

Thoracic Surgery Mock RC Meeting

John R. Potts, III, MD
Senior Vice-President, Surgical Accreditation
ACGME

TSDA General Session
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New Orleans, La



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No relevant financial conflict



Agenda

- Accreditation vs. certification
- Brief history of the ACGME
- Brief history of the RC for Thoracic Surgery
- RC responsibilities
- RC member responsibilities
- Pre-meeting work
- RC meeting timeline
- RC member program review materials
- Typical RC meeting agenda
- Mock Review Committee meeting



Certification vs. Accreditation

Individuals receive certification

Programs receive accreditation



Certification

The certification process identifies *individual physicians* who meet the requirements of a particular specialty.

Certification is the responsibility of a specialty board, i.e., the American Board of Thoracic Surgery.



Accreditation

Official recognition that a school, [program] or course has met standards set by external regulators.



Accreditation

GME *programs* are accredited by the ACGME when they are judged to be in substantial compliance with the applicable Requirements of the Accreditation Council for Graduate Medical Education (ACGME).

Applicable requirements include:

- ACGME Institutional Requirements,
- ACGME Common Program Requirements, and
- ACGME Specialty Program Requirements



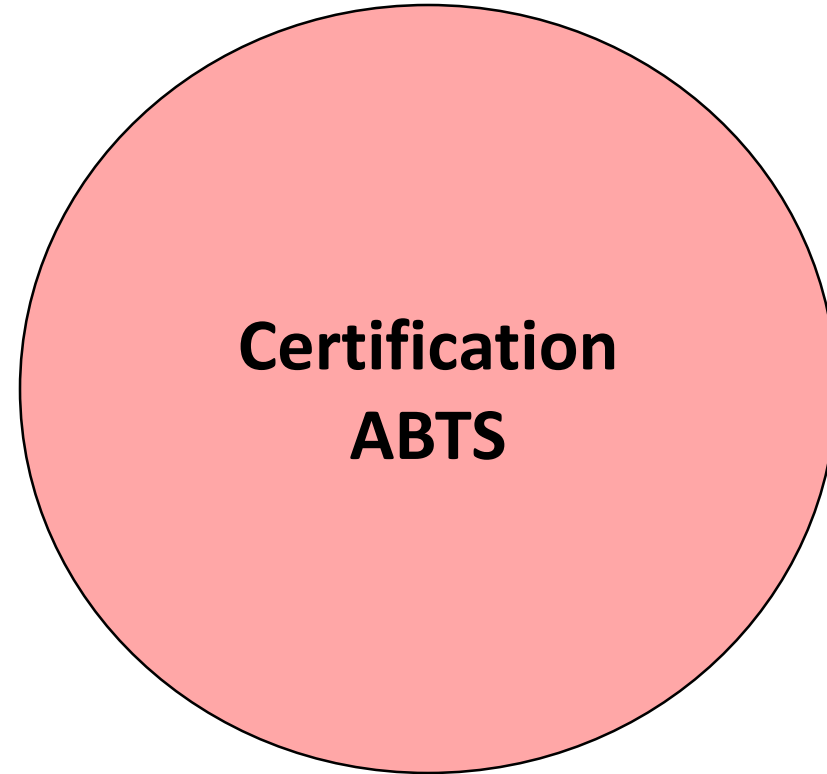
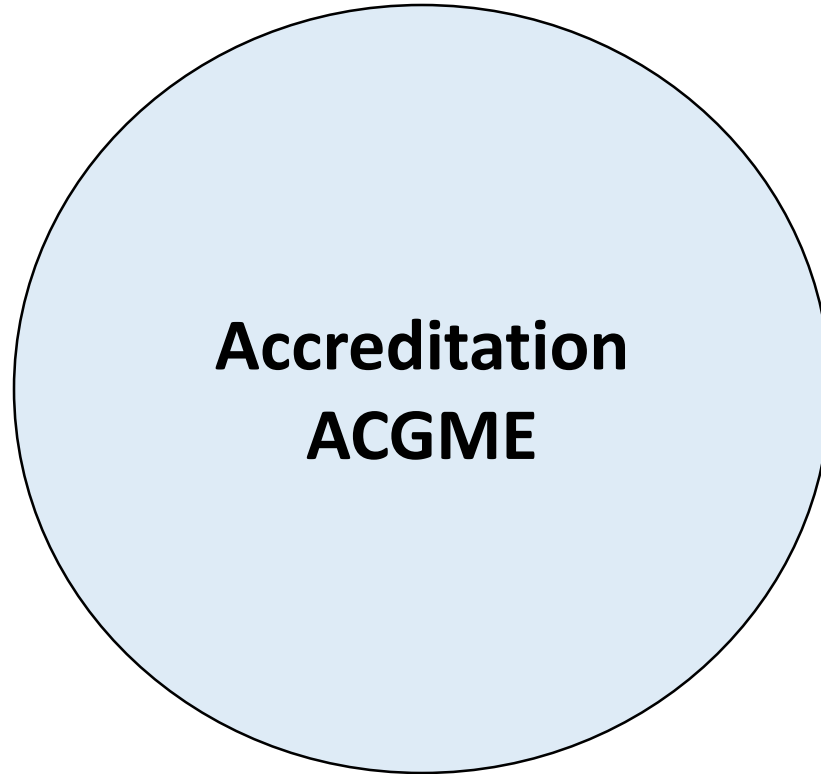
Membership Organizations

