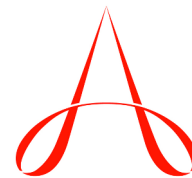


RRC NEWS

PLASTIC SURGERY



ACGME

Accreditation Council for Graduate Medical Education

NOVEMBER 2009

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Updates on Program Requirements Implementation

The deadline for submitting requests to comply with the Plastic Surgery Program Requirements (effective July 1, 2009) has passed. Your program's approved revised program length and program complement are posted on webADS. Please review this information and call the ACGME if you have any questions.

All residents matching into Plastic Surgery programs in the spring of 2010 must complete their training in either a three-year Independent program format or in a six-year Integrated program format.

Honoring Previous Commitments to Current Residents

At its October 2009 meeting, the Residency Review Committee (RRC) affirmed its decision that during this transition all programs must honor previous commitments to current residents regarding the length of their residency education.

Residents who began their education prior to July 1, 2010 must complete their residency education program according to the terms and conditions set forth when they were accepted into the program. The RRC neither expects nor condones lengthening residency education after the start of an educational program.

A number of programs provide resident education in a "combined" format, where the resident enters the institution's surgery program for three years before beginning the plastic surgery residency. The RRC understands that residents in the surgery portion of their education at such institutions have been informed of the total years of education. In order to ensure that these residents have their previous commitments honored, the RRC requires that all programs in the combined format provide the following information to the RRC by February 23, 2010:

- Resident Name
- PGY position (specify Surgery or Plastic Surgery)
- Expected date of graduation (from Plastic Surgery)

Exceptions to the three-year plastic surgery residency education will be considered for these individuals. The RRC Executive Director will send an administrative letter to the program director with the RRC's decision, and the information will be entered into the program's history. Additionally, the RRC will inform the American Board of Plastic Surgery about the granted exceptions.

MEETING: APRIL 20-21, 2010
AGENDA CLOSING: FEBRUARY 9, 2010

MEETING: OCTOBER 15-16, 2010
AGENDA CLOSING: AUGUST 6, 2010

RRC DECISIONS--OCTOBER 2009

Plastic Surgery-Independent 74 Programs	
Continued Accreditation	8
Other Requests (progress reports, increases in complement, changes in program format)	28
Plastic Surgery-Integrated	
Initial Accreditation	1
Continued Accreditation	3
Deferrals	2
Other Requests (progress reports, increases in complement, changes in program format)	4
Craniofacial Surgery 6 Programs	
Initial Accreditation	2
Hand Surgery 14 Programs	
Continued Accreditation	3
Other Requests (progress reports, increases in complement)	2

Craniofacial Surgery Program Requirements Revision Process

The RRC is currently undertaking a major revision to the Program Requirements in Craniofacial Surgery. The RRC expects that the revisions to the Craniofacial Surgery Program Requirements will be available for review and comment in early 2010.

ACGME Resident Survey Results

From March through June 2008, residents from 71 programs were surveyed, and 568 of 628 residents completed the survey for a 90% response rate. The survey results indicate highly engaged learning between faculty and residents. An average of 92% of the residents indicated that faculty provides sufficient supervision and participation in conferences. An average of 96% of the residents reported opportunities to participate in research or scholarly activities, as well as opportunities to assess the residency program for the purpose of program improvement. Of the residents who responded, an average of 98% reported having met ACGME duty hour requirements for the work week, one day free from all program responsibilities, in-house call, and

working within the 24+6 hour continuous on-duty limit. The survey results do suggest one area for program improvement: 23% percent of the residents reported they could not speak freely about issues and problems in their residency program without fear of intimidation or retaliation.

In a complex learning environment, it is possible that structures may not necessarily be in place to elicit resident input. Successful programs, however, value resident input and gather resident opinions in many different ways. One example is a resident-led forum that focuses on what works well and what can be improved. Programs can then incorporate this input into the annual review of program effectiveness and improvement, which is a required step in the accreditation process. Programs with other innovative ways of engaging residents and minimizing fear of intimidation are invited to share their ideas. The Committee will review suggestions received and share selected strategies on the "Notable Practices" section of the Plastic Surgery RRC webpage. Submissions can be made to the ACGME office at: cruiz@acgme.org.

