

Separate Accreditation: To Be or Not To Be

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Section 127 – Rural Track Programs

New CMS definition:

A 'rural track program' is a program, whether separately accredited or not, where residents spend time in both urban and rural settings <u>and</u> the time spent training in a rural place is > 50% of the total training time for residents in the program (or track) as a whole.

For ACGME definition:

Visit Medically Underserved Areas and Population and GME:

https://www.acgme.org/what-we-do/accreditation/medically-underserved-areas-and-populations/

What Kind of House?



What Kind of House?



LASTING ESTATE



VACATION HOME



What Kind of Plant?



PLANTING A TREE OR PERENNIAL

PLANTING AN ANNUAL







What Kind of House? - Advantages

SEPARATELY ACCREDITED

- ➤ More rigorous development built for durability
- Less cost in sustaining the program because of indirect benefits
- Potentially more robust local leadership, and easier to justify and ensure administrative costs
- More autonomy for the rural partner
- Easier to track graduates, given the separate ACGME#

NOT SEPARATELY ACCREDITED

- Quicker development
- Less cost in development and implementation
- Less FTE requirements for local leadership
- More control for the urban partner (especially if the sponsoring institution is at the urban site)





SEPARATELY ACCREDITED

- > Longer time in development
- More expensive in development and implementation
- Potentially more vulnerable to loss of local leadership (although can relatively easily convert accreditation to 'not separately accredited' status, may lose financial benefits)
- Local leaders may not be ready for faculty and program director roles

NOT SEPARATELY ACCREDITED

- Less durable easy come, easy go
- More cost in sustaining the program, mostly related to potential lack of continuity in leadership and lower priority from sponsoring institution
- Less rural ownership and investment
 requires more constant attention
 from urban leadership to thrive
- More difficult to track graduates



To Be or Not to Be? — It depends

- Distance between rural and urban sites Beyond 45-60 minutes travel time argues for <u>separate accreditation</u>
- Rural community assets: financial resources, leadership, community investment and pride – Limited resources argues for not separate accreditation
- Resources for development Substantial grant funding argues for separate accreditation and building it to last
- Specialty program requirements The need to do more longitudinal programming to meet the >50% rural training threshold argues for <u>not separate accreditation</u>



To Be or Not to Be? — It depends

- Multiple rural sites, especially at a distance from each other, argues for <u>separate accreditation</u>
- Separate health system Distributed/shared governance argues for <u>separate accreditation</u> (in most cases)
- ➤ The urban site is an 'RRC' an argument for separate accreditation
- Limited capacity for training One resident a year argues for <u>not</u> separate accreditation
- Other considerations?



To Be or Not to Be? — It depends

- > In summary:
 - 1. A question to take very seriously and revisit from time to time over the course of initial design, development, and implementation
 - 2. A question perhaps most germane to the domain of governance, although also important to the domains of finance, accreditation, and community engagement

Comments or Questions?

