**ACGME Program Requirements for Graduate Medical Education
in General Surgery**

Summary and Impact of Focused Requirement Revisions

Due to the small number of changes, the full revised Program Requirements have not been posted on the Review and Comment page and the changes are noted only in this Impact Statement. Visit the link below to comment on the revision.

https://forms.office.com/r/Jzfs3mZDEp

Background
In June 2020, the ACGME Board approved formation of a special task force to examine the principles that should guide creation of requirements that quantify the effort required to participate in the educational programs of residents and fellows. The task force, comprised of representatives of the ACGME Board and ACGME leadership, reviewed more than 100 position papers submitted by representatives from across the medical community, data collected through the ACGME's Accreditation Data System, a comprehensive literature search, and feedback from internal and external stakeholder congresses.

The proposed requirements were posted for a 45-day public comment period in February 2021 and will be effective as of July 1, 2022.

To balance the unique needs of each specialty/subspecialty with the responsibility to maintain fair and equitable standards across specialties/subspecialties, in February 2021 the ACGME Board directed the Committee on Requirements to develop guidance for Review Committees to use in the development of specialty-specific requirements related to dedicated time for program leadership, program coordinators, and core faculty members.

The Review Committees have now been asked to review their existing requirements for consistency with the guidance from the Committee on Requirements and, where needed, to propose modifications needed to conform to the guidelines.

The guidelines for dedicated time requirements for specialties are consistent with the recent modifications to the Common Program Requirements, and take into account the minimum required for the smallest programs in each specialty, with the ability to scale up required dedicated time based on program size and complexity. It is important to note that while the Program Requirements specify the minimum dedicated time required, individual programs may determine that additional time and support is needed.

Requirement #: **II.A.2., II.A.2.a)**

Requirement Revision (significant change only):

II.A.2.	**The program director and, as applicable, the program's leadership team, must be provided with support adequate for administration of the program based upon its size and configuration.** (Core)

~~II.A.2.~~	~~At a minimum, the program director must be provided with the salary support required to devote 30 percent FTE of non-clinical time to the administration of the program. (Core)~~

II.A.2.a)	At a minimum, the program director must be provided with the dedicated time and support specified below for administration of the program. Additional support for program leadership must be provided as specified below. This additional support may be for the program director only or divided among the program director and one or more associate (or assistant) program directors. (Core)

Number of Approved Categorical and Preliminary Resident Positions	Minimum Support Required (FTE) for the Program Director	Minimum Additional FTE Support Required for Program Leadership in Aggregate
1-6	.20	n/a
7-10	.25	n/a
11-20	.30	n/a
21-30	.30	0.10
31-40	.40	0.10
41-50	.40	0.20
51-60	.50	0.20
61-70	.50	0.30
71-80	.50	0.40
81-90	.50	0.50
≥91	.50	0.60

~~II.A.2.a)~~	~~Associate program directors must be appointed and additional salary support for the associate program director(s) must be provided based on program size as follows: (Core)~~

~~Number of Approved Categorical and Preliminary Resident Positions~~	~~Minimum Number of Associate Program Directors~~	~~Minimum FTE per Associate Program Director(s)~~
~~0-20~~	~~0~~	~~0~~
~~21-50~~	~~1~~	~~0.10~~

| 51 or more | 2 | 0.10 |

Specialty-Specific Background and Intent: As an example, a program with 50 residents would be required to have 40 percent FTE support for the program director and an additional 20 percent FTE support for leadership (Assistant or Associate Program Director (APD)). The additional 20 percent FTE may be allocated between one or more APDs, or between the PD and an APD(s). The Review Committee has maxed out the required program director support at 50 percent FTE to ensure that they will have time to remain active in the clinical and scholarly domains. The Review Committee has not specified how the remaining support should be distributed amongst leadership to allow programs, in partnership with their Sponsoring Institution, to allocate support as they see fit.

1. Describe the Review Committee's rationale for this revision:
   The proposed change is in alignment with the ACGME's new guidance related to dedicated administrative time.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   As reflected in the Background and Intent for Common Program Requirement II.A.2., the ultimate outcome of graduate medical education is excellence in resident/fellow education and patient care. The Common and specialty-specific Program Requirements related to administrative time and support are intended to ensure that the program director and, as applicable, the program leadership team, are able to devote a sufficient portion of their professional effort to the oversight and management of the program to ensure an effective and high quality educational program.

3. How will the proposed requirement or revision impact continuity of patient care?
   No impact is anticipated.

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
   The requirements define the required minimum dedicated time for administration of the program based on program size. For some programs, the new requirements represent a decrease in the minimum administrative time and support required for program leadership, while for other programs the new requirements represent an increase.

