



ACC.16

65th Annual Scientific Session & Expo

Saturday April 2nd
12.15 p.m. to 1.00 p.m.

**THE CV TRAINING SECTION &
THE TRAINING ADMINISTRATORS:
*A ROADMAP FOR FUTURE COLLABORATION***

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AT THE
INTERSECTION
OF SCIENCE
& CHANGE

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Outline

- CV Training Section Status Report
- Future vision for the Section vis-à-vis the Program Administrators/Coordinators



Section and Section Leadership Council Definitions

- **Section**

Members who *actively align* themselves around an area of clinical or professional interest

Typically pay \$35/year to join a member community.

- **Section Leadership Council**

Sections are *governed* by a corresponding **Section Leadership Council**

A section leadership council is a leadership group comprised of members appointed by the President.



Current ACC Sections and Section Leadership Councils (n=19)

- Academic Cardiology
- Adult Congenital and Pediatric Cardiology
- Cardio Oncology
- Cardiovascular Care Team
- Cardiovascular Imaging
- CV Management
- **CV Training**
- Early Career Professionals
- Electrophysiology
- Federal Cardiology
- Fellows in Training
- Geriatric Cardiology
- Heart Failure and Transplant
- Interventional
- Peripheral Vascular Disease
- Prevention
- Sports and Exercise Cardiology
- Surgeons
- Women in Cardiology



Section & Section Leadership Council Functions

- **Articulate professional needs of members** to BOT and relevant College activities
- Advocate to **advance professional priorities** of special interest areas
- Identify opportunities to **integrate specific professional/clinical perspectives** in ACC strategy
- **Coordinate members** in key College activities and network among colleagues with similar interests
- **Collaborate with (internal) & external stakeholders** consistent with ACC's strategies



CV Training Section Demographics



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2016 ACC Membership Profile

NUMBER OF MEMBERS		ATTENDED A LIVE PROGRAM*			PURCHASED A PRODUCT*			AVG AGE		AVG TENURE	
51,513		17,009			7,568			54.23		17.86	
Fellow (FACC)	INTL Assoc.	Assoc. Fellow	CV Team	FIT	FITINTL	Administrator	AACC	RESIDENT	Affiliate	STUDENT	Master (MACC)
27,660	8,157	4,889	4,030	3,885	1,560	673	251	165	90	80	73

GENDER	SPECIAL INTERESTS		BOARD CERTIFICATION		UNITED STATES MEMBER DISTRIBUTION			
Male	36,186	70.2%	Adult Cardiology	25,889	50.3%	Cardiovascular Disease	22,390	79.7%
Female	8,403	16.3%	No Specialty	11,946	23.2%	Interventional	6,099	21.7%
Not Known	6,924	13.4%	Interventional Cardiology	7,226	14.0%	Electrophysiology	1,636	5.8%
GEOGRAPHY		Clinical Cardiology/ Gen..	6,091	11.8%	Pediatric Cardiology	1,201	4.3%	
United States	36,956	71.7%	Echocardiology	5,190	10.1%	No Board Certification	2,384	8.5%
International	14,557	28.3%	Electrophysiology	2,637	5.1%	General Surgery	1,021	3.6%
AGE		Nuclear Cardiology/Med.	2,561	5.0%	Other	1,008	3.6%	
30 or younger	1,163	2.3%	Pediatric Cardiology	1,990	3.9%	Heart Failure/Transplant	206	0.7%
31 - 40	7,955	15.4%	Surgery	1,397	2.7%	Nuclear Medicine	114	0.4%
41 - 50	8,757	17.0%	Preventive Cardiology	1,187	2.3%	PRACTICE SETTING		
51 - 60	10,698	20.8%	Heart Failure/Transplant	1,098	2.1%	Not Listed	18,046	35.0%
61 - 70	8,689	16.9%	Invasive Cardiology	994	1.9%	Cardiology Group	13,678	26.6%
71 or older	5,753	11.2%	Other	908	1.8%	Med School-Univ.	5,393	10.5%
N/A	8,498	16.5%	Non-invasive Cardiology	818	1.6%	Retired	4,677	9.1%
TENURE / CAREER		Vascular Surgery/Medicine	740	1.4%	Non-Gov Hospital	2,730	5.3%	
7 years or less	7,542	14.6%	Adult Congenital Cardiol..	739	1.4%	Multi-Specialty Group	1,892	3.7%
8 - 21 years	9,170	17.8%	MR/CT Cardiology	514	1.0%	Solo Practice	1,853	3.6%
22 years or more	9,405	18.3%	Geriatrics	129	0.3%	Fellow-In-Training	1,190	2.3%
In training	5,374	10.4%	Emergency Med.	86	0.2%	Gov Hospital	1,148	2.2%
No training year	15,230	29.6%	Public Health	79	0.2%	Other	615	1.2%
Student	80	0.2%				Insurance Company	209	0.4%
Emeritus	4,712	9.1%				Industry / Pharma / Device	82	0.2%

