

2023-2024 Accreditation Annual Report

UNITED COUNCIL
FOR
NEUROLOGIC
SUBSPECIALTIES

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United Council for Neurologic Subspecialties

December 2024

INTRODUCTION

Every fall, data gathered from training program annual reports, accreditation applications, annual fellowship surveys, and program director surveys (as they occur) are provided to the Accreditation Council, program directors, and Board of Directors. These tools are used by UCNS to continuously evaluate the state of its recognized subspecialties, accredited programs, and specifically by the Accreditation Council to set and evaluate accreditation outcomes. During the review, the Accreditation Council assesses its current processes to determine whether adjustments are necessary to improve programs' accreditation experiences.

UCNS first began reporting this data for the 2017-2018 academic year following implementation of annual report submission from programs in 2016. The report presented from 2017 through 2023 contained data from programs currently accredited at the time of writing the report. Therefore, programs lost to attrition were not accounted for in the fellow counts. In addition, fellow information, such as primary board certification and subspecialty certification was updated each year, even if the fellows became certified outside of the four-year certification pathway window for graduates of accredited programs.

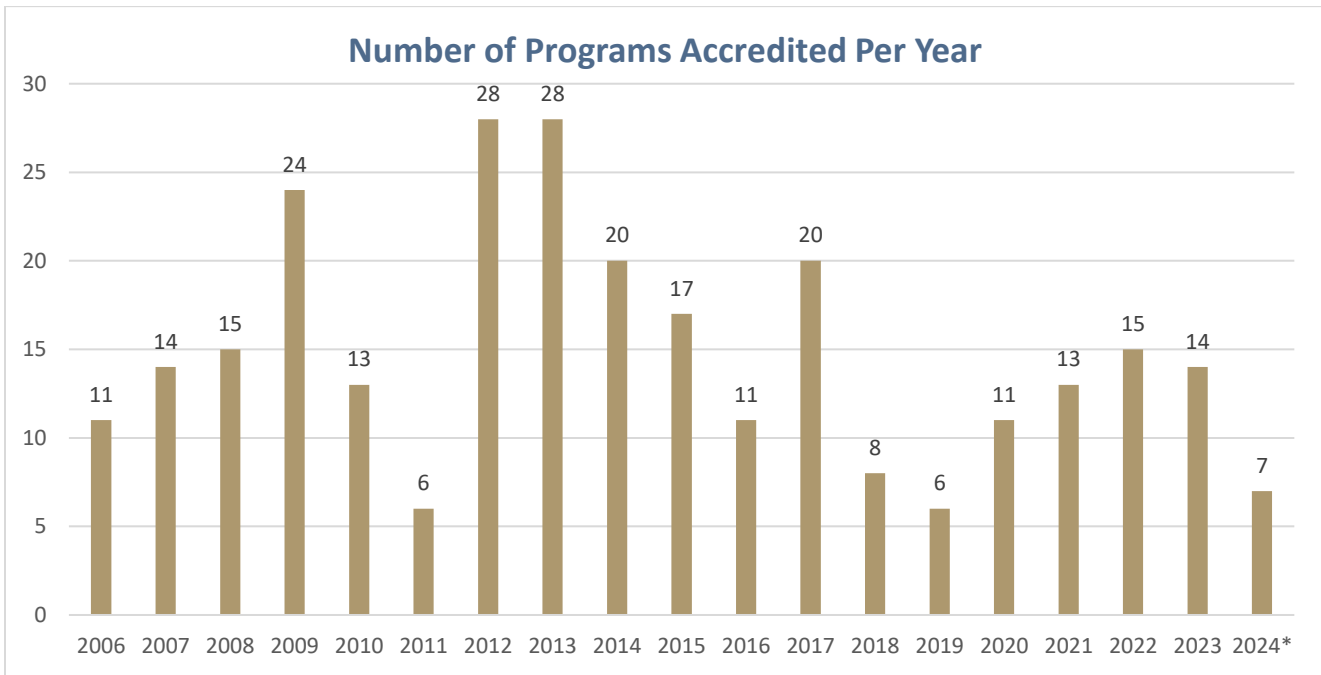
Moving forward, the report format is updated so that all data is presented on a continual basis including fellow data for programs lost to attrition. In addition, fellow certification statuses will be updated for four years only. After four years, fellow certification, if achieved, will not be updated as the fellow was not able to achieve certification as a graduate of an accredited program.

The data presented in this report is through the spring accreditation cycle, June 1, 2024, unless otherwise noted, for the subspecialties of Autonomic Disorders (AD), Behavioral Neurology & Neuropsychiatry (BNNP), Clinical Neuromuscular Pathology (CNMP), Geriatric Neurology (GN), Headache Medicine (HM), Interventional Neurology (IN), Neurocritical Care (NCC), Neonatal Neurocritical Care (NNCC), Neuroimaging (NI), Neuro-oncology (NO), and Neural Repair and Rehabilitation (NRR). It is noted that NRR sunset as a subspecialty in 2019, so data from the subspecialty is limited.

TOTAL PROGRAM GROWTH AND ATTRITION

Accredited Program Growth

Since 2006, UCNS has awarded 281 provisional accreditations to 278 programs in eleven neurologic subspecialties. Three programs have achieved provisional accreditation twice as a result of withdrawing accreditation and resubmitting an application at a later date. As of October 4, 2024, 238 programs are accredited in ten subspecialties representing 38 states, the District of Columbia, and two Canadian provinces. Eight new applications are under review for fall 2024 approval. UCNS-accredited programs are present at a majority of medical institutions with Accreditation Council for Graduate Medical Education (ACGME)-accredited neurology residencies, and 191 of the 238 programs are located within neurology departments. Program leadership (program directors and department chairs) are predominantly neurology based (87% and 82% respectively), with a specific breakdown included in the subspecialty-specific section later in this report. As of October 4, 2024, the growth in the number of accredited programs in all currently recognized subspecialties per year is shown in the chart below. The chart does not include program attrition.



*Additional programs will be reviewed during fall meeting for accreditation December 1

Accredited Program Attrition

Despite continued growth, accreditation attrition has occurred for a variety of reasons, most often due to loss of key leadership or the inability to secure or maintain institutional support or funding. Two programs have been lost due to the sunseting of the subspecialty.

As of October 1, 2024, UCNS has lost 43 programs since 2006 to attrition, with an 85% overall retention rate. The retention rate continues to decrease annually (91% 2020-2021 and 90% 2021-2022, 88% 2022-2023), largely due to an increase in the number of withdrawing NCC programs. Eleven NCC programs have withdrawn accreditation in 2023 and 2024, citing the NCC accreditation option through ACGME. A specific breakdown by year of loss and subspecialty is shown in the table on the next page.

Program Accreditation and Attrition by Year

| Year | Programs Accredited Each Year | Program Attrition Each Year | Cumulative Total Programs |
|--------------|-------------------------------|---------------------------------------|---------------------------|
| 2006 | 11 | 0 | 11 |
| 2007 | 14 | 0 | 25 |
| 2008 | 15 | 0 | 40 |
| 2009 | 24 | 2 (1 HM, 1 BNNP) | 62 |
| 2010 | 13 | 1 (1 BNNP) | 74 |
| 2011 | 6 | 0 | 80 |
| 2012 | 28 | 0 | 108 |
| 2013 | 28 | 3 (1 AD, 1 HM, 1 NI) | 133 |
| 2014 | 20 | 0 | 153 |
| 2015 | 17 | 3 (1 NO, 2 GN) | 167 |
| 2016 | 11 | 1 (1 BNNP) | 177 |
| 2017 | 20 | 2 (2 HM) | 195 |
| 2018 | 8 | 2 (2 NRR) | 201 |
| 2019 | 6 | 5 (1 AD, 1, GN, 1 HM, 1 NCC, 1 NI) | 202 |
| 2020 | 11 | 3 (2 BNNP, 1 HM) | 210 |
| 2021 | 13 | 0 | 223 |
| 2022 | 15 | 4 (1 HM, 1 NCC, 2 NO) | 234 |
| 2023 | 14 | 6 (1AD, 5 NCC) | 242 |
| 2024* | 7 | 11 (1 AD, 3 BNNP, 6 NCC, 1 NI) | 238 |
| Total | 281 | 43 | 238 |

*Additional programs will be reviewed during fall meeting for accreditation December 1

Applications for Initial/Provisional Accreditation

Not all programs that apply for accreditation are successful in achieving accreditation after first review or at all. Because of this, application numbers are not the same as the number of programs accredited during each cycle. Since applications first opened for BNNP in 2005, UCNS has received 298 applications for provisional accreditation. The highest number of applications received in a single cycle for review was during the spring 2008 cycle when 18 applications were received, 11 of which were for NCC. For the purposes of illustrating the number of applications in a given year, the chart on the next page has been simplified showing the number of applications received per calendar year, not broken out by review cycle.

Initial Accreditation Applications Received by Year

| | AD | BNNP | CNMP | GN | HM | IN | NCC | NI | NNCC | NO | NRR | Total |
|--------------|-----------|-----------|----------|----------|-----------|-----------|-----------|----------|----------|-----------|----------|------------|
| 2005 | | 10 | | | | | | | | | | 10 |
| 2006 | | 6 | | | 8 | | | | | | | 14 |
| 2007 | | 3 | | | 2 | | | | | | | 5 |
| 2008 | | 0 | | | 2 | | 15 | 3 | | 6 | | 26 |
| 2009 | | 2 | | | 1 | | 17 | 1 | | 1 | | 22 |
| 2010 | 0 | 0 | | 1 | 0 | | 3 | 0 | | 2 | | 6 |
| 2011 | 0 | 0 | | 0 | 7 | | 6 | 1 | | 2 | | 16 |
| 2012 | 2 | 4 | 0 | 2 | 5 | | 6 | 0 | | 3 | 0 | 22 |
| 2013 | 2 | 5 | 6 | 0 | 4 | | 5 | 0 | | 6 | 1 | 29 |
| 2014 | 1 | 4 | 0 | 2 | 2 | | 2 | 0 | | 7 | 0 | 18 |
| 2015 | 0 | 3 | 0 | 0 | 5 | | 5 | 1 | | 1 | 1 | 16 |
| 2016 | 1 | 2 | 0 | 0 | 1 | | 6 | 1 | | 1 | 0 | 12 |
| 2017 | 0 | 0 | 0 | 2 | 7 | | 6 | 0 | | 4 | 0 | 19 |
| 2018 | 0 | 1 | 0 | 0 | 3 | | 2 | 0 | | 3 | 0 | 9 |
| 2019 | 0 | 2 | 0 | 0 | 2 | | 1 | 0 | | 1 | 0 | 6 |
| 2020 | 1 | 3 | 0 | 0 | 3 | | 3 | 0 | | 1 | | 11 |
| 2021 | 0 | 6 | 0 | 0 | 2 | | 3 | 0 | | 1 | | 12 |
| 2022 | 1 | 2 | 0 | 0 | 5 | 6 | 0 | 0 | | 1 | | 15 |
| 2023 | 1 | 1 | 0 | 0 | 3 | 2 | 1 | 0 | 6 | 1 | | 15 |
| 2024 | 1 | 2 | 0 | 0 | 4 | 2 | 2 | 0 | 2 | 2 | | 15 |
| Total | 10 | 56 | 6 | 7 | 66 | 10 | 83 | 7 | 8 | 43 | 2 | 298 |

As shown, new program application submissions dipped in 2018 and 2019 before rebounding in 2020 and 2021. Applications received per year have been steady at 15 per year for 2022, 2023, and 2024.