Institution of Medicine (IOM) Duty Hour Recommendations

The IOM recommendations to change the current duty hour standards are probably familiar to most of our newsletter readers. While the total of 80 hours per week remains intact, multiple changes regarding how those hours can be apportioned are being recommended. The IOM has given the ACGME two years to implement most of these changes. The ACGME takes this responsibility seriously and has assigned a task force including members of its Board of Directors and several RRC chairs to study the IOM report and recommend a course of action. An interactive conference on duty hour standards was held March 4-5, 2009 in conjunction with the ACGME Educational Conference. In addition, a Duty Hour Congress was held June 11-12, 2009 in Chicago. Representatives of specialty organizations, boards, and others in the community attended. Reactions to the IOM recommendations from the Plastic Surgery community were submitted to the ACGME for consideration. Recommendations from all specialties were made available to the ACGME and the Duty Hour Task Force for review. More information will be provided as it becomes available.

Accreditation Data System (ADS)

The ACGME's online ADS alerts the RRC to changes in programs. Program directors should update ADS to:

- notify the RRC of any changes in their program (i.e., new program director or adding or deleting a site).
- request a change needing RRC approval (i.e., an increase in resident complement). The request for a permanent increase in the resident complement must include a copy of the institutional data for all participating sites. Only one academic or one calendar year of data is necessary.
- submit the academic year "Annual Update" (ADS staff will e-mail program directors the deadline for updating faculty and resident rosters).
- prepare for an upcoming site visit (the ADS will populate many sections of the PIF with the data entered).

Address any questions or concerns about ADS to WebADS@acgme.org.

Useful Resources for New Program Directors

Institutional Requirement III.B.10.e specifies that the Graduate Medical Education Committee (GMEC) approves new program directors prior to submission to the ACGME. Once approved, the name of the program director is entered into ADS, which automatically generates a welcome letter to the new program director with a copy to the designated information official (DIO) and program coordinator. The welcome letter provides useful information about the ACGME website, as noted below, and refers the new program director to the ACGME Virtual Handbook (<http://www.acgme.org/acWebsite/home/PDVirtualHandbook.asp>).

The Plastic Surgery RRC approves new program director appointments. The Committee reviews the information at the next available meeting, and the RRC Executive Director provides a final letter of approval to the program director with a copy to the DIO.

Other resources accessible via the ACGME/RRC webpages include:

- The *RRC webpage* contains periodic updates from the Review Committee, FAQs, staff members' contact information by subject, Program Requirements, Program Information Forms (PIFs), and a Program Directors' Guide to the Common Program Requirements.
- The *Program Directors & Coordinators* link contains information about Case Logs, Resident Duty Hours, the Resident Survey, and policies.
- *The ACGME Manual of Policies and Procedures, Section II, Accreditation Policies and Procedures* contains a complete explanation of accreditation statuses awarded to programs and the policies to which program directors must adhere.
- In *About ACGME-->Staff Listing-->Staff listing by Department*, you will find an overview of the four departments within the ACGME, including the Department of Accreditation Committees, which houses all of the RRC staff, and the phone and e-mail contact information for all ACGME staff.
- *The Key to the Standard Notification Letter* provides explanations for the common sections of accreditation letters.
- The *Outcome Project webpage* provides comprehensive information about the general competencies.
- Note that an ID and password are required to access the Accreditation Data System and Resident Case Log System (if applicable).

The welcome letter sent to new program directors informs them that the DIO and GMEC of the sponsoring institution, and the specialty-specific Program Directors Association, are additional important resources, and encourages them to contact these groups for more information.

2010 Parker J. Palmer Courage to Teach Award, Courage to Lead Award, David C. Leach, MD Award, and Program Coordinator Awards

The ACGME announced the 2010 Parker J. Palmer Courage to Teach and Courage to Lead Awards, and the David C. Leach, MD Award and Program Coordinator Award recipients at:

<http://www.acgme.org/acWebsite/home/2010AwardACGMERecipients.pdf>

Awardees will be invited to an awards luncheon during the 2010 ACGME Annual Educational Conference, which will take place March 4-7 in Nashville, Tennessee.

ACGME Annual Educational Conference

<p>Save the Date: 2010 ACGME Annual Educational Conference <i>Transitions in GME</i> Gaylord Opryland Resort Hotel and Convention Center Nashville, Tennessee March 4-7, 2010 For more Information: www.acgme.org/acWebsite/meetings/2010Conf/me_EducConf_10.asp</p>
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In addition to the Educational Conference, the ACGME offers workshops for New Program Directors and New Program Coordinators. The 2010 meetings will be held in Nashville, Tennessee. Dr. Robert Havlik, RRC Chair, and Dr. Peggy Simpson, RRC Executive Director, will be present to give an update for Plastic Surgery for program directors and coordinators.