



FLORIDA ATLANTIC UNIVERSITY
Board of Trustees

Item: AS: I-1

COMMITTEE ON ACADEMIC AND STUDENT AFFAIRS

Tuesday, February 17, 2026

SUBJECT: GRADUATE MEDICAL EDUCATION REPORT ON RESIDENCIES AND FELLOWSHIPS (ACGME REQUIREMENT)

PROPOSED COMMITTEE ACTION

No action is necessary. This item is only informational.

BACKGROUND INFORMATION

Florida Atlantic University's Charles E. Schmidt College of Medicine is the institutional sponsor of graduate medical education programs (i.e. residencies and fellowships) accredited by the Accreditation Council for Graduate Medical Education (ACGME). This includes the ongoing commitment to provide the necessary educational, financial, physical and human resources needed to comply with all applicable ACGME and specialty board requirements related to these programs. The institution has appointed a Designated Institutional Official (DIO) and Graduate Medical Education Committee (GMEC) that are responsible for oversight of all programs and compliance with the ACGME institutional, common and specialty specific program requirements. As part of the accreditation process, ACGME requires that the FAU Board of Trustees receive annual reports from the DIO regarding graduate medical education programs. No action is necessary, as this is purely an informational item. The College will inform ACGME the University BOT has received these documents, so that it can be noted in the agency's records.

IMPLEMENTATION PLAN/DATE

N/A

FISCAL IMPLICATIONS

N/A

Supporting Documentation: Annual GME Report for 2024-2025

Presented by: Dr. Lewis Nelson, MD, Dean of Medicine

Phone: 561-297-4341

Annual Institutional Review 2024-2025: Executive Summary for the FAU Board of Trustees

Background

The Accreditation Council for Graduate Medical Education (ACGME) requires that each Sponsoring Institution’s Graduate Medical Education Committee (GMEC) perform an annual institutional review (AIR) to demonstrate its oversight of institutional accreditation. The Designated Institutional Official (DIO) must annually submit a written executive summary of the AIR to the Sponsoring Institution’s Governing Body, including a summary of institutional performance indicators and a list of action plans and performance monitoring procedures resulting from the AIR.

Annual Review of Institutional Performance Indicators

The GMEC conducted its annual review of accredited programs for the 2024-2025 academic year. The DIO (Dr. Clayton) presented a summary of four performance indicators: the most recent ACGME Institutional Letter of Notification, 2025 Program Accreditation Status and Citations, 2025 ACGME Surveys of Residents & Core Faculty, and 2024-25 Annual Program Evaluation Indicators.

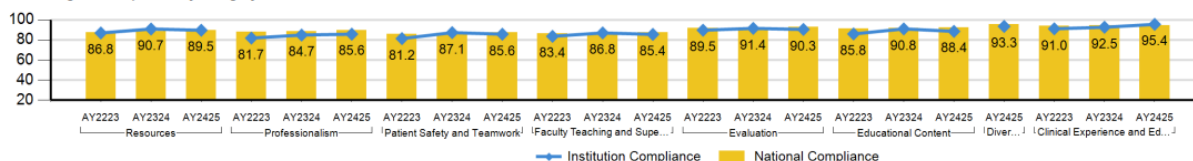
1. The Institutional Letter of Notification was received on 3/14/25 with an effective date of 1/13/25. The ACGME Institutional Review Committee (IRC) extended the four previously issued citations in the areas of oversight, review and approval, and Special Review. Updated responses to these citations, all clerical in nature, were submitted to the IRC in August as part of the annual update. Most recent meeting decision notification of Continued Accreditation effective 1/12/26; detailed letter pending).
2. The table below summarizes the accreditation status and citations of FAU’s current GME programs.

Program	Accreditation Status*	Citations	Next Review
Sponsoring Institution	Continued 1/13/25	4	Annual
Internal Medicine	Continued 1/24/25	0	Annual
General Surgery	Continued 1/16/25	4	Annual
Emergency Medicine	Continued 1/15/25	0	Annual
Psychiatry	Continued 2/7/25	0	Annual
Neurology	Continued with warning 1/23/25	4	Annual
Cardiovascular Diseases	Continued 1/19/25	0	Annual
Geriatric Medicine	Continued 1/24/25	0	Annual
Hospice-Palliative Medicine	Continued 1/24/25	0	Annual
Vascular Surgery	Continued 1/16/25	0	Annual
Pulmonary & Critical Care Medicine	Continued 9/12/25	0	Annual

