Site Visit

The Accreditation Site Visit

The accreditation process for Sponsoring Institutions and programs includes on-site visits to assess compliance with the Institutional and Program Requirements, as applicable. All accreditation site visits for Sponsoring Institutions and programs are performed by Accreditation Field Representatives who are employed by the ACGME.

Types of Site Visits

**Program Applications:** A site visit is conducted to review all specialty (core) and many subspecialty programs when an application for accreditation is submitted. The site visit seeks to verify and clarify the application documents in which institutional and program leadership have described the resources of the program and how it will comply with the Program Requirements. Applications for Sponsoring Institutions and some subspecialty programs are reviewed without a site visit.

**American Osteopathic Organization (AOA)-Approved Programs with:**

Contact Us

Fieldrepresentatives@acgme.

Quick Links

- Accreditation Field Representatives
- Site Visit
- The ACGME and the Accreditation Process
- Evaluation of Your Recent Accreditation Site Visit
Pre-Accreditation Status: The site visit for an AOA-approved program with Pre-Accreditation status is similar in many ways to a site visit for an application as described above. Osteopathic Sponsoring Institutions with Pre-Accreditation status are reviewed without a site visit.

Institutions and Programs with Initial Accreditation: All Sponsoring Institutions and programs undergo a full site visit at the end of their two-year Initial Accreditation period and prior to a Review Committee’s decision to grant Continued Accreditation.

Annual Data-Prompted Visits and Other Visits Scheduled at the Discretion of the Review Committee: Sponsoring Institutions and programs undergo an annual review of accreditation data collected by the ACGME via the Accreditation Data System (ADS). If the review suggests a potential problem, the Committee may schedule a site visit to clarify and address aspects of the institution or program that need attention or follow-up. Site visits also are scheduled annually to evaluate Sponsoring Institutions or programs with probationary accreditation statuses, and may be scheduled to assess complaints or serious conditions, or other situations, at the discretion of the Review Committee.

10-Year Accreditation Site Visits: All Sponsoring Institutions and programs undergo a full accreditation site visit every 10 years. This is preceded by a comprehensive Self-Study process that includes a description of how the Sponsoring Institution or program creates an effective learning and working environment, and how this leads to desired educational outcomes. For the Self-Study, programs are also asked to review their aims and conduct an analysis of strengths, areas for improvement, external opportunities, and threats, and to formulate and document plans for improvement.

Click here for Eight Steps to Prepare for the 10-Year Accreditation Site Visit
Key to Standard Notification Letter for Status of Continued Accreditation
(Text in italics provides explanations of the sections in the letter; non-italicized text is standard text of the letter)

Date
Program Director Name
Director, Residency Program
Program Name
Address Line 1
Address Line 2
City State Zip

Dear Dr. Program Director:

The Residency Review Committee for X, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Specialty
Name of Program
Sponsoring Institution
City, ST
Program 1000000000

Based on all of the information available to it at the time of its recent meeting, the Review Committee accredited the program as follows:

Status: This is the accreditation status assigned to the program or institution by the Review Committee following annual review of the program or institution.

Maximum Number of Residents: If the Review Committee approves resident complement, this section lists the maximum number of residents that may be appointed to the program at any given time.

Residents per Level: If the Review Committee approves resident complement by year, this section specifies the maximum number of residents that may be appointed at each level of the program.

Effective Date: The effective date of the accreditation action is the date of the Review Committee meeting at which the action was taken.

Approximate Date of Self-Study Visit: This is the approximate date of the program’s next Self-Study visit. Each program will undergo a self-study visit once every 10 years.
Progress Report Due: If the Review Committee requests a progress report, the due date is included in this section.

Areas Not in Substantial Compliance (Citations)

The Review Committee cited the following areas as not in substantial compliance with the ACGME’s Program Requirements and/or Institutional Requirements:

- If applicable, the LON will include this section, listing areas in which the program is not in compliance with ACGME Requirements for Graduate Medical Education. These areas of non-compliance are also referred to as citations. Each citation will include a descriptive heading, the date the citation was issued, the actual Institutional or Program Requirement for the area that is not in compliance and the Review Committee’s brief explanation of non-compliance.

Extended Citations: Citations from the program’s or institution’s previous review that have not been adequately addressed will appear in the LON as extended citations, with the Review Committee’s brief description of the continued non-compliance.

New Citations: Citations resulting from the current review of the program will appear in the New Citations section of the LON.

