**Continued Accreditation Application: Geriatric Medicine (Internal Medicine)**

**Review Committee-International**

401 N. Michigan Ave. • Chicago, IL 60611 • United States • +1.312.755.7042 • www.acgme-i.org

**Submission for continued accreditation:** This Advanced Specialty PIF is for programs applying for **continued Accreditation Only** and is used in conjunction with the Accreditation Data System.

All sections of the form applicable to the program must be completed in order to be accepted for review. The information provided should describe the existing program. For items that do not apply, indicate “N/A” in the space provided. Where patient numbers are requested, provide an estimate of last year’s numbers. If any requested information is not available, an explanation must be given and it should be so indicated in the appropriate place on the form. Once the forms are complete, number the pages sequentially in the bottom center.

The program director is responsible for the accuracy of the information supplied in this form, and must sign it. It must also be signed by the designated institutional official of the sponsoring institution, who will submit the application electronically.

Review the International Foundational Program Requirements for Graduate Medical Education and Advanced Specialty Program Requirements for Graduate Medical Education in Geriatric Medicine. The International Foundational, Advanced Specialty, and Institutional Requirements may be downloaded from the ACGME International website: [www.acgme-i.org](http://www.acgme-i.org).

For questions regarding the form’s content, e-mail acgme-i@acgme-i.org.

For Questions regarding ADS, e-mail ADS@acgme.org (type the program number in the subject line).

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| Program Name: Click here to enter text. |

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**Introduction**

**Duration and Scope of Education**

|  |  |
| --- | --- |
| * + - 1. What is the length, in months, of the educational program?
 | Choose a length. |

**Institutions**

**Sponsoring Institution**

1. Does the fellowship function as an integral part of an ACGME-I-accredited residency in internal medicine? [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

|  |
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| Click here to enter text. |

**program personnel and resources**

**Other Program Personnel**

1. Are services from the following health care professionals available?
2. Occupational therapists [ ] YES [ ] NO
3. Physical therapists [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

1. Are physician assistants or nurse practitioners available to provide team or collaborative care of geriatric patients?…………………………………………………………………………. [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

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| Click here to enter text. |

**Resources**

1. Does the program have access to an acute care hospital? [ ] YES [ ] NO

If ‘YES,’ does the acute care hospital function as an integral component of a teaching center?

 [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

|  |
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| Click here to enter text. |

1. If the program has access to an acute care hospital, does the hospital have a full range of resources, including the following?
2. Intensive care units [ ] YES [ ] NO
3. Emergency medicine [ ] YES [ ] NO
4. Operating rooms [ ] YES [ ] NO
5. Diagnostic laboratory [ ] YES [ ] NO
6. Imaging services [ ] YES [ ] NO
7. Pathology services [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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1. Is the program affiliated with one or more long-term care facilities, such as a skilled nursing facility or a chronic care hospital? [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

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| Click here to enter text. |

If ‘YES,’ is the facility approved by the appropriate licensing agency in the country or state?

 [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

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| Click here to enter text. |

1. Are long-term non-institutional services, such as home care, day care, residential care, or assisted living, available to the program? [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

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| Click here to enter text. |

1. Do residents have educational experiences at the following facilities?
2. A nursing home that includes sub-acute care [ ] YES [ ] NO
3. A nursing home that includes long-term care [ ] YES [ ] NO
4. A home care setting [ ] YES [ ] NO
5. An internal medicine center or other outpatient settings [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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1. Describe how the program ensures that a geriatric medicine consultation program is available in the ambulatory setting, the inpatient service, or in the emergency medicine service in the acute care hospital or at an ambulatory setting administered by the primary clinical site.(Limit 300 words)

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1. Describe the makeup of the geriatric population available to the program, including gender, chronic illness, and percent of the population with potential for rehabilitation. (Limit 300 words)

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**Eligibility Criteria**

1. Describe how the program ensures that all fellows have completed an ACGME-, ACGME-I-, or Royal College of Physicians and Surgeons of Canada (RCPSC)-accredited internal medicine residency program. (Limit 300 words)

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| Click here to enter text. |

**Specialty-Specific Educational Program**

**Regularly Scheduled Didactic Sessions**

1. Complete Appendix A., Formal Didactic Sessions by Academic Year, and attach to submission.

**Clinical Experiences**

* + - 1. Describe how the program ensures that each fellow has a minimum of 12 months devoted to clinical experiences. (Limit 300 words)

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| Click here to enter text. |