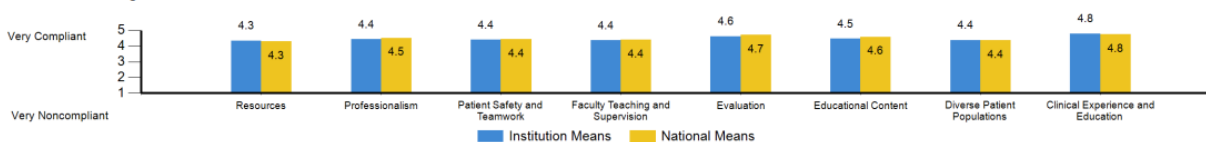
*Continued Accreditation is subject to annual renewal with extension, additional or removal of citations based upon a dashboard of metrics, until the scheduled 10-year self-study and site visit.

- The ACGME surveyed residents and fellows in the eight areas of Resources, Professionalism, Patient Safety and Teamwork, Faculty Teaching and Supervision, Evaluation, Educational Content, Diverse Patient Populations and Clinical Experience and Education. Compliance remained steady in all areas overall. Results for the resident/fellow surveys for Geriatric Medicine, Hospice and Palliative Medicine, Vascular Surgery and Pulmonary Critical Care Medicine were not provided, as they have fewer than four trainees.

Total Percentage of Compliance by Category



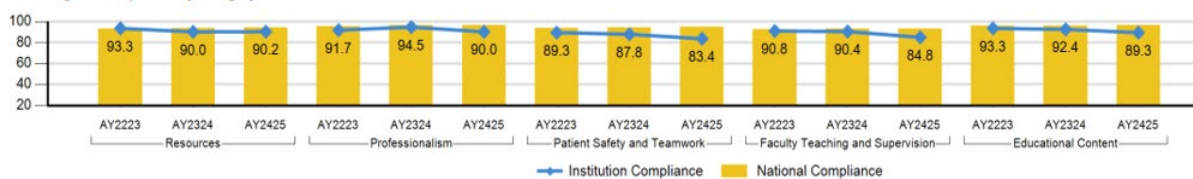
Institution Means at-a-glance



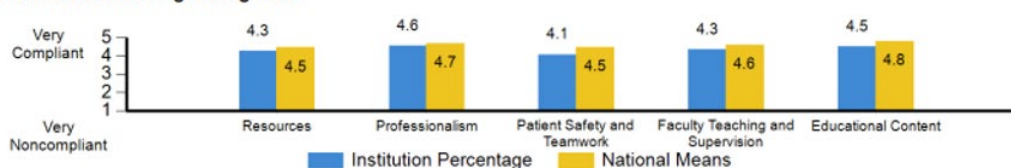
Program Directors are reviewing their program-specific ratings and feedback to inform individualized action plans as well as institution-wide solutions.

During the same period, core faculty were surveyed in the five areas of Resources, Professionalism, Patient Safety and Teamwork, Faculty Teaching and Supervision, and Educational Content. This survey conducted between February and April 2025 showed minimal decrease in most domains and ratings slightly below national means.

Total Percentage of Compliance by Category



Institution Percentage at-a-glance



- Each residency or fellowship program was required by the ACGME to conduct an Annual Program Evaluation (APE) including 25 indicators approved by the GMEC. The GMEC reviewed APE trends across programs.

Graduating Residents & Fellows (2025)

	Remaining in Florida	Remaining in Palm Beach County	Fellowship	FAU Fellowship	Hired by FAU Clinical Sites/Hospital
Internal Medicine	13 (57%)	1 (4%)	7 (30%)	0 (0%)	1 (4%)
General Surgery	0 (0%)	0 (0%)	4 (80%)	0 (0%)	0 (0%)
Emergency Medicine	3 (60%)	1 (20%)	1 (20%)	0 (0%)	1 (20%)
Cardiovascular Disease	1 (50%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Neurology	2 (67%)	1 (33%)	2 (67%)	0 (0%)	1 (33%)
Psychiatry	1 (25%)	0 (0%)	3 (75%)	0 (0%)	0 (0%)
Hospice & Palliative Medicine	1 (100%)	1 (100%)	0 (0%)	0 (0%)	0 (0%)
Geriatric Medicine	1 (100%)	1 (100%)	0 (0%)	0 (0%)	0 (0%)
Vascular Surgery	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Of Total Graduates (45)	22 (49%)	5 (11%)	17 (38%)	0 (0%)	3 (7%)

Of a total of 45 residents and fellows completing training, 33% entered subspecialty fellowship training, and 3 graduates were hired into FAU Clinical sites/hospitals.