- The American Association of Thoracic Surgeons
- The Society of Thoracic Surgeons
- The American College of Surgeons

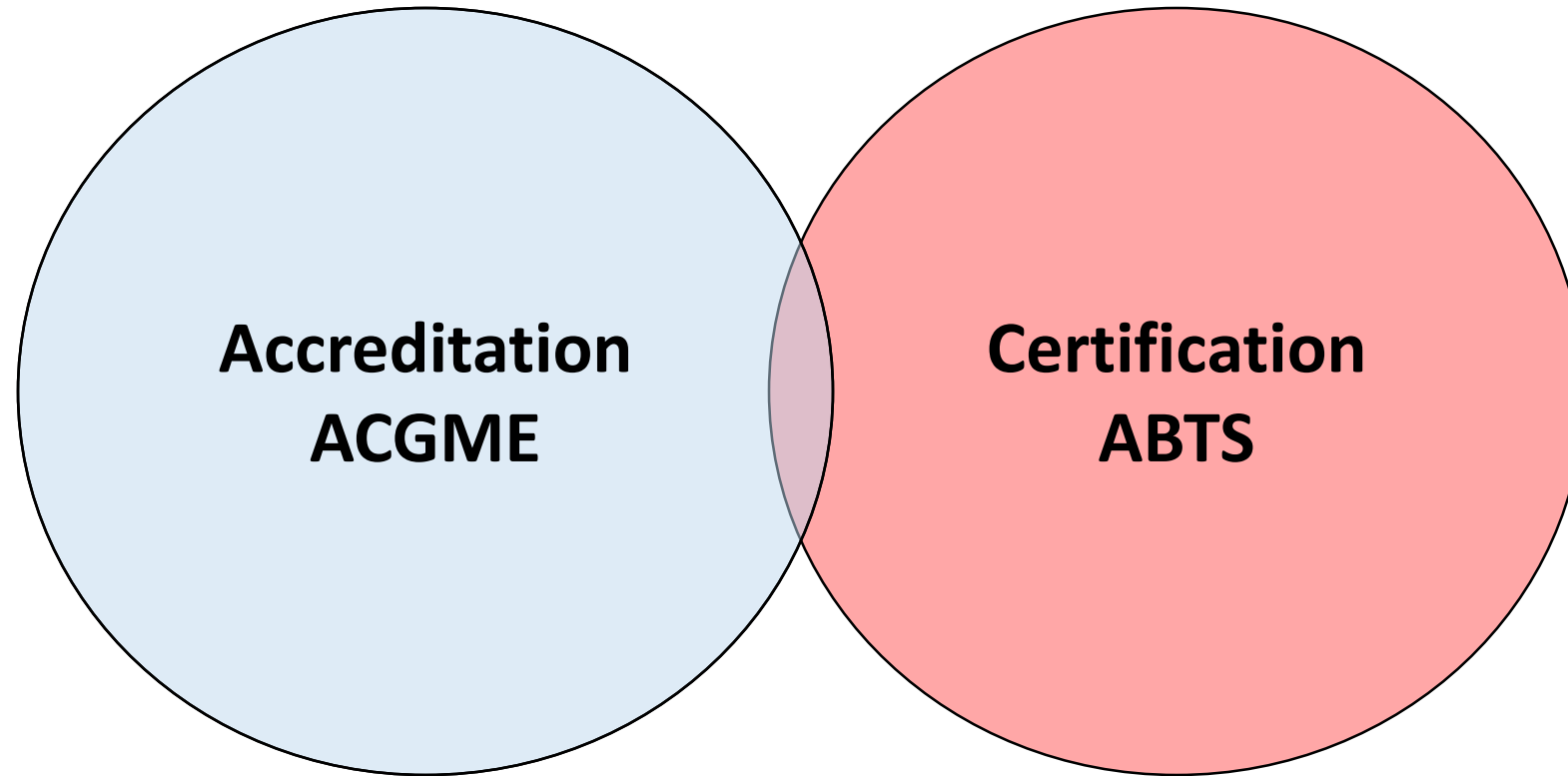
Have no direct role in
accreditation *or* certification



