



Transitional Year Review Committee Update

Ashley M. Maranich, MD, MHPE, Chair

**Cheryl Gross, MA, CAE,
Executive Director**

—2023—
ACGME
—ANNUAL—
**EDUCATIONAL
CONFERENCE**

FEBRUARY 23-25, 2023
NASHVILLE
TENNESSEE



Conflict of Interest Disclosure

Speaker(s):

Ashley Maranich, MD, MHPE

Cheryl Gross, MA, CAE

Disclosure to the Learner:

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

- Summarize the work of the TYRC this past year
- Describe recent changes in TYRC program requirements and policies
- Describe reporting requirements and data elements reviewed by the TYRC



The Review Committee

Ashley Maranich, MD, MHPE (*Chair*)

Andrew Mangano, DO, FACP

Mary Warden, MD (*Vice Chair*)

Anne Messman, MD

Natalie Domeisen (*Resident Member*)

Sharon Rouse, DO

Laurel Fick, MD, FACP

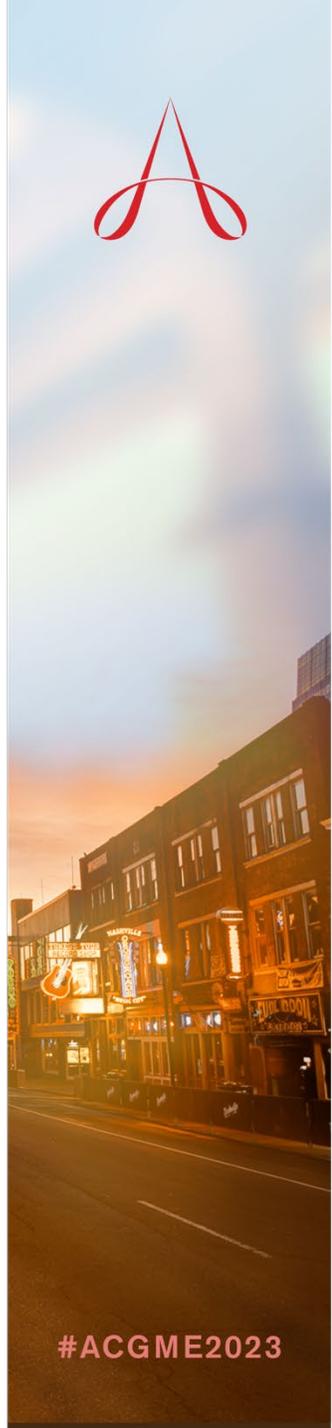
Bhavna Sheth, MD, MBA

Benjamin Jarman, MD

Christopher Swide, MD

Christopher Kuzniewski, MD

Tara Zahtila, DO



New Public Member – 2023-2029

Eric Brown, PhD

- Boston University School of Medicine
- Assistant Professor, Mental Health Counseling and Behavioral Medicine



