



ACGME

Review Committee for Obstetrics and Gynecology Update

Scott Sullivan, MD

Member, Review Committee for Obstetrics and Gynecology



Disclosures

No conflicts of interest to report.



Topics

- Review Committee (RC) Members, Staff, Meetings and Programs
- RC Updates
- ACGME Updates
- Questions

2023-2024 RC Members

Gabriella Gosman, MD, Chair

UPMC Magee-Womens Hospital

Meredith Alston, MD, Vice Chair

University of Colorado

Erika Banks, MD

NYU Langone Health - Long Island

Seine Chiang, MD

University of Washington

William Cliby, MD

Mayo Clinic

Marlene Corton, MD

University of Texas Southwestern

Adrienne Dade, MD

Rush University

Felicia Lane, MD

University of California Irvine

Kurt Ludwig, DO

Henry Ford Macomb Hospital

Joseph (Tony) Ogburn, MD

Michelle Owens, MD

Ascension St. Vincent's Hosp

Elizabeth Howlett, MBA (Public Member)

Randal Robinson, MD

University of Texas Health San Antonio

Shanice Robinson, MD (Resident Member)

VNA Health Care

Scott A. Sullivan, MD

Inova Health System

Paul Sparzak, DO

Duke University



RC Staff

Laura Huth, MBA **NEW!**

Executive Director

Emma Breibart-White, MALS

Associate Executive Director

Shellie Bardgett, MPH

Senior Accreditation Administrator

TBD

Accreditation Administrator

MFM Program Statistics (as of 2/1/24)

Status	Count
Initial Accreditation	6
Initial Accreditation with Warning	1
Continued Accreditation without Outcomes	11
Continued Accreditation	87
Continued Accreditation with Warning	1
Total Programs	106
Total Approved Fellow Positions	476



Upcoming Meetings

- April 29-30, 2024 (Agenda closed February 1, 2024)
- September 18-19, 2024 (Agenda closes July 12, 2024)

*Permanent complement increase reminder:
The **DIO** must submit a request **by the agenda closing date** to be included in the meeting agenda*