Resolved Citations: Citations from the program’s or institution’s previous review that have been adequately addressed will appear in the Resolved Citations section of the LON.

Areas for Program Improvement/Concerning Trends: The Review Committee may identify one or more areas for improvement based on the current review of the program and/or concerning trends based on data related to the current review, as well as from previous annual reviews of the program.

The Review Committee identified the following areas for program improvement and/or concerning trends:

Request for Progress Report: If a progress report is requested, the citations to be addressed in the progress report will be indicated in the Areas Not in Substantial Compliance (Citations) section of the LON and the following text will appear:

The Review Committee requests a progress report in which each citation listed above (**Reference in progress report) is addressed. This information is requested via email to the Executive Director. As specified in the ACGME Institutional Requirements, the report should be reviewed and approved by the sponsoring institution’s Graduate Medical Education Committee and co-signed by the Designated Institutional Official prior to submission to the ACGME. If you have concerns about the due date for the progress report, please contact the Review Committee Executive Director.
**Other Comments:** The letter may include additional text such as:
- Commendation for exemplary program performance or innovations.
- Approval of a change in participating sites.
- Approval or denial of a change in resident complement.
- Comment on recent or anticipated changes in the program.

**Subspecialty Programs:** If the program has associated subspecialty programs, the following text, along with a listing of the subspecialty programs and, in most cases, the accreditation status assigned to each program, will appear in the LON as described below:

The following is a list of subspecialty programs associated with your program. Subspecialty programs with ** preceding the program number were not reviewed at the most recent RC meeting. Subspecialty programs with LTR preceding the program number will receive a separate Letter of Notification.

1010000000 Name of subspecialty
Accreditation status of subspecialty program and effective date

**Closing Statement:**
The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System.

Sincerely yours,

Executive Director
Residency Review Committee for X

cc: Designated Institutional Official
    Core Program Director for letters about dependent subspecialty program
    Dependent Subspecialty Program Director for letters about core program

**Participating Sites**
This section includes a list of all regular and routine participating sites listed in the ACGME Accreditation Data System (ADS).
### Faculty Scholarly Activity Definitions:
- **Pub Med IDs (assigned by PubMed)** for articles published in the previous academic year. List up to 4. Pub Med ID (PMID) is an unique number assigned to each PubMed record. This is generally an 8 character numeric number. The PubMed Central reference number (PMCID) is different from the PubMed reference number (PMID). PubMed Central is an index of full text papers, while PubMed is an index of abstracts.
- **Number of abstracts, posters, and presentations given at international, national, or regional meetings in the previous academic year.**
- **Number of other presentations given (grand rounds, invited professorships), materials developed (such as computer-based modules), or work presented in non-peer review publications in the previous academic year. Articles without PMIDs should be counted in this section. This will include publication which are peer reviewed but not recognized by the National Library of Medicine.**
- **Number of chapters or textbooks published in the previous academic year.**
- **Number of grants for which faculty member had a leadership role (PI, Co-PI, or site director) in the previous academic year.**
- **Had an active leadership role (such as serving on committees or governing boards) in national medical organizations or served as reviewer or editorial board member for a peer-reviewed journal in the previous academic year.**
- **In the previous academic year, held responsibility for seminars, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students, residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences.**

<table>
<thead>
<tr>
<th>Faculty Member</th>
<th>PMID 1</th>
<th>PMID 2</th>
<th>PMID 3</th>
<th>PMID 4</th>
<th>Conference Presentations (#)</th>
<th>Other Presentations (#)</th>
<th>Chapters / Textbooks (#)</th>
<th>Grant Leadership (#)</th>
<th>Leadership or Peer-Review Role (Y/N)</th>
<th>Teaching Formal Courses (Y/N)</th>
</tr>
</thead>
</table>

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Template for **Resident Scholarly Activity** that occurred during the previous academic year between 7/1/2017-6/30/2018

**Resident Scholarly Activity Definitions:**
- Number of abstracts, posters, and presentations given at international, national, or regional meetings in the previous academic year
- Number of chapters or textbooks published in the previous academic year
- Participated in funded or non-funded basic science or clinical outcomes research project in the previous academic year
- Lecture, or presentation (such as grand rounds or case presentations) of at least 30 minute duration within the sponsoring institution or program in the previous academic year

