



# Specialty Update: Medical Genetics and Genomics

SES095

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FEBRUARY 23-25, 2023  
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# Conflict of Interest Disclosure

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Speaker(s):

Melissa Merideth, MD, MPH – Chair, Review Committee for Medical Genetics and Genomics

Cindy Riyad, PhD – Executive Director, Review Committee for Medical Genetics and Genomics

Kate Hatlak, EdD – Director, Faculty Development & Special Projects  
*(former Executive Director, Review Committee for Medical Genetics and Genomics)*

## Disclosure

None of the speakers for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



# Session Objectives

1. Review Committee Statistics
2. Annual Program Review
3. Frequently Asked Questions
4. ACGME/Review Committee Updates

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# Review Committee Statistics



# Review Committee Membership

<b>Melissa Merideth, MD, MPH, FACMG</b> (Chair) <i>National Institutes of Health</i>	<b>Scott Hickey, MD, FACMG</b> <i>Nationwide Children's Hospital</i>
<b>Donald Basel, MD</b> (Vice Chair) <i>Medical College of Wisconsin</i>	<b>Azra Ligon, PhD</b> <i>Brigham and Women's Hospital</i>
<b>Dusica Babovic-Vuksanovic, MD</b> <i>Mayo Clinic (Rochester)</i>	<b>Anna L. Mitchell, MD, PhD</b> <i>Case Western Reserve University</i>
<b>Michael Finkel, DO, MPH</b> (Resident Member) <i>Detroit Medical Center</i>	<b>Dan Sharer, PhD, FACMG</b> <i>University of Alabama at Birmingham</i>
<b>Michael Gambello MD, PhD, FACMG</b> <i>Emory University</i>	<b>Frances van Beek, MSHA, MBA</b> (Public Member) <i>Wellstar Health System</i>
<b>Miriam Blitzer, PhD, FACMG</b> (Ex-Officio) <i>American Board of Genetics and Genomics</i>	





# Welcome Incoming Members!

*Term beginning July 1, 2023*

**Sanmati  
Cuddapah, MD**

**Children's Hospital of  
Philadelphia**

**Lois J. Starr,  
MD, PhD**

**University of Nebraska  
Medical Center**



# Review Committee Staff

Cindy Riyad, PhD – *Executive Director*

[criyad@acgme.org](mailto:criyad@acgme.org)

312.755.7416

## Additional staff on the way!

- Associate Executive Director
- Accreditation Administrator



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# Annual Program Review



# September & December 2022 Accreditation Decisions

Medical Genetics and Genomics	
Continued Accreditation	44
Initial Accreditation	1
Medical Biochemical Genetics	
Continued Accreditation	17
Initial Accreditation	1
Molecular Genetic Pathology	
Continued Accreditation	6





# Lab Fellowship Transition Complete!

- 56 programs have achieved ACGME accreditation as of December 2022!
  - 17 Clinical Biochemical Genetics (*+2 new programs in 2022*)
  - 39 Laboratory Genetics and Genomics (*+4 new programs in 2022*)



# Common Citations

- Board Pass Rate (5)
- Case Logs (2)
- Clinical and Educational Work Hours
- Final Evaluations
  - Ability to enter into autonomous practice
- Levels of Supervision
- Scholarly Activities
- Resources



# Common Areas for Improvement

- Faculty Supervision and Teaching (10)
  - Interest in Education
  - Evaluation as Educators
- Evaluation (7)
- Case Logs (4)
- Educational Content (4)
- Professionalism (3)
- Curriculum Organization (3)
- Resources (2)
- Failure to Provide Accurate Information (2)



# What is a Citation?

- Area of noncompliance with a program requirement
- Something the program doesn't have, doesn't do, or didn't clearly describe
- Citations *must* be responded to in ADS
- Reviewed by the Review Committee each year until determined issue is resolved