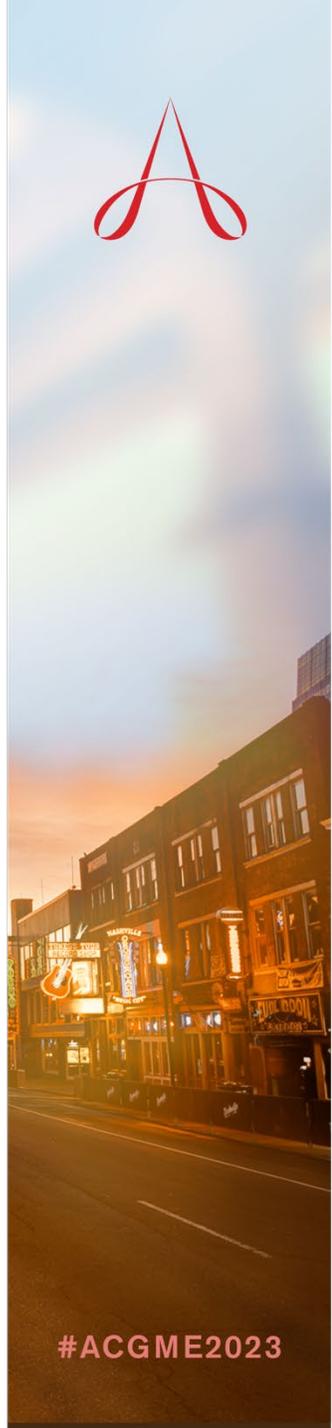
The Stats



Trends in Transitional Year Programs



Academic Year	# Residents	# Programs
2021-2022	1,767	178
2020-2021	1,693	172
2019-2020	1,597	166
2018-2019	1,532	157
2017-2018	1,320	135
5-Year Trend	↑ 33.9%	↑ 31.9%



Transitional Year Program Size



Number of Filled Positions	Number of Programs
0 Residents (<i>new programs</i>)	12
1-5 Residents	21
6-10 Residents	61
11-15 Residents	63
16-20 Residents	14
Over 20 Residents	7

Number of Filled Positions	
Range	0-29
Mode	6
Median	10
Mean	10



Accreditation Status

All TY Programs – 2021-2022

Status	Number of Programs	Percent
Initial Accreditation	30	16.9%
Continued Accreditation	146	82.0%
Continued Accreditation with Warning	2	1.1%
Probation	0	--
Withdrawn	0	--

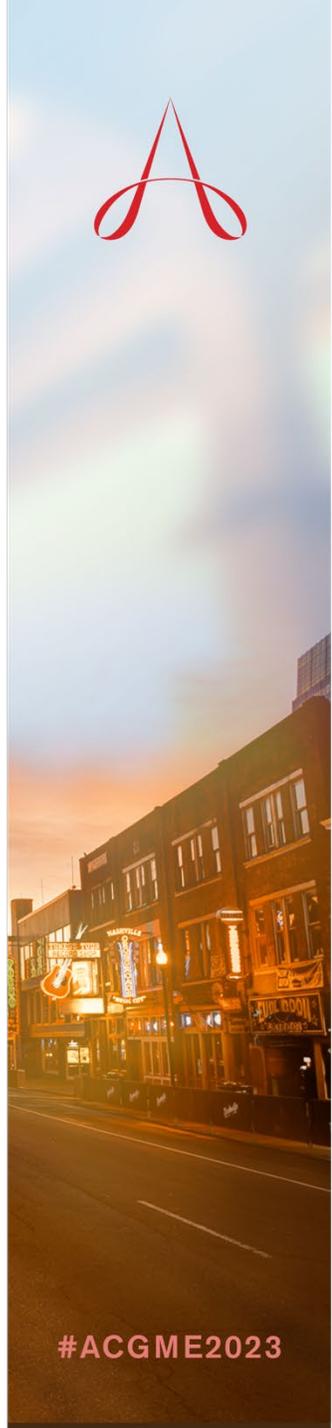


Annual TYRC Activities



The Review Committee meets to review:

- Applications
- Permanent Complement Increase Requests
- Annual Data
 - *Programs with Citations*
 - *Programs with Annual Data Indicators*
- NAS Accreditation Site Visit



Program Requirements



Salary Support – TY Program Director/Leadership



Number of Approved Resident Positions	Minimum Support Required (FTE) for the Program Director	Minimum Additional Support Required (FTE) for Program Leadership in Aggregate
1-6	0.2	---
7-10	0.25	---
11-15	0.25	0.05
16-20	0.25	0.1
21-25	0.25	0.15
26 or more	0.25	0.2



Section II: Program Director Qualifications

Qualifications must include:

- At least 3 years of educational and/or administrative experience, or qualifications acceptable to RC
- AOA or ABMS certification acceptable
- Current medical licensure and medical staff appointment
- Ongoing clinical activity



Section II: Core Faculty



Core Faculty

- Program director can select core faculty
- Definition now based on role in resident education and supervision – not number of hours devoted
- Must complete annual ACGME Faculty Survey