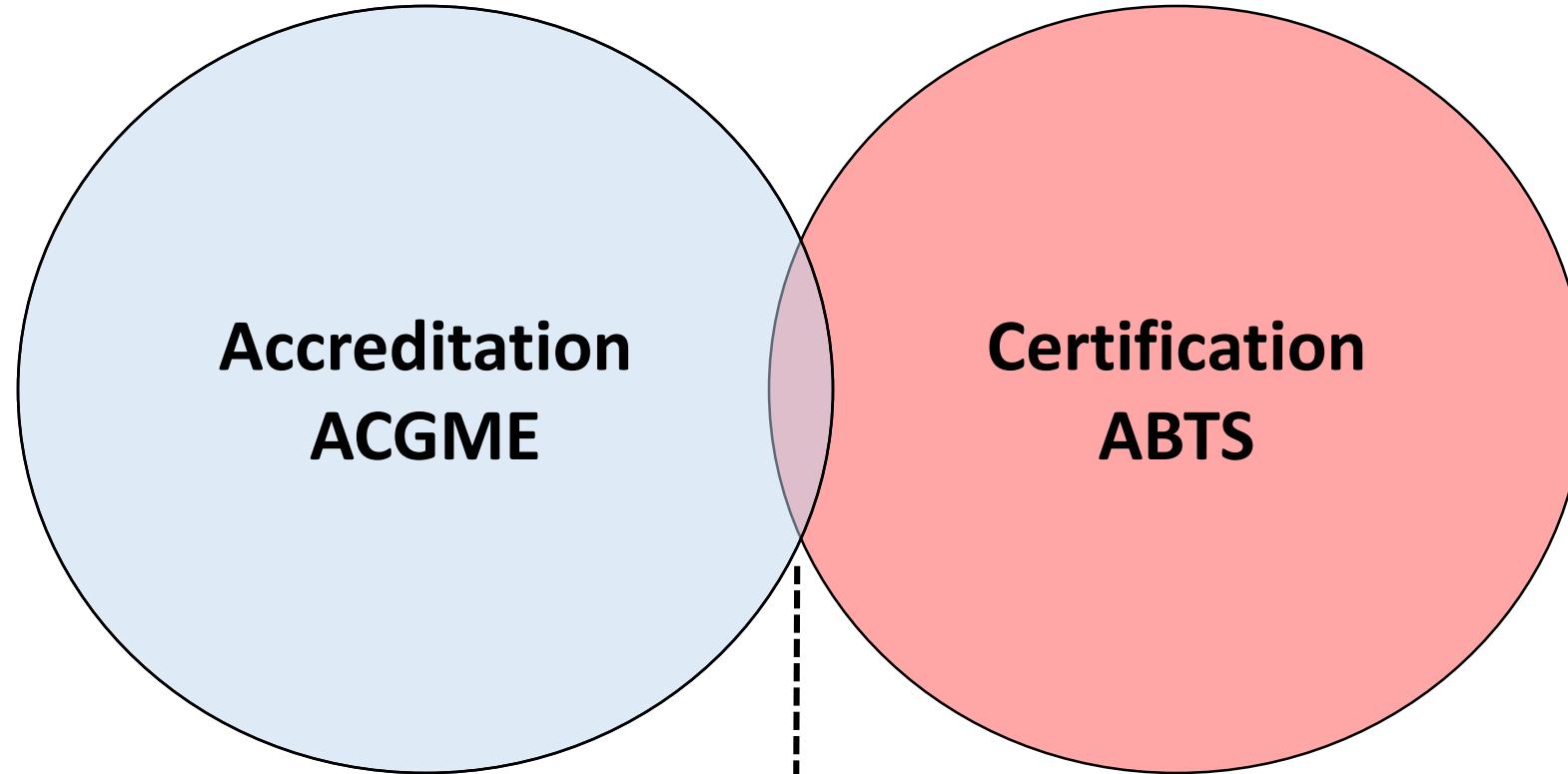
Accreditation vs Certification



Accreditation vs Certification



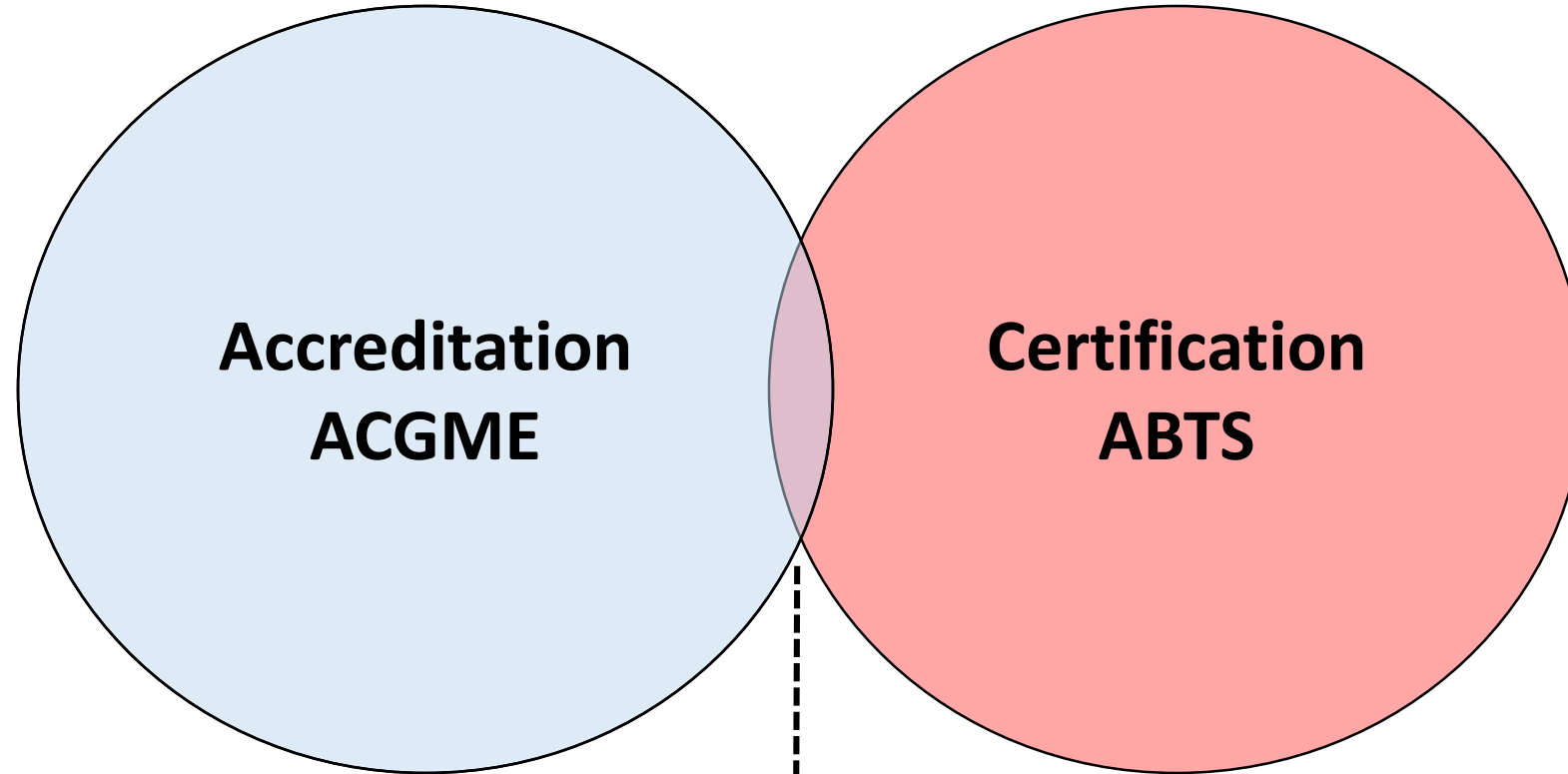
Accreditation vs Certification



RC uses ABTS pass rates in accreditation



Accreditation vs Certification