ACCREDITED PROGRAM GROWTH BY YEAR PER SUBSPECIALTY

It has been long expected that the growth of programs in existing subspecialties would “plateau,” but when the plateau will occur remains unknown. Three of UCNS’ longest standing subspecialties, BNNP, HM, and NO continue to see program growth outpacing attrition. In particular, HM has shown consistent growth with at least one newly accredited program per year except for 2010. The newest subspecialties, IN and NNCC have shown initial strength in their first review cycles. Conversely, several subspecialties CNMP, NI, and GN, have not seen any program growth since 2013, 2016, and 2017 respectively.

Staff and the Accreditation Council will continue to monitor trends in both program growth and attrition. The table below shows program accreditation growth per year per subspecialty without attrition.

Accredited Program Growth by Year Per Subspecialty

(Does not include attrition)

| Year | AD | BNNP | CNMP | GN | HM | IN | NCC | NNCC | NRR^ | NI | NO | Total |
|--------------|----------|-----------|----------|----------|-----------|-----------|-----------|----------|----------|----------|-----------|------------|
| 2006 | | 11 | | | 0 | | | | | | | 11 |
| 2007 | | 5 | | | 9 | | | | | | | 14 |
| 2008 | | 1 | | | 2 | | 9 | | | 0 | 3 | 15 |
| 2009 | | 1 | | 0 | 1 | | 16 | | 0 | 2 | 4 | 24 |
| 2010 | 0 | 1 | | 1 | 0 | | 8 | | 0 | 1 | 2 | 13 |
| 2011 | 0 | 0 | | 0 | 3 | | 2 | | 0 | 1 | 0 | 6 |
| 2012 | 1 | 4 | 0 | 1 | 8 | | 10 | | 0 | 0 | 4 | 28 |
| 2013 | 2 | 4 | 6 | 1 | 4 | | 4 | | 1 | 0 | 6 | 28 |
| 2014 | 2 | 5 | 0 | 2 | 3 | | 3 | | 0 | 0 | 5 | 20 |
| 2015 | 0 | 3 | 0 | 0 | 5 | | 4 | | 1 | 1 | 3 | 17 |
| 2016 | 1 | 2 | 0 | 0 | 1 | | 5 | | 0 | 1 | 1 | 11 |
| 2017 | 0 | 0 | 0 | 2 | 7 | | 7 | | 0 | 0 | 4 | 20 |
| 2018 | 0 | 1 | 0 | 0 | 3 | | 1 | | 0 | 0 | 3 | 8 |
| 2019 | 0 | 2 | 0 | 0 | 2 | | 1 | | | 0 | 1 | 6 |
| 2020 | 1 | 2 | 0 | 0 | 3 | | 4 | | | 0 | 1 | 11 |
| 2021 | 0 | 7 | 0 | 0 | 2 | | 3 | | | 0 | 1 | 13 |
| 2022 | 1 | 2 | 0 | 0 | 5 | 6 | 0 | | | 0 | 1 | 15 |
| 2023 | 1 | 1 | 0 | 0 | 3 | 2 | 1 | 6 | | 0 | 0 | 14 |
| 2024* | | | | | 2 | 2 | 2 | | | | 1 | 7* |
| Total | 9 | 52 | 6 | 7 | 63 | 10 | 80 | 6 | 2 | 6 | 40 | 281 |

*Additional programs will be reviewed during fall meeting for accreditation December 1

^NRR subspecialty sunset in 2019

The table on the next page illustrates the trend in program growth among subspecialties from 2019 through 2024. Six of the subspecialties saw an overall growth in the number of programs in six years. Two subspecialties saw overall loss and two subspecialties remained stagnant.

Six-Year Accreditation Growth Trend for Accredited Programs

(Total programs by subspecialty by year including attrition)

| Subspecialty | 2019 | 2020 | 2021 | 2022 | 2023 | 2024* | Six-Year Change |
|--------------|------|------|------|------|------|-------|-----------------|
| | | | | | | | # |
| AD | 4 | 5 | 5 | 5 | 6 | 6 | 2 |
| BNNP | 37 | 37 | 44 | 46 | 46 | 46 | 9 |
| CNMP | 6 | 6 | 6 | 6 | 6 | 6 | 0 |
| GN | 4 | 4 | 4 | 4 | 4 | 4 | 0 |
| HM | 43 | 45 | 47 | 51 | 54 | 58 | 15 |
| IN | NA | NA | NA | 6 | 8 | 10 | 10 |
| NCC | 69 | 73 | 76 | 76 | 71 | 66 | -3 |
| NNCC | NA | NA | NA | NA | 6 | 8 | 8 |
| NI | 4 | 4 | 4 | 4 | 4 | 3 | -1 |
| NO | 35 | 36 | 37 | 36 | 36 | 37 | 2 |

**Due to the timing of the report, an updated accounting with 2024 numbers is provided with a six-year change for the Board's report, which has not been yet reviewed by the Accreditation Council.*

INACTIVE STATUS

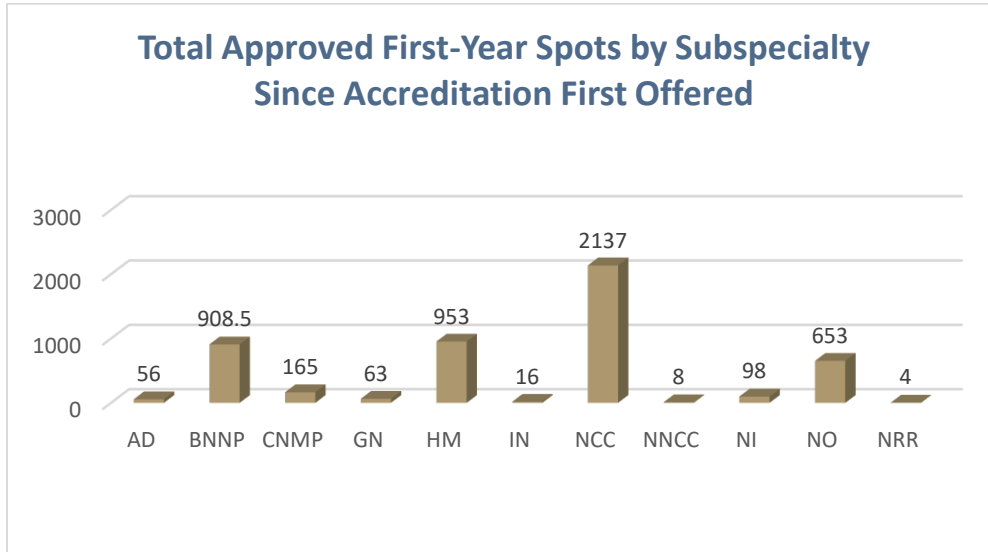
Programs may voluntarily choose *Inactive Status* at any time for a period of not more than two years, renewable once. The most common reason for programs to request inactive status is due to loss of program leadership. Programs must still submit their annual fees, but do not need to submit an annual report or reaccreditation application while inactive. Programs also may not enroll a fellow while inactive. To “reactivate,” a program must submit a reaccreditation application.

Currently, nine programs are in an inactive status as shown in the table below.

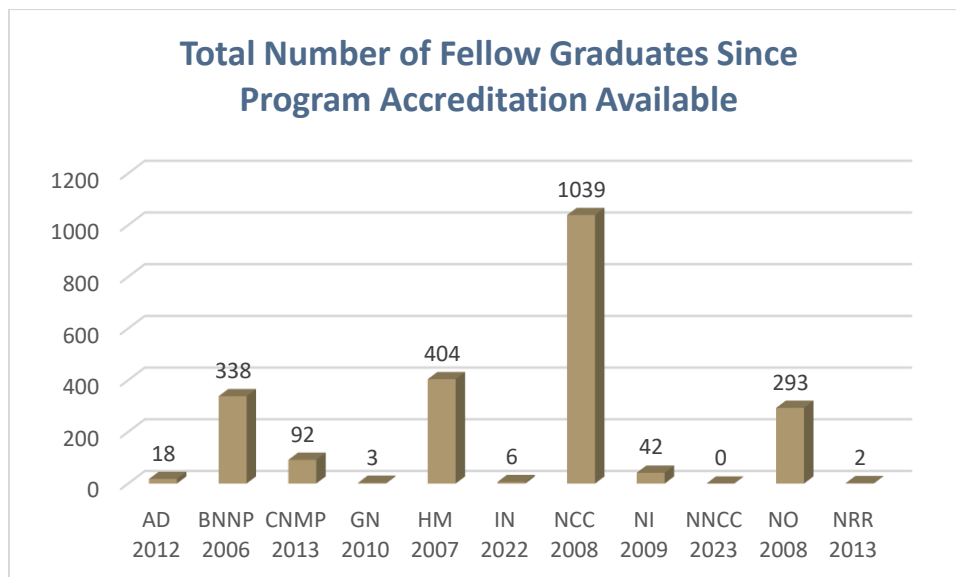
| Subspecialty | Number of Inactive Programs |
|--------------|-----------------------------|
| AD | 0 |
| BNNP | 0 |
| CNMP | 0 |
| GN | 1 |
| HM | 3 |
| IN | 0 |
| NCC | 1 |
| NNCC | 0 |
| NI | 1 |
| NO | 3 |
| NRR | NA |
| Total | 9 |

FELLOWS

Since 2006, a total of 2,233 physicians have filled and graduated from 5,061.5 approved first-year fellowship spots through 2023. This number represents the pipeline for fellowship graduates to seek certification, which is a key measure for subspecialty sustainability. The breakdown of approved first-year fellowship spots by subspecialty is shown in the chart below. A breakdown of the spots by year by subspecialty is included in the subspecialty-specific portion of this report.



The total number of graduates since UCNS-accreditation was implemented through 2023 for each subspecialty is included in the table below, along with the year accreditation was first offered. It is important to note that IN accredited its first programs in 2022 and NNCC in 2023. A table illustrating the program graduates by subspecialty by year is included later in the report, with more specific information given in the subspecialty-specific portion of the report.



A breakdown of the primary specialties and board certifications for the 2,231 graduates is illustrated in the following table. A more specific breakdown per subspecialty follows in the subspecialty-specific portion of the report.