Core Faculty Members

- Minimum – 3 core faculty, at least 1 from each sponsoring program
- At least 1 additional core faculty for every 4 residents over 12 approved residents



Program Coordinator

[II.C]



- <16 approved residents – 50% support
(20 hours/week)
- 16-20 approved residents – 75% support
(30 hours/week)
- Over 20 approved residents – 100% support
(40 hours/week)

FTE support must be exclusive to TY program



Other Items

- Residents must TAKE USMLE Step 3 or COMLEX-USA Level 3 prior to completion of the TY program [IV.B.1.c).(1)]
 - *Program is NOT required to reimburse residents for exam, unless the sponsoring program(s) pay for PGY-1 residents to take exam*
 - *If exam was delayed, mark as such in the resident's file in the event of a site visit*



Curriculum Organization [IV.C]

- Each rotation must be at least 2 weeks in length [IV.C.1.a)
 - *Outside of ambulatory/longitudinal clinic*



Curriculum Organization [IV.C]

- 24 weeks of fundamental clinical skills
 - *In units where other ACGME residents rotate*
 - *Resident must be primary physician for patient, who would identify resident as their physician*





Curriculum [IV.C.4]

Ambulatory (140 hours)

- *Can be family medicine, primary care internal medicine, general surgery, obstetrics and gynecology, or pediatrics*
- *May be conducted as a longitudinal clinic (NOT required)*
- *No shorter than half-day sessions*



Curriculum [IV.C.4]

8 weeks of rotations involving INPATIENTS (can double count FCS/inpatient) [IV.C.4.c)]

- *General medicine, general pediatrics, general surgery, obstetrics and gynecology, or family medicine*

Minimum Requirements

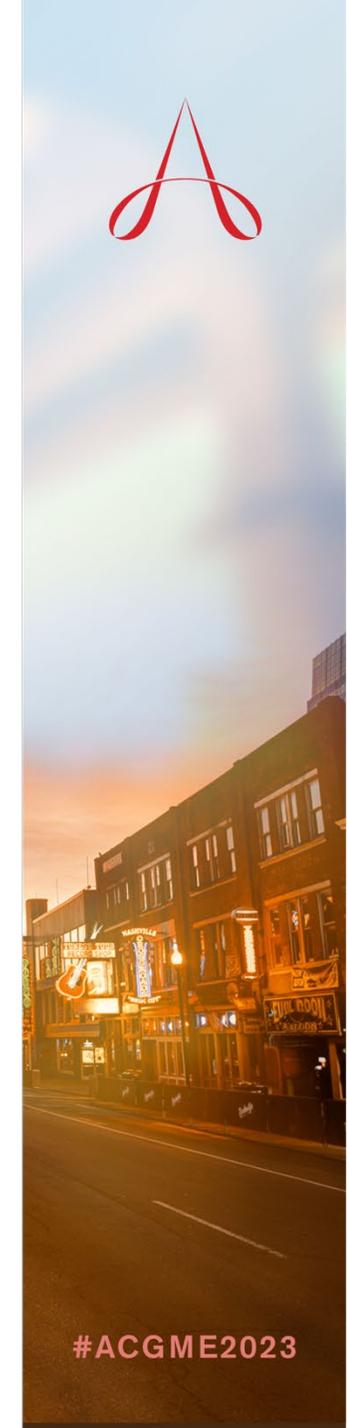
**TY Program
(52 weeks)**

**FCS (24w) “primary
provider”**

**Gen. IPD
(8w)**

EM (4w)

**Gen. Amb
(4w)**



Implementation Example



**Night
Float (4w)**

**Gen. Amb
(4w)**

**Gen. IPD
(4w + 12w)**

**FCS (24w)
“primary physician”**

EM (12w)

Night Float

- No more than 4 consecutive weeks
- Maximum of 8 weeks during transitional year
- If resident is primarily responsible for most patient care decisions, can be FCS rotation
- Solely consulting or handling night emergencies would not qualify as FCS





