

THE SOCIETY OF NEUROLOGICAL SURGEONS

Committee on Advanced Subspecialty Training (CAST) Charter

Approved by SNS Executive Council June 23, 2023

The following document represents the Charter for the Society of Neurological Surgeons (SNS) Committee on Advanced Subspecialty Training (CAST) based on Article III (Committees of the Society), Section A (Standing Committees), Sub-section 4 (Committee on Advanced Subspecialty Training (CAST)) of the SNS Bylaws:

The Committee on Advanced Subspecialty Training (CAST) will be comprised of a Chair, a Chair-elect, and eight additional members. The membership of CAST will be appointed by the Executive Council from the SNS, Neuroendovascular Surgery Advisory Committee (NESAC) and (Neurocritical Care Trauma Advisory Committee) NCTAC membership. Terms of service on CAST will be staggered among the members and will be for two years with one renewal option for a maximum term of 4 years.

The terms of the NESAC and NCTAC members of CAST will coincide with their terms as Chair of NESAC and Chair of NCTAC. The Chair of CAST will attend the SNS Executive Council meetings for the purpose of communicating CAST deliberations and facilitating Executive Council oversight of CAST activities. Every two years, the Executive Council will appoint a current CAST member as the CAST Chair-elect. This member will serve on CAST for an additional four years, two as Chair-elect and two as Chair. The Chair-elect of CAST will serve as the principal liaison to the CAST office for oversight of ongoing operations and accreditation activities.

CAST will be responsible for accreditation of subspecialty training fellowships and for development and updating of subspecialty training requirements. Additionally, this Committee will have responsibility for promulgating study and analysis of outcomes relative to neurosurgical subspecialty training and when necessary, developing and monitoring programs for a neurosurgery fellowship match.

I. Principles Pertaining to Neurosurgical Subspecialty Training:

- A. Completion of Accreditation Council for Graduate Medical Education (ACGME) approved residency training is sufficient to allow individuals to practice neurosurgery. Post-residency fellowship training is not required for either competent practice or reimbursement for delivery of neurosurgical patient care within the definition of neurosurgery promulgated by the ABNS and ACGME Review Committee for Neurological Surgery (RC).

- B. The development and management of accreditation of neurosurgical fellowships by the SNS through the CAST structure is in the best interest of neurosurgery and the public by helping to ensure the quality of the education experience.
- C. “Fellowships” may either be enfolded or a post-graduate subspecialty training experience. Fellowships are usually one year in duration, but in certain instances may be shorter or longer as determined by the body of knowledge and the skills to be learned. Both types of fellowships are of equivalent and sufficient depth and breadth to provide a higher level of subspecialty expertise than that achieved during the usual core residency training. Enfolded fellowships must comply with requirements set forth by the ACGME for residency programs as well as the requirements set forth by the ABNS for future certification. This includes the possibility of Recognition of Focused Practice (RFP) by the American Board of Medical Specialties (ABMS).
- D. Training requirements for the aforementioned fellowships and fellows are established by CAST in consultation with the respective AANS/CNS Joint Sections. The duration and components of training, facility requirements, faculty, affiliated services, and minimum case material will be specified. Each fellowship must include a curriculum for knowledge and procedural objectives to be achieved by the fellow.
- E. Fellowships should include a significant emphasis on scholarly activity, and fellowship directors should provide specific expectations to fellows entering the fellowship with respect to academic performance.

II. Committee Structure & Responsibilities

CAST will function under and be responsible to the Executive Council of the SNS. CAST will be comprised of a Chair, a Chair-elect, and representatives of each of the following subspecialties:

- 1) Cerebrovascular
- 2) CNS Endovascular
- 3) Neurocritical Care and Neurotrauma
- 4) Neurosurgical Oncology
- 5) Pediatric Neurosurgery
- 6) Skull Base Neurosurgery
- 7) Spine and Peripheral Nerve
- 8) Stereotactic and Functional

CAST members will be appointed by the Executive Council, with the exception of the CNS Endovascular and Neurocritical Care/Neurotrauma representatives, who will be the Chairs of the NESAC and NCTAC, irrespective of specialty. Terms of service on CAST will be staggered among the members and will be for two years with one renewal option for a maximum term of four years, with the exception being a CAST member who is chosen to be Chair-elect (see

below). The terms of the NESAC and NCTAC members will coincide with their terms as Chair of NESAC and NCTAC. Additional invited members may be added based on the needs of the Committee.

Fellowships in CNS Endovascular will be reviewed by the NESAC, a CAST subcommittee, and will be subject to final approval by CAST. The Chair of NESAC will be the CAST member representing CNS Endovascular surgery subspecialty. NESAC membership will reflect the scope of CNS Endovascular surgery with representation by neurosurgery, neurology, and radiology. Terms of membership for NESAC will be the same as for CAST.

Fellowships in Neurocritical Care and Neurotrauma will be reviewed by NCTAC, a CAST subcommittee, and will be subject to final approval by CAST. The Chair of NCTAC will be the CAST member representing Neurocritical Care and Neurotrauma subspecialties. NCTAC membership will reflect the scope of neurocritical care and neurotrauma with representation by neurosurgery, neurology, and anesthesiology. Terms of membership for NCTAC will be the same as for CAST.