Institutional Action Plans and Monitoring Procedures

Four institutional action plans were monitored by the GMEC during 2024-2025.

1. Track Outcomes and Early Identify Need for Remediation: The Outcomes and Monitoring Subcommittee (OMS), established in 2020, continued meeting during the 2024–25 academic year. It recommended performance indicators based on prior-year data trends. Monthly data collection identified needs for special monitoring and/or internal review and informed academic year 2025-26 action plans. Monitoring of trainee leaves of absences was added as a part of oversight. ACGME launched a new product within its accreditation data system (ACGME CLOUD Analytics) in March 2025.
2. Improve and Sustain Resident/Fellow Well-Being: The Subcommittee met monthly, and efforts included tracking trends in the ACGME national well-being surveys of faculty, trainees, and administrators and making recommendations for mitigating stressor domains in financial, emotional, vocational, or mental areas. Current listed benefits and resources were reviewed and evaluated for availability, utility, and effectiveness. Implemented MedOwls as a centralized communication and community forum to enhance connection and peer support across fellowship and residency programs. The platform was also leveraged to launch a workforce housing resource page allowing trainees to share available local housing opportunities including postings from outgoing residents and fellows. The initiative aimed to reduce transition related stress, improve access to affordable housing information, and strengthen cross-program communication in community.

3. Identify Resident/Fellow Engagement in Quality Improvement and Patient Safety Activities: The GMEC continues to monitor resident and fellow participation in quality and safety activities and initiatives at the clinical sites via the OMS Subcommittee reports. A new Subcommittee Chair was identified as well as new resident representatives for the academic year.
4. Enhance Resident Research Mentoring/Coordination: Following the opening of the Center of Excellence, a new Research Director for Medical Education was hired, and the former mentor began transition of data and resources to the new Director. New Subcommittee resident representatives were identified for the academic year as well, with a new charge of identifying opportunities to increase faculty scholarly activity. The subcommittee will relaunch the resident and fellow research showcase for 2025–26 academic year and is exploring improved methods for tracking trainee and faculty scholarly activity.

Overall, review of the survey data and performance indicators showed noted deficits in areas of Evaluation, Faculty Supervision and Teaching. Recruitment of a permanent General Surgery Program Director continued, and the Psychiatry and Neurology programs adjusted curriculums as indicated in accreditation notification letters. These findings, along with ACGME accreditation notification letters, drive the Institutional Action Plans in the following areas for the 2025-2026 academic year:

1. Continuation of the GMEC subcommittees in Research Mentoring, Quality Improvement and Patient Safety, Well-being, and the Institutional Evaluation Subcommittee (formerly the Outcomes and Monitoring Subcommittee) to address concerns.
 - a. Track outcomes and identify early any need for remediation: Institutional Evaluation Subcommittee (IES) will implement an enhanced institutional review process for all GME programs including a structured score card designed to longitudinally track program performance indicators and ACGME survey trends with the assistance of ACGME CLOUD Analytics.
 - b. Expand the GMEC Well-being Subcommittee scope to include systematic review of schedule compression, jeopardy utilization, and sick leave data.
 - c. Quality Improvement and Patient Safety Education (Subcommittee) engage with quality and risk departments at hospital sites to develop a mock root cause analysis for all learners; increase cross-discipline patient safety conferences among trainees in all programs.
 - d. Support and advance faculty and trainee research by providing centralized institutional mentorship, project guidance, and oversight through the Research Subcommittee which is led by the Director of Research for Medical Education.
2. Special Reviews – Complete special reviews of the Vascular Surgery and Psychiatry programs with regular updates to the GMEC.
3. Revision of institutional and program policies to clarify incident reporting mechanisms, evaluation processes, supervision and teaching expectations.

