to contact at ACGME for specific needs.

KEEP CALM

KNOWLEDGE: YOUR KEY TO SUCCESS
Your Review Committee Team

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Review Committee Composition - DERM

- 3 appointing organizations - ABD, AMA and AOA
- 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
  - CA, FL, IA, IN, KS, MS, NY, PA, RI, WI

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RC-Dermatology Members

- ABD
  - Mary Stone, MD, Chair
  - Erik Stratman, MD, Vice Chair
  - John Zitelli, MD
  - Ilona Frieden, MD

- Resident
  - Brian Peterson, MD

- AMA
  - Amit Garg, MD
  - William Hanke, MD
  - Robert Brodell, MD
  - George Elgart, MD

- AOA
  - Stephen Purcell, DO

- Public Member
  - Mary Theobald

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ADS Annual Updates

- Each year, programs are required to enter data into ADS such as:
  - Faculty information
  - Resident/Fellow information
  - Block diagrams/curricular information
  - Scholarly activity (PD, Faculty, Residents) information
  - Participating site information
  - Responses to previous citations
  - Duty Hour, Patient Safety and Learning Environment information
  - Evaluation information
  - Reporting of major changes in the program
Data elements for Annual Review, but not entered directly by the Coordinator include:

- Resident Survey
- Faculty Survey
- Milestone data
- Certification examination performance (*provided by respective Boards*)
- Case Log data (*Derm*)
- Clinical experience (*FM*)
ADS Annual Update Tips

- Step away and revisit with fresh eyes
- Have you addressed all of the questions? No blanks!
- Ask ED, DIO, other Coordinators, etc. Remember the PD is responsible for accuracy of data
- Complete and accurate information – Essential!
- Review all data with your PD before “hitting” the submit button
- DIO should also review before submission
Omission of Data

Common omissions

- Faculty credentials (degree, certification)
- Participating sites
- Complete scholarly activity
- Updated response to citation(s)
- Complete block diagram

“If it is not listed, it isn’t so/didn’t happen/not present.”
Block Schedule/Diagram

- Uploaded by program as PDF
- Instructions and formats detailed in ADS
- Essential elements
  - PGY
  - Clinical site
  - Rotation name (Specific) and time

*Important for RC to understand program*
Common Mistakes

- Accurate scholarly activity
- Ensuring that all residents log cases (*do not need to cease once minimums are met*)
- Identification of (physician) core faculty (*dedicate*15 hours a week to teaching, clinical, administration, scholarship*)

*15 hours does not need to be evenly divided among those activities.*
What does the RC do with this information?
Role of the RC in the Accreditation Process

- **Determine** accreditation status based on data review that involves:
  - Reviewing the program’s responses to PREVIOUS citations to determine if issues are corrected
  - Reviewing program data to determine substantial compliance with the requirements
- **Request** additional information from program
  - Clarifying information (e.g., Faculty Credentials, etc.)
  - Full or Focused Site Visit
- **Change/Continue** accreditation status based upon data review (e.g., CA, CAW)
Annual Review Process

Data Submission

Review by RC

Administrative/Committee Review

Request for clarifying or additional information; progress reports

Focused site visit

Full site visit

Accreditation Decision

Continued accreditation
• Citations
• Areas for improvement

Continued accreditation w/ warning
• Citations
• Areas for improvement

Probationary accreditation

Withdrawal of accreditation

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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
  • *diagnose factors underlying deterioration* in program’s performance
  • *evaluate complaint* against program
  • Minimal notification/preparation, may be a team of visitors
How is a Full Site Visit Different?

• Factors leading to full site visit
  • Application for new core program
  • At end of initial accreditation period
  • Resident/Faculty complaint
  • RC identifies broad issues/concerns
  • Other serious conditions or situations identified
• 30-day notification given, minimal document preparation, team of site visitors
Citations vs. Area for Improvement

Citation

- Identified areas of noncompliance
- Linked to specific requirement
- Response to citations required in ADS
- Responses reviewed annually by RC (either winter or spring meeting)
- Remain active until corrected
Area for Improvement (AFI)

- May not be specifically linked to a requirement
- Written response not required, but data will be reviewed
- Will appear in LON
- May include areas of concern by Committee that may devolve into or rise to level of citation if not addressed (e.g., patient visits, Board scores, resident survey)
Areas of Improvement

- May or may not be linked to a requirement
- General concern “before” it’s a problem
- Written program response **not** required
- Will be tracked by RC
RC-Derm Citations Since 2009

Academic Year:
- 2010-2011: 24 citations
- 2011-2012: 79 citations
- 2012-2013: 99 citations
- 2013-2014: 54 citations
- 2014-2015: 23 citations
- 2015-2016: 36 citations

Citations vs. Academic Year Graph
Letter of Notification (LON)

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:
The LON May Also Include...