* + - 1. Does each fellow have clinical experience in the following?
				1. Management of elderly patients [ ] YES [ ] NO
				2. Direct care for patients in ambulatory settings [ ] YES [ ] NO
				3. Direct care for patients in community settings [ ] YES [ ] NO
				4. Direct care for patients in long-term care settings [ ] YES [ ] NO
				5. Consultative and/or direct care in acute inpatient settings [ ] YES [ ] NO
				6. Care for persons who are generally healthy requiring primary preventive services [ ] YES [ ] NO
				7. Care for elderly patients as a consultant providing expert assessments and recommendations for each patient’s unique care needs [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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* + - 1. Does each fellow have exposure to sub-acute care and rehabilitation in a long-term care setting?

 [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

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* + - 1. Does each fellow have a longitudinal experience that includes the following?
				1. In-home visits [ ] YES [ ] NO
				2. Hospice care [ ] YES [ ] NO
				3. Organizational and administrative aspects of home care [ ] YES [ ] NO
				4. Continuity of care for home or hospice care patients [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

* + - 1. Describe how the program ensures that each fellow will have experience participating as a member of a physician-directed interdisciplinary geriatric team in more than one setting. (Limit 300 words)

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* + - 1. Does the geriatric team include the following?
				1. Geriatrician [ ] YES [ ] NO
				2. Nurse [ ] YES [ ] NO
				3. Social worker or case manager [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

* + - 1. Are regular geriatric conferences held as dictated by the needs of individual patients? [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

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| Click here to enter text. |

If ‘YES,’ does the team include representatives from the following?

* + - * 1. Dentistry [ ] YES [ ] NO
				2. Neurology [ ] YES [ ] NO
				3. Occupational therapy [ ] YES [ ] NO
				4. Pastoral care [ ] YES [ ] NO
				5. Pharmacy [ ] YES [ ] NO
				6. Physical medicine and rehabilitation [ ] YES [ ] NO
				7. Physical therapy [ ] YES [ ] NO
				8. Psychiatry [ ] YES [ ] NO
				9. Psychology [ ] YES [ ] NO
				10. Speech therapy [ ] YES [ ] NO

Explain any ‘NO’ responses and indicate any additional members of the team. (Limit 300 words)

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1. Describe how the program ensures that each fellow has a longitudinal experience in the diagnosis and treatment of acutely and chronically-ill and frail elderly patients in a less technologically sophisticated environment than the acute care hospital. (Limit 400 words)

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1. Does each fellow’s longitudinal experience include the following?
	1. Structured didactic experiences in geriatric psychiatry [ ] YES [ ] NO
	2. Structured clinical experiences in geriatric psychiatry [ ] YES [ ] NO
	3. Working within the limits of a decreased staff-patient ratio compared with acute care hospitals

 [ ] YES [ ] NO

* 1. Sub-acute care [ ] YES [ ] NO
	2. Physical medicine and rehabilitation [ ] YES [ ] NO
	3. Addressing clinical and ethical dilemmas related to illness if the very old [ ] YES [ ] NO
	4. Interaction or communicating with a patient’s family and/or caregiver [ ] YES [ ] NO
	5. Using palliative care and hospice in caring for terminally ill [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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| Click here to enter text. |

1. Do fellows have the following educational experiences?
	1. Teaching other health professional and trainees [ ] YES [ ] NO
	2. Reviewing autopsy reports completed on their patients [ ] YES [ ] NO
	3. Involvement in other health care and community agencies related to geriatric medicine [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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1. Do fellows have a structured continuity ambulatory clinic experience that exposes them to the breadth and depth of geriatric medicine? [ ] YES [ ] NO
2. Does the experience include an appropriate distribution of patients of each gender and a diversity of ages within geriatric medicine? [ ] YES [ ] NO
3. Do fellows have an average of one half-day a week in the ambulatory clinic throughout the educational program? [ ] YES [ ] NO

Explain any ‘NO’ responses to Questions 8-10. (Limit 250 words)

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1. Describe how the program ensures that each fellow, on average, will be responsible for four to eight patients during each half-day session and, on average, no more than eight to 12 patients during each half-day session. (Limit 300 words)

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1. Is the continuing patient care experience interrupted by more than one month, excluding vacation?

 [ ] YES [ ] NO

Explain if ‘YES’. (Limit 250 words)

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1. Do fellows participate in the administrative aspects of long-term care? [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

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| Click here to enter text. |

If ‘YES,’ does this experience include the following?

