

ACCREDITATION OF EDUCATION INSTITUTES

BY THE AMERICAN COLLEGE OF SURGEONS:

A NEW PROGRAM FOLLOWING AN OLD TRADITION



BY CARLOS A. PELLEGRINI, MD, FACS,
SEATTLE, WA,

AJIT K. SACHDEVA, MD, FACS, FRCSC,
DIRECTOR, DIVISION OF EDUCATION

AND KATHLEEN A. JOHNSON, EDM,
MANAGER, PROGRAM FOR THE ACCREDITATION
OF EDUCATION INSTITUTES
AND EXPERIENTIAL LEARNING PROGRAMS



The American College of Surgeons has had a rich tradition in leading major national efforts to enhance the care of surgical patients. Accreditation of clinical programs has been key to such efforts. The ACS played a pivotal role in establishing minimum standards for hospitals in 1917, which led to the creation of the Joint Commission on Accreditation of Hospitals. More recently, the College established programs to accredit trauma and cancer centers, which resulted in a major positive impact on surgical care and outcomes. However, until now, the ACS has not played a role in educational accreditation.

Major forces continue to exert an impact on the field of surgery and the professional activities of surgeons, surgical residents, and members of the surgical team. These forces include significant advances in science and technology, intense focus on patient safety and accountability, definition of the core competencies that all physicians must acquire and demonstrate throughout their careers, implementation of the program for maintenance of certification, and restrictions on resident duty hours. In addition, the pivotal role of education in changing physician performance and improving patient outcomes has received considerable attention. Other considerations have included the venues in which educational programs need to be offered, and the formats that result in optimum outcomes. State-of-the-art educational opportunities should be made available close to surgeons' practices to facilitate participation and need to be just-in-time and clinically relevant. Facilities should be established and accredited to offer such education.

To address the aforementioned needs, the ACS Division of Education proposed to the Board of Regents in 2003 the concept of accreditation of education institutes, which would serve as regional sites where learners could acquire and maintain their skills—especially in new procedures, emerging technologies, and infrequently performed procedures—and would allow verification of knowledge and skills to confirm achievement of predetermined standards. Such institutes would offer College-sponsored and locally designed courses, and some institutes might pursue post-course preceptoring. The accreditation program would be voluntary. The

ACS would accredit the institutes but would not own or manage these facilities.

The ACS Board of Regents received this concept very favorably and in October 2003 approved the appointment of an ad hoc committee to develop the model for accreditation of education institutes, which would be implemented by the Division of Education. The committee included individuals with expertise in establishing surgical skills centers and in surgical education. (See page 10 for a roster of committee members.)

DEVELOPMENT OF THE ACCREDITATION PROGRAM

The committee held its first meeting in March 2004. The members agreed that the goal of the accreditation program would be to establish a network of education institutes that would offer educational opportunities to practicing surgeons, surgical residents, medical students, and other members of the surgical team to address the spectrum of surgical skills and the core competencies and support efforts of surgeons to maintain their certification. The institutes would specifically address teaching, learning, and assessment of technical skills using state-of-the-art educational methods and cutting-edge technology.

Contemporary educational approaches would be used to ensure achievement of competence and development of expertise. The education institutes would use a variety of methods to achieve specific educational outcomes. These methods may include bench models, simulations, simulators, and virtual reality. The faculty at these institutes would ensure that participants achieve predetermined levels of knowledge and skills at the completion of various courses. Collaborative educational research would be pursued by the accredited institutes to advance the science of surgical education. Thus, the accreditation process would provide a unique opportunity to enhance the existing activities of skills centers that, at present, focus principally on minimally invasive surgery, and would create a national network of education facilities that would provide cutting-edge education under the aegis of the ACS Division of Education.

The committee also undertook the process of developing standards and criteria for accredita-

tion of education institutes. A key consideration was that the accreditation program should enhance educational opportunities without becoming cumbersome or onerous. The committee initially performed a thorough needs assessment. Information was obtained from the surgical education literature and existing surgical skills centers. In addition, background information was gathered from established educational accreditation programs, including those of the Accreditation Council for Graduate Medical Education, Accreditation Council for Continuing Medical Education, Joint Commission on Accreditation of Healthcare Organizations, and other professional societies, as well as from the Trauma and Cancer Programs of the College. The ACS general counsel provided input in the design of the accreditation program to address various legal issues proactively. The committee deliberated about a variety of educational and administrative issues. Based on the discussions, three standards for accreditation were defined by the committee:

- Standard I: Learners
- Standard II: Curriculum
- Standard III: Technological support and resources.