Elective Options [IV.C.5]

- 8 weeks minimum, from medical, surgical, and hospital-based specialties
 - *Residents should have elective rotations to meet needs of future residencies*
- 8 weeks maximum non-clinical (research, etc.)
- Outside rotation maximum of 8 weeks
- Exceptions can be made for as required by the categorical specialty (ex. ophthalmology)

Section IV: Scholarship

- Focuses on scholarly activity for the program as a whole
- Annual activity by a variety of methods, disseminated within and outside the program, including peer review publication



Program Evaluation Committee

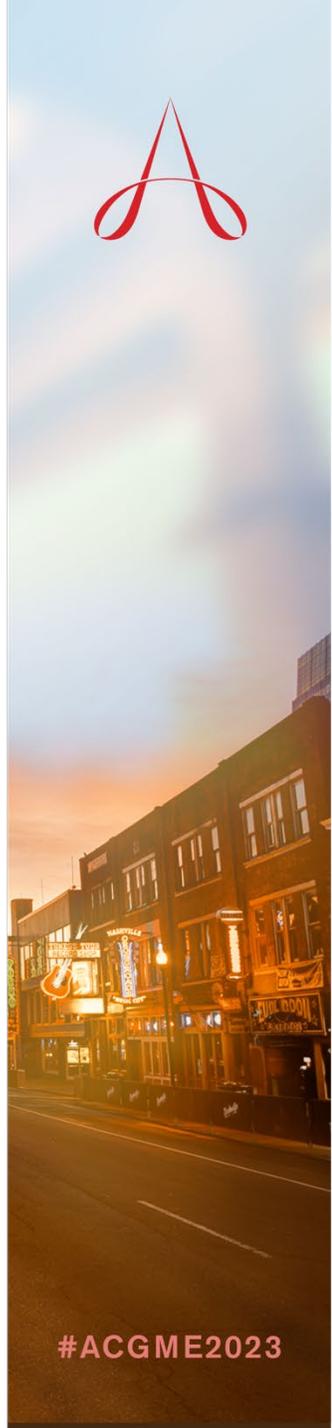
Required to meet at least annually

Recommend at least semi-annually or quarterly

Strongly recommend the DIO or member of
Sponsoring Institution leadership be a member