# What is an Area for Improvement?

- Often referred to as “AFI”
- Areas of concern or repeat trends/issues
- May or may not be tied to program requirement
- ‘Heads up’ to the program before it becomes serious
- Do not have to respond to in ADS
  - Can provide updates to Review Committee via ‘Major Changes’ section’
- Repeat areas may become citations



# Case Logs

- Review Committee is *still* seeing programs with residents not logging cases
- Aggregate entry method started in Fall 2018
  - Residents only have to type five numbers
  - Can pull right from their ABMGG logbooks
- *All* residents must log all cases in the ACGME Case Log System
  - This includes residents in combined programs
- Programs with repeat noncompliance may be subject to citation



# Case Log Entry

Add Cases

View Only

Area/Type/Keyword

Selected Codes

Lock

Area	Type	Keyword 	
Medical Genetics	All		<input type="button" value="Search"/>
Code	Description	Area	Type
	Metabolic Genetics	Medical Genetics	Metabolic Genetics
	Cancer Genetics	Medical Genetics	Cancer Genetics
	Reproductive Genetics	Medical Genetics	Reproductive Genetics
	Adult Patient	Medical Genetics	Other
	Pediatric Patient	Medical Genetics	Other

10	<input type="button" value="Add"/>
30	<input type="button" value="Add"/>
16	<input type="button" value="Add"/>
35	<input type="button" value="Add"/>
32	<input type="button" value="Add"/>



# Case Log Entry Expectations

- Each patient/case should only be logged *once*
  - Select specific category that most closely corresponds to reason for visit
- “Other” categories should *not* include cancer, metabolic, or reproductive cases/patients
- Examples of what would be logged as “Other Patient”
  - Developmental disability, birth defects, chromosomal abnormalities, connective tissue disease, or neurodegenerative disease



# Resident/Fellow and Faculty Survey

- Programs receive results if:
  - There are at least four respondents
  - The response rate is at least 70%
- Programs who do not receive annual results will receive multi-year results once enough data is collected
- Important to preserve anonymity

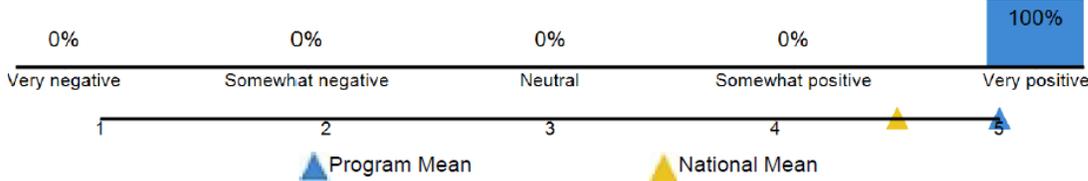


# How to Use Survey Results

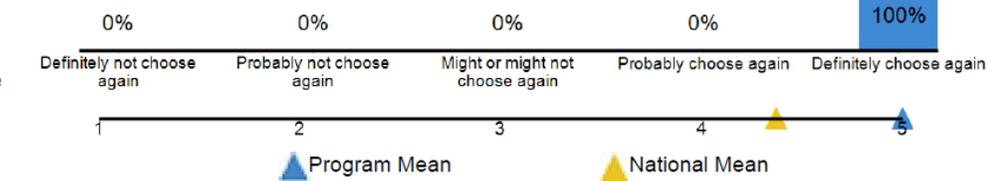
- Review results with Program Evaluation Committee (PEC)
  - Program should still do 'internal' survey
- Review areas of concern with residents
  - Try to identify source of problem
  - Solicit specific improvement suggestions
- Use the 'Major Changes' section of ADS to proactively communicate how you are addressing poor survey results
- Poor Resident/Fellow Survey results alone will *not* cause the Review Committee to withdraw accreditation