TOP 5 LIVE PROGRAMS		TOP 5 EDUCATION PRODUCTS	
	Count		Count
Annual Meeting	12,122	ACC SAP	2,286
FIT Exam	2,723	ECHOSAP	2,195
NYCVS	1,035	NCCT	1,924
CV Board Review	823	CATHSAP	956
CV Care Summit	581	CV BOARD REVIEW	695

Membership (Active) as of 2/22/2016
 AVG Tenure: Number of years out of training (Domestic Physicians)
 Board Certifications consist of US Physicians (Assoc. Fellow, Fellow, Master)
 * Popular Live Programs / Products: Interactions over a 3-year span (2013-2015)

SOURCE: ACC Database; All Members



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2016 CV Training Section Profile

NUMBER OF MEMBERS		ATTENDED A LIVE PROGRAM*		PURCHASED A PRODUCT*		AVG AGE		AVG TENURE					
1,938		968		394		51.79		15.36					
Fellow (FACC)	Assoc. Fellow	INTL Assoc.	CV Team	Affiliate	AACC	Administrator	FIT	Master (MACC)	FITINTL				
1,401	187	142	138	18	17	16	15	3	1				
GENDER		SPECIAL INTERESTS				BOARD CERTIFICATION				UNITED STATES MEMBER DISTRIBUTION			
Male	1,504	77.6%	Adult Cardiology	1,081	55.8%	Cardiovascular Disease	1,099	88.2%					
Female	332	17.1%	Interventional Cardiology	454	23.4%	Interventional	350	28.1%					
Not Known	102	5.3%	Clinical Cardiology/ General Cardiology	421	21.7%	Electrophysiology	125	10.0%					
			Echocardiology	361	18.6%	No Board Certification	55	4.4%					
GEOGRAPHY		Electrophysiology	186	9.6%	Pediatric Cardiology	50	4.0%						
United States	1,450	74.8%	No Speciality	143	7.4%	General Surgery	22	1.8%					
International	488	25.2%	Nuclear Cardiology/Med.	141	7.3%	Heart Failure/Transplant	20	1.6%					
AGE		Heart Failure/Transplant	97	5.0%	Other	16	1.3%						
30 or younger	9	0.5%	Preventive Cardiology	79	4.1%	Nuclear Medicine	9	0.7%					
31 - 40	286	14.8%	Invasive Cardiology	64	3.3%								
41 - 50	499	25.7%	Pediatric Cardiology	63	3.3%								
51 - 60	518	26.7%	Adult Congenital Cardiol.	57	2.9%								
61 - 70	352	18.2%	Non-invasive Cardiology	56	2.9%								
71 or older	61	3.1%	MR/CT Cardiology	41	2.1%								
N/A	213	11.0%	Vascular Surgery/Medicine	39	2.0%								
TENURE / CAREER		Surgery	31	1.6%									
7 years or less	392	20.2%	Other	16	0.8%								
8 - 21 years	558	28.8%	Emergency Med.	7	0.4%								
22 years or more	442	22.8%	Public Health	5	0.3%								
In training	16	0.8%	Geriatrics	3	0.2%								
No training year	524	27.0%											
Emeritus	6	0.3%											
PRACTICE SETTING						TOP 5 LIVE PROGRAMS		TOP 5 EDUCATION PRODUCTS					
						Count			Count				
Cardiology Group	534	27.6%	Cardiology Group	534	27.6%	Annual Meeting	816	ACC/SAP	121				
Med School-Univ.	477	24.6%	Med School-Univ.	477	24.6%	CV Board Review	47	ECHOSAP	105				
Not Listed	472	24.4%	Not Listed	472	24.4%	FIT Exam	33	NCCT	69				
Non-Gov Hospital	130	6.7%	Non-Gov Hospital	130	6.7%	NYCVS	32	CATHSAP	63				
Gov Hospital	106	5.5%	Gov Hospital	106	5.5%	CV Care Summit	21	CV BOARD REVIEW	42				
Multi-Specialty Group	106	5.5%	Multi-Specialty Group	106	5.5%								
Solo Practice	63	3.3%	Solo Practice	63	3.3%								
Other	27	1.4%	Other	27	1.4%								
Insurance Company	9	0.5%	Insurance Company	9	0.5%								
Industry / Pharma / Device	6	0.3%	Industry / Pharma / Device	6	0.3%								
Retired	6	0.3%	Retired	6	0.3%								
Fellow-In-Training	2	0.1%	Fellow-In-Training	2	0.1%								

