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August 13, 2019

Mary Lieh-Lai, MD
Senior Vice President, Medical Accreditation
Accreditation Council for Graduate Medical Education
401 North Michigan Avenue, Suite 2000
Chicago, IL 60611

Dear Dr. Leih-Lai,

On behalf of the Board of Directors of the Association of Pulmonary and Critical Care Medicine Program Directors, representing 95% of all ACGME accredited Pulmonary, Critical Care Medicine and Pulmonary Critical Care Medicine Fellowship Programs, we would like to express our objections to the 2019 revisions of the required program annual update on WebADS.

The information required for the annual update has slowly increased. This year, however, the required information has expanded substantially. There are 15 new questions that each require a narrative response describing processes in place to meet specific common program requirements. Additionally, many of the questions refer to *institutional*, and not *divisional*, resources or responsibilities which we feel could be addressed at CLER visits.

The APCCMPD appreciates the ACGME's efforts, as you described in your 2012 New England Journal article, to evolve beyond reductionist regulatory compliance and processes and the onerous paperwork burden that often accompanies it. The NAS, to date, has fulfilled much of its promise to focus on outcomes, and not process, allowing programs to individualize their unique missions, while reducing that paperwork. It was generally heralded as focusing on what matters while reducing administrative burden for postgraduate programs. It has been largely successful in fostering cooperation between program directors and the ACGME toward the common goal of making each program the best it can be. We recognize that part of this change includes more frequent reporting by institutions and programs in the form of annual fellow and faculty surveys, updates, Milestones, and CLER visits. However, this year's annual update seems to be a step backwards, reminiscent of the PIFs of years past.

As you may also know, this is the busiest time of the year for program directors. Immediately after evaluating and meeting with all our trainees, entering their Milestones and seeing our graduates off, we dive into orientation, on-boarding, boot camp training and the even more diligent supervision of our new trainees. Further, for directors of Internal Medicine fellowships the new application season commences on July 15. During a time of year when our time is tightly scheduled, these changes to this year's annual update have come as a

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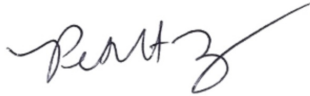
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surprise. Many Program Directors have few working hours in which to complete it.

The Board of Directors of the Association of Pulmonary and Critical Care Medicine Program Directors is writing this initial letter on behalf of our membership. We would welcome the opportunity to provide more specific feedback and recommendations to improve the WebADS requirements, making the process more useful and efficient for all.

We do look forward to hearing from you and working with you further on this matter.

Sincerely,



Peter Lenz, MD, MEd
President



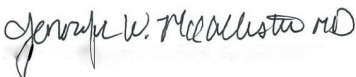
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