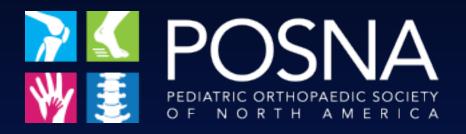
Fellowship Directors Meeting



POSNA Annual Meeting
Indianapolis, IN
April 27, 2016

Agenda

- Recap of the 2016 Match
- Jack Flynn, Fellowship Match Grievance Committee
- Fellowship Applicant Survey 4/2016
- AAOS Fellowship Match Oversight Committee
- Fellowship committee activities
 - POSNA accreditation

- Fellowship year 2017-2018
- SFMP website went "live" September 1st, 2016
- Interview process:
 - November 16th, 2015 through March 31st, 2016
 - One issue reported to POSNA
 - Applicant interview canceled due to weather > skype, asked for "second visit"
 - Post-interview contact with applicants:
 - Applicants <u>can</u> contact fellowship: encourage communication with administrative staff, current fellows and past fellows. Not with attendings.
 - Fellowship programs <u>cannot</u> initiate contact w/ applicants

- Rank lists submitted
 - -45 programs (2 more than last year) with 73 fellowship positions (2 more than last year)
 - Match results were manually reviewed on April 4th
 - Applicant rank list
 - Fellowship rank list

- Match date: April 8th, 2016
 - Programs sent an email that morning
- Applicants had access to Match results on April 8th by logging onto the SFMP website
- 55 full applicants in match* (decrease of 14)
 - -2015:69
 - -2014:76
 - -2013:67
- 44 North American (decrease by 3)
- 11 IMG (decrease by 11)

- Mean number of application/applicant: 17.0
 (2015 17.5 2014 18)
- Mean number of Programs the applicant ranked: **8.2** (2015 7.8 2014 7.4)
 - Average number of offers to applicants: 5.4
- Mean number of applicants the Program ranked: 10.8 (2015 11.8 2014 11.8)

- Match results
 - 50 applicants "matched"
 - 2013: 50
 - 2014: 60
 - 2015: 53
 - 5 applicants "un-matched"
 - 2013: 17
 - 2014: 16
 - 2015: 16
 - 0 North American (2012: 1, 2013: 1; 2014: 3; 2015:0)
 - 5 International* (2012: 11, 2013: 16, 2014: 13, 2016: 16)

- Withdrawals
 - IMGs difficult to track
 - North American
 - 4 withdrawals prior to match
 - 1 matched in spine

2016 Applicant Rank List (Matched 50)

Rank	2016 (n=50)	2015 (n=53)	2014 (n=60)
1	23(46%)	24 (45%)	30 (50%)
2	14	8	11
3	6	8	2
4	2	9	2
5	5	2	2
6	0	0	5
7	0	1	2
8	0	1	2
9			2
10			1
11			1

Top 5 choices:

2016: 100%

2015: 96%

2014: 78%

2013: 96%

- Programs: 73 fellowship positions
 - 50 filled positions
 - 27 programs
 - 23 un-filled positions
 - 18 programs

2016 Fellowship Program Match List

• Top 5

- 2016: 54%

- 2015: 47%

- 2014: 60%

- 2013: 66%

Top 10

- 2016: 90%

- 2015: 85%

- 2014: 95%

- 2013: 88%

	2016	2015	2014
1	4	6	9
2	6	7	6
3	5	3	6
4	9	4	6
5	3	5	9
6	2	2	8
7	2	3	3
8	6	4	7
9	3	3	3
10	4	4	
11			
12		1	
13	1	1	
14	1		
15	2	2	1
16		2	1
17			1
18		1	
19	1	1	
20			
21			
22			
23			

- April 8th unfilled programs were listed (voluntary) onto the SFMP website
 - 23 fellowship positions
- Problems with Interview process, applicant or fellowship conduct: None

Fellowship Match Grievance Issues: Past

- 2012: 1 applicant reneged on match agreement
- 2014: 2 applicants reneged on match agreement
- 2015: 1 applicant reneged on match agreement
 - fellowship director left the pediatric fellowship, applicant did not want to do fellowship

Fellowship Match Grievance Issue: 2016

 Jack Flynn (Chairman of Fellowship Match Grievance Committee)

- Data collected: April 2016
- 38 of 50 applicants in match responded so far.....
- Average number of applications: **17** (2015: 16; 2014: 16)
- Average number of interviews: 9.8 (2 to 17)
 - 2015: 7.6 (3 to 16)
 - -2014: 8.5 (1 to 17)
 - -2013: 8.2 (2 to 14)

• Did you apply for fellowships in any other subspecialty?