Program Review



Annual Timeline



Jul/Aug

Oct/Nov

December

April

Annual ADS
Data Input

Data
Analysis

TYRC
Meeting
Review

TYRC
Meeting
Follow Up

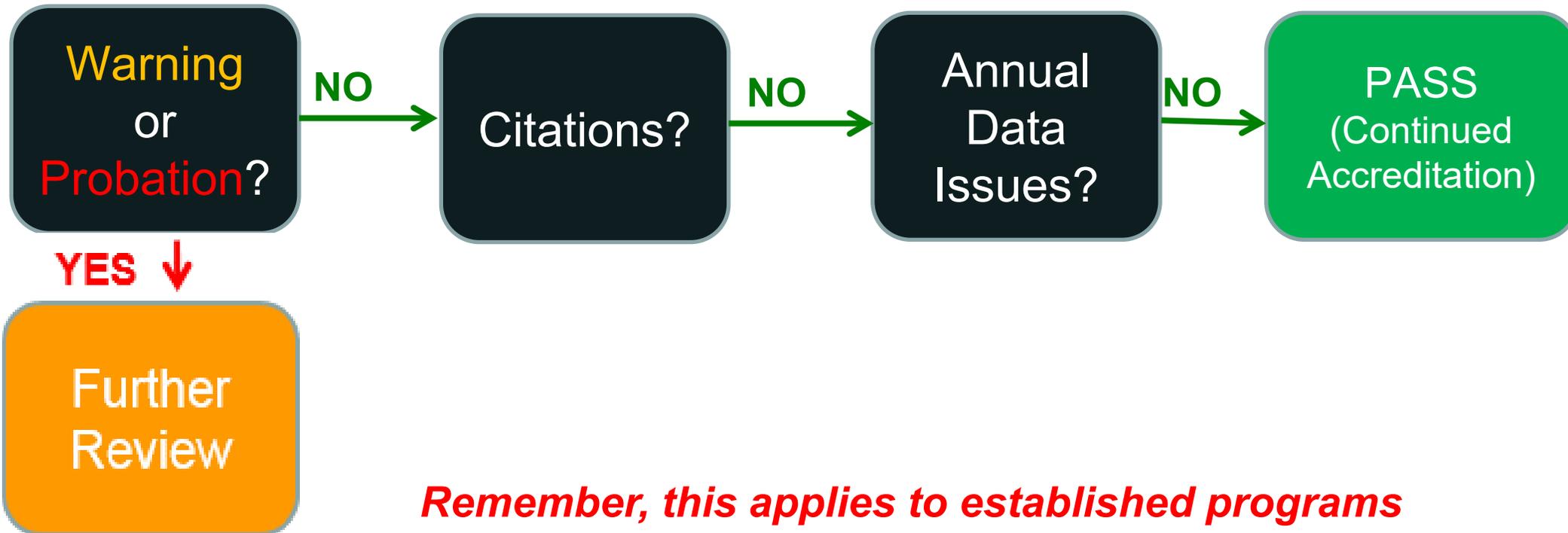


Majority of
Programs
Reviewed





Annual Data Review Process



Remember, this applies to established programs (not on Initial Accreditation).



The Review Process

Staff Review

- *Broad Review of all Data – Concerns Flagged*

Committee Review

- *Programs on Warning or Probation*
- *Programs with Active Citations*
- *Data Concerns*



Annual Data Indicators

- Surveys – Resident/Fellow and Faculty
- Clinical Experience and Case Logs
- Scholarly Activity – Faculty and Resident/Fellow
- Attrition
- Information Omission
- Major Changes / Responses to Citations

Accreditation Status

Continued Accreditation

Continued Accreditation with Warning

Probation

Withdrawal of Accreditation





Continued Accreditation

Substantial compliance with requirements

- *Programs may or may not have Citations or Areas for Improvement (AFIs) issued*

RC will continue annual review of indicators

Programs can innovate around “Detail” Requirements
(not “Core” or “Outcome” Requirements)

Continued Accreditation with Warning

Areas of Non-Compliance Jeopardize Accreditation

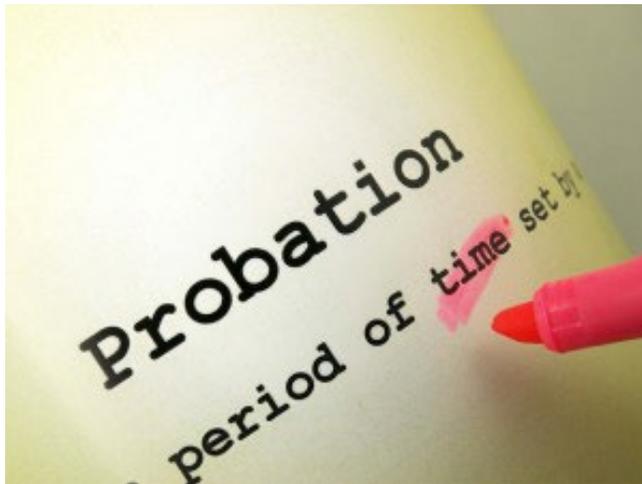
- *No increase in complement*
- *Status is published on ACGME website*
- *Do NOT need to inform residents*





Probation

Must have a site visit before conferring this status



- *No increase in complement*
- *Status is published on ACGME website*
- *Must inform residents and applicants in writing*



Letter of Notification

Citations

- More serious concerns than areas for improvement
- Linked to Program Requirements
- Require written response in ADS
- RC will review again the following year (Extended or Resolved)