Primary Specialty of Fellowship Graduates

| Primary Specialty | # Grads | Primary Specialty | # Grads | Primary Specialty | # Grads |
|---------------------|---------|----------------------|---------|-------------------|---------|
| Neurology | 1769 | Pediatrics | 6 | Cardiology | 1 |
| Internal Medicine | 140 | Peds/Peds Hem Onc | 5 | Dentistry | 1 |
| Psychiatry | 113 | IM/Geriatric Med | 3 | IM/CCM | 1 |
| Emergency Medicine | 41 | Neurology/Pediatrics | 3 | IM/EM | 1 |
| Neurosurgery | 37 | Neurology/Psychiatry | 3 | IM/Hem-Onc | 1 |
| Child Neurology | 28 | Neuro/Vascular Neuro | 3 | IM/Psych | 1 |
| Anesthesiology | 25 | PMR | 3 | Ophthalmology | 1 |
| Family Medicine | 14 | Surgery | 2 | Pulmonology | 1 |
| IM/Medical Oncology | 12 | Anesthesiology/IM | 1 | Radiology | 1 |
| Neurology/IM | 12 | C Neuro/Pediatrics | 1 | Vascular Surgery | 1 |

Primary Board Certification of Fellowship Graduates

| Primary Certification | # Grads | Primary Certification | # Grads |
|-----------------------|---------|-----------------------|---------|
| ABMS | 2054 | AOA | 12 |
| None | 118 | Other | 1 |
| RCPSA | 45 | Unknown | 1 |

FELLOW ENROLLMENT, COMPLETION, AND UCNS CERTIFICATION

Fellow Enrollment

The information provided for fellow enrollment is limited to first-year enrollment as not all programs offer a second- or third-year option. Historically, most programs offered a one-year program option only; however, over the last three years, one- or two-year programs have become more common. Currently, 96 programs offer one- or two-year options and 91 offer only a one-year option. The remaining program options include two years (42) and a handful of programs offering up to three years (9).

Most of the currently accredited programs (n=109) enroll only one fellow; however, the number of requested fellows per year varies from .5 fellows to six fellows per year. The following table illustrates the number of fellowship spots approved for the 238 programs accredited as of October 4, 2024, including inactive programs. Approved fellowship spots that include a .5 are noted as such because the program has requested a different number of fellows each year (e.g., 1 in odd years and 2 in even years) or because a fellow must complete an entire multiple-year program before the program will enroll another fellow.

| Current Breakdown of UCNS Programs/Fellowship Spots Approved* | |
|---|--------------------|
| Approved Fellowship Spots | Number of Programs |
| 0.5 | 1 |
| 1 | 109 |
| 1.5 | 3 |
| 2 | 81 |
| 2.5 | 2 |
| 3 | 28 |
| 3.5 | 1 |
| 4 | 7 |
| 4.5 | 2 |
| 5 | 3 |
| 6 | 1 |

*Includes programs accredited as of 10/4/2024

The historical number of first-year fellowship spots available per subspecialty per year, including programs lost to attrition and programs in an inactive status through 2023 are as follows:

Available Fellowship Spots by Year by Subspecialty

| Year | AD | BNNP | CNMP | GN | HM | IN | NCC | NNCC | NI | NO | NRR | TOTAL |
|--------------|-----------|--------------|------------|-----------|------------|-----------|-------------|----------|-----------|------------|----------|---------------|
| 2006 | | 23 | | | | | | | | | | 23 |
| 2007 | | 30 | | | 21 | | | | | | | 51 |
| 2008 | | 31 | | | 25 | | 30 | | | 11 | | 97 |
| 2009 | | 31 | | | 26 | | 73 | | 3 | 16.5 | | 149.5 |
| 2010 | | 34 | | 1 | 24 | | 91 | | 5 | 21.5 | | 176.5 |
| 2011 | | 33 | | 1 | 30 | | 95 | | 6 | 21.5 | | 186.5 |
| 2012 | 1 | 36 | | 2 | 41 | | 118.5 | | 6 | 27.5 | | 232 |
| 2013 | 2 | 43 | 15 | 5 | 49 | | 128 | | 6 | 34.5 | 0 | 282.5 |
| 2014 | 4 | 49 | 15 | 8 | 53 | | 132 | | 5 | 40.5 | 0 | 306.5 |
| 2015 | 4 | 55 | 15 | 8 | 62 | | 139.5 | | 7 | 45 | 2 | 337.5 |
| 2016 | 5 | 59 | 15 | 4 | 65 | | 148.5 | | 8 | 46 | 2 | 352.5 |
| 2017 | 5 | 58 | 15 | 6 | 74 | | 162 | | 8 | 52 | 0 | 380 |
| 2018 | 5 | 61 | 15 | 6 | 75 | | 164 | | 8 | 55 | 0 | 389 |
| 2019 | 5 | 64 | 15 | 6 | 77 | | 167 | | 8 | 56 | | 398 |
| 2020 | 5 | 67 | 15 | 5 | 79 | | 172 | | 7 | 57 | | 407 |
| 2021 | 5 | 76 | 15 | 5 | 81 | | 178 | | 7 | 58 | | 425 |
| 2022 | 7 | 79 | 15 | 3 | 87 | 7 | 176 | | 7 | 55.5 | | 436.5 |
| 2023 | 8 | 79.5 | 15 | 3 | 84 | 9 | 162.5 | 8 | 7 | 55.5 | | 431.5 |
| TOTAL | 56 | 908.5 | 165 | 63 | 953 | 16 | 2137 | 8 | 98 | 653 | 4 | 5061.5 |

It should be noted that, as illustrated in the table above, UCNS saw its first decline in the number of approved fellowship spots from year to year between 2022 and 2023, likely due to increasing numbers of NCC program attrition. NCC programs, as shown in the subspecialty-specific portion of the report, tend to enroll higher numbers of fellows than other subspecialties; therefore, impacting the total number of approved spots even when accredited programs growth outpaces attrition.

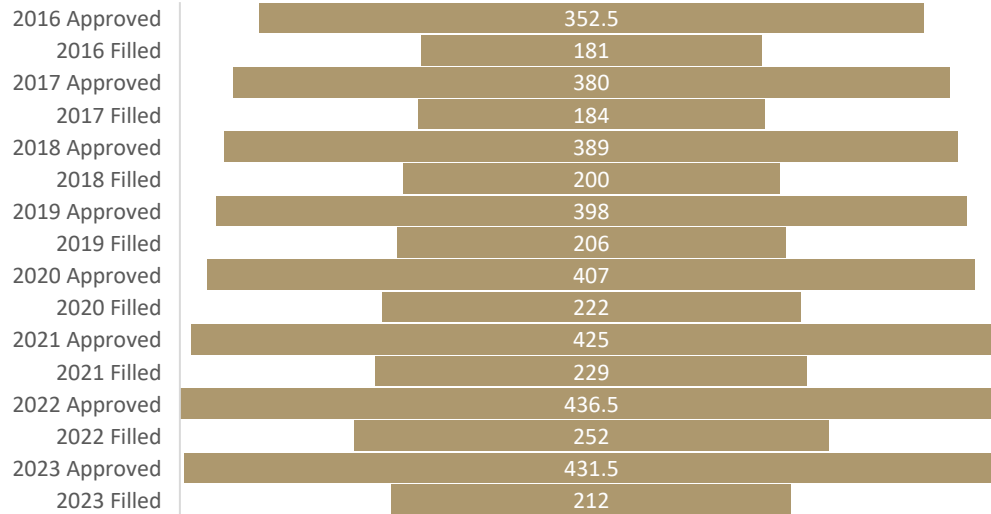
Enrollment Comparisons: 2016 through 2023

With the implementation of the annual reporting system in 2016, UCNS has a mechanism to compare program statistics on a year-to-year basis. Previously, program information was collected only when a program was due for an accreditation review, which occurs between one and five years. A comparison of the approved fellowship spots and first-year fellow enrollment between 2016 and 2023 follows.

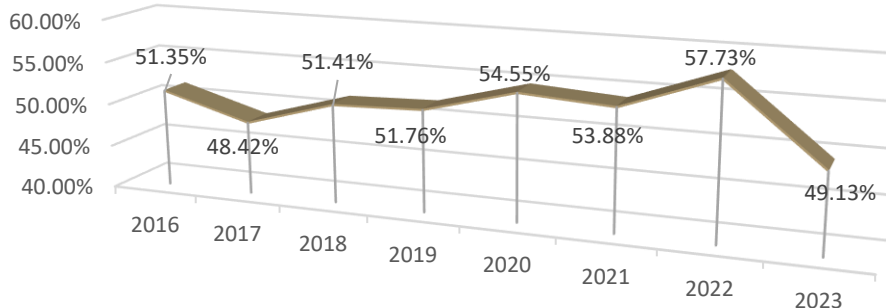
It is important to once again note that these enrollment numbers account only for fellows enrolled in Year 1. Programs in an inactive status do not show as approved spots in the following tables as programs are not allowed to enroll fellows while inactive.

The overall fill rate for approved first year spots is 52.37% across all subspecialties for all programs accredited between 2016 and 2023. There is variability among fill rates per year and per subspecialty. Fill rates per subspecialty per year are illustrated in the subspecialty-specific portion of this report.

Approved and Filled Spots: All Subspecialties 2016-2023



Percentage Fill Rate: All Subspecialties 2016-2023



Fellow Completion and Certification

Of the 2,237 graduates, 60% (n=1,344) have gone on to pursue UCNS certification, which is down from last year. A decrease in the percentage of certification in previous years is largely associated with the decrease in the number of NCC graduates seeking to certify in NCC by UCNS, which is described in greater detail below. Eight-six graduates have applied to take upcoming 2024 examinations in AD, BNNP, HM, and IN and one NI fellow applied to sit for the rescheduled NI examination. If all candidates pass their respective certification examinations, the number of graduates who are certified will increase to 1,430 (64%). It is important to note that the graduates include fellows who are not certified through the American Board of Medical Specialty (ABMS), Royal College of Physicians and Surgeons of Canada (RCPSC), or American Osteopathic Association and are not eligible for a UCNS certification examination (120). Also included are those who have graduated from a subspecialty when no examination has been available (GN=3). Removing these graduates increases the percentage certified to 63% of graduates who have sought UCNS certification following completion of an accredited program.

A breakdown of the graduates per year per subspecialty, with certification rates, is as follows and includes data from 2020 and 2021 for comparison. As a reminder, examinations are offered every other year so percentages for each subspecialty may dip from year to year. It is interesting to note that, while not illustrated in the following table, the data shows there is a significant number of fellows who do not apply for the first available certification examination after their graduation. Staff also noted while completing the analysis of graduate certifications that three CNMP graduates have either applied for or successfully achieved AD certification instead of CNMP. These diplomates are not reflected in either percentage below.