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-Yes: 1 (2.6%)
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-No: 37 (97%)

2015

-Yes: 1 (3%)

-No: 33 (97%)

- Late cancellations: **58%** (2015: 50%; 2014: 28%; 2013: 60%;)
 - Applicant: 57% (2015: 55%; 2014: 98%; 2013: 68%)
 - "too expensive" **65%** (2015: 54%; 2014: 65%; 2013: 53%)
 - "not enough time" **59%** (2015: 44%; 2014: 65%; 2013: 65%)
 - Program: **10%** (2015: 3%; 2014: 2%; 2013: 14%)

- Estimated cost to applicants
 - Per interview: \$390
 - 2015: \$566
 - 2014: \$372
 - 2013: \$515
 - Total cost (38 respondents): \$146,960
 - Project this to all 50 matched applicants: \$193,369
- Difficult to arrange interview without work hours violation?
 - Yes 43% (2015: 43%; 2014: 37%; 2013: 30%)
 - No 61% (2015: 61%; 2014: 63%; 2013: 70%)

- Pressured to make commitment prior to match day?
 - Yes: 1 applicant (2.6%)
 - 2015: 4 applicants (12%)
 - 2014: 1 applicant (2.3%)
 - 2013: 4 applicants (10%)
 - No 97%
- Pressured directly to applicant?
 - Yes: 1 applicant (2.6%)
 - 2015: 3 applicants (14%)
 - 2014: 1 applicant (2.3%)
 - 2013: 3 applicants (7.5%)
 - No 97%
- Pressured indirectly through residency program?
 - Yes: 0%
 - 2015: 2 applicants (9%)
 - 2014: 1 applicant (2.3%)
 - 2013: 1 applicant (3.3%)
 - No 100%

Did any fellowship director encourage you to contact them, after your interview, if you were interested in their fellowship and were going to rank their program highly?

2013: 37.5%

2014: 21%

2015: 32%

2016: 16%

Were you encouraged, or was it recommended to you by the fellowship program, to have an "extended" interview or "try-out" which was longer than the normal interview day?

2015: 1 applicant (3%)
2016: 0%

POSNA forbids this activity

Where did you get your information?

SFMP

2013: 74.3%

2014: 71%

2015: 66%

2016: 85%

POSNA website

2013: 82.9%

2014: 88%

2015: 88%

2016: 70%

AAOS book

2013: 8.6%

2014: 15%

2015: 9%

2016: 9%

Did you have any fellowship interviews at the 2015 IPOS meeting?

2012: 29.7%

2013: 25%

2014: 21%

2015: 16%

2016: 42%

1-2 programs

Did you have any fellowship interviews at the 2016 AAOS annual meeting?

2013: 7.7%

2014: 7%

2015: 2%

2016: 2.6%



IPOS and AAOS meetings are opportunities for cost/time savings for applicants

What additional information do you feel would have been helpful to know about a fellowship, during the planning and scheduling phases, to make more informed/educated decisions?

- Number of people in match
- •Interview dates ahead of time
- •Money (pay, insurance etc)

•Applicants wanted "more information" on each fellowship's websites

- AAOS Webinar on Fellowships (Fall 2015)
 - Webinar was seen live by 4 applicants (10.5%)
 - 2014: 24% of applicants (n=8)
 - Webinar was reviewed later on AAOS website by 8 applicants (22%)
 - 22% of applicants (n=97

Was your rank list influenced by whether or not a program was ACGME accredited?