Florida Atlantic University

Consortium Board of Directors

GME Annual Institutional Review Summary

AY 2024-2025

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Accreditation Council for
Graduate Medical Education

Institutional Requirements

- 1.14. The GMEC must demonstrate effective oversight of the Sponsoring Institution's accreditation through an Annual Institutional Review (AIR). (Outcome)
 - 1.14.a. The GMEC must identify institutional performance indicators for the AIR, to include, at a minimum: (Core)
 - 1.14.a.1. the **most recent ACGME institutional letter of notification**; (Core)
 - 1.14.a.2. **results of ACGME surveys** of residents/fellows and core faculty members; and, (Core)
 - 1.14.a.3. each of its ACGME-accredited programs' ACGME accreditation information, including **accreditation and recognition statuses and citations**. (Core)
- The 24-25 AIR Report Executive Summary will be distributed for your record.

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Current Status of FAU's Graduate Medical Education Programs

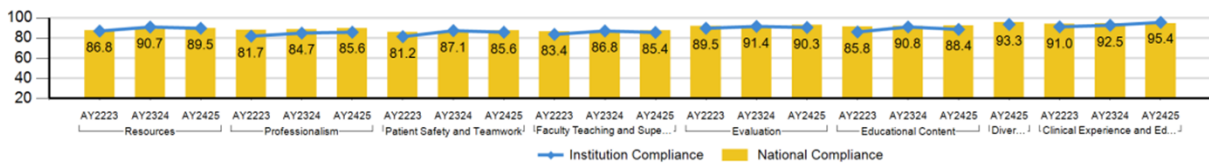
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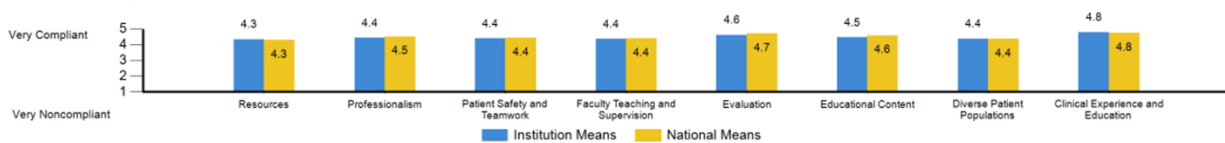
3 year survey trends: AY 22-23 to AY 24-25

ACGME Residents & Fellows 99% responded (165/166) for AY24-25

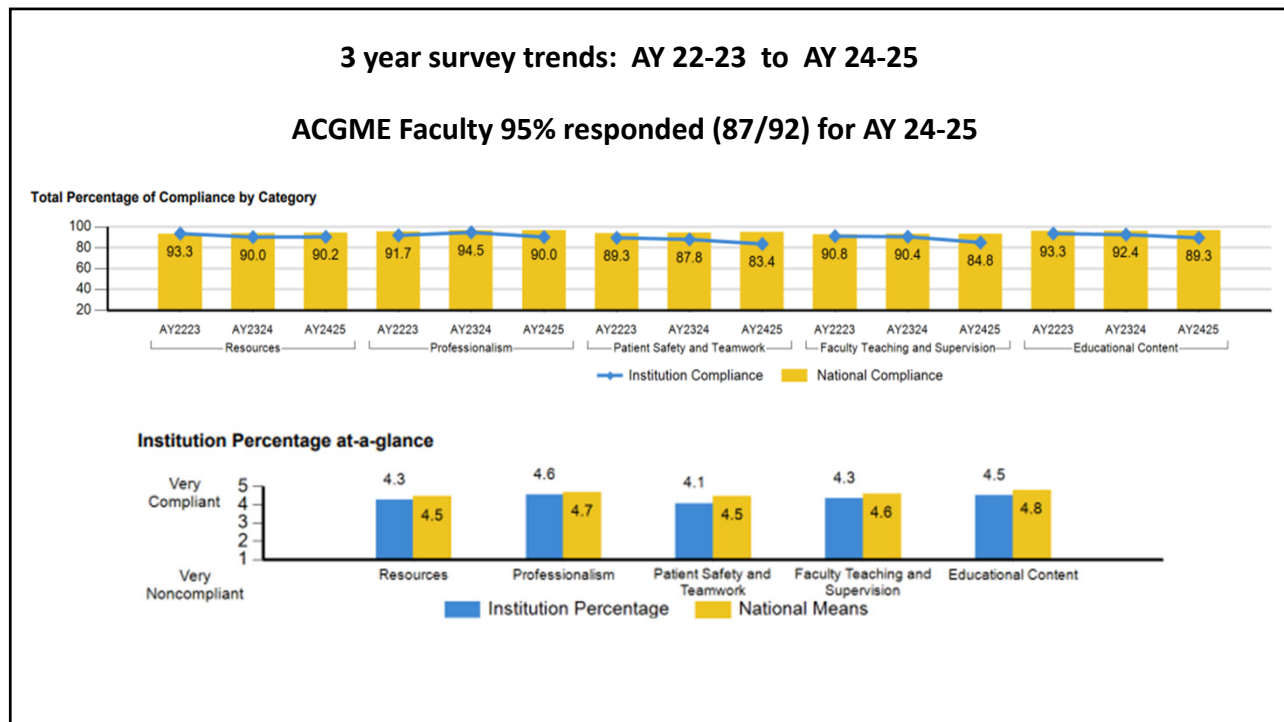
Total Percentage of Compliance by Category