Section Membership Status as of 2/26/2016
 AVG Tenure: Number of years out of training (Domestic Physicians)
 Board Certifications consist of US Physicians (Assoc. Fellow, Fellow, Master)
 * Popular Live Programs / Products: Interactions over a 3-year span (2013-2015)

SOURCE: ACC Database; Opt-in Section Members



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Section Steering Committee

- Established in 2013
- Chairs of all Sections
- Address issues pertinent to all sections, ensure consistency of governance and engagement
- Chair: Lee Goldberg MD FACC
- Oversight Areas/Topics:
 - Standard operating procedures**
 - Integration** with LLL Division and others
 - Success/accountability** measures
 - Strategic planning**
 - Collaboration** opportunities



Goals of CVT Section for the First Year

- Grow the membership of the brand new Section (target at least 500 members)
- Establish workgroups based on identified priorities
- Promote and showcase educational research by members
- Develop a system of rapid data collection from members, for the benefit of the workgroups
- Expand the scope and mission of the Section in carefully planned incremental steps to achieve the broadest level of member participation and include the diversity of professional scope of members



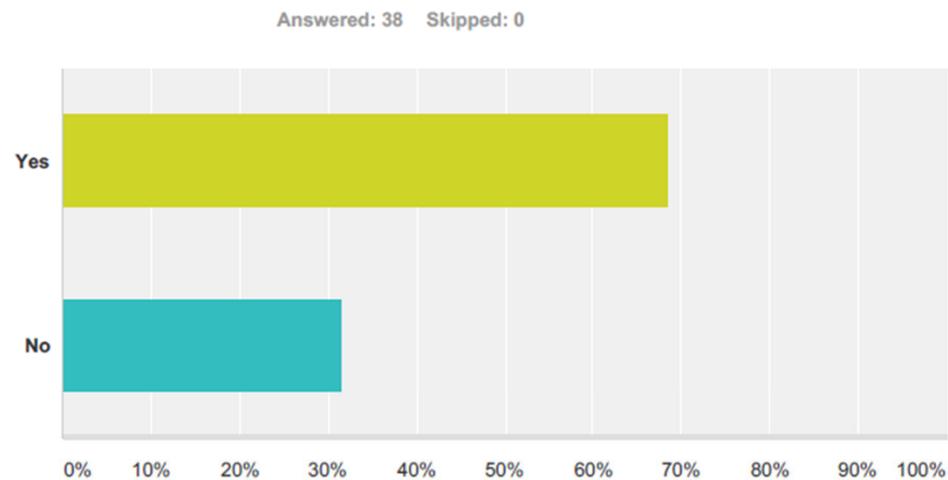
Achievements during the First year of the Section