- Identification of areas for improvement
- Identification of concerning trends
- Decision on an increase to the resident complement
- Commendations on programmatic innovations/best practices
PR Focused Revision
Medical Knowledge (7.1.2016)

• IV.A.5.b).(4) must demonstrate knowledge of proper techniques for botulinum toxin injections, soft tissue augmentation, repairs of cutaneous surgical defects using flaps and grafts, and the use of light, and laser, and other energy-based modalities for skin conditions. (Outcome)

• IV.A.5.b).(5) must demonstrate knowledge of indications and contraindications for, and complications and basic techniques of elective cosmetic dermatology procedures, to include chemical peels, dermabrasion, hair transplants, invasive vein therapies, liposuction, scar revision, hair transplants, sclerotherapy, and invasive vein therapies; and, (Outcome)
V.C.2.c).(1) At least 90 percent of program graduates from the preceding four years must have taken the American Board of Dermatology or American Osteopathic Board of Dermatology certifying examination. (Outcome)

V.C.2.c).(1).(a) At least 90 percent of the program’s graduates from the preceding four years taking the American Board of Dermatology certifying examination for the first time must pass. (Outcome)

V.C.2.c).(1).(b) At least 90 percent of the program’s graduates from the preceding four years taking the American Osteopathic Board of Dermatology certifying examination for the first time must pass. (Outcome)

V.C.2.c).(1).(c) If fewer than 10 residents have graduated from the program in the preceding four years, then at least 90 percent of the last 10 graduates to take the American Board of Dermatology certifying examination for the first time must pass. (Outcome)

V.C.2.c).(1).(d) If fewer than 10 residents have graduated from the program in the preceding four years, then at least 90 percent of the last 10 graduates to take the American Osteopathic Board of Dermatology certifying examination for the first time must pass. (Outcome)
# Case Log Minimums
**Effective for Graduates of 7.1.17**

<table>
<thead>
<tr>
<th>Area</th>
<th>Category</th>
<th>Minimums</th>
<th><em>Role(s)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1: Perform</td>
<td><strong>Excision - Benign or Malignant</strong></td>
<td>50</td>
<td>Surgeon</td>
</tr>
<tr>
<td>Level 1: Perform</td>
<td>Repair (Closure) Simple/Intermediate/Complex</td>
<td>50</td>
<td>Surgeon</td>
</tr>
<tr>
<td>Level 2: Observe</td>
<td>Mohs Micrographic Surgery</td>
<td>15</td>
<td>Surgeon + Observed</td>
</tr>
<tr>
<td>Level 2: Observe</td>
<td>Laser - Combined (Ablative, Non-ablative, Vascular)</td>
<td>15</td>
<td>Surgeon + Observed</td>
</tr>
<tr>
<td>Level 2: Observe</td>
<td>Botulinum Toxin Chemodeinnervation</td>
<td>10</td>
<td>Surgeon + Observed</td>
</tr>
<tr>
<td>Level 2: Observe</td>
<td>Soft Tissue Augmentation/Skin Fillers</td>
<td>5</td>
<td>Surgeon + Observed</td>
</tr>
<tr>
<td>Level 2: Observe</td>
<td>Flaps and Grafts (Split or Full)</td>
<td>13</td>
<td>Surgeon + Observed</td>
</tr>
<tr>
<td>Level 2: Observe</td>
<td>Nail Procedures</td>
<td>3</td>
<td>Surgeon + Observed</td>
</tr>
</tbody>
</table>

*Surgeon + Observe - indicates that a resident may gain credit in this category minimum by either performing or observing.*

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Where do I...
RC-Dermatology webpage

- RC-Dermatology meets *twice* a year
- Meeting dates and agenda closing deadlines on webpage

**DEPARTMENT**

**OVERVIEW**

The documents and resources within this section are provided by the Review Committee for Dermatology and its staff at the ACGME to assist ACGME-accredited programs and those applying for accreditation. Specialty and subspecialty information is found in each of the links listed below, as applicable.

**DERMATOLOGY SUBSPECIALTIES**

- Dermatopathology
- Micrographic Surgery and Dermatologic Oncology

**SPECIALTY AND SUBSPECIALTY LINKS**

- Program Requirements and FAQs and Applications
- Milestones
- Documents and Resources
- Review Committee Members and Staff

**OTHER ACCREDITATION RESOURCES**

- Common Program Requirements
- Duty Hours

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Whom to Contact

- WebADS – (Kevin Bannon for Dermatology):
  - webADS@acgme.org
- Case Log Concerns:
  - oplog@acgme.org
- Resident Survey Issues
  - ResSurvey@acgme.org
- Faculty Survey Issues:
  - facsurvey@acgme.org
- Milestones:
  - milestones@acgme.org
Questions?

KEEP CALM AND ASK QUESTIONS