Graduates Seeking Certification

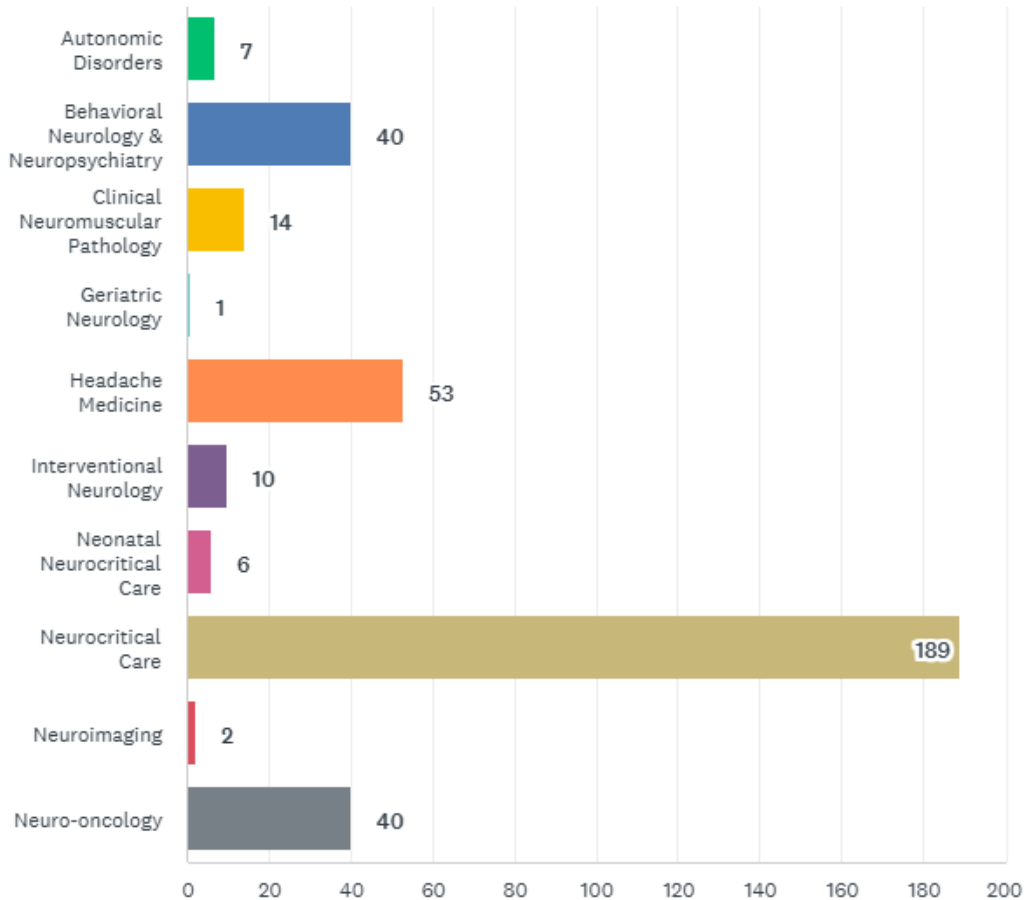
| | AD | BNNP | CNMP | GN | HM | IN | NCC | NI | NNCC | NO | NRR |
|---|--------------|--------------|------|----|--------------|-------------|------|--------------|------|-----|-----|
| Total Graduates Through 2023 | 18 | 337 | 92 | 3 | 404 | 6 | 1037 | 42 | NA | 291 | 2 |
| Total Graduates Certified Through 2023 | 8 | 213 | 30 | 0 | 282 | 0 | 550 | 30 | NA | 231 | 0 |
| Certification Applications | 2 | 28 | NA | NA | 54 | 1 | NA | 1 | NA | NA | NA |
| Percent Certified (% if all applicants pass) | 44% (55%) | 63% (72%) | 33% | 0% | 70% (83%) | 0% (16%) | 53% | 71% (74%) | NA | 79% | 0% |
| Total Graduates Through 2021 | 10 | 274 | 72 | 3 | 295 | NA | 779 | 39 | NA | 235 | 2 |
| Total Percent Certified in 2021 | 80% | 72% | 38% | 0% | 83% | NA | 63% | 69% | NA | 81% | 0% |
| Total Graduates Through 2022 | 11 | 304 | 82 | 3 | 248 | NA | 873 | 40 | NA | 260 | 2 |
| Total Percent Certified in 2022 | 79% | 68% | 33% | 0% | 89% | NA | 57% | 68% | NA | 75% | 0% |

FELLOWSHIP EVALUATION SURVEY

Introduction

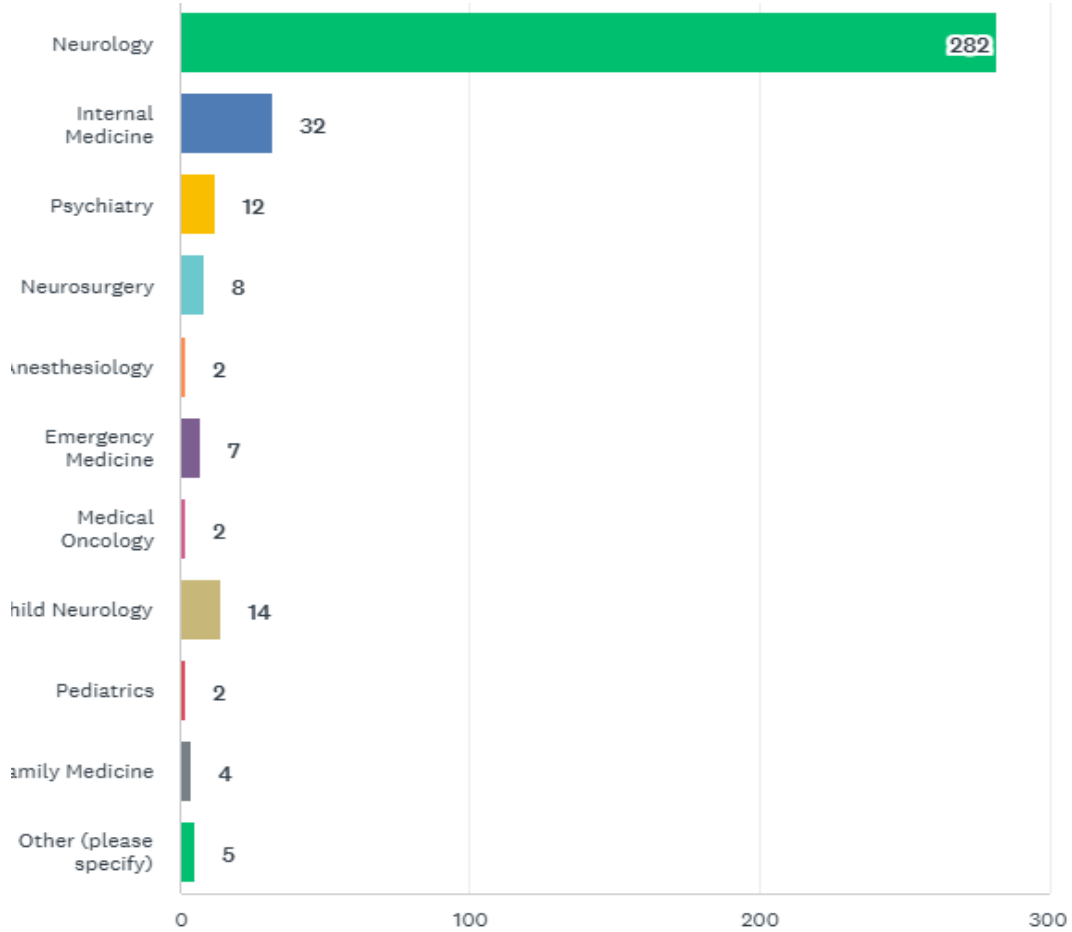
From May 30 through July 2, 2024, UCNS surveyed 373 fellows enrolled in a UCNS-accredited fellowship. Three fellows with undeliverable email addresses were unable to receive the survey invitation. Reminder emails for those who did not complete the survey were sent periodically during the collection period. Emails were also sent to program directors and program coordinators asking them to encourage fellows and remind them to complete the survey. Responses from 361 fellows were collected. Fellows from 162 of the 163 programs with self-reported enrolled fellows responded.

The following illustrates the respondents by subspecialty:



Fellows were asked to identify their primary specialty. Most of the respondents reported being primarily certified in Neurology (282), followed by the specialties identified in the following chart. “Other” is comprised of one each in vascular neurology, Neuro-oncology, physical medicine and rehabilitation, geriatric medicine, and preventative medicine.

Fellow Primary Specialty



A total of 212 fellows reported being enrolled in their first year, 139 in their second year, and 10 in the third year of their fellowship, with 232 intending to graduate in 2024.

Demographic Information

UCNS fellows were next asked a series of demographic information including age, gender, and ethnicity.

Your age

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|------------------------|------------|
| 20-30 | 5.54% 20 |
| 31-40 | 86.15% 311 |
| 41-50 | 7.20% 26 |
| 51-60 | 0.83% 3 |
| 61+ | 0.00% 0 |
| I prefer not to answer | 0.28% 1 |
| TOTAL | 361 |

Your gender

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|--|-----------|------------|
| Female | 44.60% | 161 |
| Male | 54.29% | 196 |
| Nonbinary | 0.28% | 1 |
| Transgender | 0.00% | 0 |
| I prefer not to answer | 0.83% | 3 |
| Other (please specify) Responses | 0.00% | 0 |
| TOTAL | | 361 |

Your Race and Ethnicity

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|-------------------------------------|-----------|------------|
| American Indian or Alaska Native | 0.28% | 1 |
| Asian | 32.96% | 119 |
| Black or African American | 4.43% | 16 |
| Hispanic or Latino | 8.59% | 31 |
| Native Hawaiian or Pacific Islander | 0.28% | 1 |
| White | 43.49% | 157 |
| I prefer not to answer | 9.97% | 36 |
| TOTAL | | 361 |

Compliance with the Program Requirements

Fellows were next asked a series of questions to confirm their program's compliance with specific program requirements. The questions with comments requested do not include the received comments. Comments have been received by the Accreditation Council and appropriate follow-up completed by staff.

There is administrative support available to me.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| Yes | 98.89% | 357 |
| No | 1.11% | 4 |
| TOTAL | | 361 |

Faculty in my fellowship provide appropriate supervision for my clinical work (neither too little nor too much).

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| Always | 80.61% | 291 |
| Usually | 18.28% | 66 |
| Rarely | 1.11% | 4 |
| Never | 0.00% | 0 |
| TOTAL | | 361 |

Faculty members are interested in my fellowship education.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| Always | 77.84% | 281 |
| Usually | 18.56% | 67 |
| Rarely | 3.32% | 12 |
| Never | 0.28% | 1 |
| TOTAL | | 361 |

I am able to review all of my performance evaluations.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| Always | 82.83% | 299 |
| Usually | 12.19% | 44 |
| Rarely | 3.60% | 13 |
| Never | 1.39% | 5 |
| TOTAL | | 361 |

I evaluate program faculty at least once per year.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| ▼ Yes | 92.52% | 334 |
| ▼ No | 7.48% | 27 |
| TOTAL | | 361 |

I evaluate the program at least once per year.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| ▼ Yes | 96.40% | 348 |
| ▼ No | 3.60% | 13 |
| TOTAL | | 361 |

The program director treats my evaluations of faculty and the program as confidentially as possible.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| ▼ Always | 92.24% | 333 |
| ▼ Usually | 6.09% | 22 |
| ▼ Rarely | 0.83% | 3 |
| ▼ Never | 0.83% | 3 |
| TOTAL | | 361 |

Fellow feedback is and has been used to help improve the program.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| ▼ Always | 72.02% | 260 |
| ▼ Usually | 22.16% | 80 |
| ▼ Rarely | 2.49% | 9 |
| ▼ Never | 0.83% | 3 |
| ▼ Unknown | 2.49% | 9 |
| TOTAL | | 361 |

Feedback provided to me is timely.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| Always | 74.24% | 268 |
| Usually | 20.22% | 73 |
| Rarely | 4.43% | 16 |
| Never | 1.11% | 4 |
| TOTAL | | 361 |

Feedback provided to me has helped direct my learning.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|------------------------------|-----------|------------|
| Always | 75.90% | 274 |
| Usually | 19.67% | 71 |
| Rarely | 3.60% | 13 |
| Never | 0.55% | 2 |
| I have not received feedback | 0.28% | 1 |
| TOTAL | | 361 |

I have opportunities to participate in research and other scholarly activity.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 74.79% | 270 |
| Agree | 22.16% | 80 |
| Neither agree nor disagree | 2.22% | 8 |
| Disagree | 0.83% | 3 |
| Strongly disagree | 0.00% | 0 |
| TOTAL | | 361 |

My education has not been compromised by service requirements. Service is defined as activities that should be routinely performed by non-physicians, such as routine transportation of patients and routine phlebotomy. Taking care of patients and documentation are education and not service.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 78.39% | 283 |
| Agree | 14.68% | 53 |
| Neither agree nor disagree | 2.22% | 8 |
| Disagree | 3.32% | 12 |
| Strongly disagree | 1.39% | 5 |
| TOTAL | | 361 |

The variety of patients in my program is comprehensive for my fellowship field.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 74.52% | 269 |
| Agree | 21.33% | 77 |
| Neither agree nor disagree | 2.22% | 8 |
| Disagree | 1.39% | 5 |
| Strongly disagree | 0.55% | 2 |
| TOTAL | | 361 |

Patient handovers are very effective in my program.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 59.00% | 213 |
| Agree | 27.70% | 100 |
| Neither agree nor disagree | 3.05% | 11 |
| Disagree | 2.77% | 10 |
| Strongly disagree | 0.55% | 2 |
| Not applicable | 6.93% | 25 |
| TOTAL | | 361 |

My education has not been compromised by too many other trainees (i.e., residents, medical students, allied health, etc.)