Yes: 26%

No: 74%

New Question

- What changes would you (applicant) recommend to the match process for future years?
 - Interview dates listed as early as possible
 - Group interviews regionally
 - Saturday interviews
 - Know size of applicant pool

Take home points

- Websites
 - Improve fellowship websites—link to POSNA
- "Extended interviews" or "tryouts" not permitted
- Offer applicants the option of interviews at IPOS and AAOS
- Early notification about interviews
- Post-interview contact discouraged

AAOS Fellowship Match Oversight Committee

- Sanctions for Fellowship Match violations
- No society has any effective sanctions for applicants that leave their subspecialty area.
 - POSNA
 - Applicant: restriction of membership in POSNA
 - Fellowship: academic participation in annual meeting
- Many Fellowship subspecialties have experienced applicant misconduct

AAOS Fellowship Match Oversight Committee

- Non-compete clauses/Restrictive covenants
 - If these exist for a fellowship they will be listed on the SFMP website and/or the POSNA website
 - Approved by the POSNA BOD
- "Extended interviews", "tryouts" and scrubbing into surgical cases are not acceptable.
- Webinar for the fellows starting this summer: "Tips for the Orthopaedic Fellowship Year".
 May 17, 2016

ACGME decision: D.O.s Unified Accreditation System

- AOA (American Osteopathic Association)
 - Accredits programs and osteopathic medical schools
 - Certifies osteopathic physicians
- AACOM (Association of American Colleges of Osteopathic Medicine
- AOA and AACOM will become ACGME member organization (phased in to ACGME Board and Review Committees)
- DO and MD graduates will have access to all GME programs
- AOA-accredited programs may apply for ACGME-accreditation 7/1/2015 to 6/30/2020

ACGME decision: Fellowship Eligibility

- New requirement effective 7/1/2016....
- Requires completion of either ACGMEaccredited or RCPSC-accredited orthopaedic surgery residency.
- AOA-accredited programs may apply for ACGME-accreditation 7/1/2015
- So how can D.O.s participate in ACGME-accredited fellowships in 2017 (and thereafter)?

ACGME decision: D.O.s Fellowship Eligibility

- If an AOA-accredited medical school has applied for ACGME-accreditation by 8/1/2016 then their graduates will have current rules apply for all fellowships, then no problem...
- However, if an AOA-accredited medical school has **NOT** applied for ACGME-accreditation by 8/1/2016, then the AOA graduate could potentially enter orthopaedic fellowship programs as permitted under the "Exception".
- RRCs may or may not allow "Exceptions", however the Orthopaedic Surgery RRC WILL allow the "Exception".

ACGME decision: D.O.s Fellowship Eligibility

- What is the "Exception" for eligibility?
 - Completion of non-ACGME-accredited core residency
 - Demonstrated clinical excellence compared to peers throughout training
 - Satisfactory completion of USMLE Steps 1, 2 and if eligible, 3
 - Additional: e.g. additional clinical or research training; demonstrated scholarship; demonstrated leadership; completion of ACGME-I residency

ACGME decision: D.O.s Fellowship Eligibility

- What is the "Exception" for eligibility?
 - Must be reviewed and approved by the GMEC or GMEC subcommittee
 - ECFMG verification if international
 - Evaluation by CCC using fellowship milestones within 6 weeks of matriculation
- Word on the street.....a program which has a history of using the "Exception" eligibility requirements for their fellowship will be scrutinized by the ACGME.

Fellowship Committee 2015-2016

- Improved/updated information for applicants on the new POSNA website
 - Listing/Links for every program (map)
 - Program information updated
 - Recommend that each program link to their own websites
 - SFMP match timeline posted (links to SFMP)
 - Links to previous match data (these presentations)

Fellowship Committee 2015-2016

POSNA accreditation Project

Background

- Accreditation ensures minimal standards in training
- Provides for "uniform" product
- Minimizes outliers



Background

ACGME

- Only current accreditation body for Peds Ortho fellowships
- Primarily concerned with large training programs (medicine, surgery etc.)
- Relevance to smaller subspecialities is questionable



Background

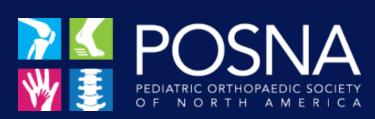
ACGME

- Processes are onerous
- Expensive (\$6200/\$4300)
- Many within our subspecialty forego accreditation completely
 - 25 programs
 - 43 in match in 2015



Pros

- •We gain control
 - We are Peds Ortho authorities—we can decide minimal standards
- Bring all programs under one umbrella
 - Not a referendum on ideal training program
- Make accreditation relevant
- Make accreditation responsive
 - Competency based



Cons

- Onus of initial implementation
- Ongoing work to maintain
- Hard to go back
- Financial risk
- Legal risk?