   Programs for which the required minimum has decreased are encouraged to consider whether additional time and support should be provided based on factors such as program complexity and level of experience among the members of the program leadership team. It is anticipated that some programs may choose to decrease administrative time and support to the level specified in the new requirements if that is sufficient to meet the administrative requirements of the program. Other programs

may determine that the time and support currently provided is optimal and may, therefore, elect not to make a change.

Programs for which the requirements for administrative time and support have increased will need, in partnership with their Sponsoring Institution, to provide additional support for administrative time as specified in the requirements.

Both provision of support for the time required for the leadership effort and flexibility regarding how this support is provided are important. Programs, in partnership with their Sponsoring Institution, may provide support for this time in a variety of ways. Examples of support may include, but are not limited to, salary support, supplemental compensation, educational value units, or relief of time from other professional duties. Program directors and, as applicable, members of the program leadership team, who are new to the role may need to devote additional time to program oversight and management initially as they learn and become proficient in administering the program. It is suggested that during this initial period, the support described above be increased as needed.

5. How will the proposed revision impact other accredited programs?
   Not applicable

Requirement #: **II.C.2, II.C.2.a)**

Requirement Revision (significant change only):

II.C.2. **The program coordinator must be provided with dedicated time and support adequate for administration of the program based upon its size and configuration. (Core)**

II.C.2. ~~At a minimum, the program coordinator must be supported at 100 percent FTE for administration of the program. (Core)~~

II.C.2.a) ~~Additional support must be provided based on program size as follows: (Core)~~

~~Number of Approved Resident/Fellow Positions~~	~~Minimum FTE~~
~~0-20~~	~~1.0~~
~~21-29~~	~~1.5~~
~~30 or more~~	~~2.0~~

II.C.2.a) <u>At a minimum, the program coordinator must be provided with the dedicated time and support specified below for administration of the program:</u> (Core)

Number of Approved Resident Positions	Minimum FTE
1-6	.50
7-10	.70
11-15	.80
16-25	1.0
26-35	1.2
36-45	1.4
46-55	1.6
56-65	1.8
66-75	2.0
76-85	2.2
86-95	2.4
≥96	2.5

Specialty-Specific Background and Intent: The Review Committee recognizes that some surgical program coordinators support large programs, that some support multiple programs, including other surgical specialties, and that some support other administrative functions within their Sponsoring Institution in addition to residency/fellowship programs. Support of large and/or multiple programs requires a facile working knowledge of each specialty's requirements, as well as the ability to manage the day-to-day requirements of large/multiple programs and their required data. The Committee believes that program coordinators who support general surgery programs and are assigned to support other specialties should only support surgical specialties, as these specialties have more similarities in their execution than non-surgical specialties. ~~To ensure that residency coordinators have sufficient support for performing those functions, the Review Committee has limited the number of residents/fellows that a single coordinator should manage to no more than 20, including both categorical and preliminary residents. For coordinators managing a single program or multiple programs with more than 20 residents, the Review Committee has instituted a requirement for additional administrative support, which can take many forms, such as an additional coordinator, an assistant coordinator, or an administrative assistant.~~

6. Describe the Review Committee's rationale for this revision:
   The proposed change is in alignment with the ACGME's new guidance related to dedicated administrative time.

7. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   The program coordinator plays a key role in developing and maintaining a high quality educational program, and the Common and specialty-specific Program Requirements are intended to ensure that the FTE support for the coordinator is sufficient to meet the administrative needs of the program.

8. How will the proposed requirement or revision impact continuity of patient care?
   No impact is anticipated.

9. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?

The requirements define the required minimum dedicated time for administration of the program based on program size. For some programs, the new requirements represent a decrease in the required FTE support for the coordinator, while for other programs the new requirements represent an increase. It is important to note that the FTE support defined in the requirements must be devoted exclusively to responsibilities related to the accredited program. Time spent by a coordinator related to other duties, such as providing support for unaccredited fellowships or other departmental responsibilities, must not be counted toward the required FTE. Coordinators may support more than one accredited program only if the total FTE required across programs does not exceed 1.0 FTE.

Programs for which the required minimum has decreased are encouraged to consider whether additional time and support should be provided based on factors such as program complexity, the administrative responsibilities delegated to the coordinator, and level of experience of the coordinator. It is anticipated that some programs may choose to decrease administrative time and support to the level specified in the new requirements if that is sufficient to meet the administrative requirements of the program. Other programs may determine that the time and support currently provided is optimal and may, therefore, elect not to make a change.

Programs for which the requirements for administrative time and support have increased will need, in partnership with their Sponsoring Institution, to provide additional support for administrative time as specified in the requirements.

10. How will the proposed revision impact other accredited programs?
Not applicable