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 69.25% | 250 |
| Agree | 20.50% | 74 |
| Neither agree nor disagree | 5.82% | 21 |
| Disagree | 3.60% | 13 |
| Strongly disagree | 0.83% | 3 |
| TOTAL | | 361 |

I can raise concerns to my program director, department, or graduate medical education leadership without fear of reprisal.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 77.29% | 279 |
| Agree | 15.51% | 56 |
| Neither agree nor disagree | 4.71% | 17 |
| Disagree | 1.94% | 7 |
| Strongly disagree | 0.55% | 2 |
| TOTAL | | 361 |

I am provided with progressive responsibility for patient care in my fellowship program, and the criteria for reaching new levels of progressive responsibility have been made clear to me by the program.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 72.58% | 262 |
| Agree | 19.94% | 72 |
| Neither agree nor disagree | 5.26% | 19 |
| Disagree | 1.94% | 7 |
| Strongly disagree | 0.28% | 1 |
| TOTAL | | 361 |

In my program, I participate in interprofessional teams in patient management.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 81.72% | 295 |
| Agree | 16.62% | 60 |
| Neither agree nor disagree | 1.66% | 6 |
| Disagree | 0.00% | 0 |
| Strongly disagree | 0.00% | 0 |
| TOTAL | | 361 |

There are didactics specifically for the fellow(s) in my fellowship specialty in my program.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 69.25% | 250 |
| Agree | 21.33% | 77 |
| Neither agree nor disagree | 3.32% | 12 |
| Disagree | 4.71% | 17 |
| Strongly disagree | 1.39% | 5 |
| TOTAL | | 361 |

In my program, there are systems in place for me to transition care to another provider if I am too fatigued.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------------------|-----------|------------|
| Strongly agree | 59.28% | 214 |
| Agree | 27.98% | 101 |
| Neither agree nor disagree | 9.70% | 35 |
| Disagree | 2.22% | 8 |
| Strongly disagree | 0.83% | 3 |
| TOTAL | | 361 |

I work less than an average of 80 hours a week averaged over four weeks and have one day off in seven days averaged over four weeks.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Yes | 98.89% 357 |
| No | 1.11% 4 |
| TOTAL | 361 |

In-house overnight call is not more frequent than every third night averaged over four weeks and the duration of night float is not more than six nights in a row.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Always | 54.02% 195 |
| Usually | 4.43% 16 |
| Rarely | 0.55% 2 |
| Never | 3.05% 11 |
| Not applicable | 37.95% 137 |
| TOTAL | 361 |

The maximum duration of a work shift is 24 hours plus an additional four hours for patient handovers and after a 24-hour shift I have at least 14 hours off.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Always | 61.77% 223 |
| Usually | 3.88% 14 |
| Rarely | 0.28% 1 |
| Never | 0.83% 3 |
| Not applicable | 33.24% 120 |
| TOTAL | 361 |

I have at least eight hours off between work duty periods.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Always | 92.52% 334 |
| Usually | 7.20% 26 |
| Rarely | 0.28% 1 |
| Never | 0.00% 0 |
| TOTAL | 361 |

At-home call includes telemedicine or remote monitoring.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|-------------------------------|------------|
| Yes | 26.32% 95 |
| No | 13.85% 50 |
| Not applicable | 59.83% 216 |
| Total Respondents: 361 | |

[Comments \(77\)](#)

I am included in the process of reviewing the goals and objectives of the fellowship.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Yes | 90.58% 327 |
| No | 9.42% 34 |
| TOTAL | 361 |

Most of the fellow responses indicate perceived compliance with the program requirements. Negative ratings will be reviewed, and fellows contacted as deemed appropriate. This is described in further detail later in the report.

COVID-19

The questions relating to COVID-19 were eliminated from the survey this year.

Fellow Concerns

Fellows were next asked if they have any concerns about their program. Since 2020, UCNS has been evaluating the best way to address fellow concerns. The 2022 survey was adjusted to ask more specific questions. This appears to have resulted in less confusion by fellows when reporting concerns. The Accreditation Council also

confirmed after several reviews of its process that comments are reviewed as received and serious concerns will be addressed; however, overall items are reviewed on a trend basis by program as delineated in the accreditation outcomes.

Do you have any concerns about your program?

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Yes | 8.03% 29 |
| No | 91.97% 332 |
| TOTAL | 361 |

If yes, please indicate the following regarding your concern(s) (select one):

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|--|------------|
| My concerns are not serious, but I want UCNS to be aware of them | 3.60% 13 |
| My concerns are serious, but may be addressed by the program without the program receiving an adverse action, e.g., probation or withdrawal of accreditation | 3.60% 13 |
| My concerns are serious enough to warrant the program being placed on probation | 0.83% 3 |
| My concerns are egregious enough that the program's accreditation should be withdrawn | 0.00% 0 |
| I have no concerns about my program. | 91.97% 332 |
| TOTAL | 361 |

The Accreditation Council evaluates the comments identified by fellows as needing future action. In addition, fellows were asked if they wished to be contacted regarding their concerns, which is also addressed by the Council. Three indicated they could be contacted.

Conclusion

The survey is concluded by asking the fellow to rate the fellowship, as well as some additional general questions about the program and certification.

On a scale of one to five, with five being the best, how would you rate your fellowship experience?

Answered: 361 Skipped: 0

| | 1 | 2 | 3 | 4 | 5 | TOTAL | WEIGHTED AVERAGE |
|---|------------|------------|-------------|--------------|---------------|-------|------------------|
| ☆ | 0.55% 2 | 1.39% 5 | 8.86% 32 | 24.93% 90 | 64.27% 232 | 361 | 4.51 |

My program has prepared me for independent practice in my subspecialty.

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|-------------------------------|-----------|------------|
| Yes | 75.07% | 271 |
| No | 0.83% | 3 |
| I am not graduating this year | 24.10% | 87 |
| TOTAL | | 361 |

If you are completing your program, do you have a position for employment in your subspecialty?

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|-------------------------------|-----------|------------|
| Yes | 57.89% | 209 |
| No | 7.20% | 26 |
| I am not graduating this year | 34.90% | 126 |
| TOTAL | | 361 |

I plan to take the UCNS certification examination in my subspecialty (must be taken within four years of graduation).

Answered: 361 Skipped: 0

| ANSWER CHOICES | RESPONSES | |
|----------------|-----------|------------|
| Yes | 81.99% | 296 |
| No | 18.01% | 65 |
| TOTAL | | 361 |

[Comments \(63\)](#)

Analysis

The 97% (n=361) response rate exceeded initial expectations, providing UCNS with a solid foundation of data to continue monitoring outcomes thresholds. A total of 162 programs were represented, with only one program that self-identified as having at least one enrolled fellow not participating. Most of the survey responses indicate fellow-perceived compliance with the program requirements regarding resource availability, curriculum, evaluation, and duty hours requirements. Two hundred seventy-one fellows indicated that they felt their training program prepared them for independent practice in the subspecialty, with 87 indicating they would not be graduating this year. Only three fellows felt that their experience in the program did not prepare them for independent practice in the subspecialty. In addition, fellows rated their fellowship experience on a scale of one to five, with five being the best. The weighted average was 4.51, with 232 rating 5, 90 rating 4, 32 rating 3, 5 rating 2, and 2 rating 1.

When asked about taking the UCNS certification within four years of graduation, 209 respondents indicated they would be pursuing UCNS certification in the future, with 26 of 361 respondents indicating they would not be seeking UCNS certification. Most of the NCC respondents cited the competing American Board of Medical Specialties NCC examination as the reason they would not pursue UCNS certification, while others indicated certification eligibility issues as the reason. The certification response supports the decreasing rate of graduates applying for the NCC examination presented earlier in this report.

The data received in the survey will be used as program outcomes and will be shared with programs annually, along with a summary of the data received in the annual report. Outcomes for the survey will include both the response rate of fellows completing the survey and the responses themselves. Programs showing a trend of negative responses or that do not meet other identified benchmarks may trigger a comprehensive review. Other outcomes that will be tracked by UCNS include fellow recruitment, fellow graduation and attrition, fellow performance on certification examinations, and fellow scholarly activity.