Residents Surveyed 11  
Residents Responded 11  
Response Rate 100%

Residents' overall evaluation of the program



Residents' overall opinion of the program



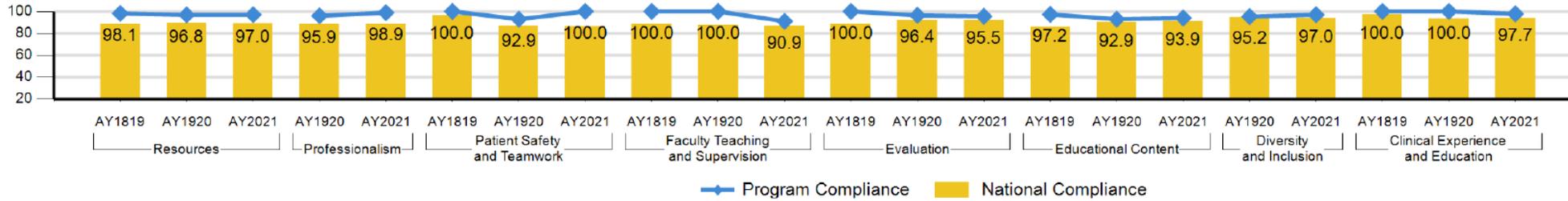
Resources

Education compromised by non-physician obligations

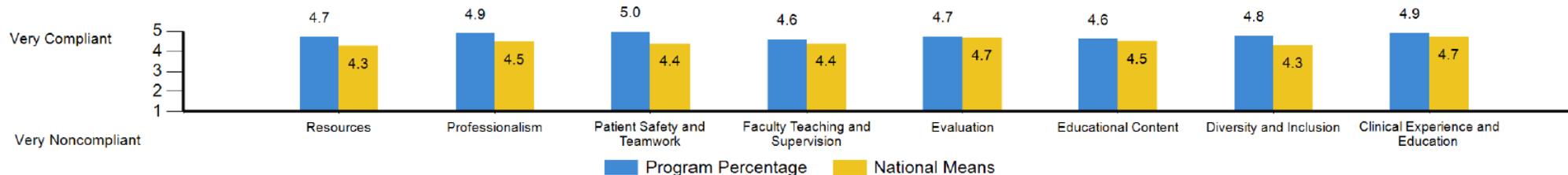
- Impact of other learners on education
- Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care
- Faculty members discuss cost awareness in patient care decisions
- Time to interact with patients
- Protected time to participate in structured learning activities
- Able to attend personal appointments
- Able to access confidential mental health counseling or treatment
- Satisfied with safety and health conditions

	% Program Compliant	Program Mean	% Specialty Compliant	Specialty Mean	% National Compliant	National Mean
Impact of other learners on education	100%	5.0	95%	4.8	88%	4.4
Appropriate balance between education (e.g., clinical teaching, conferences, lectures) and patient care	100%	4.5	97%	3.7	89%	3.7
Faculty members discuss cost awareness in patient care decisions	100%	5.0	95%	4.6	80%	4.1
Time to interact with patients	73%	3.3	92%	3.6	90%	3.5
Protected time to participate in structured learning activities	100%	4.6	99%	4.7	89%	4.3
Able to attend personal appointments	100%	5.0	97%	4.8	85%	4.3
Able to access confidential mental health counseling or treatment	100%	5.0	100%	5.0	92%	4.7
Satisfied with safety and health conditions	100%	5.0	97%	4.9	95%	4.8
	100%	5.0	97%	4.8	88%	4.5

Total Percentage of Compliance by Category



Program Percentage at-a-glance



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# Frequently Asked Questions



# Clinically-Oriented Experiences

- Q: Does having a resident perform inpatient consults during a research experience/rotation fulfill the requirement for at least 18 months of broad-based, clinically oriented medical genetics and genomics experiences? (*Program Requirement IV.C.5.a*)
- A: No, a rotation or experience that focused primarily on research with residents taking some inpatient consults does not count as a broad-based, clinically-oriented experience. Using this approach to fulfill the requirement could dilute the research experience, and such rotations are not fully dedicated to clinical time and experiences.