Furthermore, two levels of accreditation were proposed—Level I (Comprehensive) and Level II (Basic)—which would be based on these aforementioned standards and criteria. Institutes may apply for either level of accreditation.

Once the committee developed the draft of the standards and criteria, Richard Reznick, MD, FACS, FRCS, chair of the department of surgery at the University of Toronto, and Helen M. MacRae, MD, FACS, FRCS, invited the committee to visit the University of Toronto's Skills Centre in November 2004 to develop benchmarks and further refine the standards and criteria. Additional benchmarking was made possible at a later date when Mark W. Bowyer, MD, FACS, extended an invitation to the committee to visit the National Capital Area Medical Simulation Center of the Uniformed Services University in May 2005. Both visits were very productive and helped to define the specific accreditation standards and criteria.

APPROVAL OF THE ACS PROGRAM

The accreditation model, including the standards and criteria, was presented to the Board of Regents in October 2004 for information and input. The Regents were enthusiastic about the

AD HOC COMMITTEE FOR THE ACCREDITATION OF ACS EDUCATION INSTITUTES

CHAIR: Carlos A. Pellegrini, MD, FACS, *Seattle, WA*

MEMBERS:

Peter B. Angood, MD, FACS, *Oakbrook Terrace, IL*
 Robert W. Bailey, MD, FACS, *Miami, FL*
 Mark W. Bowyer, MD, FACS, Col., USAF, MC, *Burke, VA*

Richard J. Finley, MD, FACS, FRCS, *Vancouver, BC*

Gerald M. Fried, MD, FACS, FRCS, *Montreal, QC*

John G. Hunter, MD, FACS, *Portland, OR*

Lenworth M. Jacobs, MD, MPH, FACS, *Hartford, CT*

Daniel B. Jones, MD, FACS, *Boston, MA*

Thomas M. Krummel, MD, FACS, *Stanford, CA*

Helen M. MacRae, MD, FACS, FRCS, *Toronto, ON*

Adrian E. Park, MD, FACS, FRCS, *Baltimore, MD*

A. Karim Qayumi, MD, PhD, FRCS, *Vancouver, BC*

Robert V. Rege, MD, FACS, *Dallas, TX*

Richard M. Satava, MD, FACS, *Seattle, WA*

Lisa Satterthwaite, RPN/OR, *Toronto, ON*

Lelan F. Sillin III, MD, MEd, FACS, *Rochester, NY*

C. Daniel Smith, MD, FACS, *Atlanta, GA*

Mark A. Talamini, MD, FACS, *San Diego, CA*

STAFF:

Ajit K. Sachdeva, MD, FACS, FRCS, *Chicago, IL*,
 Director of the Division of Education

Kathleen A. Johnson, EdM, *Chicago, IL*,
 Manager, Program for the Accreditation of
 Education Institutes and Experiential
 Learning Programs

Marvin A. Poole, MPH, *Chicago, IL*

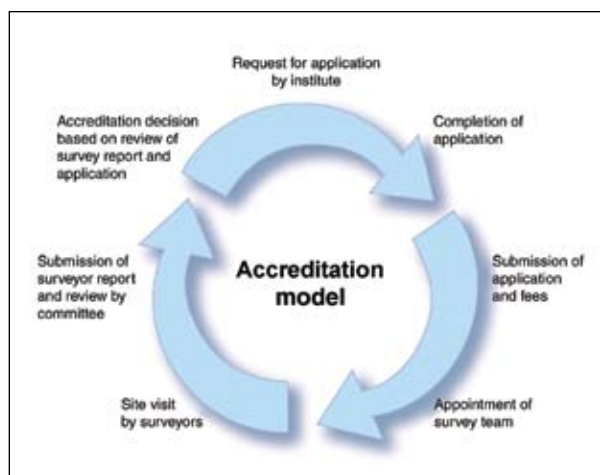
Administrator, Program for the
 Accreditation of Education Institutes

program. A progress report was presented to the Regents in February 2005 and the program was formally approved by the Board in June 2005 for launch in fiscal year 2005-2006.