Precedent

- OTA accreditation
 - Successful
 - Financially neutral
- ASES, others considering
- AAOS Fellowship accreditation project team
 - Support alternative accreditation pathways
 - AAOS will explore



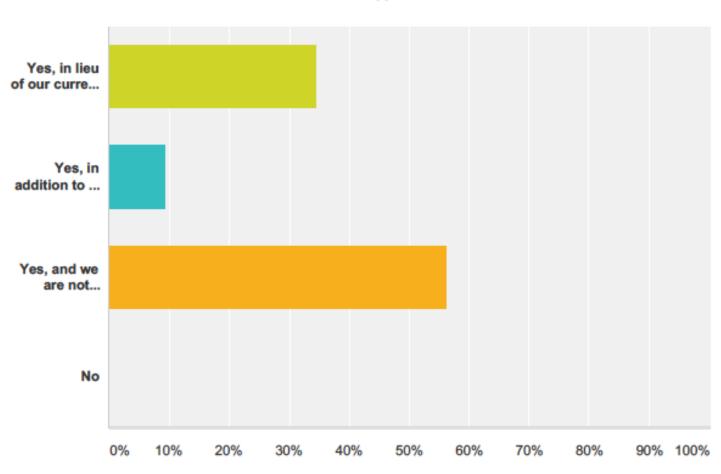
- 2014-2015: Discussions begun by Scott Luhmann
- Summer 2015: OTA plan used as starting point
- Worked through fellowship committee
- Surveyed all program directors
- Draft presented to POSNA BOD 9/15

- Refined based on BOD input
- Drafted proposed timeline
- Vetted by task force of fellowship program directors
 - Canada, Shrine, large, small, non-ACGME etc.
- Drafted language for oversight and penalties
- Discussed by BOD 12/15

- Reviewed by Carl Stanitski and Dick Haynes (previous ACGME reviewers)
- Language for oversight/sanctions were reviewed (and approved) by legal
- Plan approved by BOD 3/16
- Details emailed to all program directors

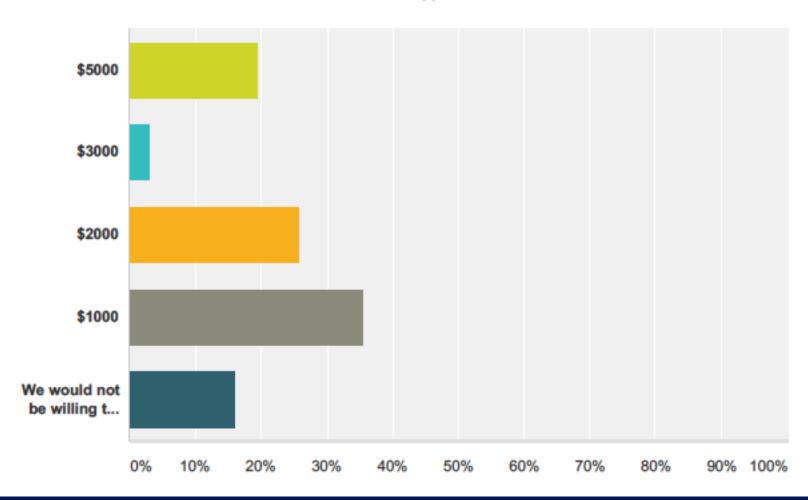
Q1 As POSNA considers the development of a POSNA accreditation for pediatric orthopaedic fellowships, would your program be interested in this?