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# ACGME / Review Committee Updates





# Combined Programs

- Programs offering combined training are *strongly* encouraged to have and use combined program profiles in ADS
- Once combined training is approved by both certifying boards, programs can have a profile which has a separate program number identifying the combined program
  - Not accredited by the ACGME
  - Can receive feedback from Review Committee



# Combined Programs

- Able to monitor combined residents/fellows in one program
  - No longer need to 'move' residents/fellows from one program profile to another
- Ensures Resident/Fellow and Faculty Survey and scholarly activity is credited to both programs
- Only report Milestones for each resident/fellow once a year (for both specialties at once)



# Combined Program Profiles in ADS

- Pediatrics/Medical Genetics and Genomics: 27
- Internal Medicine/Medical Genetics and Genomics: 7
- Medical Genetics and Genomics/Maternal-Fetal Medicine: 6
- Reproductive Endocrinology and Infertility/Medical Genetics and Genomics: 1



# Complement vs. Filled Positions

- Programs are encouraged to have a program complement that closely reflects the number of residents training in the program
  - 2022-2023: total of 194 approved residency positions, only 65 were filled
- Programs should request decrease in complement if needed to better align filled positions versus approved positions
  - Programs can always request temporary increase in complement for a year or two if needed



# Clinical Year Requirement

- All prerequisite post-graduate clinical education required for entry into an ACGME-accredited residency program must be completed in an ACGME-, Royal College of Physicians and Surgeons of Canada-, or College of Family Physicians of Canada-accredited program, or in a residency program with ACGME International Advanced Specialty accreditation. (see III.A.2.)



# Clinical Year Requirement

- Prior to appointment, residents must have successfully completed at least 12 months of direct patient care experience in a residency that satisfies III.A.2. (see III.A.2.b))



# Clinical Year Requirement

- ABMGG waiver for certification eligibility does *not* apply to ACGME requirements
- Medical Genetics and Genomics is defined as a residency program by ACGME
  - Fellow eligibility exception option does not apply
- International educational experience must be in an ACGME-I accredited program with Advanced Specialty Designation



# Milestones 2.0 Update

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Celebrating the completion of Milestones 2.0 for all specialties this spring!

Multi-year Milestones Program Evaluation will begin this fall. Many opportunities to share your thoughts via focus groups, surveys, and interviews.