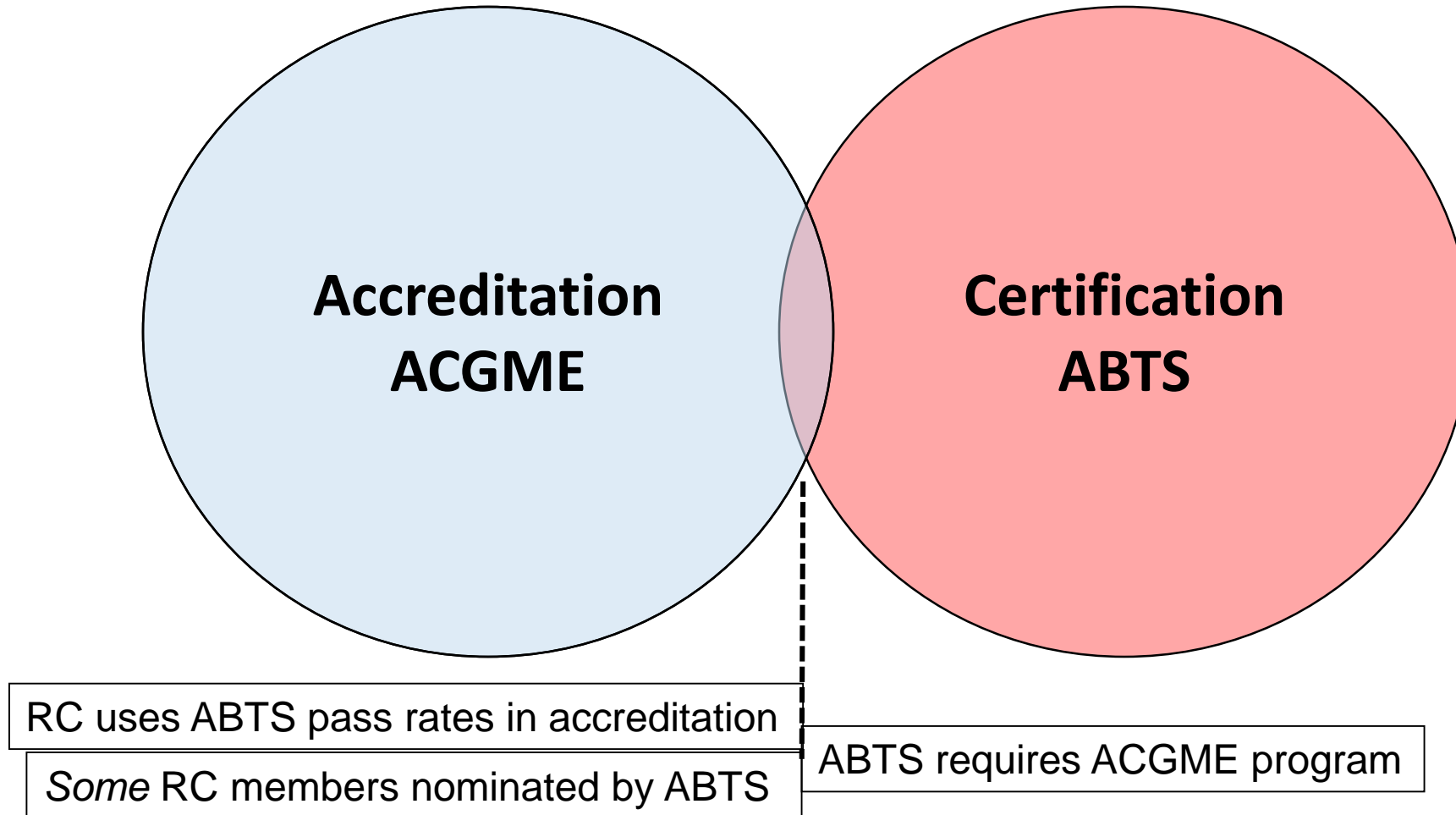


RC uses ABTS pass rates in accreditation

Some RC members nominated by ABTS



Accreditation vs Certification



Brief History of ACGME

- 1950-1972
No oversight of RCs
- 1972-1981
Liaison Committee on Graduate Medical Education
Representatives from: AAMC, ABMS, AHA, AMA, CMSS
- 1981-2000
Original ACGME
“Parent Organizations”: AAMC, ABMS, AHA, AMA, CMSS
- 2000-
Current ACGME
“Parent Organizations” → “Nominating Organizations”
AOA and AACOM added 2015



