Greetings!

Enclosed you'll find news updates, resources and highlights of our global efforts to improve health care worldwide.

Meet James A. Arrighi, MD, Incoming President and Chief Executive Officer of ACGME International!

The announcement of Dr. Jim Arrighi’s selection comes as welcome news, after a thorough search was performed internationally for this important position by the Executive Committee of the ACGME-I Board with essential input from international representatives. Over 200 individuals were considered, and particular emphasis was placed on international experience, sensitivity to country-specific needs, communication skills, and impeccable integrity. Dr. Arrighi has them all and will serve ACGME-I admirably.

Dr. Arrighi currently serves as the designated institutional official at Lifespan Hospitals in Rhode Island, USA, with an integral relationship with Brown University. His medical education started at Brown’s medical school, with residency in internal medicine at Washington University in St. Louis, Missouri. He then completed fellowship education in both cardiology and nuclear medicine from the National Institute of Health and Yale University.

Dr. Arrighi’s emphasis in standard-setting has been the cornerstone of his scholarly activity. He has previously served as the Chair of the ACGME Review Committee for Internal Medicine and most recently as Chair of the Medicine-based Review Committee-International. He is truly an expert in what is needed for international accreditation—a universal perspective, an understanding of the unique features of every program, and a desire to help others continuously improve education for their residents and fellows.

As President and CEO, Dr. Arrighi will be an important colleague. Like you, he has dedicated his professional life to the betterment of health care. Please welcome him, seek out his wisdom, and let him learn your stories.

Questions of the Quarter: Verifying Graduate Case Logs

Each quarter, this section of the ACGME-I Newsletter answers questions applicable to all ACGME-I-accredited programs. This quarter the questions are for program directors and coordinators of procedural specialties and will cover verifying graduates’ case logs.

Question: Why does ACGME-I require that program directors verify their graduates’ Case Log data?

Answer: Graduates’ Case Logs provide the Review Committee-International with valuable information on residents/fellows’ clinical experiences, including standardization of experience as well as the breadth and depth of the clinical experience provided. Importantly, since education must be emphasized, the annual review of case logs can also help determine if residents/fellows are providing service over education. The program director is responsible for reviewing Case Log data at least semi-annually [Foundational Requirement II.A.2.i)] and for submitting accurate information required by ACGME-I [Foundational Requirement II.A.2.j]]. Verifying graduates’ Case Logs is an important final review step to ensure that complete and accurate information is provided.
What’s New at ACGME-I?

What’s New for the 2021 Annual Update?

This is the first year that all ACGME-I-accredited programs will be reviewed annually. Because of this, dates for the Annual Update have changed for some jurisdictions. The 2021 Annual Update will begin on 5 July. All data must be entered by 22 October. All programs with Continued Accreditation will be reviewed in this manner at the January 2022 RC meeting. Programs with Initial Accreditation will still require a site visit at the time indicated on the letter of notification. The ACGME-I staff will clarify any questions you have regarding the review process for your program if you wish.

As was done last year, the Annual Update will include questions about how the COVID-19 pandemic affected your educational program during the 2020-2021 academic year. The same questions will be used as in 2020, and just as last year, responses will not be used for making accreditation decisions.

What’s New in Case Logs?

The way robotic procedures are recorded in the Case Log System is changing for urology and obstetrics and gynecology programs. Currently, a resident indicates a case was performed robotically and if multiple procedures were completed during the case, every procedure counts as robotic. The system will be updated so that if multiple procedures were completed during a single case, only those that were completed robotically will be designated as such. This change does not affect minimum requirements but does lead to better and more accurate accounting of robotic procedures for use by the program and the residents.

Program directors in ophthalmology and radiology programs have been sent information on updates to the Case Log System for their specialty. Updated Faculty and Staff Member and Resident Quick Guides for each specialty provide additional details on the revisions and will be posted on the Ophthalmology page and Radiology page of the ACGME-I website.

If your specialty/subspecialty requires Case Log reporting, it is noted on the program’s Overview page in the Accreditation Data System (ADS). Graduates’ data are reviewed annually by the Review Committee-International.

Question: How does one verify graduate Case Logs in ADS?

Answer: The first step is completed prior to graduation. Program directors check all graduate logs for accuracy and completeness and work with individual residents/fellows ahead of graduation to make any necessary adjustments or corrections. Once the program director is satisfied that the Case Logs are accurate, they save any Case Log reports needed for future reference, such as the Minimums Report. The only report available once graduates’ Case Logs are archived is the Summary Report. The program also updates graduating residents’/fellows’ emails to a personal account so that graduates can log in after they leave the program to obtain their Summary Report for future use.

To complete the verification process, from the Resident/Fellow Roster, indicate that a resident/fellow completed the program, enter the completion date, and click “Save”. After saving, confirm the information is successfully archived by clicking the “Archive” button. Graduate data is archived the day after the data verification deadline. This archive is designed to ‘freeze’ all Case Log data so that it can be reported to the Review Committee-International as part of the annual review of programs. Cases cannot be added or edited once a resident/fellow is archived, and this action CANNOT be undone.
What’s New in Explore?

New resources have been added to ACGME-I’s distance education platform, Explore. Explore contains videos, articles, bibliographies, and other resources that are free to all ACGME-I-accredited Sponsoring Institutions and programs. These resources are useful for faculty development and new faculty and staff member orientation. They can also provide new ideas about common issues in graduate medical education. New content is added regularly. Check out these latest additions:

- Caring for Health Care Workers During a Crisis – *This article presents ideas in a quick, list format for helping organizations during a crisis.*
- Designing a Comprehensive Well-Being Program: Mental Health, Resilience, and System Change – *a recording of a session presented at the 2020 ACGME Annual Educational Conference that describes how a large teaching hospital in the US has developed and implemented a comprehensive well-being program for residents, fellows, and faculty members.*
- Direct Observation of Clinical Competency (DOCC) and TEAM – *new open access assessment tools, including a webinar that explains the use of these tools. There are also directions on how to install the DOCC app and use the TEAM website.*
- FATCAT: The Frameworks of Assessment in Training and Choosing your Assessment Tools – *Dr. Eric Holmboe discusses theories behind assessment of residents and fellows and how to use theory to choose assessment methods and tools.*
- Successful Practices for Engaging Residents and Fellows in Patient Safety – *a recording of a session presented at the 2020 ACGME Annual Educational Conference that summarizes how several institutions in the US improved resident and fellow engagement in patient safety.*
- Update on the revised requirements for ACGME-I Sponsoring Institutions – *a recording of the update presented to designated institutional officials and graduate medical education staff members on 27 May 2021. Included are answers to the questions posed during the session and handouts on implementing the revised Institutional Requirements.*

Did you know?

ACGME-I by the Numbers

1. Statistics for the 2020-2021 academic year are:
   - 164 ACGME-I-accredited programs (109 residency; 55 fellowship)
   - 3394 total learners
   - 9 countries with accredited programs and/or sponsoring institutions
   - 19 Sponsoring Institutions
   - Specialties with the largest number of programs:
     - Internal Medicine – 10 programs
     - Emergency Medicine – 9 programs
     - Family Medicine, Ophthalmology, Otolaryngology, Pediatrics – 8 programs each
2. Since 2011, there have been 5,451 graduates of ACGME-I-accredited programs.