Watch the Milestones Engagement page and the weekly ACGME Communications email



# Milestones Resources

## Faculty Development

Resources are added and updated throughout the year

Clinician Educator Milestones

Developing Faculty Competencies in Assessment

Resources for Assessment in the Learning Portal

## Guidebooks

Assessment Guidebook

Milestones Implementation Guidebook

The Milestones Guidebook

Milestones Guidebook for Residents and Fellows

Clinical Competency Committee Guidebook

CCC Guidebook

Assessment Guidebook

DOCC and TEAM Assessment Tools

Clinician Educator Milestones

Resident and Fellow Guidebook

## Quick Links

View

Resources

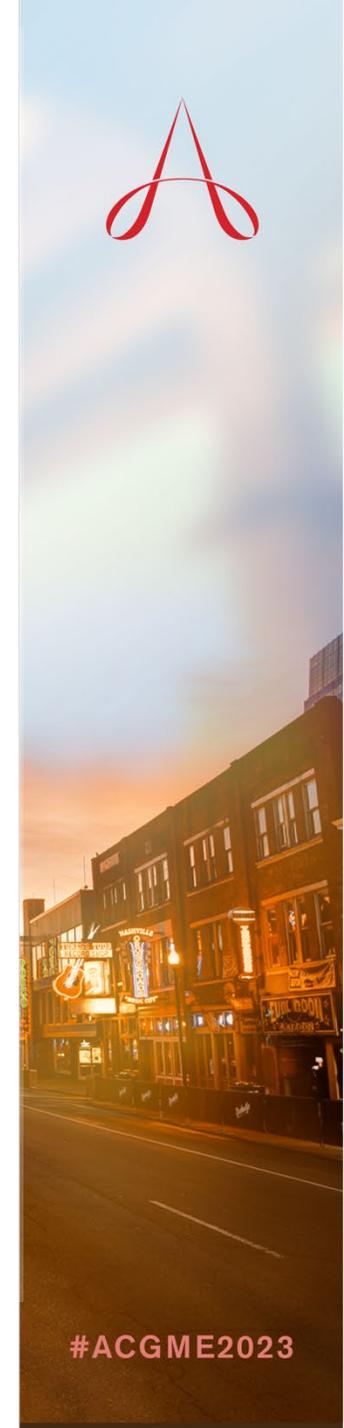
Research and Reports

Engagement

Milestones by Specialty



Feedback

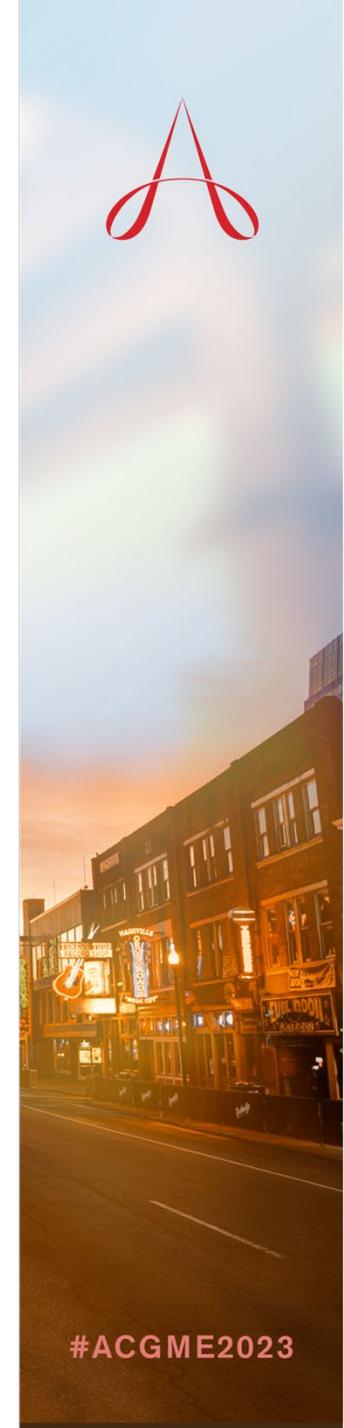




# Supplemental Guide

Use the Word version of the guide to fill in curriculum mapping for your program and create a shared mental model of the new Milestones

Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice	
Overall Intent: To incorporate evidence and patient values into clinical practice	
Milestones	Examples
<b>Level 1</b> <i>Demonstrates how to access, categorize, and analyze clinical evidence</i>	<ul style="list-style-type: none"> <li>Identifies evidence-based guidelines for osteoporosis screening at US Preventative Services Task Force website</li> </ul>
<b>Level 2</b> <i>Articulates clinical questions and elicits patient preferences and values in order to guide evidence-based care</i>	<ul style="list-style-type: none"> <li>In a patient with hyperlipidemia, identifies and discusses potential evidence-based treatment options, and solicits patient perspective</li> </ul>
<b>Level 3</b> <i>Locates and applies the best available evidence, integrated with patient preference, to the care of complex patients</i>	<ul style="list-style-type: none"> <li>Obtains, discusses, and applies evidence for the treatment of a patient with hyperlipidemia and co-existing diabetes and hypertension</li> <li>Understands and appropriately uses clinical practice guidelines in making patient care decisions while eliciting patient preferences</li> </ul>
<b>Level 4</b> <i>Critically appraises and applies evidence even in the face of uncertainty and conflicting evidence to guide care, tailored to the individual patient</i>	<ul style="list-style-type: none"> <li>Accesses the primary literature to identify alternative treatments to bisphosphonates for osteoporosis</li> </ul>
<b>Level 5</b> <i>Coaches others to critically appraise and apply evidence to patient care</i>	<ul style="list-style-type: none"> <li>Leads clinical teaching on application of best practices in critical appraisal of sepsis criteria</li> </ul>
Assessment Models or Tools	<ul style="list-style-type: none"> <li>Chart stimulated recall</li> <li>Direct observation</li> <li>Evaluation of a presentation</li> <li>Journal club and case-based discussion</li> <li>Multisource feedback</li> <li>Oral or written examination</li> <li>Portfolio</li> <li>Simulation</li> </ul>
Curriculum Mapping	<ul style="list-style-type: none"> <li></li> </ul>
Notes or Resources	<ul style="list-style-type: none"> <li>AHRQ. Guidelines and Measures. <a href="https://www.ahrq.gov/gam/index.html">https://www.ahrq.gov/gam/index.html</a>. 2020.</li> <li>Centre for Evidence Based Medicine. <a href="http://www.cebm.net">www.cebm.net</a>. 2020.</li> <li>Guyatt G, Rennie D. <i>Users Guide to the Medical Literature: A Manual for Evidence-Based Clinical Practice</i>. Chicago, IL: AMA Press; 2002.</li> <li>Local Institutional Review Board (IRB) guidelines</li> <li>National Institutes of Health. Write Your Application. <a href="https://grants.nih.gov/grants/how-to-apply-application-guide/format-and-write/write-your-application.htm">https://grants.nih.gov/grants/how-to-apply-application-guide/format-and-write/write-your-application.htm</a>. 2020.</li> </ul>





# Site Visits/Self-Studies

- Site visits are conducted in person or using remote technology
  - Programs/institutions will be notified of the modality for the site visit (blackout date request)
- ACGME developing process for conducting periodic site visits for programs on Continued Accreditation
  - Will not assign program self-study dates or 10-year accreditation site visit dates until further notice



# Disruptions due to COVID-19/RSV

- It is ultimately up to the program director to determine a resident's readiness for autonomous practice
  - See ACGME's guidance on competency-based medical education during program disruptions
  - Some residents may require additional training to make up missed experiences
  - Contact Review Committee staff and ABMGG with questions
- Programs should report disruptions or modifications of resident experiences or curricula in the 'Major Changes' section of ADS



## Direct Observation of Clinical Care (DOCC ) web app

- Enables faculty evaluators to do on-the-spot direct observation assessments of residents and fellows
- Evidence-based frameworks provided for assessing six types of clinical activities
- Dictate feedback into app via mobile device
- Open source design permits programs and institutions to implement web app locally

<https://dl.acgme.org/pages/assessment>  
for more information

## Assessment Tools

### Teamwork Effectiveness Assessment Module (TEAM)

- Enables residents and fellows to gather and interpret feedback from their interprofessional “team”
- Assists programs in assessing key competencies of communication, professionalism and aspects of systems-based practice

<https://team.acgme.org/>



Accreditation Council for Graduate Medical Education

**TEAM: Teamwork Effectiveness Assessment Module**

A web-based assessment tool for residency and fellowship programs.

The Accreditation Council of Graduate Medical Education (ACGME) is proud to provide the graduate medical education community with the Team Effectiveness Assessment Module (TEAM) for residents and fellows.

The TEAM module is meant for use by individual residents and fellows to gather and interpret feedback from their interprofessional “team” with whom they work to care for patients in the hospital or clinic. TEAM is designed for use even in work settings and clinical rotations that do not provide formal support or training for interprofessional teamwork. This multi-source feedback tool can assist residents in fellows in the assessment of key competencies, such as interpersonal skills and communication and professionalism, and the milestones.

Originally developed by the American Board for Internal Medicine (ABIM) as a continuing medical education tool for physicians, the TEAM module has been adopted by the Accreditation Council for Graduate Medicine (ACGME) for use by residents and fellows.