<table>
<thead>
<tr>
<th>Resident Name</th>
<th>PMID 1</th>
<th>PMID 2</th>
<th>PMID 3</th>
<th>Conference Presentations (#)</th>
<th>Chapters / Textbooks (#)</th>
<th>Participated in research (Y/N)</th>
<th>Teaching / Presentations (Y/N)</th>
</tr>
</thead>
</table>

*Please Note: Scholarly activity for U.S. Internal Medicine residents is collected in a different manner than other specialties. For U.S. Internal Medicine programs, scholarly activity is collected for graduate residents that completed the program in the previous academic year for the entirety of their training. All other specialties collect data for ALL residents in the previous academic year 7/1/2017-6/30/2018 for that year only.*
Scholarly Activity
Frequently Asked Questions

If you have questions about the specific scholarly activity program requirements for your specialty, please contact the Review Committee Team directly.

General

**Q.** When entering PMIDs I get a message that says the number has already been used, why can I not enter this number again?

**A.** Your program previously entered that same PMID for the same person in a previous academic year. The ACGME has already collected and reviewed that data. PMIDs cannot be entered in more than 1 academic year.

**Q.** What if there is no scholarly activity to enter for someone?

**A.** If there is no scholarly activity to enter for a faculty member or resident select ‘no scholarly activity’.

Faculty

**Q.** I no longer see an option to view/edit CVs for my physician faculty members. Why is this?

**A.** CVs are only collected for physician faculty during the application process and for programs with initial accreditation. After a program receives an accreditation status other than initial accreditation, only the Program Director will need to update the CV. Scholarly activity has replaced the detailed CVs for physician faculty members.

**Q.** Why are only some of my faculty members showing on the list?

**A.** Some programs are only required to enter scholarly activity for core faculty. If you are a specialty program, you will only enter scholarly activity for your core faculty (see: Faculty Roster Instructions to see how to designate faculty as core). US subspecialty programs will enter scholarly activity for all physician faculty listed on the data entry form. International subspecialty programs will only enter scholarly activity for core faculty.

**Q.** Do I need to enter scholarly activity for non-physician faculty members?

**A.** No, we are only collecting the quantitative scholarly activity for physician faculty members. The scholarly activity, however, will be reported in narrative form on the non-physician CVs for the specialties and subspecialties that require it.
Q. I have more than 4 PMIDs to enter for a faculty member; can I submit more than 4 PMIDs for one person?
A. No. The scholarly activity is used to get an idea of the activity, not necessarily to document it entirely.

Q. A new faculty member just graduated from an accredited program. If their resident scholarly activity has been reported, should I enter the same data for faculty scholarly activity?
A. Yes.

Q. Do I need to enter scholarly activity for a faculty member who was an active faculty member last year, but has left the program?
A. No. We are only collecting scholarly activity for your current faculty members.

Q. Do I need to enter scholarly activity for new faculty members even if they were not in the program last year?
A. Yes. It does not matter where the scholarly activity was completed at.

Q. I have a faculty member who is listed in another program. Can I transfer their scholarly activity information to my program?
A. No. You must manually enter scholarly activity separately for each program.

Q. How do I document an article without a PMID number?
A. Articles without PMID numbers can be counted as ‘Other Presentations’. This includes publications which are peer reviewed but not recognized by the National Library of Medicine.

Resident

Q. Only my residents from last year are showing. None of my incoming residents for the current year are showing. Do I need to enter scholarly activity for incoming residents?
A. No. You will only enter scholarly activity for residents who were active or completed your program in the previous academic year. New residents, including residents who transferred to your program, will not require scholarly activity reporting this year.

Q. I have more than 3 PMIDs to enter for a resident/fellow; can I submit more than 3 PMIDs for one person?
A. No. The scholarly activity is used to get an idea of the activity, not necessarily to document it entirely.

Q. We have fellows in our program, not residents; does this section still apply to us?
A. Yes. The ACGME describes any resident, fellow, house officer, or intern in an ACGME accredited program as resident. You are required to complete the scholarly activity for your residents/fellows/house officers/interns.

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Q. I have an off-cycle resident who completes after September 1st; do I need to enter scholarly activity for this resident?
A. Yes.

Q. How do I document an article without a PMID number?
A. Articles without PMID numbers could be counted as ‘Conference Presentations’ only if the article was presented at an international, national, or regional meeting.

Q. Can one abstract or publication count for multiple residents or faculty who had completed it?
A. Yes.