Common Citations

- Responsibilities of Program Director (Failure to provide accurate/complete information)
- Faculty/Resident Scholarly Activity
- Responsibilities of Faculty
- Curricular Development/Organization
- Evaluation of Residents
- Educational Program – Patient Care Experience and Didactic Components



Letter of Notification

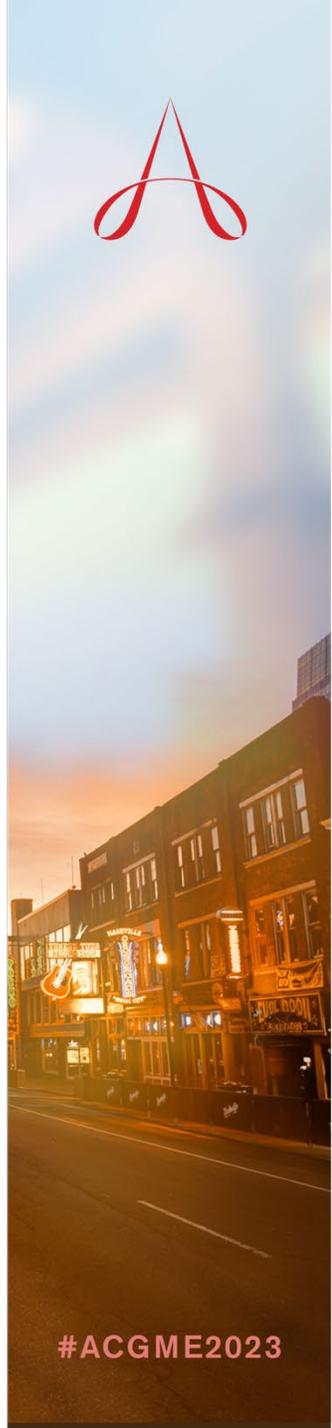
Areas for Improvement (AFIs)

- Concerns do not reach level of citation (trends)
- No written response required
- Should be reviewed with PEC
- RC will review again following year
- Unresolved AFIs may become Citations

Faculty Certification

Certification information is automatically pulled from ABMS certification information

Any additional certifications, including AOA, still need to be updated manually during the annual update



Tips





Complement Increases

- Temporary requests – Programs on Continued Accreditation
 - *Remediation*
 - *Off-cycle residents*
- **NOT** for long-term “temporary-permanent” increases (i.e. multiple-year temporary increases with a rationale that “the position is funded”)
- Multiple-year increases for the same position will **NOT** be approved



Common RC Concerns

Inaccurate/Incomplete information in Annual ADS Update

- *Faculty licensure, qualifications*
- *Faculty / resident scholarly activity*
- *Response to Citations*
- *Lack of documentation (when requested)*
- *Block diagram information / format*



Website Information

- [Block Diagram Instructions](#)
- [FAQs](#)
- Video Shorts
 - [Avoiding Common Errors in the ADS Annual Update](#)
 - [Completing an Application for ACGME Accreditation](#)

