ACGME Fact Sheet

• What is the Accreditation Council for Graduate Medical Education?
The ACGME is a private, non-profit organization that accredits about 8,300 residency programs in 126 specialties and subspecialties that educate about 107,000 residents. Its mission is to improve health care by assessing and advancing the quality of resident physicians’ education through accreditation.

• Why was the ACGME established?
The ACGME was established in 1981 out of a consensus need in the medical community for an independent accrediting organization for graduate medical education programs. Its forerunner was the Liaison Committee for Graduate Medical Education.

• How is the ACGME governed?
The members of the ACGME Board of Directors are nominated in equal number (four each) by the American Association of Medical Colleges, American Board of Medical Specialties, American Hospital Association, American Medical Association, and Council of Medical Specialty Societies. The Board also includes two resident members, three public members, the chair of the Council of Review Committee Chairs, and a non-voting federal representative appointed by the Department of Health and Human Services.

The ACGME governance structure also includes a Council of Review Committee Chairs, consisting of the chairs of the 27 residency review committees and the Institutional Review Committee, and a Council of Review Committee Residents, comprising resident members of the review committees.

The ACGME has several standing committees: Executive Committee, Committee on Requirements, Monitoring Committee, Strategic Initiatives Committee, Committee on Innovation in the Learning Environment, and Awards Committee.

• What is a residency program?
A residency program is a period of education in a chosen specialty that physicians undergo after they graduate from medical school. Most residency programs last from three to seven years, during which residents care for patients under the supervision of physician faculty and participate in educational and research activities. When physicians graduate from a residency program, they are eligible to take their board certification examinations and begin practicing independently.

Residency programs are sponsored by teaching hospitals, academic medical centers, health care systems and other institutions.

• How does the accreditation process work?
The work of reviewing specific programs and making accreditation decisions is carried out by 27 residency review committees one for each major specialty, as well as one for transitional year programs. The Institutional Review Committee accredits institutions that sponsor residency programs. RRC members are volunteer physicians appointed by the appropriate medical specialty organization, medical specialty board and the AMA Council.
ACGME field staff representatives conduct one-day site visits to programs once every two to five years, depending on the strength of the program. About one-third of the programs are visited each year. The field staff representatives write objective narrative reports about the programs they visit, based on lengthy interviews with the program directors, faculty and residents, as well as a review of supporting documents.

The RRCs, which on average meet three times a year, review the site visitors’ reports, along with data provided by the programs. The RRC members then vote on the appropriate accreditation action for each program on the agenda for that meeting.

New programs are given initial accreditation, while continuing programs are given full accreditation if they substantially comply with the ACGME common and specialty-specific requirements. Programs that have deficiencies may be given accreditation with warning or probationary accreditation, and programs that subsequently fail to demonstrate that they have corrected their deficiencies may have their accreditation withdrawn.

Programs can appeal adverse accreditation actions to an appeals panel composed of volunteer physicians in the appropriate specialty. Although withdrawal of accreditation is usually preceded by probationary accreditation, programs which have egregious violations of program standards or experience a catastrophic loss of resources may be subject to expedited withdrawal of accreditation. Programs may also request voluntary withdrawal of accreditation if, for example, the program becomes inactive or merges with another program. Accreditation may be administratively withdrawn from a program if it is delinquent in paying fees, does not provide information to the review committees, does not maintain current data on the ACGME Accreditation Data System, or does not follow directives of an accreditation action.

- **Is accreditation voluntary or mandatory?**

  Accreditation is voluntary. However, programs must be ACGME-accredited in order to receive graduate medical education funds from the federal Center for Medicare and Medicaid Services. Residents must graduate from ACGME-accredited programs to be eligible to take their board certification examinations. In addition, many states require completion of an ACGME-accredited residency program for physician licensure.