PROGRAM DIRECTOR SURVEY

Introduction

From September 17 through October 1, 2024, 238 program directors of active UCNS-accredited programs were surveyed. A total of 198 program directors participated. The table below shows the number of program directors in each subspecialty and the number of participants. As shown, all subspecialties were represented that currently have accredited programs. Questions including a comment response are not included but were reviewed by the Accreditation Council.

| Program Director Survey Respondents by Subspecialty | | |
|---|----------------|----------------------|
| Subspecialty | Number Invited | Number Responded (%) |
| AD | 5 | 5 (100%) |
| BNNP | 44* | 35 (80%) |
| CNMP | 6 | 6 (100%) |
| GN | 4* | 3 (75%) |
| HM | 56 | 48 (86%) |
| IN | 10 | 9 (90%) |
| NCC | 67 | 56 (84%) |
| NI | 3 | 2 (67%) |
| NNCC | 6 | 5 (83%) |
| NO | 37 | 30 (81%) |
| Total | 238 | 199 (83%) |

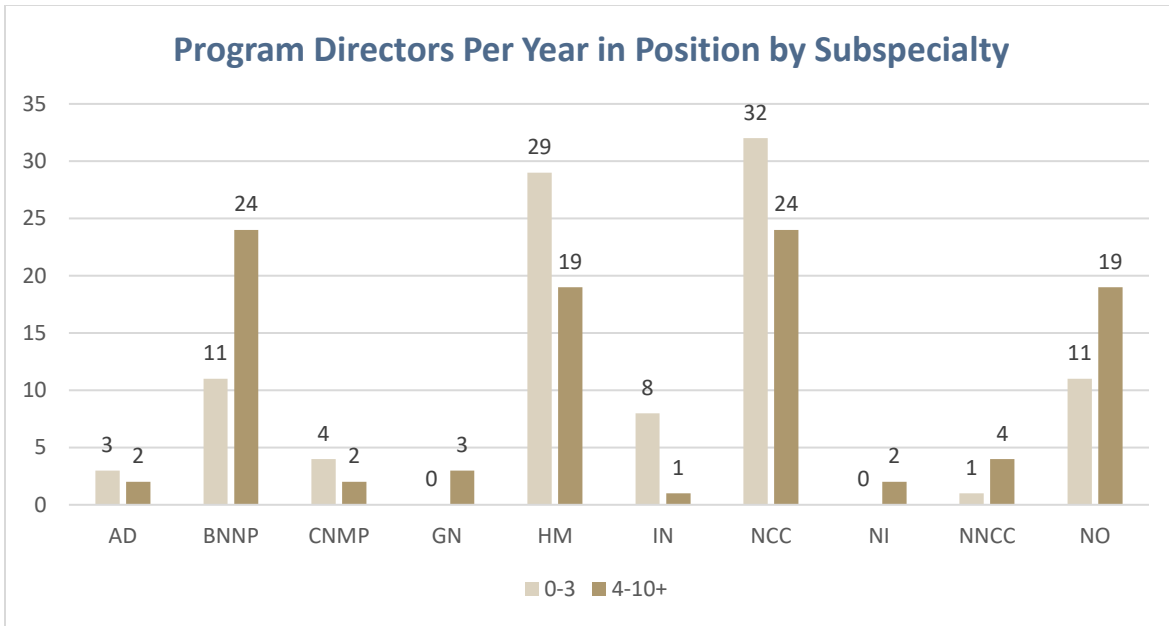
* One program director is the director over a dually accredited BNNP and GN program so 198 surveys were responded to representing 199 programs.

Program Director Information

After identifying their name and institution name, program directors were asked to identify how many years they have served as the program director for this UCNS-accredited fellowship. The response was an open-ended question and ranged from 0 to 25+. The ranges of responses are included below:

| Years of Service as Program Director of UCNS-Accredited Program | | | | | | | |
|---|-------|---------|-------|---------|-------|--------------|------------|
| # Years | # PDs | # Years | # PDs | # Years | # PDs | # Years | # PDs |
| Fewer than 1 | 15 | 2.5 | 2 | 5 | 15 | 9 | 8 |
| 1 | 38 | 3 | 20 | 6 | 12 | 10 | 14 |
| 1.5 | 4 | 4 | 16 | 7 | 14 | More than 10 | 16 |
| 2 | 20 | 4.5 | 1 | 8 | 4 | Total | 199 |

Approximately half of the program directors reported (n=99) having served as program directors for three years or fewer. A breakdown of the number of program directors per years in the position per subspecialty is as follows.



NCC program directors were also asked to identify their accreditation status in light of the competing accreditation offered through ACGME.

Please indicate the following with regard to ACGME Neurocritical Care accreditation

Answered: 56 Skipped: 142

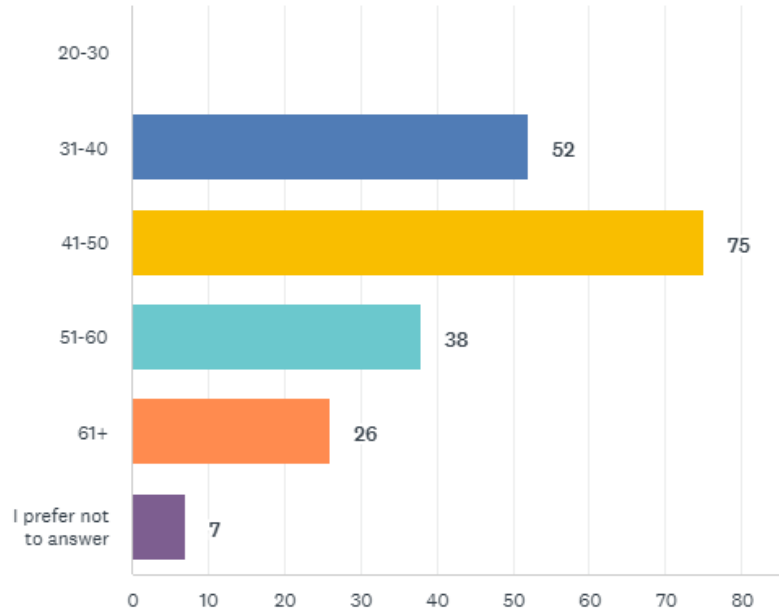
| ANSWER CHOICES | RESPONSES |
|--|-----------|
| My program is also accredited by ACGME. | 64.29% 36 |
| I intend to seek ACGME accreditation for my program. | 32.14% 18 |
| I plan to maintain UCNS accreditation and ACGME accreditation. | 71.43% 40 |
| I do not plan to maintain UCNS accreditation. | 3.57% 2 |
| I do not plan to seek ACGME accreditation. | 1.79% 1 |
| Total Respondents: 56 | |

Demographic Information

Program directors were next asked a series of demographic questions.

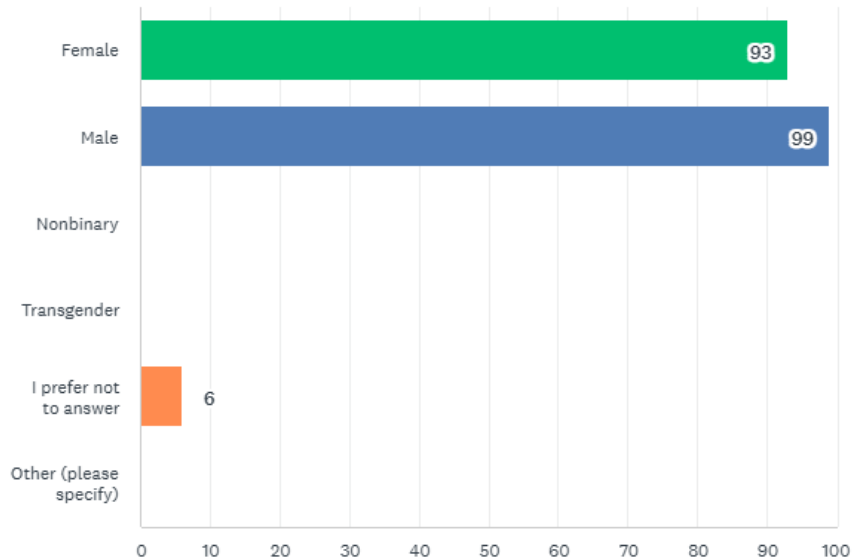
Your age

Answered: 198 Skipped: 0



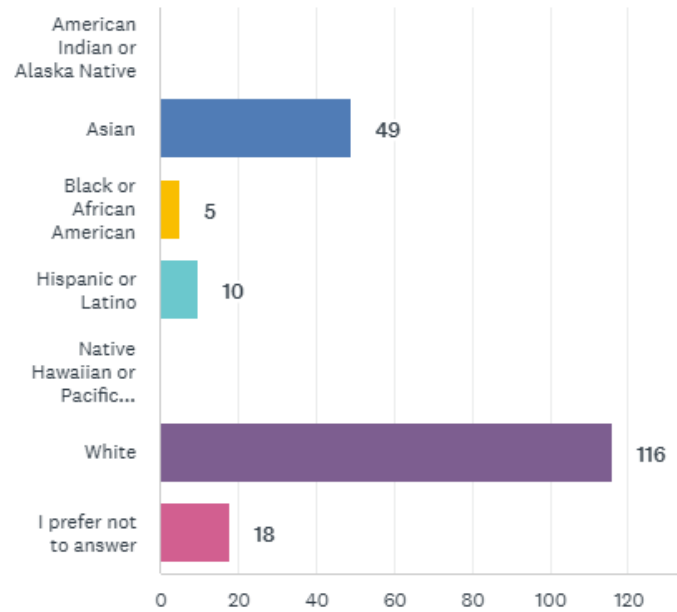
Your gender

Answered: 198 Skipped: 0



Your race and ethnicity

Answered: 198 Skipped: 0

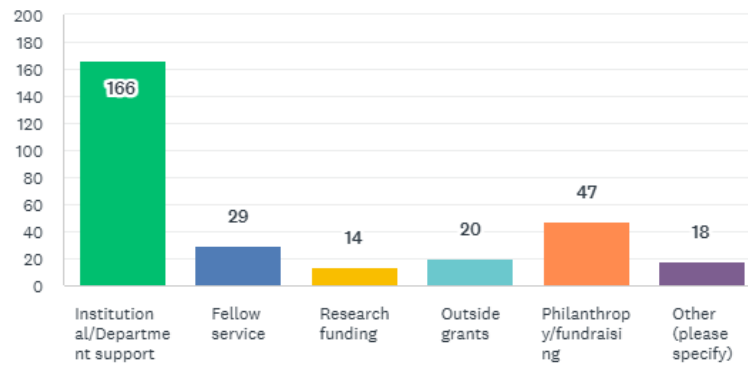


Program Funding and Zengine

Program directors were next asked to identify how their programs are funded.

How is your fellowship funded? (Check all that apply)

Answered: 198 Skipped: 0



Program directors were asked to indicate their agreement with four statements regarding the new accreditation software, Zengine, and provided with an opportunity to provide comments.

| | STRONGLY DISAGREE | DISAGREE | NEITHER AGREE NOR DISAGREE | AGREE | STRONGLY AGREE | TOTAL | WEIGHTED AVERAGE |
|---|-------------------|--------------|----------------------------|--------------|----------------|-------|------------------|
| ▼ I am aware that UCNS has transitioned to an online reporting platform, Zengine. | 6.06% 12 | 14.14% 28 | 21.21% 42 | 35.35% 70 | 23.23% 46 | 198 | 3.56 |
| ▼ I am comfortable using the Zengine platform. | 5.08% 10 | 10.66% 21 | 45.69% 90 | 23.86% 47 | 14.72% 29 | 197 | 3.32 |
| ▼ Zengine is more user friendly than previous submission methods. | 2.05% 4 | 3.08% 6 | 68.72% 134 | 20.51% 40 | 5.64% 11 | 195 | 3.25 |
| ▼ I would participate in online training provided by UCNS to better understand Zengine. | 4.57% 9 | 6.60% 13 | 31.98% 63 | 44.16% 87 | 12.69% 25 | 197 | 3.54 |

[Comments \(20\)](#)

Milestones

Program directors were asked two questions regarding using the milestones within their programs.

Do you use the UCNS Milestones for fellows progressing through your program?

Answered: 198 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|--|---------------|
| ▼ Yes | 63.64% 126 |
| ▼ No | 22.22% 44 |
| ▼ Not applicable - Milestones are not available for my subspecialty | 5.56% 11 |
| ▼ Not applicable - I have not yet enrolled any fellows in my program | 8.59% 17 |
| TOTAL | 198 |

If you use the UCNS Milestones, please indicate how helpful you find the UCNS Milestones.