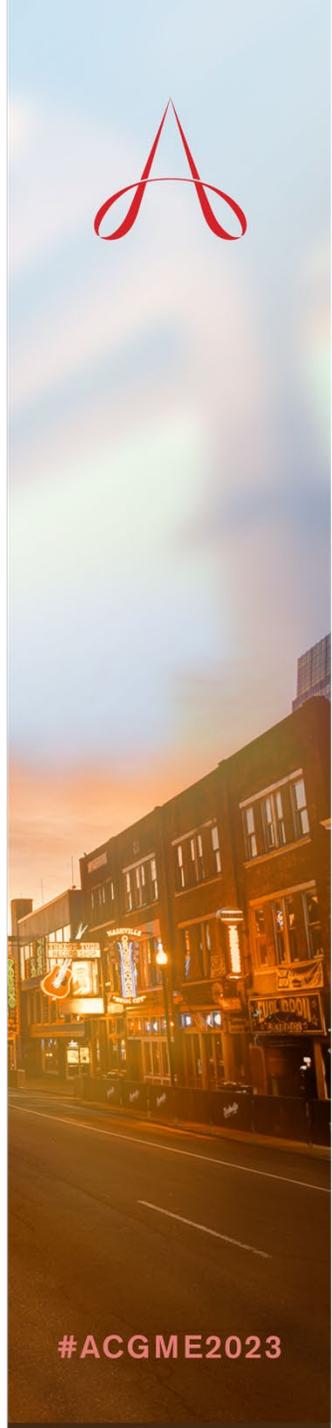
How to Respond to Citations

- Look at citation with an open mind
 - *It's not personal!*
 - *Citations are based on the information the Review Committee sees*
- If it's not written, it didn't happen
- Have others read responses for tone
 - strive for objectivity



How to Respond to Citations

- Provide the information requested
 - *If data is requested, provide the data*
 - *If you don't understand, call or email*
- Thoroughly respond to each concern within the citation and beyond
 - *If there are multiple concerns, show how they've been resolved or are being resolved*



HOW TO **REALLY** RESPOND TO CITATIONS TO RESOLVE THEM

- How did you engage residents and faculty in investigating the issue?
- What is the issue?
- What actions will/have you implemented to correct the issue?
- How will you monitor and sustain the improvement?



Other Initiatives





Coordinator Timelines

- Developed by the ACGME Coordinator Advisory Group
 - [Residency](#)
 - [Fellowship](#)
 - [Institutional](#)
- Orientation Manual for Coordinators (*Spring 2023*)



Milestones 2.0 Update

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 eCommunications 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](#)

Current resources include:

- *CCC Guidebook*
- *Assessment Guidebook*
- *DOCC and TEAM Assessment Tools*
- *Clinician Educator Milestones*
- *Resident and Fellow Guidebook*

Guidebooks

[Assessment Guidebook](#)[Milestones Implementation Guidebook](#)[The Milestones Guidebook](#)[Milestones Guidebook for Residents and Fellows](#)[Clinical Competency Committee Guidebook](#)

Quick Links

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Live Event

Program Director Well-Being



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

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***



CONTACT US

We want to help!

RC Staff

Cheryl Gross: cgross@acgme.org

Kerri Price: kprice@acgme.org

Aimee Morales: amorales@acgme.org

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

ADS Staff

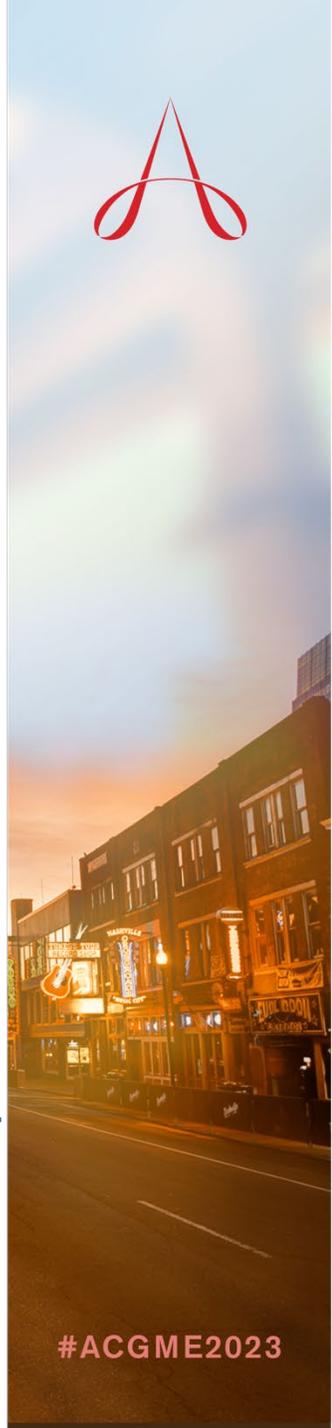
ADS@acgme.org

- *ADS*
- *Surveys*
- *Case Log System*

Field Activities Staff

fieldrepresentatives@acgme.org

- *Site Visit*





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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



Thank You!

Questions?

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