* 1. Introductory instruction to the role of the nursing home medical director [ ] YES [ ] NO
	2. Nursing home regulations [ ] YES [ ] NO
	3. Completing a quality improvement project [ ] YES [ ] NO
	4. Attending team meetings [ ] YES [ ] NO

Explain any ‘NO’ responses. (Limit 250 words)

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1. Describe how the program ensures that all fellows have experiences in relevant specialty and subspecialty clinics that focus on the assessment and management of geriatric syndromes, including falls, incontinence, and osteoporosis. As part of your answer, identify the specialty or subspecialty clinics that are used.
(Limit 400 words).

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1. Do all fellows have clinical experience in day care or day hospital centers, life care communities, or residential care facilities? [ ] YES [ ] NO

Explain if ‘NO’. (Limit 250 words)

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**ACGME-I Competencies**

**Patient Care**

1. How do graduating fellows demonstrate the ability to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health?

Describe how this is evaluated. (Limit 300 words)

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1. How do fellows demonstrate proficiency in the following?

Assessing older persons for safety risks and providing appropriate recommendations and referrals when necessary

Assessing the cognitive status of geriatric patients

Assessing the affective status of geriatric patients

Assessing the functional status of geriatric patients

Peri-operative assessment and management

Providing appropriate preventive care and teaching patients and their caregivers regarding self care

Providing care that is based on patients’ preferences and overall health

Treating and managing geriatric patients in acute care, long-term care, community, and home care settings

Use of an interpreter in clinical care

Provide an example of how proficiency is assessed in five of the nine areas listed. (Limit 500 words)

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| Click here to enter text. |

**Medical Knowledge**

1. How do graduating fellows demonstrate proficiency in their knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care?

Describe how this is evaluated. (Limit 400 words)

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1. How do graduating fellows demonstrate knowledge of the current science of aging and longevity, including theories of aging, the physiology and natural history of aging, pathologic changes with aging, epidemiology of aging populations, and diseases of the aged? (Limit 300 words)

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1. How do graduating fellows demonstrate knowledge of aspects of preventive medicine, including nutrition, oral health, exercise, screening, immunization, and chemoprophylaxis against disease? (Limit 300 words)

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1. How do graduating fellows demonstrate knowledge of geriatric assessment, including medical, affective, cognitive, functional status, social support, economic, and environmental aspects related to health?

(Limit 300 words)

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1. How do graduating fellows demonstrate knowledge of the following?
	1. Activities of daily living (ADL)
	2. Instrumental activities of daily living (IADL)
	3. Medication review
	4. Appropriate use of the history, physical, and mental examination and laboratory results or findings

Provide an example of how proficiency is assessed in each of the areas listed. (Limit 400 words)

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1. How do graduating fellows demonstrate knowledge of the general principles of geriatric rehabilitation, including those applicable to patients with cardiac, neurologic, orthopaedic, pulmonary, and rheumatologic impairments? (Limit 300 words)

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1. How do graduating fellows demonstrate knowledge of management of patients in long-term care settings, including palliative care, administration, regulation, and the financing of long-term institutions, as well as the continuum from short- to long-term care? (Limit 300 words)

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1. How do graduating fellows demonstrate knowledge of the pivotal role of the family in caring for many elderly patients, and the community resources (formal support systems) required to support both patients and families? (Limit 300 words)

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1. How do graduating fellows demonstrate knowledge of the following?
	1. Home care, including the components of a home visit and accessing appropriate community resources to provide care in a home setting
	2. Hospice care, including pain management, symptom relief comfort care, and end-of-life issues
	3. Behavioral sciences, including psychology and social work

Provide an example of how proficiency is assessed in each of the areas listed. (Limit 300 words)

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1. How do graduates demonstrate knowledge of topics of special interest to geriatric medicine, including the following?
	1. Cognitive impairment
	2. Depression and related disorders
	3. Falls
	4. Incontinence
	5. Osteoporosis
	6. Fractures
	7. Functional impairment
	8. Malnutrition
	9. Pain
	10. Pressure ulcers
	11. Senior (elder) abuse
	12. Sensory impairment
	13. Sleep disorders

Provide an example of how proficiency is assessed in seven of the thirteen areas listed. (Limit 700 words)

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| Click here to enter text. |

1. How do graduates demonstrate knowledge of diseases that are prominent in the elderly or that may have atypical characteristics in the elderly, including the following?
	1. Cardiovascular disease
	2. Infectious disease
	3. Metabolic disease
	4. Musculoskeletal disease
	5. Neoplastic disease
	6. Neurologic disorders