Answered: 196 Skipped: 2

| ANSWER CHOICES | RESPONSES |
|---|--------------|
| ▼ Extremely helpful | 6.63% 13 |
| ▼ Very helpful | 36.73% 72 |
| ▼ Neither helpful nor not helpful | 21.43% 42 |
| ▼ Not so helpful | 3.57% 7 |
| ▼ Not at all helpful | 0.00% 0 |
| ▼ Not applicable - I do not/have not used UCNS Milestones | 31.63% 62 |
| TOTAL | 196 |

Program Director Feedback

Programs were asked to indicate their agreement with seven statements regarding the value of accreditation and UCNS communications.

Please indicate your agreement with the following statements:

Answered: 198 Skipped: 0

| | STRONGLY DISAGREE | DISAGREE | NEITHER AGREE NOR DISAGREE | AGREE | STRONGLY AGREE | TOTAL | WEIGHTED AVERAGE |
|---|-------------------|--------------|----------------------------|--------------|----------------|-------|------------------|
| There is value to my UCNS accreditation. | 2.03% 4 | 1.52% 3 | 9.64% 19 | 40.10% 79 | 46.70% 92 | 197 | 4.28 |
| UCNS accreditation assists me in recruitment of fellows. | 2.53% 5 | 5.56% 11 | 18.18% 36 | 35.86% 71 | 37.88% 75 | 198 | 4.01 |
| UCNS accreditation enables me to secure funding for my program. | 9.18% 18 | 17.86% 35 | 31.63% 62 | 19.39% 38 | 21.94% 43 | 196 | 3.27 |
| UCNS accreditation allows me to secure protected time for program administration. | 14.14% 28 | 22.22% 44 | 25.76% 51 | 21.72% 43 | 16.16% 32 | 198 | 3.04 |
| UCNS accreditation allows me to require administrative support. | 9.60% 19 | 23.23% 46 | 20.20% 40 | 28.79% 57 | 18.18% 36 | 198 | 3.23 |
| The UCNS accreditation process is user friendly. | 2.53% 5 | 4.04% 8 | 27.78% 55 | 41.41% 82 | 24.24% 48 | 198 | 3.81 |
| Communication is effective for receiving the accreditation information I need. | 1.52% 3 | 2.02% 4 | 14.14% 28 | 46.97% 93 | 35.35% 70 | 198 | 4.13 |
| I use the UCNS website routinely as a resource. | 5.56% 11 | 14.14% 28 | 32.32% 64 | 32.32% 64 | 15.66% 31 | 198 | 3.38 |

Podcasts

Program directors were asked to indicate whether a UCNS-developed podcast would be of interest to them and, if so, what topics they would like to see.

| ANSWER CHOICES | RESPONSES |
|----------------|---------------|
| Yes | 41.41% 82 |
| No | 58.59% 116 |
| TOTAL | 198 |

[Comments \(29\)](#)

Conclusion

The final three questions centered around certification information sharing with fellows, resources programs would like to see developed, and an open-ended opportunity to share additional feedback.

Do you share UCNS certification information with your fellows or will you share if no fellows are currently enrolled?

Answered: 198 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Yes | 97.47% 193 |
| No | 2.53% 5 |
| TOTAL | 198 |

Are there any resources you would like UCNS to develop to facilitate the accreditation process?

Answered: 198 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Yes | 20.71% 41 |
| No | 79.29% 157 |
| TOTAL | 198 |

[Comments \(33\)](#)

Do you have any additional comments or suggestions you would like to share relating to UCNS accreditation?

Answered: 198 Skipped: 0

| ANSWER CHOICES | RESPONSES |
|----------------|------------|
| Yes | 8.08% 16 |
| No | 91.92% 182 |
| TOTAL | 198 |

[Comments \(15\)](#)

Analysis

Eighty-four percent of invited program directors participated in the survey, representing all subspecialties with accredited programs. Seventy-one percent of the responding NCC programs plan to maintain their UCNS accreditation at this time; however, as indicated later in comments, programs will continually reassess the issue as time progresses. This is an increase from responses received in 2023 when only half of the NCC programs responding indicated they would maintain their UCNS accreditation. Likely this is due to the large number of NCC programs lost to attrition already.

A majority of participants (64%) report using the UCNS Milestones and 85% of the 126 users responded that they find the milestones either extremely helpful or helpful. This feedback helps to inform the decision of how to proceed with the development and maintenance of milestones in the future.

Feedback regarding the Zengine platform remains mixed, but there is some improvement in the overall scores from the previous survey. Comments demonstrate that there is still confusion about using the platform. Programs will benefit from increased communications/training.

Programs identify a perceived value to UCNS accreditation, with a weighted average of 4.28 out of 5; a slight decrease from 2023's 4.31 weighted average. Ratings are lower when asked if accreditation is a benefit for securing funding, administrative support, and recruitment. The majority of programs find the process to be user friendly and communications effective.

UCNS podcasts are not of interest to most survey participants (n=116) and those who indicated they would be interested named topics specific to clinical and educational activities within the subspecialty, which would be outside of the UCNS prevue and more in line with educational initiatives by their professional societies. The survey demonstrates that program directors of currently accredited programs are not a likely target audience for UCNS-developed podcasts.

The survey continues to yield feedback that warrants Council attention to determine process improvements and training to facilitate the accreditation process.

SUBSPECIALTY-SPECIFIC STATISTICS

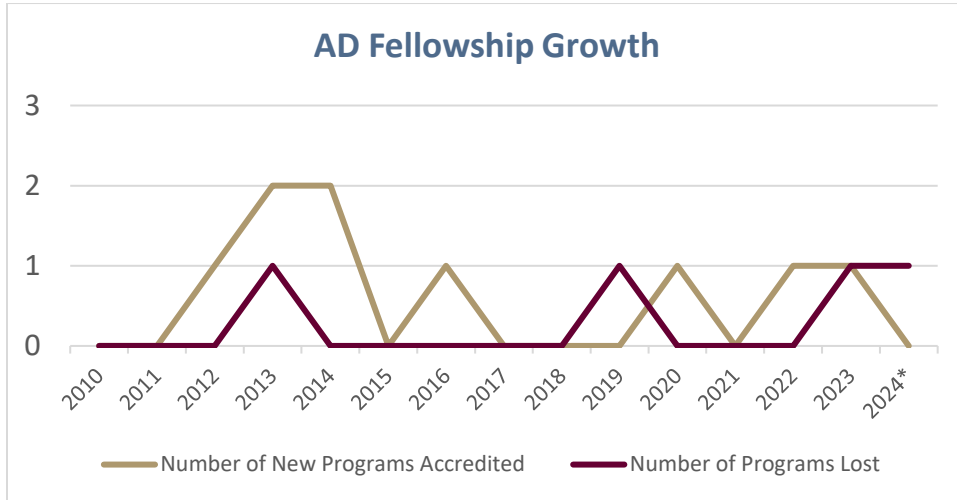
through October 4, 2024

For each subspecialty, the following information includes the year programs were first accredited, the current number of accredited programs, and the number lost to attrition. In addition, the programs' duration, overseeing department, and program directors' specialties are included. For fellows, the number of graduates, number of graduates certified by UCNS, and the graduates' primary specialties and ABMS/RCPC certifications are listed. Enrollment numbers of approved and filled spots for 2016, 2017, 2018, 2019, 2021, 2022, and 2023 are also provided.

Subspecialty: Autonomic Disorders

Fellowships

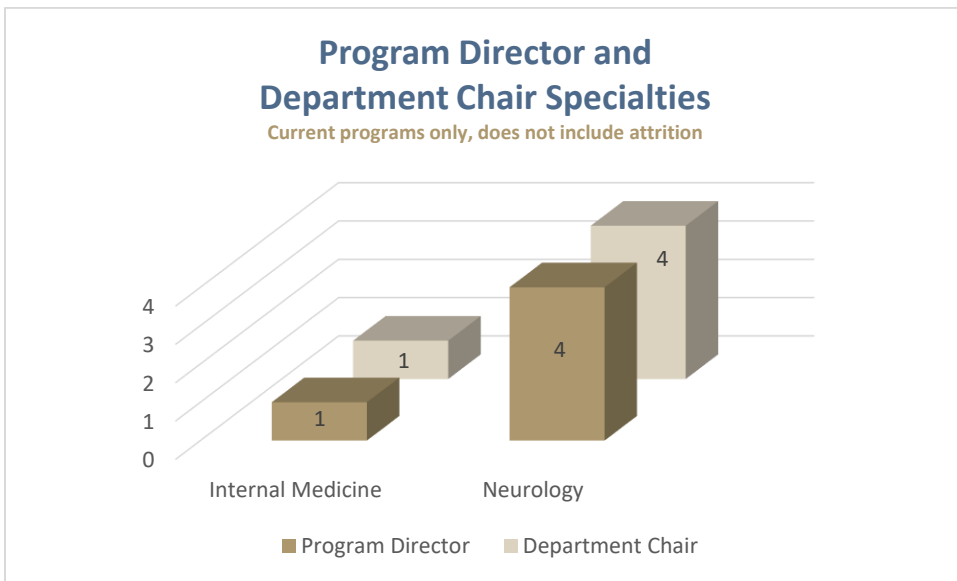
| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|---------------|------------------------|
| 2012 | 9 | 4 | 5 | 2013, 2019, 2023, 2024 |



*2024 fall accreditation actions TBD

| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 1 year | 4 |
| 1 or 2 years | 1 |

*Currently accredited programs only – does not include programs lost to attrition



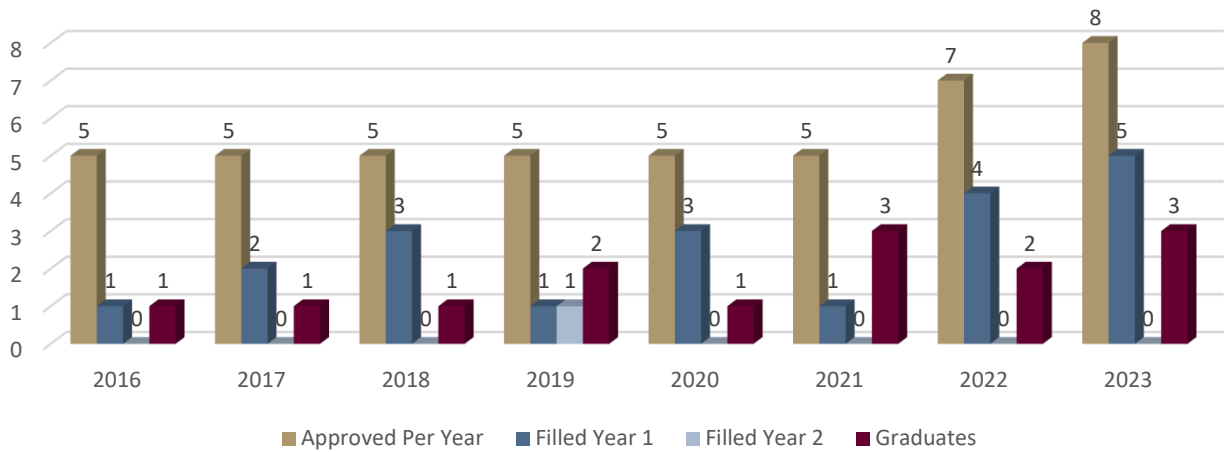
Fellows

Graduates: 18 | UCNS Certified: 8

Primary Specialty and Certification

| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|-------------------|---------------------|-----------------------|---------------------|
| Cardiology | 1 | ABMS | 16 |
| Family Medicine | 1 | Other | 1 |
| Internal Medicine | 3 | No | 1 |
| Neurology | 13 | | |

