ACGME Next Accreditation System

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On March 4, at the ACGME Annual Education Conference, CEO Dr. Tom Nasca described the next accreditation system to be phased in between now and July 1, 2014. *

Intent is to improve graduate medical education and the accreditation process in ways responsive to the IOM Duty Hours Committee, MedPAC, Congress, and others.

Key System Attributes

Key attributes of the new accreditation system will include:

• Specialty-specific educational milestones
• A focus on improvement and self study
• Development of national normative data
• Less prescriptive program requirements, revised less frequently
• Greater flexibility that allows educational innovation
• Reduced burden of accreditation
• Greater emphasis on institutional oversight

This system has 3 parts: Institutional Accreditation, interim visits on short notice (CLEAR), Program Accreditation.
New Institutional Accreditation

Institutional review, including self study, with visit every 6 years

Emphasis on institutional oversight through DIO and GMEC

Regular reporting of selected performance indicators

Current system will continue until June 30, 2013

July 2013 through June 2014 will be the ‘construction year’ for the new system
New Institutional Accreditation

New institutional requirements effective July 1, 2014 will focus on:

• Patient Safety
• Quality Improvement
• Care Transitions
• Supervision
• Professional responsibility for duty hours, fatigue management, honest and accurate reporting
Interim visits: CLEAR Program (Clinical Learning Environment Assessment Reviews)

Visits to sponsoring institutions every 18 months to discuss:

• Integration of residents into patient safety programs
• Integration of residents into QI and efforts to reduce disparities
• Establishment and implementation of supervision policies
• Oversight of transitions of care
• Oversight of duty hours
Interim Visits: CLEAR Program (cont’d)

Separate from institutional review process; site visitors not drawn from the existing field staff

Initially no additional cost to sponsors for visits, but costs will be added to accreditation fees later on

No data submission; visits will rely on existing data

Letter report will be sent to institution’s CEO with a copy to the Institutional Review Committee
Specialty Program Accreditation

Program site visits every 10 years, with self-study

Continuous observation of:
• Progress by residents on specialty milestones
• Board pass rates
• Attrition from program
• Resident feedback (survey)
• Faculty feedback (survey)
• Clinical experience/case logs
• Structure and resources
Specialty Milestones

Milestones are specific resident performance levels associated with each of the six general competencies.

ACGME Review Committees will track milestone trajectories of unidentified individual residents.

Local Clinical Competency Committee will triangulate progress of each resident.
What We Don’t Yet Know

How much the burden for programs and institutions will be reduced

How the CLEAR visit information will affect institutional accreditation

What will be reported to the public (cf UHC)

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