Every two years, the Executive Council will appoint a current CAST member as the CAST Chair-elect. This member will serve on CAST for an additional four years, two as Chair-elect and two as Chair. The CAST Chair will have responsibility for directing the Committee's activities and convening meetings as necessary to meet its responsibilities. The CAST Chair will attend the SNS Executive Council meetings for the purpose of communicating CAST deliberations and facilitating Executive Council oversight of CAST activities. The Chair-elect of CAST will oversee CAST Administration to maintain records of CAST deliberations and actions as well as accreditation status and review cycles of accredited fellowships and the certification and certificate status of fellows. CAST Administration will be responsible for pertinent and timely notifications of each fellowship involved in and related to the accreditation process, as well as collecting application fees and maintaining financial records relative to income and disbursements.

The members of CAST will have responsibility for the following:

A. Applications and Training Requirements

CAST will assure that subspecialty training requirements are reviewed and updated at a minimum of every five years, seeking input from the SNS membership, the AANS/CNS Joint Sections and fellowship training directors. It will be the responsibility of CAST members to collate and establish a consensus for final approval of revised requirements by CAST.

B. Appeals

The CAST Chair or Chair-elect will be responsible for managing all accreditation appeals according to the prescribed procedures. If a program wants to appeal a CAST decision, that

program must submit the appeal in writing to CAST Administration within 60 days of the date of the CAST decision.

C. Outcomes

CAST members shall have the responsibility to convene subcommittees for the study of outcomes related to fellowship training.

III. Fellowship Review Committee

There will be a Fellowship Review Committee (FRC) comprised of SNS members and other pertinent specialists as needed with acknowledged interest and active clinical practice in each of the subspecialty areas to assist CAST in the review of programs, appeals and development/maintenance of subspecialty training requirements. Members of the FRC will serve without defined terms of service. With input from the respective Joint Section leadership, the Chair or Chair-elect of CAST will appoint FRC members to constitute a panel for assisting in the review of applications for fellowship accreditation and making recommendations to CAST in this regard. Additionally, members of this body may serve in the development and revision of fellowship training requirements as determined by the CAST member responsible for this activity.

IV. Accreditation Process

CAST accreditation is limited to those fellowships which exist within ACGME accredited neurosurgery training programs (or the Canadian equivalent) and have current ACGME Review Committee (RC) authorization for existence of the specific fellowship. An application fee will be paid by the sponsoring program to CAST. Fees will be set by CAST to cover application, review and administration costs. All CAST fees will be subject to review and approval by the SNS Executive Council.

Applications for fellowship accreditation will be submitted to the CAST Administrator as per instructions posted on the SNS/CAST website. The CAST Chair or Chair-elect and Administrator will have the discretion to have the review completed by members of the CAST or utilize additional subspecialty reviewers from the appropriate Fellowship Review Committee (FRC). At a minimum, two CAST members or one CAST member and two FRC members must review each application and prepare a critique with accreditation recommendations for discussion and action at the next CAST meeting.

Judgments regarding accreditation will be made based on compliance with the established fellowship training requirements. All deliberations will be in accordance with established policies regarding conflict of interest. A quorum of greater than 50% of CAST members must be present for accreditation decisions. Accreditation decisions will be made by a majority vote of the CAST members present.

CAST may require a site visit by a CAST member to obtain information not adequately represented in the application. The expense of this visit will be predetermined to cover transportation, meal, and lodging expenses as well as an honorarium for the reviewer and will be the responsibility of the sponsoring program's department/division. These arrangements will be made prior to the site visit.

After initial accreditation, review of a fellowship will occur every year by CAST with the submission of an Annual Report by the Fellowship Program. CAST review will result in continued accreditation, probation, or loss of accreditation.

When a CAST accredited subspecialty fellowship makes a significant change in program structure or undergoes major changes in fellowship faculty, especially fellowship program director, the program shall inform the CAST Administrator within three months of the change. Likewise, the CAST Administrator must be informed within six months of major ACGME accreditation rulings regarding the sponsoring residency training program. All of these areas will be part of the annual review of the fellowship program.

V. Appeals

Appeal of a decision by CAST will be submitted in writing to the CAST Administrator. The letter must address specifics in detail. The CAST Chair or Chair-elect will convene an Ad Hoc Appeals Committee to hear the appeal, which may be presented in writing or in person by the fellowship director and/or program chair of the fellowship in question. The Ad Hoc Appeals Committee will consist of three members with expertise in the subspecialty, who have not participated in the original review and have no other conflict of interest. The recommendation of the Ad Hoc Appeals Subcommittee will be presented to CAST for a final decision.

VI. Outcomes

Outcome studies relative to fellowship training will be directed by CAST members so charged. Appropriate areas for review may include review of fellowship training experience, impact of fellowship on residents within the training program, proficiencies and special competencies gained from fellowship training, the role of fellowship training for future practicing and academic neurosurgeons, as well as other outcome issues. These studies and pertinent recommendations will be reported to CAST, the Executive Council and the SNS membership as appropriate.

VII. Fellowship Match

When deemed necessary by a coalition of fellowship program directors and the SNS membership, mechanisms and procedures may be developed or contracted under direction of CAST and the SNS Council for a subspecialty fellowship match. The cost for such a match will be borne equitably by the accredited fellowship programs and not by SNS or CAST.