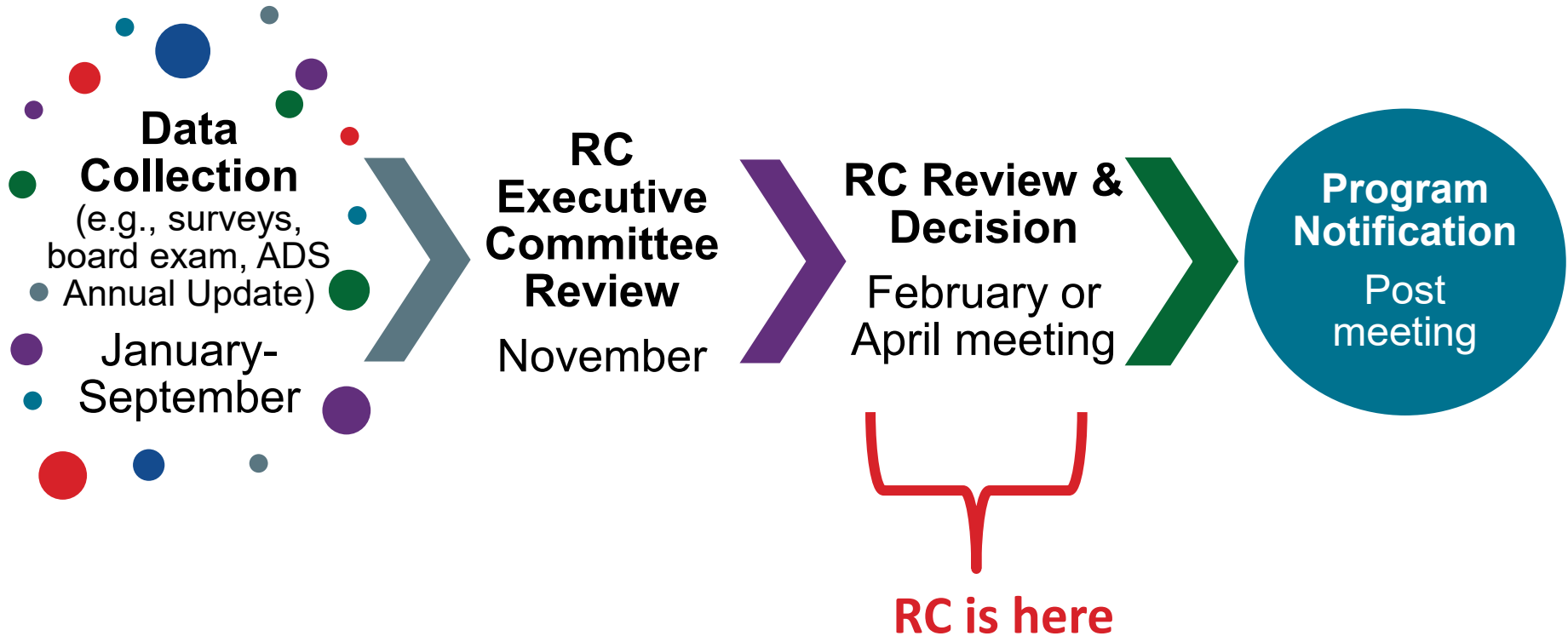
Permanent Complement Increase Requests

- Educational rationale must outline how increase will benefit fellow education
- RC will want to see sufficient patient/procedural volume
 - Most recent Graduate Case Log Report
 - Institutional Procedural/Patient Data
- Use **color** to identify changes in proposed block diagram
- Detailed instructions available at [acgme.org](https://www.acgme.org) > Specialties > OB/GYN > Documents and Resources > [Complement Change Requests](#)

RC UPDATES



Annual Program Review





Case Log

- In 2022, RC significantly reduced what fellows need to log
- Fellows must log:
 - Amniocentesis
 - Cervical cerclage
 - Cordocentesis
 - Chorionic villus sampling
 - Ultrasound: Transvaginal, Detailed anatomy, Doppler, Echocardiogram
 - Obstetric Critical Care



Case Log



Code	Description	Area	Type	Fav	
76811	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; single or first gestation	Ultrasound	Detailed anatomy	★	<input type="button" value="Add"/>

Ultrasounds

- To log, fellows must **perform** the ultrasound
- Fellows can “batch enter” ultrasounds
- Fellows choose role and CPT code, enter a date, and then enter the total number of that type of ultrasound over a given period of time
 - Maximum for one entry is 50



Case Log

Obstetric Critical Care

- Managing the care for an OB patient receiving ICU-level care
 - Fellows must be involved in decision-making
 - Care can take place on **any unit**
- Fellows should log each OB critical care patient once
 - RC understands may be some double counting



Case Log

Q: When will MFM Case Log minimums be established?

A: It will take a few more years:

- Additional data needed given significant changes to the MFM Case Log
- RC wants to ensure minimums are fair and evidence-based
 - Please ensure fellows are logging!



Case Log

- Accuracy of Case Log data variable - some fellows logging very few experiences
- Program director is responsible for monitoring Case Logs
- At a minimum, Case Logs should be reviewed twice a year as part of the semi-annual meeting

2023 Graduate Data

		Surgeon		
		Natl Res MIN	Natl Res MED	Natl Res MAX
RRC Area	RRC Type			
CVS	CVS	0	2	71
Ultrasound	Transvaginal	0	4	638
	Detailed anatomy	0	38	702
	Doppler	0	2	526
	Echocardiogram	0	0	240
OB Critical Care	OB critical care	0	2	296



Block Diagram

18 months core MFM, including:

- 3 months ultrasound
- 2 months outpatient
- 2 months genetics
- 2 months supervisory L&D
- 1 month ICU

- Block diagram must show how program meets core MFM clinical requirements
- **Longitudinal** experiences **must** be included in block diagram and/or explained in note below
- Block diagram instructions available at [acgme.org](https://www.acgme.org) > Specialties > OB/GYN > [Documents and Resources](#)



Genetics Experience

- Genetics coursework can **supplement**, but not replace, the required two months of clinical experience
- A genetics counselor **can** be the program's genetics faculty member
 - Optional to include in Non-Physician Faculty Roster
 - Reminder: If include, program will need to report their scholarly activity and they will be expected to participate in ACGME Faculty Survey



Supervisory L&D

- Experience helps fellows gain knowledge and skills needed to care for critically ill obstetrics patients
- Minimum two-week blocks
- Fellow must be supervised by MFM faculty
 - MFM program determines level of supervision (i.e., direct, indirect, oversight)



Supervision Policy

- RC continues to see outdated supervision levels in Supervision Policies
- **Current** ACGME supervision levels outlined in Program Requirements VI.A.2.b).(1)-(3)
 - Direct Supervision definition revised and includes supervision via telecommunication technology
 - Indirect Supervision is **no longer** divided into “with direct supervision immediately available” and “with direct supervision available”
- Review program’s Supervision Policy and update if needed



Common Citations and Areas for Improvement (AFIs)