ACGME Board of Directors

- 7 Member (Nominating) Organizations
 - American Board of Medical Specialties (4)
 - American Hospital Association (4)
 - American Medical Association (4)
 - American Osteopathic Association (2→4) [2015-2020]
 - AACOM (2→4) [2015-2020]
 - Association of American Medical Colleges (4)
 - Council of Medical Specialty Societies (4)
- Public members (3)
- At-large members (3)
- Chair of Council of Review Committee Chairs
- Chair of Council of Review Committee Residents
- At large resident
- Federal non-voting (2)



ACGME

- Accredits 11,685 GME programs
- 140,399 residents & fellows
- 156 specialty and subspecialty areas
- 847 sponsoring institutions



Review Committees

- 29 Review Committees
 - 27 Specialty
 - 1 Transitional Year
 - 1 Institutional



Brief History of Thoracic RC

- 1948 Board of Thoracic Surgery
 - Affiliate of the ABS
- 1969 independence from ABS
- 1971 *American* Board of Thoracic Surgery
- Review Committee established ~ 1970



Brief History of Thoracic RC

- Nominating organizations:
 - American Board of Thoracic Surgery (2)
 - American College of Surgeons (2)
 - American Medical Association (2)
- Resident member (2000)
- Public member (2018)
- *ex officio* members: ABTS, ACS, AMA



RC Responsibilities

Under authority delegated by the ACGME

- Accredite programs using PRs & consistent with policy
- Review programs annually
- Confer accreditation status for each program
- Revise/recommend program requirements
- Discuss GME policy, best practices & innovation
- Recommend policy, procedures & requirements to CRCC



RC Member Responsibilities

- Attend orientation
- Attend meetings
- Agree to- and perform tasks of membership
- Be evaluated by other RC members



Screening Programs by Staff

- Faculty scholarly activity
- Resident/fellow scholarly activity
- Board pass rate
- Clinical experience (case logs)
- Resident/fellow survey
- Faculty survey



With RC Executive Committee

Assign program to:

- Consent agenda
- Consent agenda w/ AFI(s) +/- citation(s)
- Request clarifying information
- Request site visit
- Schedule for RC review



RC Meeting Timeline

- Agenda closes ~ 2 months before meeting
- Reviews to RC members 4-6 weeks before
- Completed reviews due 3 weeks before
- Reviewer & Agenda Books sent 10 days before
- Meetings ~ 1 ½ days
- Two meetings per year
- Occasional conference calls *ad hoc*



Reviewer Materials

- Case logs
- Letters of notification
- Resident/Fellow survey
- Faculty survey
- Block diagram
- Program history
- Annual program update
- [Site visit report]
- [Complement change request]



Typical RC Meeting Agenda

- Call to order
- Review conflict & duality
- Approval of minutes
- Program reviews
 - Citations
 - Areas for improvement (AFI)
 - Accreditation status
- Reports:
 - Council of Review Committee Chairs
 - Council of Review Committee Residents
 - Council of Public Members
 - American Board of Thoracic Surgery
 - Executive Committee
- RC business:
 - *ad hoc* informational presentations
 - Program Requirement revisions
 - Case log / minima revisions
 - Election of new members & officers