LOG IN TO THE TEAM ASSESSMENT

Email Address  
Enter email address

Password  
Enter password

Submit

Forgot Password?

To get started with your assessment, click the Register Now button.

Register Now

Ready to use TEAM Assessment with your program?

Program Directors



# Faculty Development & Well-Being



- Foundations of Competency-Based Medical Education
- Managing your Clinical Competency Committee
- Live and Hybrid Developing Faculty in Competency Assessment Workshops/Online Modules
- Curated Catalog of Well-Being Resources

<https://dl.acgme.org/pages/well-being-tools-resources>

## FEATURED RESOURCES

The screenshot displays a grid of featured resources. Each resource card includes a thumbnail image, a title, a brief description, and a 'View Details' link. The resources shown are:

- Make the Difference: Preventing Medical Trainee Suicide Video** by Mayo Clinic/American Foundation for Suicide Prevention.
- Resource Compendium for Health Care Worker Well-Being Toolkit** by National Academy of Medicine.
- Well-Being in the Time of COVID-19 GUIDEBOOK** by Accreditation Council for Graduate Medical Education (ACGME).
- After a Suicide: Toolkit for Physician Residency/Fellowship Programs** with a 5-star rating.

Search for content  Q SEARCH

## Systems Approaches to Well-Being

[AWARE Systems and Research in Well-Being Podcast Series](#)

Available on [Spotify](#), [RadioPublic](#), and [Apple Podcasts](#)  
Multiple Authors  
ACGME

[Changing the Culture: Returning Humanity to the Healing Professions](#)

Dr. Holly J. Humphrey  
ACGME

[Combating Burnout, Promoting Physician Well-Being Building Blocks for a Healthy Learning Environment](#)

[Developing Strategies for Well-Being in Your Institution](#)

Drs. John Patrick T. Co and Catherine M. Kuhn  
ACGME

[NAM Action Collaborative on Clinician Well-Being and Resilience: Perspectives from the Leaders](#)

Drs. Victor J. Dzau, Darrell Kirch, and Thomas J. Nasca  
ACGME

[NAM Action Collaborative on Clinician Well-Being and Resilience: To Care is Human](#)

[The Role of Psychological Safety in Improving the Learning Environment](#)

Drs. John M. Byrne, Lawrence K. Loo, and Robert A. Swendiman  
ACGME

[Schwartz Rounds \(Creating a Support Group\)](#)

The Schwartz Center

[Stimulating a Culture of Well-Being in the Clinical Learning Environment](#)

Dr. Lourdes Calero



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- WELL-BEING RESOURCES ▾
- COVID-19 RESOURCES ▾
- ASSESSMENT
- EVENTS
- CREATE AN ACCOUNT
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## Learn at ACGME

We offer Faculty Development in Assessment and Evaluation, the Basics of ACGME Accreditation, and more. Visit our library of videos from our Annual Educational Conference, Baldwin Seminar Series, and other events. Connect with others in the graduate medical education community by joining a role- or topic-based discussion forum.

# The ACGME's Online Learning Portal

Visit our learning portal at  
[dl.acgme.org](https://dl.acgme.org)  
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# Live Event

## Program Director Well-Being



<https://dl.acgme.org/pages/well-being-tools-resources>

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An ACGME listening session focused on creating a space for program directors to share experiences and hear from peers regarding issues related to program director well-being .

Join the event for an open discussion of challenges faced by program directors and potential solutions.

- ✓ April 11, 2023
- ✓ Registration required



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# Questions?





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## Complete the Evaluation for CME or Certificate of Completion!

The evaluation can be found in the mobile app and a link will be sent post-conference by email to attendees.

Evaluations are tied to your registered sessions.

Register/un-register sessions in the mobile app.

Deadline – March 24, 2023

Questions? [cme@acgme.org](mailto:cme@acgme.org)

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# Thank You