Answered: 32 Skipped: 0



Q2 Understanding that the ACGME currently charges \$5000 a year for accreditation, how much would your program be willing to pay for POSNA accreditation?

Answered: 31 Skipped: 1



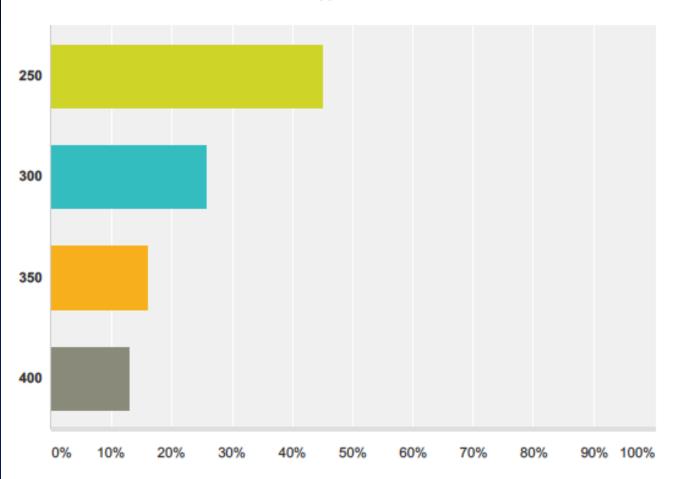
- Pediatric trauma experience
- Malpractice coverage
- Cost = \$2000; \$1000 for ACGME
- Faculty requirements
 - 2:1 ratio
 - POSNA members
 - Total # trainees must not exceed faculty
- Educational program
 - Fellow conferences, journal club etc

- Non-surgical responsibilities
 - Harder to quantify
 - Minimum 1 outpatient day/week
 - Trauma call ideally
- Research encouraged
 - Minimum requirements (e.g. IRB)

- Surgical responsibilities
 - 250 cases***
 - -45% of program directors (55% thought \geq 300)
 - − 10th percentile ACGME = 391 codes ~ 260 cases
 - Not broken down by subspecialty

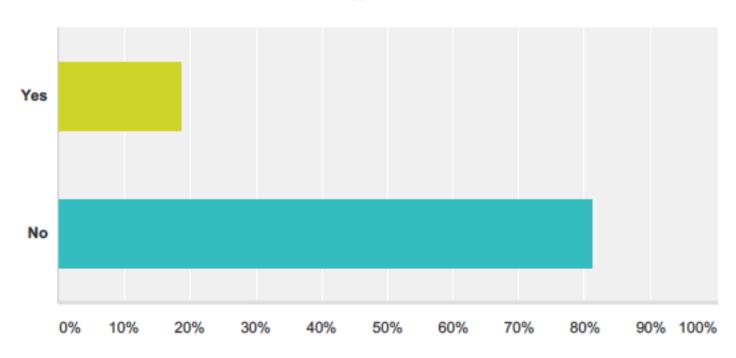
Q13 What do you feel is a reasonable number of MINIMUM surgical cases (not CPT codes) for a pediatric orthopaedic fellowship (as primary surgeon or first assist)?

Answered: 31 Skipped: 1



Q14 As part of a proposed accreditation system, do you favor MINIMUM surgical case volume requirements for each subspecialty (e.g. hip, spine, foot & ankle etc.)?

Answered: 32 Skipped: 0



- Evaluations
 - Can be institutional
 - Samples drafted
 - Fellow eval of faculty
 - Faculty eval of fellow
 - Program eval by faculty
 - Program eval by fellow***
 - Submitted online to POSNA
- Program director attestation

Implementation

- Accreditation required to participate in 2017-2018 match cycle (i.e. match day April 2018, for fellows starting Aug 1, 2020)
- Deadline for applications Jan 1, 2017
- All completed applications (with \$\$) will be granted provisional accreditation
- ACGME accreditation = POSNA accreditation
- All programs reviewed by fellowship committee over 2 year period to confer full accreditation
- Renewals reviewed on yearly basis

Thoughts

- Not a referendum on optimal training program
 - Each program will continue to have its own personality and educational priorities
- Goal is to provide minimum and uniform standards for fellowship training
- We want (need) everyone on board