Institution Means at-a-glance



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45 total Graduates for 2025

- **Internal Medicine: 23**
 - 5 (22%) entered into fellowship
- **General Surgery: 5**
 - 4 (80%) entered into fellowship
- **Emergency Medicine: 5**
 - 1 (20%) entered into fellowship
- **Psychiatry: 4**
 - 3 (75%) entered into fellowship
- **Neurology: 3**
 - 2 (67%) entered into fellowship
- **Hospice and Palliative Medicine: 1**
- **Geriatric Medicine: 1**
- **Cardiovascular Disease: 2**
- **Vascular Surgery: 1**

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Graduating Residents & Fellows (2025)

	Remaining in Florida	Fellowship	FAU Fellowship	Hired by FAU Clinical Sites/Hospital
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Of Total Graduates (45)	22 (49%)	5 (11%)	17 (38%)	3 (7%)

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2024-25 Institutional Action Plans & Monitoring

- Track outcomes and early identify need for remediation: Outcomes and Monitoring Subcommittee (OMS)** - Continue to track Program trends - Monitoring of trainee leaves of absences was added as a part of oversight. The subcommittee and GME office will implement an "annual program review scorecard" to guide programs with their annual program evaluations (APEs), action plans and annual updates to the ACGME. - Monthly reporting.
Note: Introduction of ACGME Cloud | Analytics product (March 2025)
- Improve and Sustain Resident/Fellow Well-Being: Resident/Fellow Well-Being Subcommittee**— Review and evaluation of trainee benefits and wellness resources in alignment with well-being survey results - Quarterly reporting
- Identify Resident/Fellow engagement in Quality Improvement and Patient Safety activities: Quality Improvement and Patient Safety Education (Subcommittee)** - Develop recommendations for compliance with new/revised IR's-Quarterly reporting
- Enhance Resident Research Mentoring/Coordination: Resident/Fellow Research Subcommittee**- Identify opportunities to increase Faculty scholarly activity under new subcommittee leadership and member roster- Quarterly reporting
- Remediate struggling Programs: Special Reviews** – Neurology [Convened August 21, 2023/last update May 2025], Vascular Surgery [Convened February 17, 2025]

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2025-26 Institutional Action Plans & Monitoring

1. Continuation of the GMEC subcommittees in Research Mentoring, Quality Improvement and Patient Safety, Well-being and the Institutional Evaluation Subcommittee (formerly the Outcomes and Monitoring Subcommittee) to address concerns.
 - a. **Track outcomes and early identify need for remediation: Institutional Evaluation Subcommittee (IES) [Formerly the Outcomes and Monitoring Subcommittee (OMS)]**- Using the Program Scorecards to closely follow-up on programs identified to meet higher level of support and tracking of major changes. Continue to track Program trends - Monthly reporting – improved feedback mechanism for GME office and programs on APes and action plans
 - b. **Improve and sustain Resident/Fellow Well-Being: Resident/Fellow Well-Being Subcommittee**– Expanding systemic review of schedule compression, jeopardy utilization, and sick leave data; identification of new wellness resources and funding opportunities- Quarterly reporting
 - c. **Increase Resident/Fellow engagement in Quality Improvement and Patient Safety activities: Quality Improvement and Patient Safety Education Subcommittee** - Engage with quality and risk departments at hospital sites to develop a Mock RCA for all learners; Increase Patient Safety conferences among trainees in all programs- Quarterly reporting
 - d. **Support and advance faculty and trainee research: Resident Research Mentoring/Coordination Subcommittee**: - Identify opportunities to increase Faculty scholarly activity – Reinstigate the Resident/Fellow showcase - Quarterly reporting
2. Special Reviews – Neurology [next update February 2026], Vascular Surgery [next update February 2026], Psychiatry [Convened July 21, 2025; next update February 2026]
3. Revision of institutional and program policies to clarify incident reporting mechanisms, evaluation processes, and supervision and teaching expectations.


