Review Committees of the ACGME

New Program Directors Pre-Course
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Background Information

- ACGME has 28 review committees
- Review Committee members range in number from 6 to 20 volunteer physicians

Types of Review Committees

1. Residency Review Committees (RRC)
   (6 to 20 physician members + 1 resident member)
2. Transitional Year Review Committee (TYRC)
   (9 members, including 1 resident member)
3. Institutional Review Committee (IRC)
   (10 members, including 1 resident member)
Overview - Review Committee

- Functions
- Role of appointing organizations
- Composition, tenure, and code of conduct

Review Committee Functions

- Set accreditation standards
- To provide a peer evaluation of residency programs and subspecialties
- (IRC) To provide a peer evaluation of sponsoring institutions

Purpose of Peer Evaluation

- To assess the degree to which the program (or institution) complies with a published set of educational standards
- To confer an accreditation status on programs and institutions meeting those standards
Delegation of Authority

- Each Review Committee functions under accreditation authority delegated by the ACGME.
- Review Committee actions are monitored for procedural compliance at intervals set by the ACGME.

Appointing Organizations of RCs

- American Medical Association’s Council on Medical Education
- Specialty Board
- Professional college or other professional organization or society

Appointing Organizations – IRC, TYRC

- TYRC physician member candidates are nominated by the member organizations of the ACGME:
  - The American Board of Medical Specialties (ABMS)
  - The American Hospital Association (AHA)
  - The American Medical Association (AMA)
  - The Association of American Medical College (AAMC)
  - The Council of Medical Specialty Societies (CMSS)
- IRC candidate nominations are solicited from the GME community and appointed by ACGME.
RC Member Appointments

- ACGME determines the number of RC members based on the number of specialty and subspecialty programs (or sponsoring institutions) as well as overall workload
- All appointees are confirmed by the ACGME Board of Directors

Process: RC Member Appointments

When an RRC vacancy occurs . . .

- Appointing organization is contacted 18 months in advance of member departure
- Recommendations for new member are defined:
  - general and specialty characteristics
  - geographic distribution
  - diversity in gender, race, and ethnicity

RC Physician Membership Tenure

RC physician members -

- Are appointed for an initial term of 3 years
- A renewable term of 3 more years, for a total of 6 years
- May not be appointed again to the same RC
Resident Member

- Each RC must have a procedure for appointing the resident member (a minimum of one year), who must be enrolled in a residency program at the time of appointment, and
- Who may not serve more than one year beyond completion of residency

RRC and TYRC Members

- Must be certified by the appropriate ABMS Board
- Should be actively involved in GME
- Should demonstrate substantial experience in the administration and/or teaching of the specialty
- Should have knowledge of the accreditation process

IRC Members

- Should be associated with an institution that holds initial accreditation or continued accreditation (exception: the resident member)
- Should be familiar with the institutional review process and the requirements, and have experience with or current responsibility for their implementation
- Should possess demonstrated experience in institutional administration, institutional oversight, and/or institutional review
Review Committee Structure (cont.)

Typical structure . . .
- Chair and Vice-Chair
- Physician Members
- Resident Member
- Ex officio Member
- An RC may also appoint either one or more alternate members

Review Committee Structure (cont.)

Member roles and responsibilities -
- **Chair**: elected from the membership for a 2-year term, should be eligible for re-election, calls and presides over meetings, ensures that policies and procedures are followed, attends Council of Review Committee Chair (CRCC) meetings
- **Vice Chair**: assumes the duties of the Chair if required, may or may not succeed chair

Review Committee Structure (cont.)

- **Resident**: reviews programs, full voting member
- **Ex officio**: recommended by the appointing organization, non-voting member, observes same rules as voting members, can participate in policy discussions but not in program reviews
- **Alternate**: officially designated, substitutes for voting member, sufficiently familiar with review process
Observers and Guests
- Number at an RC meeting is limited
- Must be approved in advance by the RC Executive Director
- (Guests) May be invited to provide data that addresses specific issues
- (Guests) Are not present for program review or institutional review

RC Member Conduct
ACGME Expectations
- Sign an agreement to comply with ACGME policies and procedures
- Honor a fiduciary duty to act in the best interests of the ACGME
- Do not serve as program or institutional consultant, or site visitor to GME programs of sponsoring institutions while an RC member

RC Member Conduct
- Avoid conflict of interest by withdrawing from discussions that present a conflict, leave the room
- Respect confidentiality by not disclosing information or documents that are acquired during the accreditation process
Executive Director for Review Committees

- Appointed by the ACGME Senior Vice-President for the Department of Accreditation Committees
- Serves as chief staff member for the RC
- Responsible for all RC administrative matters

Accreditation Responsibilities

1. To accredit programs and sponsoring institutions consistent with established ACGME policies

Accreditation Responsibilities (cont.)

2. To confer an accreditation status and specify the length of the accreditation review cycle
Accreditation Responsibilities (cont.)

3. To prepare or periodically revise (minimum, 5 years) the Requirements to reflect current educational and clinical practice.

Accreditation Responsibilities (cont.)

4. To prepare or revise PIFs (Program Information Forms), data collection systems, and other evaluation documents.

Accreditation Responsibilities (cont.)

5. To initiate discussion in matters of policy, best practices, and innovation relating to GME.
Accreditation Responsibilities (cont.)

6. To recommend to the ACGME changes in policy, procedures, and requirements

RC Accreditation Process

- RCs evaluate and make recommendations for program accreditation
- Decisions are based on both the Institutional Requirements and the Program Requirements

RC Accreditation Process (cont.)

- Program Directors receive accreditation decisions via ADS
- Adverse Actions may be appealed
- ACGME Monitoring Committee reviews each RC at least once every 5 years
Components of an Accreditation Review

- Site Visitor report
- Resident survey results
- Board scores for RRCs
- Program Information Form (PIF)
- Requests: complement increase, program format, add/delete participating institution
- Progress report

RC Meetings

- Typically, semi-annual meetings
- Program files sent to Committee members 2-3 months prior to meeting
- 2 members review each program, submit independent reports

RC Meetings (cont.)

- Agenda books are compiled approximately 1 month prior to meeting
- Decisions are communicated through ADS
Summary

- 3 types of RCs with similar functions
- Appointing organizations recommend new members
- Code of conduct applies to all members

Summary (cont.)

- Review Committee composition and tenure may vary slightly, but the same ACGME code of conduct applies to all members

Summary (cont.)

- Review Committees make accreditation decisions based on requirements
- Decisions can be appealed
Conclusion

Your Questions