- Faculty commitment to fellow education (e.g., interest, amount of teaching)
- Service/education balance
- Interprofessional teamwork
- Ability for fellows to report concerns and feel safe doing so
- Fellow participation in patient safety analysis and investigation



ADS Annual Update*
is several months away, but
sharing a few reminders now 😎

***July-September each year**




Faculty Roster

- Faculty certification **automatically** populated in faculty profiles
 - Manual data entry option (e.g., recent graduate not yet board certified)
 - RC no longer expects MOC be used
- If a **new** faculty member is listed in another roster at institution, can copy most of their information into MFM program's roster
- Faculty scholarly activity can be copied from another program by using the "Copy" tool



Major Changes and Other Updates

Communicate to the RC

- Low ratings on the most recent ACGME Surveys 
- How the program has addressed any AFIs from last year
- Program changes (rotations, faculty)



Responding to Citations

- Respond as you would to a colleague outside your institution
- Be clear and concise
- Demonstrate understanding of non-compliant area
- Outline implemented action plan
- Describe verifiable outcomes (e.g., survey trending up)
- If goals not met, explain why and outline next steps

ACGME Updates





Dr. Nasca Stepping Down January 1, 2025

- Dr. Nasca served as ACGME President and CEO for 17 years
- He will transition to leading the new ACGME Center for Professionalism and the Future of Medicine
- National search underway for a new President and CEO





Site Visits

- ACGME recently announced 2% of programs randomly chosen to undergo a site visit each year **NEW!**
 - Only programs beyond initial accreditation period
 - Chosen programs receive a Letter of Notification with an approximate date
 - Initial group of programs received notification in January
 - Site visits assess compliance with all program requirements



Site Visits

- 10-Year Site Visits officially discontinued
- A program self-study is still required per Common Program Requirements
 - Remain on hold for now
 - Will not be tied to a site visit



Site Visits

- Virtual vs. in-person site visit format
 - Most site visits will be virtual
 - In-person site visit required for complex visits (e.g., complaint)
 - Other in-person site visits randomly chosen
 - Site visit letter announcement identifies format



ACGME Surveys

- 2024 ACGME Fellow and Faculty Surveys
 - Surveys open February 7th- April 7th
 - **No changes** to the survey process—program leadership responsible for notifying fellows and faculty about the survey via ADS
 - Results available in early May
 - Small programs receive a Multi-Year Report a few weeks later
- Reminder: 70% response rate required



TEMPORARY Complement Increases

- Up to 90 days: Do **not** need to submit request in ADS **NEW!**
- Over 90 days: Submit if additional fellow will cause program to exceed approved total complement
- Again, instructions available at [acgme.org](https://www.acgme.org) > Specialties > OB/GYN > Documents and Resources > [Complement Change Requests](#)



Learn at ACGME Resources

dl.acgme.org

- ACGME Faculty Development Toolkit: Improving Assessment Using Direct Observation **NEW!**
 - 13 modules for creating custom workshops
 - 50 videos in a growing training library
 - Six workshops curated by ACGME experts
- Diversity, Equity and Inclusion Resources
 - CME Learning Path (modules structured for self-paced CME)
 - Equity Practice Toolkit



ACGME Initiatives

- ABMS and ACGME have co-hosted meetings to discuss Competency Based Medical Education (CBME) in GME
 - Representatives from RC, ABOG, ACOG, and AOA
 - Working on action plan for each specialty
- ACGME undergoing a digital transformation
 - Improve ADS
 - Establish a modern data estate to improve analytics capabilities
 - Create infrastructure for an outcomes-based accreditation model



ACGME Initiatives

- Scheduled review of the **Common** Program Requirements
 - Multi-year project
 - Includes a reassessment of the work hour requirements
 - Specialty organizations and community will have opportunities to weigh in on proposed changes

Where to go for help?

RC Staff

OB/GYN section of website >
Contact and Support

- Program requirements
- Notification letters
- Complement requests
- Case Log content

Milestones Staff

milestones@acgme.org

- Milestones

ADS Staff

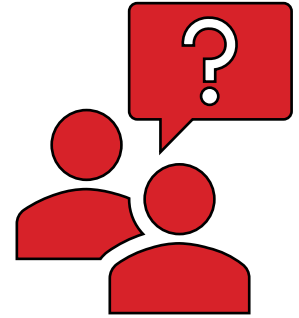
ADS@acgme.org

- ADS
- Surveys
- Case Log System

Field Activities Staff

fieldrepresentatives@acgme.org

- Site Visit



Thank you!

Questions?