



**Accredited Education Institutes**  
American College of Surgeons

## Annual Report Card Overview

During the five-year accreditation cycle, Institutes must maintain compliance with applicable Standards, keep documentation/evidence of compliance, and live by the letter and spirit of those Standards. To retain its accredited status, Institutes must pay an annual fee as well as submit an Annual Compliance Report. Reaccreditation occurs at the end of the five years, following the submission of an application, a virtual or onsite visit by an ACS surveyor, and decision by the Accreditation Review Committee (ARC).

AEIs must complete an Annual Compliance Report to enable the ACS-AEI Program to monitor continuing compliance with the Standards. The Report is not optional and is required for several reasons, including:

- To demonstrate and attest to continued compliance with the Standards
- To keep accredited programs continually aware of the Standards and educated on how to best meet the requirements, particularly when there is a leadership/staff change at the Institute
- To provide accredited programs the opportunity to receive feedback on any changes that may affect their accreditation status and to receive suggested actions to take to maintain compliance with the Standards
- To provide accredited programs with data to help them determine how they are performing as compared to their peers

While the Annual Compliance Report asks for data and information related to all the [Accreditation Standards and Criteria](#), it does not address every aspect of each Criterion. Instead, it focuses on the primary components of compliance and is designed to complement, rather than duplicate, the more detailed reaccreditation application. After a review by the ARC, AEIs receive an annual Report Card that indicates whether the accreditation Criteria are being maintained. In limited situations, the Annual Compliance Report may provide information leading to a progress report after the ARC review, if the Institute fails to respond or its response demonstrates a lack of maintenance of the Standards.

We encourage Institutes to use this Report Card as a reminder of how to meet the accreditation requirements throughout the entire five-year accreditation term and how to prepare for reaccreditation. Please feel free to contact [Cathy Sormalis](#), Senior Manager of the AEI Program, with questions about the Annual Compliance Report, the Report Card, or any other aspects of accreditation.

With best wishes,

Staff of the AEI Program

# Annual Report Card

Name of AEI: **Rocky Vista University's Institute of Medical and Surgical Simulation**

Today's Date: **June 24, 2024**

Accreditation Level: **Comprehensive**

Accreditation Expiration: **6/30/2027**

*All ratings and comments in this report are derived from self-reporting from the Accredited Education Institute (AEI). The Annual Compliance Report does not include review of an application or a site visit. The reporting period spans the last twelve months.*

CRITERIA	RATING	COMMENTS
RATING KEY: <b>Y</b> Criterion Maintained <b>N</b> Criterion Not Maintained <b>I</b> Criterion Maintained, But Requires Attention		
1.1 <b>Education Institute Director</b>	Y	The AEI Institute Director continued to meet the requirements as outlined in the Criterion. If the Director changed since last year, the AEI reported the change, provided his/her CV, submitted the verification form, uploaded a revised organizational chart, and updated the Portal.
1.2 <b>Education Institute Surgical Director</b>	Y	The AEI Surgical Director continued to meet the requirements as outlined in the Criterion. If the Director changed since last year, the AEI reported the change, provided his/her CV, submitted the verification form, uploaded a revised organizational chart, and updated the Portal.
1.3 <b>Administrative and Support Staff</b>	Y	The AEI Administrative and Support staff continued to meet the requirements as outlined in the Criterion. If the Administrator changed since last year, the AEI reported the change and provided an updated organizational chart. All contacts are also up to date in the AEI's Portal.
2.1 <b>Statement of Purpose</b>	Y	The statement of purpose was reviewed at the oversight committee meetings that occurred last year to ensure the Institute was meeting its mission. If the statement of purpose changed, it was reported.
2.2 <b>Ongoing Financial Resources and Support</b>	Y	The AEI reported the amount of income received and expenses incurred since last year. If income and expenses were not roughly equivalent, an explanation was provided.
2.3 <b>Oversight Committee</b>	Y	The AEI's oversight committee met at least twice last year to help make strategic decisions; to maintain authority over curricular offerings; to evaluate the AEI's effectiveness in meeting its mission; and to review the accreditation requirements to determine if the standards are being met. Minutes were kept, which reflect how the committee performs the stated functions.
2.4 <b>Organizational Structure</b>	Y	If the organizational structure of the AEI or parent institution changed since last year, they were reported and reflected in a revised organizational chart.
3.1 <b>Accreditation</b>	Y	The AEI remained accredited by one of the following bodies: LCME;ACGME; ACCME; Royal College of Physicians and Surgeons of Canada; or an equivalent accrediting body for International AEs.
3.2 <b>Learners</b>	Y	The AEI continued to track the required elements as identified in the Criterion. <b>Reminder:</b> Maintain your List of Activities template on a yearly basis.
3.3 <b>Space Requirements</b>	Y	The AEI continued to meet the space requirements outlined in the Criterion. Any increases or decreases in space last year were reported.
3.4 <b>Device Inventory</b>	Y	The AEI reported the types of simulators it currently has and indicated if any new simulators were acquired last year.

4.1	<b>Curriculum</b>	Y	If any new curricula were reported, the AEI utilized a course intake template or a course development form to create the new curricula, which included the required steps of curriculum development as stated in the Criterion. As a reminder, curricula can be developed within the AEI or adapted from more standardized curricula. At least two curricula must be developed or adapted during each 5-year accreditation cycle.
4.2	<b>Selection of Educational Methods and Models</b>	Y	The AEI reviewed its curricula last year to determine effectiveness and need for changes.
4.3	<b>Domains of Education</b>	Y	The AEI continued to provide education and training to address each of the noted domains: cognitive, psychomotor, affective and team training. Only Comprehensive AEIs are required to provide team training.
4.4	<b>Assessment</b>	Y	The AEI continued to evaluate the effectiveness of its education through learner assessments; faculty assessments; course evaluations completed by the learners; and long-term follow up of learners.
4.5	<b>Faculty Development</b>	Y	The AEI continued to offer faculty development activities and maintained documentation of these activities. <b>Reminder:</b> Keep records of training dates; objectives; methods and names of faculty participants.
5.1	<b>Research or Scholarly Activities in Simulation-Based Education</b>	Y	The AEI continued to be involved in simulation-based research and scholarly activities and indicated which types of activities it was involved in last year. This Criterion is only required for Comprehensive AEIs.
5.2	<b>Annual Compliance Reports</b>	Y	The AEI acknowledged the requirement to submit annual compliance reports.
5.3	<b>Involvement in the Consortium of ACS-Accredited Education Institutes</b>	Y	The AEI continued to be involved in the AEI Consortium and reported how that was achieved, i.e., through collaborative projects, attendance at the ACS Surgical Simulation Summit, AEI committees and/or other ways not stated in the Criterion.