Provide an example of how proficiency is assessed in four of the six areas listed. (Limit 400 words)

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1. How do graduates demonstrate knowledge of pharmacologic problems associated with aging, including the following?
2. Changes in pharmacokinetics and pharmacodynamics
3. Drug interactions
4. Over medication
5. Appropriate prescribing
6. Adherence

Provide an example of how proficiency is assessed in three of the five areas listed. (Limit 300 words)

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1. How do graduates demonstrate knowledge of psychosocial aspects of aging, including interpersonal and family relationships, living situations, adjustment disorders, depression, and bereavement.
(Limit 300 words)

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| Click here to enter text. |

1. How do graduates demonstrate knowledge of the following?
2. Patient and family education
3. Psychosocial and recreational counseling for patients requiring rehabilitation care
4. The economic aspects of supporting geriatric services

Provide an example of how proficiency is assessed in each of the areas listed. (Limit 300 words)

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| Click here to enter text. |

1. How do graduates demonstrate knowledge of ethical and legal issues pertinent to geriatric medicine, including the following?
2. Limitation of treatment
3. Competency
4. Guardianship
5. Right to refuse treatment
6. Advance directives
7. Designation of a surrogate decision maker for health care
8. Wills
9. Durable power of attorney for medical affairs

Provide an example of how proficiency is assessed in five of the eight areas listed. (Limit 500 words)

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1. How do graduates demonstrate knowledge of basic principles of research, including research methodologies related to geriatric medicine, such as clinical epidemiology and decision analysis and how research is conducted, evaluated, explained to patients, and applied to patient care? (Limit 400 words)

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1. How do graduates demonstrate knowledge of the cultural aspects of aging, including knowledge of the following?
2. Demographics
3. Health care status of older persons of diverse ethnicities
4. Access to health care
5. Cross-cultural assessment of culture-specific beliefs and attitudes towards health care
6. Issues of ethnicity in long-term care and special issues relating to urban and rural older persons of various ethnic backgrounds

Provide an example of how proficiency is assessed in three of the five areas listed. (Limit 300 words)

|  |
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| Click here to enter text. |

1. How do graduates demonstrate knowledge of the following?
2. Behavioral aspects of illness
3. Socioeconomic factors
4. Health literacy issues

Provide an example of how proficiency is assessed in each areas listed. (Limit 300 words)

|  |
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| Click here to enter text. |

**Practice-based Learning and Improvement**

* + - 1. How do graduating fellows demonstrate their ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning?

Describe how these skills are evaluated. (Limit 300 words)

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| Click here to enter text. |

**Interpersonal and Communication Skills**

1. How do graduating fellows demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals?

Describe how these skills are evaluated. (Limit 300 words)

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| Click here to enter text. |

**Professionalism**

1. How do graduating fellows demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles?

Describe how these skills are evaluated. (Limit 300 words)

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| Click here to enter text. |

**Systems-based Practice**

1. How do graduating fellows demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care?

Describe how these skills are evaluated. (Limit 300 words)

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Appendix A. Formal Didactic Sessions by Academic Year

For each year of the fellowship, please attach (Label: Appendix A.) a list of all scheduled didactic courses (including discussion groups, seminars and conferences, grand rounds, basic science, skills labs, and journal club) at all participating sites attended by fellows using the format below. If attended by fellows from multiple years, list in each year, but provide a full description *only the first time it is listed*.

Number sessions **consecutively** from the first year through the final year so that the scheduled didactic sessions can be easily referenced throughout the application. **Be brief and use the outline that follows.**

Year in the program:

Number: Title:

a) Type of Format (e.g., seminar, conference, discussion groups, etc.)

b) Required or elective

c) Brief description (three or four sentences)

d) Frequency, length of session, and total number of sessions

**Example:**

|  |
| --- |
| Y-101. Introduction to Geriatric Medicinea) Seminarb) Required Y-1c) Survey of contemporary methods and styles of critical care including approaches to clinical work with minority populationsd) Weekly, for 8 sessions02. Departmental Grand Roundsa) Discussion groupsb) Required, Y-1, Y-2, Y-3; Elective c) Clinical case presentations, sponsored by each departmental division, followed by discussion and review of contemporary state of knowledge. Format includes resident presentations and discussions with additional faculty discussant.d) Twice monthly, 24 sessions |

If attendance is monitored, explain how this is accomplished and how feedback is given regarding non-attendance. (Limit 250 words)

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