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ACGME Requirements Major Changes


- ❖ Major revisions to the ACGME Institutional and Common Program Requirements were paused. Surveys distributed to collect public comment.
- ❖ Fall of 2025, the ACGME distributed Surveys to collect stakeholder comments.
- ❖ DEI requirements were eliminated from current-in-effect requirements.
- ❖ Self-Study for Programs was eliminated; Institutional Self-study still expected but not formal. Next FAU SI Site Visit 2028.

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Next Steps




WRITTEN EXECUTIVE SUMMARY TO THE BOARD OF TRUSTEES FOR FEBRUARY 2026 AGENDA.



PROGRAMS UPDATE ADS IN REAL-TIME WITH MAJOR CHANGES.

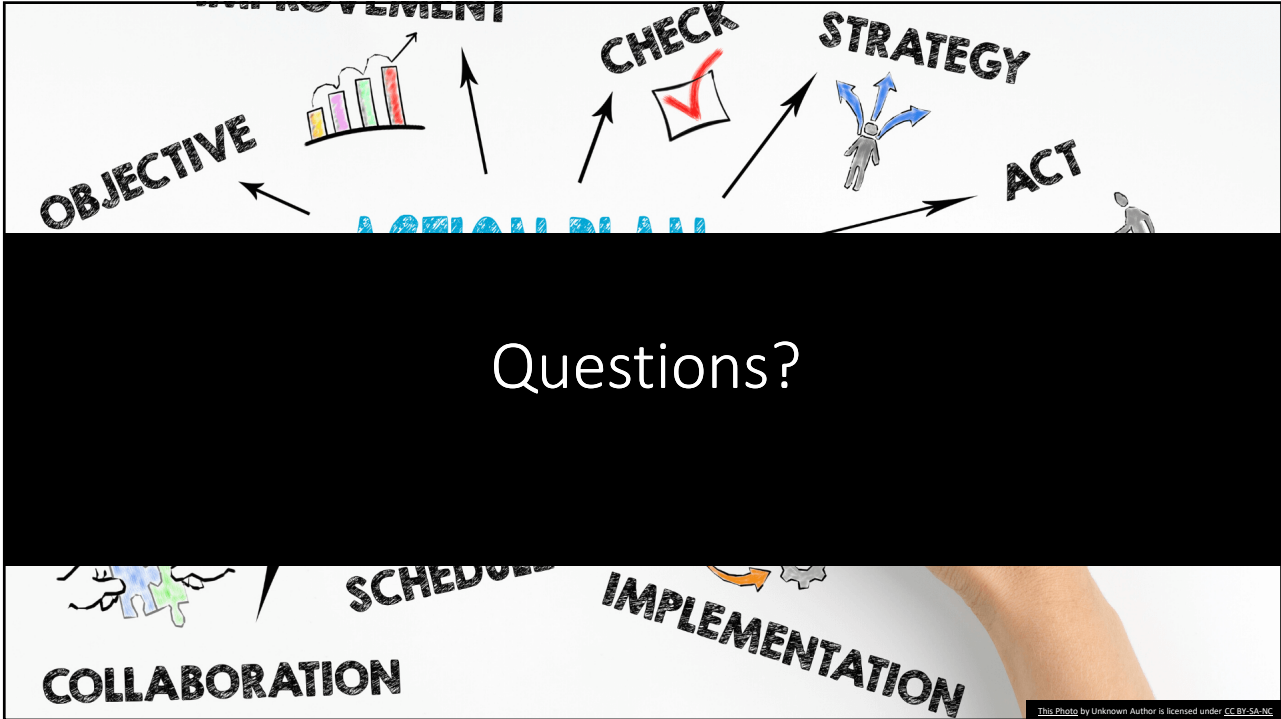


SPECIAL REVIEW UPDATES TO THE GMCC ONGOING.



EXPLORATION OF ACME CLOUD | ANALYTICS FOR DEEPER TRENDING AND PATTERNS AND PROGRAM DEVELOPMENT OPPORTUNITIES

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Questions?

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