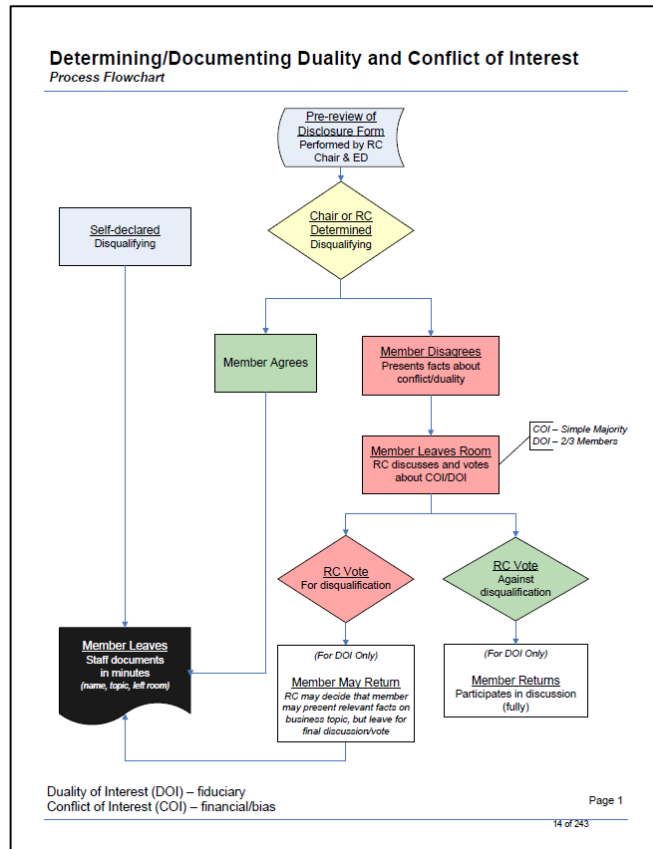
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Conflict & Duality of Interest

- 8 pages in ACGME Policies
- Annual review of Policy
- Annual disclosure form
- 6 pages in RC Agenda Book



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Accreditation Status

Continued Accreditation

Continued Accreditation with Warning

Probationary Accreditation

Withdrawal of Accreditation

Withhold Accreditation

Initial Accreditation

Initial Accreditation with Warning

Continued Accreditation Without Outcomes

REVIEWER RECOMMENDATIONS

If the current status is...	Then reviewer can recommend...	
Application	Withhold	Adverse action, can be appealed
	Initial Accreditation	
Application (AOA Programs in pre-accreditation status)	Continued Pre-Accreditation	Cannot be Withheld
	Initial Accreditation	
	Initial Accreditation-Contingent (maximum time, 2 years)	Issued when program's application is in substantial compliance however sponsoring institution is still in pre-accreditation status
Initial Accreditation (No permanent increases)	Continued Accreditation	
Within 2 years of granting IA, full site visit and review. If program does not matriculate residents/fellows in the first academic year after initial Accreditation, a site visit will be conducted within three years from the effective date of accreditation.	Continued Accreditation without Outcomes	Maximum length of status: length of program + one year
	Initial Accreditation w/ Warning	
	Withdrawal	Adverse action, can be appealed
Initial Accreditation w/Warning (1 st year)	Continued Accreditation	
Site visit at the discretion of the Review Committee – please note that historically, this has been a requirement. This is a recent policy change allowing the Committee to move the program off warning without a site visit.	Continued Accreditation without Outcomes	Maximum length of status: length of program + one year
(No permanent increases)	Initial Accreditation w/Warning (2 nd year) w or w/o SV	
Initial Accreditation w/ Warning (2 nd Year)	Withdrawal of Accreditation (following a site visit)	Adverse action, can be appealed
Site visit at the discretion of the Review Committee	Continued Accreditation	
(No permanent increases)	Continued Accreditation without Outcomes	Maximum length of status: length of program + one year
Continued Accreditation	Withdrawal of Accreditation (following a site visit)	Adverse action, can be appealed
	Continued Accreditation	
	Continued Accreditation w/Warning	
	Probation (following a site visit)	Adverse action, can be appealed
	Withdrawal of Accreditation (following a site visit)	Adverse action, can be appealed

	Then reviewer can recommend...	
Continued Accreditation without Outcomes	Maximum length of status: length of program + one year	
Continued Accreditation		
Continued Accreditation w/Warning		
Probation (following a site visit)	Adverse action, can be appealed	
Withdrawal of Accreditation (following a site visit)	Adverse action, can be appealed	
Continued Accreditation		
Continued w/Warning		
Probation (following a site visit)	Adverse action, can be appealed	
Withdrawal of Accreditation (following a site visit) (program can complete the current academic year and with RC approval can complete 1 additional year but no new residents)	Adverse action, can be appealed	
Continued Accreditation		
Continued Accreditation w/Warning		
Continued Probation, 1 year (if current status is Probation 1 year) (following a site visit)	Adverse action, can be appealed	
Withdrawal of Accreditation (following a site visit)	Adverse action, can be appealed	
May be requested pre-meeting or may be requested at winter meeting and accreditation decision awarded at spring meeting.		