- Exceeded the 500 member section goal- Currently we have **1,938** section members
- Established four working groups
 - Education Research & Innovation
 - Faculty Development
 - Recruitment Issues
 - Training Resources
- Created a rapid response on-line focus group for data collection
- First time ever educational research poster session at ACC.16
- 6 hours of topics at the ACC.16 Training Program Directors' Symposium (more inclusive program faculty)
- ACC membership for training program administrators allowing them to be section members



Does your fellowship training program have an associate PD?

**Rapid Response Team
At work**



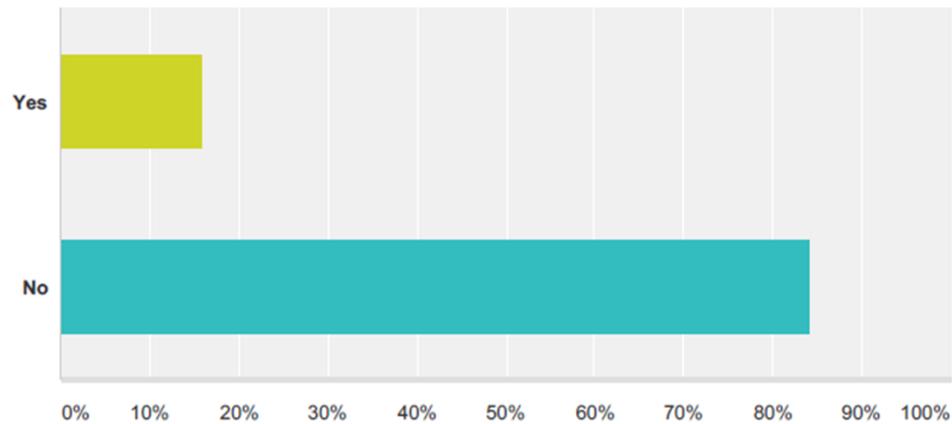
Answer Choices	Responses	
Yes	68.42%	26
No	31.58%	12
Total		38



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Do you provide any formal training (in addition to on the job training) to the associate PD?

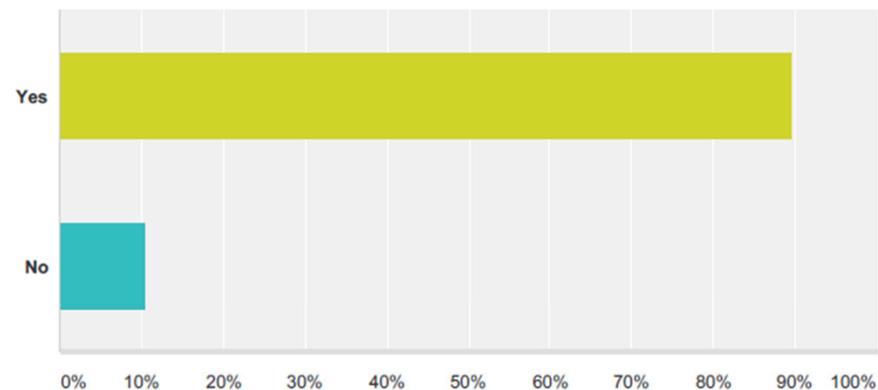
Answered: 38 Skipped: 0



Answer Choices	Responses	
Yes	15.79%	6
No	84.21%	32
Total		38

Do you think a web-based formalized ACC training tool/program for associate PD development will be helpful?

Answered: 38 Skipped: 0



Answer Choices	Responses	
Yes	89.47%	34
No	10.53%	4
Total		38



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What types of tools do you use for training Associate PD?