A mock survey was conducted in July 2005 to assess the operational aspects of the accreditation model and make final changes in the accreditation process. The University of British Columbia's Centre of Excellence for Surgical Education and Innovation—under the direction of Richard J. Finley, MD, FACS, FRCS, a member of the ACS Board of Regents, and A. Karim Qayumi, MD, PhD, FRCS—was selected as the test site for the mock survey. The center's staff completed the requisite forms and the center underwent a formal review using the established standards and criteria. Robert V. Rege, MD, FACS, and Lelan F. Sillin III, MD, MEd, FACS, were asked to play the role of the surveyors. The survey process was conducted openly, with the entire committee in attendance. The committee observed each step of the process, and extensive debriefings were conducted between the committee members, the surveyors, ACS Division of Education staff, and the staff of the center. At the completion of the exercise, the accreditation model and process were deemed to be sound. Minor changes were made in the accreditation documents based on this experience. The accreditation model is depicted in the figure on this page.

LAUNCH OF THE ACS PROGRAM

The ACS Program for the Accreditation of Education Institutes was officially launched during the 2005 Clinical Congress in San Francisco, CA. A special general session was held October 17 to share key features of the program. Ajit K. Sachdeva, MD, FACS, FRCS, Director of the Division of Education, presented background information and discussed the educational underpinnings of the program. Carlos A. Pellegrini, MD, FACS, a member of the Board of Regents and Chair of the ad hoc committee, outlined the activities of the committee and highlighted key components of the accreditation model. He underscored the speed with which the model had been developed over a short period of 18 months. Dr. Pellegrini complimented the committee members and the Division of Education staff for their expertise and tireless



efforts. C. Daniel Smith, MD, FACS, Dr. Rege, Dr. Sillin, and Daniel B. Jones, MD, FACS, who served as chairs for the subcommittees that addressed the specific standards and criteria, presented the rationale for these standards and criteria and described their use in accrediting institutions at Level I or Level II. Thomas R. Russell, MD, FACS, Executive Director of the College, was the invited discussant at this session. He emphasized the critical role of the College in accreditation activities and expressed his strong support for this new program, emphasizing its relevance and significance. The response from the attendees of this session was extremely positive.

In addition, Dr. Sachdeva was invited by the Board of Governors to present, during their meeting at Clinical Congress, an outline of the educational accreditation activities of the ACS, including this program and the new program for verification of knowledge and skills. The response from the Governors was also very positive.

Surveyors were recruited before the 2005 Clinical Congress and were invited to a half-day training session at the Congress. Fourteen surveyors from across the U.S. and Canada participated in this session. The training was conducted by Kathleen A. Johnson, EdM, Manager of the Program for the Accreditation of Education Institutes and Experiential Learning Programs, and Drs. Pellegrini, Rege, Sillin, and Qayumi. The goal of the training was to educate the new surveyors about the accreditation requirements, the roles of the

surveyors, and the documents that would be used by both the institution applying for accreditation and the survey teams.

The committee was dissolved following completion of its charge, which involved creation of the accreditation model. Two smaller review committees were subsequently appointed in February 2006 with approval of the Board of Regents. These committees are responsible for making the accreditation decisions. Dr. Pellegrini chairs both review committees and both are staffed by the same members of the Division of Education to ensure consistency in the accreditation decisions.

The applications for accreditation and the informational materials have been mailed to institutes that have requested these documents. In addition, these documents have been posted on the ACS Web site, *www.facs.org*, and can be accessed through the Web page of the Division of Education. With support from Communications and Information Technology Services, an interactive Web page is being developed to facilitate dissemination and collection of accreditation materials and information on the ACS accredited institutes' activities.

APPLYING FOR ACS ACCREDITATION

There are many reasons for education institutes to apply for ACS accreditation. The institutes will play a pivotal role in the Division of Education's efforts to offer regional and local educational support to practicing surgeons, surgical residents, medical students, and members of the surgical team. The institutes would be involved in the development and implementation of innovative, cutting-edge educational programs to address the core competencies and would support surgeons in their efforts to acquire and maintain their surgical skills and meet the requirements for maintenance of certification. The institutes would also be involved in collaborative educational research and development conducted under the aegis of the College. They may serve as demonstration sites for certain new educational technologies, including simulators and simulations. Thus, the ACS Accredited Education Institutes would have the potential to dramatically change the way surgical education is delivered in the U.S. and Canada.

With the creation of this educational program of accreditation, the American College of Surgeons has reaffirmed its commitment to the education of surgeons from all specialties, following a long-standing tradition of establishing and monitoring standards that result in enhancement of the care of the surgical patient. □

For further information about the ACS Program for the Accreditation of Education Institutes, please contact Dr. Sachdeva at asachdeva@facs.org, or Ms. Johnson at kjohnson@facs.org.

Dr. Pellegrini is Henry N. Harkins Professor and chair, department of surgery, University of Washington, Seattle, and a member of the Board of Regents.

