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Accreditation Council for Graduate Medical Education

COFTOG Meeting

RC Update FPMRS

Jessica Bienstock, MD MPH
Vice Chair
Obstetrics & Gynecology RC
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Update RC OB/GYN (FPMRS)


Jessica Bienstock, MD MPH

Disclosure

- None of the above speakers have any conflicts of interest to report



NAS: What happens at my program?



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Slide 1

r1 maybe keep the names off.
rmiller, 2/11/2013

The Next Accreditation System

- RC screens all programs based on annual data-
 - ADS annual update, Resident & Faculty Survey
 - Milestones Data, Case Log, Board Pass rate (5 yr rolling average)
- All programs reviewed by set performance indicators and thresholds
 - Identified programs with potential problems require more information with a progress report or site visit
 - High performing programs-informed of continued accreditation



What Happens at *My* Program?

FPMRS

- Milestones implementation date: July 2014
- 1st Milestones reporting date: Nov 2014



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Key Points: Milestones

- Articulate shared understanding of expectations
- Describe trajectory from beginner in the specialty to exceptional practitioner
- Organized under six domains of clinical competency
- Represent a subset of all sub-competencies
- Set aspirational goals of excellence



FPMRS Milestones

- Based on Core Competencies:
 - Patient Care - 7
 - Medical Knowledge -8
 - Systems-based Practice -3
 - Practice-based Learning and Improvement – 2
 - Professionalism – 1
 - Interpersonal and Communication Skills – 2
- A total of 23 Milestones



Pelvic Organ Prolapse Treatment– Patient Care

Pelvic Organ Prolapse Treatment – Patient Care				
Level 1	Level 2	Level 3	Level 4	Level 5
Counsels patients on use of pessaries, and behavioral and physical therapy Assesses functional contributions to pelvic organ prolapse Assesses patients for treatment of urogenital atrophy Assists in surgical treatments	Fits and manages pessaries Identifies appropriate functional interventions Initiates hormonal therapy for urogenital atrophy Performs primary prolapse procedures on uncomplicated patients	Recognizes and manages pessary complications Integrates non-surgical and surgical options into therapeutic plans for complex patients Assesses complications of hormonal therapy Performs a variety of prolapse procedures on complex patients Anticipates intra- and post-operative complications	Integrates combined therapies for complex patients Initiates behavioral and physical treatments, and functional interventions Manages pharmacotherapy in complex patients Performs a variety of surgical approaches tailored to individual patients, including vaginal, open abdominal, minimally invasive approaches, and the use of grafts Demonstrates the ability to perform complex therapeutic interventions independently Recognizes and manages intra- and post-operative complications	Teaches and supervises combined therapies Teaches advanced surgical techniques Incorporates cost awareness and risk/benefit principles into all clinical scenarios
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

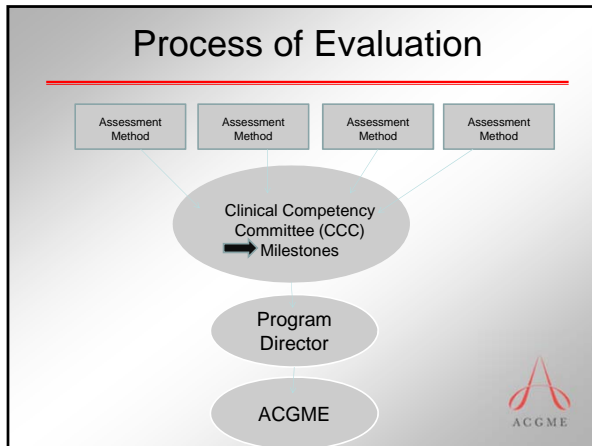
Comments: _____ Not yet rotated



Milestone Assessment


- Goal is to develop objective methods of assessment
- Value of direct observation - whether in simulation, use of standardized patients, or clinical care
- ACGME avoiding too proscriptive of an approach






Milestones: Reporting

- All programs within a specialty use the specialty's milestones
- Programs will report semi-annually
- Milestone data will be reported to ACGME through direct entry into ADS



Milestones Summary

- Goal of the Milestones Project is to articulate a shared understanding of expectations
- Describe the process of how an individual fellow moves from beginner to expert
- Assure that programs are enabling fellows to develop expertise



Case Logs

- ACGME FPMRS Case Log system developed July 2013.
- The RC will set minimums in a few years. Data currently being collected in the system will be used to develop threshold numbers.
- **Important** - Achievement of the minimum numbers of listed procedures does not signify achievement of competence in a particular listed procedure.



RC Decisions in NAS



What happens at MY Program?

- "Cycle Lengths" will not be used
- Programs will receive feedback from RRC each time they are reviewed
- Status:
 - Initial Accreditation
 - Continued Accreditation +/- request for more information
 - Accreditation with Warning
 - Probationary Accreditation
 - Withdrawal of Accreditation



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OBG RC Accreditation Statistics
October 2013

Accreditation Status	FPMRS
Initial Accreditation	44
Continued Accreditation	NA
Continued Accreditation with Warning	NA
Probation	NA
Request for Progress Reports	NA



NAS = CQI for Graduate Medical Education