If a program cannot demonstrate the capacity to provide educational experience. This is an adverse action and may be appealed.

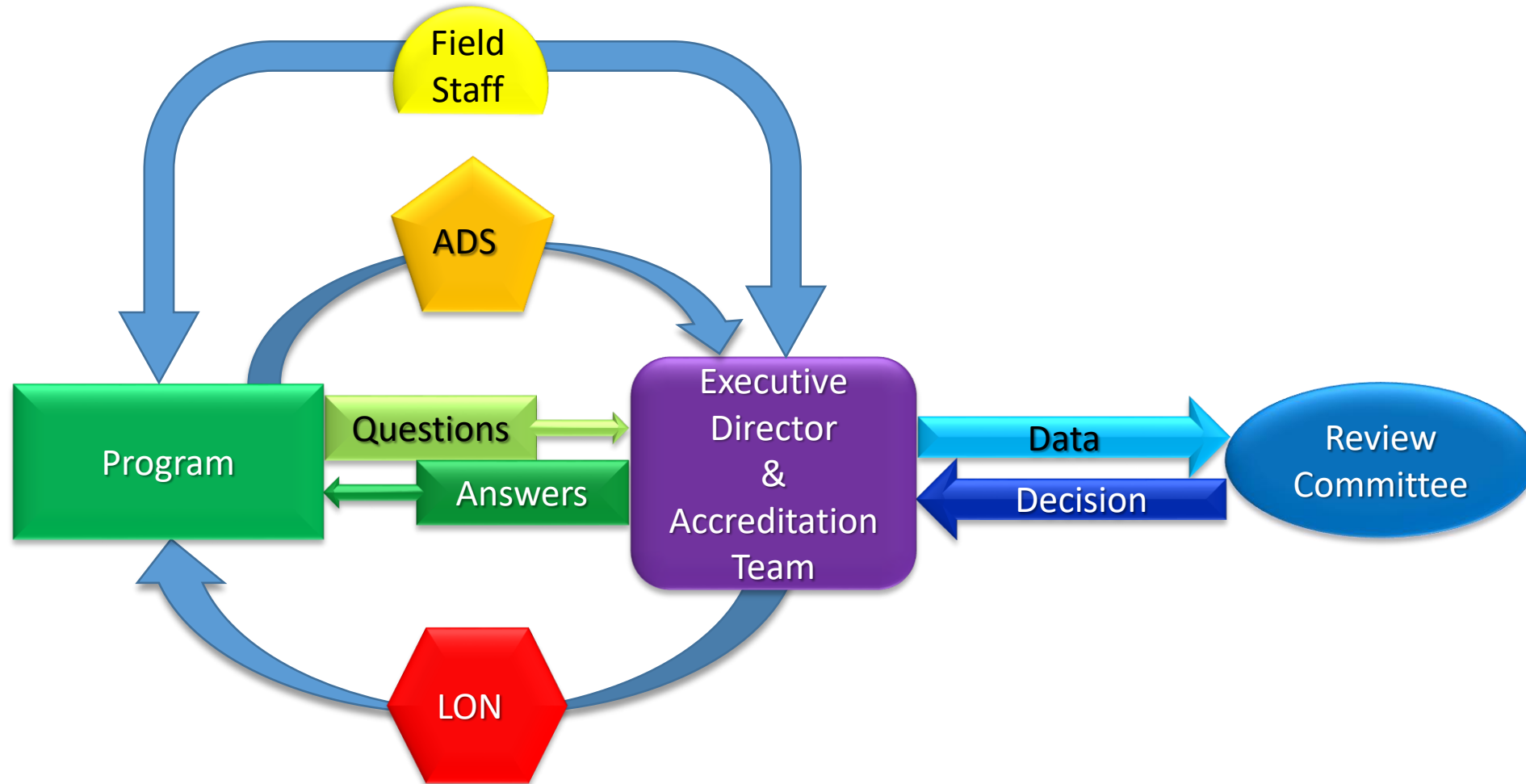


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Central Roles of ED & Teams



**Meeting
of the
Review Committee for Thoracic Surgery**