- ACC annual Training Program Directors' Symposium and ACC.org Program Directors webpage
- ACGME offered classes and website
- Institutional PD workshops or GME run courses/office hours
- Published training recommendations
- Face to face review meetings and feedback modules
- 20 respondents had no tools available



Issues faced by the PD/APD/Program Administrator Community

- Recruitment (Visa issues)
- Accreditation (ACGME, faculty surveys, fellow surveys)
- Fellow orientation (Start dates)
- Fellow assessment (Evaluation forms)
- New PD and APD development (Professional Development)
- GME office liaison (Mid-term reviews)
- Documentation (Work hour reports, leave, reporting milestones)
- Innovation (ABIM Pilot, ACGME studies on work hour rules)
- Education Research (ACC annual session)





INDIANA UNIVERSITY
SCHOOL OF MEDICINE

Evolution of the ABIM's Competency Based Medical Education (CBME) Pilot in Internal Medicine-Cardiology



VANDERBILT UNIVERSITY
MEDICAL CENTER

Chittur A. Sivaram MD FACC, Lisa A. Mendes MD FACC, Julie B. Damp MD FACC, Eric Stern MD FACC, Deepak Bhakta MD FACC, Shouvik Chakrabarty MD, John McPherson MD FACC, Salvatore Cilmi MD, Mitch Goldman MD
University of Oklahoma, Vanderbilt University, Icahn School of Medicine at Mount Sinai, Indiana University

Pilot's Study Objectives

1. To test the feasibility of administering four competency based rotations focused on cardiology ('hybrid rotations') during third year of residency to carefully selected IM residents already selected for cardiology fellowship training. While these rotations provide credit for both IM and cardiology training, the total duration of training to complete cardiology fellowship remains unchanged at 6 years (3 IM + 3 cardiology).
2. To demonstrate that Pilot residents' performance is non-inferior to

ABIM IM-Cardiology Pilot Pathway- 6 years

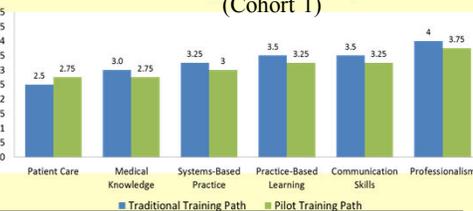


Methods

To test feasibility of CBME in Internal Medicine residency and fellowship programs, ABIM began its graduate medical education (GME) pilots in 2012. The Pilot in Internal Medicine and Cardiology started in 2014 July with University of Oklahoma, Vanderbilt University, Icahn School of Medicine at Mount Sinai and Indiana University as the 4 sites nationally. Each site selected one Pilot trainee per site in 2014 (Cohort 1). Institutions began their participation in the Pilot in

Preliminary Results

1. The Pilot residents performed as well as the traditional track first year cardiology fellows in the six core competency domains during echocardiography rotation- most cardiology specific (see below).
2. The pass rate of Pilot residents from Cohort 1 in ABIM examination in IM for was 100% (3/4), not different from their traditional track counterparts. Suggests Pilot is a NON-INFERIOR approach to training (Cohort 1)



Educational Innovation



resident performance in echocardiography rotation (most cardiology specific) was compared with traditional first year fellows from all the 4 sites in July 2015. Pilot resident

Sponsor of the Pilot: American College of Cardiology

cardiovascular fellowship and performing well Cohort 3 recruitment in progress at all 4 sites at present

Unresolved Issues & Debates

1. Will additional centers be recruited to the Pilot?
2. Will the Pilot lead to shortened IM + Cardiology training?

Future Goals of CVT Section

- Increase collaboration with sub-specialty fellowship programs (creation of specific workgroups)
- Increase and strengthen collaboration with Program Coordinators and Program Administrators in several projects
- Foster collaborative education research (multi-institutional)
- Create web-based training resources housed at ACC for professional development of new PDs and APDs



Questions



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