

The Single Accreditation System

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Thomas J. Nasca, MD MACP
Chief Executive Officer
ACGME
ACGME International

Single Accreditation System

- AOA, AACOM, and the ACGME have completed year 2 of a 6.5 year historic transition to the Single Accreditation System
- Begun in February 2014 with Memorandum of Understanding, and scheduled to be completed in July 2020
- Creates a unified graduate medical education system - the essential phase of the formation of specialist physicians in the United States

Key Factors in Transition

- Codify Osteopathic Tradition in GME
- Inclusion of Osteopathic Principles and Practice into the fabric of ACGME accreditation governance and activities
- Intentionally preserving the osteopathic identity, tradition and history
- Preserve other dimensions of the osteopathic tradition. (i.e. COMLEX, AOA Board certification, or COCA accredited Colleges of Osteopathic Medicine)
- Preserve ACGME Structure and the other dimensions of the allopathic tradition. (i.e. NBME, ABMS Board certification, LCME accredited Colleges of Medicine)
- Unify Specialty Program Standards

Benefits to the Public

- Assurance that the method for evaluation and accountability for competency of physicians graduating from GME programs is consistent across all programs
- Elimination of unnecessary duplication of accreditation
- Coordinated activities related to funding and policy
- Places leadership of Osteopathic and Allopathic Medicine together in the same room over key challenges to the profession

Benefits to Medical School Graduates

Provides all US medical school graduates with the opportunity to:

- Enter a uniform GME pathway to practice medicine for all US physicians
- Seek admission to any residency program
- Progress from residency to fellowship without repeating training
- Demonstrate achievement of common milestones and competencies as they enter practice

What have we accomplished?

- New governance structure achieved through bylaw changes
- Nominees elected to ACGME Board of Directors and its key committees
- New ACGME department created & staff added
- Nominees elected to, and functioning on 21 existing Review Committees
- Nominees elected to, and functioning on OPC and NMM RRC
- Joint GME Operations Committee and Education Committee meetings (AOA, AACOM & ACGME)
- Outreach & communication ongoing by ACGME & AOA
- Combined educational meetings between allopathic and osteopathic colleagues now routine

AOA & AACOM Nominated ACGME Board Members

- Clinton Adams, D.O., MPA, FACHE.
President and Chief Executive Officer, Rocky Vista University
- David A. Forstein, D.O., FACOOG.
Fertility Center of the Carolinas, Department of Obstetrics and Gynecology
- Karen J. Nichols, D.O., MA, MACOI, CS.
Dean, Chicago College of Osteopathic Medicine at Midwestern University
- Gary L. Slick, D.O., MACOI, FACP.
Medical Director and Chief Academic Officer, Osteopathic Medical Education Consortium of Oklahoma (OMEKO)

New Committees

- Osteopathic Principles Committee (OPC) formed
- Osteopathic Neuromusculoskeletal Medicine Review Committee (NMM RRC) formed
 - Requirements, applications, and Milestones have been written, proposed, and approved for both committees
- First programs have received Osteopathic Recognition
- First Osteopathic Neuromusculoskeletal Medicine program accredited

Year 1 of 5 in Accreditation Transition to the Single Accreditation System

- Significant success in creation of a collaborative culture
 - Welcoming of new RRC members
 - RRC unilateral declarations regarding PD certification
 - Embrace of new Board Members
 - Continued highly effective function of the Operations Committee
 - Success of combined and coordinated unilateral educational efforts
- Significant success in achievement of Initial Accreditation on first attempt by Sponsoring Institutions and Programs

Challenges and Opportunities

- To support programs and sponsors as they adapt to a different process of accreditation
- Solve unique challenges as they arise
- Implement the next phase of Governance Expansion (2018 expansion of ACGME BOD)
- Common Program Requirement Revision
- Institutional Requirement Revision
- “Debunk” myths and biases

Summary

- Tremendous progress has been made in achieving our shared goals while preserving our respective strengths
- The ACGME is stronger than before through this inclusion of osteopathic colleagues, values, culture, and approach to patient care
- Now at the threshold of creating a national GME system that places residents and patients first
- Continue to Under-Promise, and Over-Deliver

“History never looks like history
when you are living through it.”

John W. Gardner

“What lies behind us
and what lies before us
are tiny matters compared to
what lies within us.”

Oliver Wendell Holmes