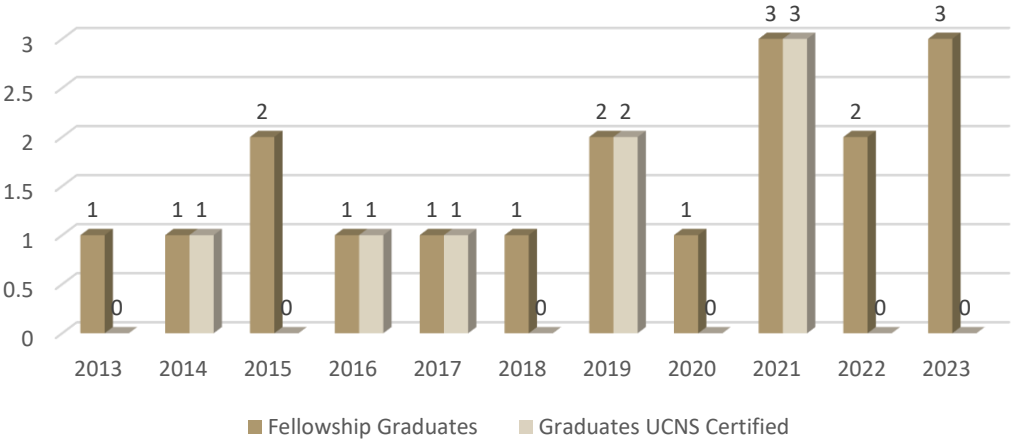
AD Fellow Enrollment 2016-2023



Certification Pass Rates (tracking began in 2014)

| Year | Pass Rate | |
|------|-----------|------------|
| | Fellow | Non-Fellow |
| 2016 | 100% | 90% |
| 2018 | 100% | 100% |
| 2020 | 100% | 83% |
| 2022 | 100% | 100% |

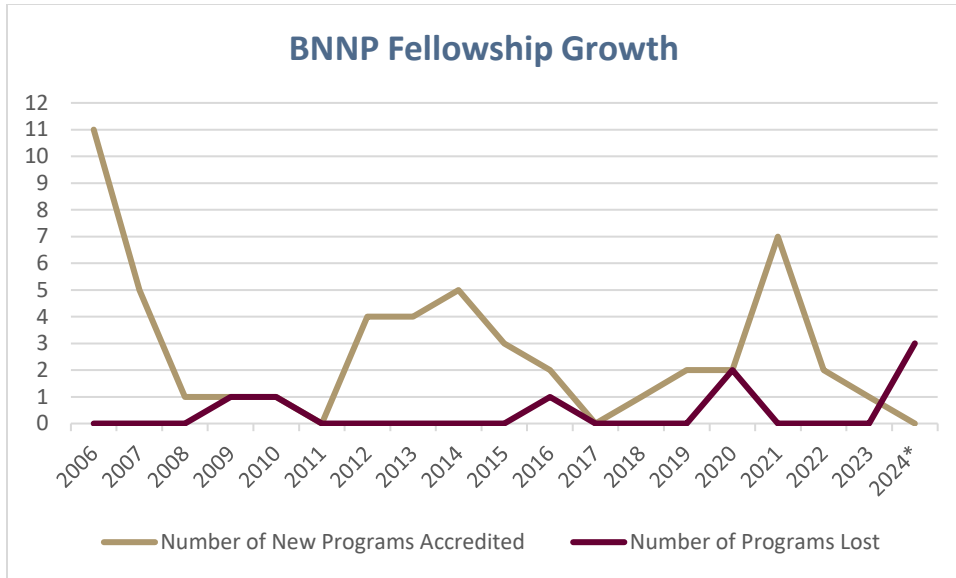
AD Graduate Certification



Subspecialty: Behavioral Neurology & Neuropsychiatry

Fellowships

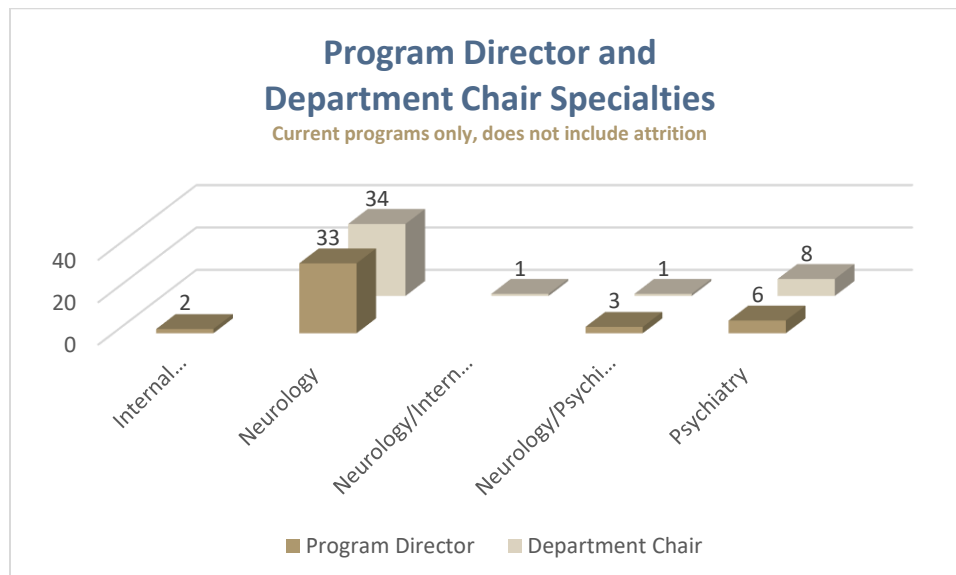
| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|---------------|------------------------------------|
| 2006 | 52 | 8 | 44 | 2009, 2010, 2016, 2020 x2, 2024 x3 |



*2024 fall accreditation actions TBD

| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 1 year | 16 |
| 2 years | 4 |
| 1 or 2 years | 22 |
| 1, 2, or 3 years | 2 |

*Currently accredited programs only – does not include programs lost to attrition



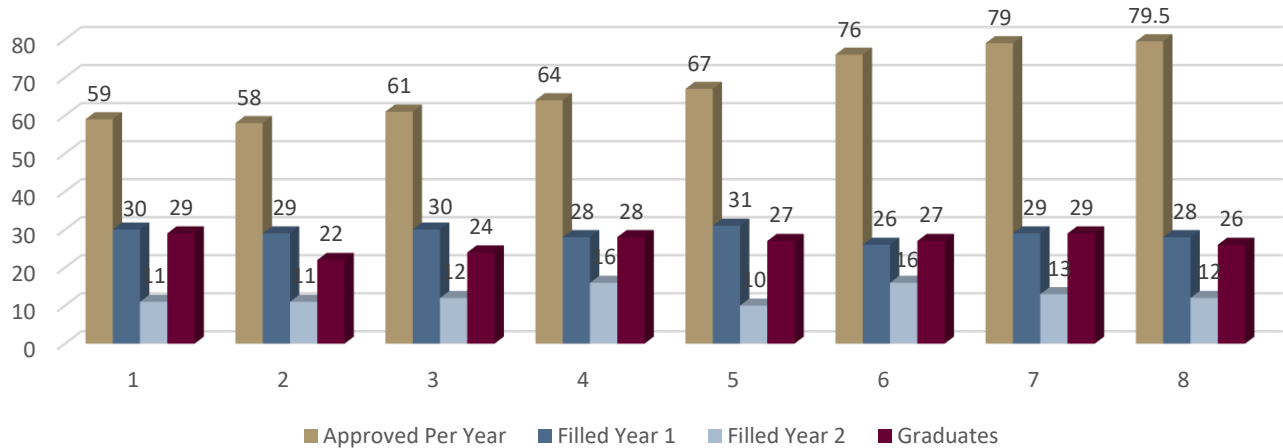
Fellows

Graduates: 337 | UCNS Certified: 213 (28 applications received for 2024 examination)

Primary Specialty and Certification

| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|--------------------------------------|---------------------|-----------------------|---------------------|
| Internal Medicine | 4 | ABMS | 302 |
| Internal Medicine/Geriatric Medicine | 3 | RCPSC | 23 |
| Internal Medicine/Psychiatry | 1 | AOA | 1 |
| Neurology | 217 | No | 11 |
| Neurology/Psychiatry | 1 | | |
| Psychiatry | 111 | | |

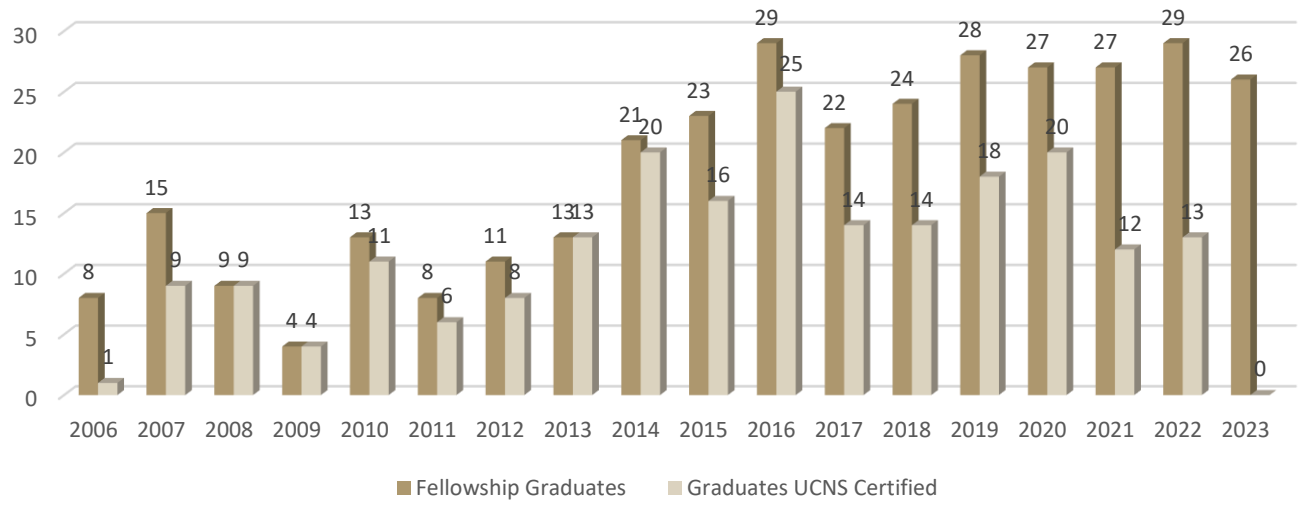
BNNP Fellow Enrollment 2016-2023



Certification Pass Rates (tracking began in 2014)

| Year | Pass Rate | |
|------|-----------|------------|
| | Fellow | Non-Fellow |
| 2014 | 100% | 83% |
| 2016 | 96% | 82% |
| 2018 | 96% | 83% |
| 2020 | 98% | 96% |
| 2022 | 86% | 72% |

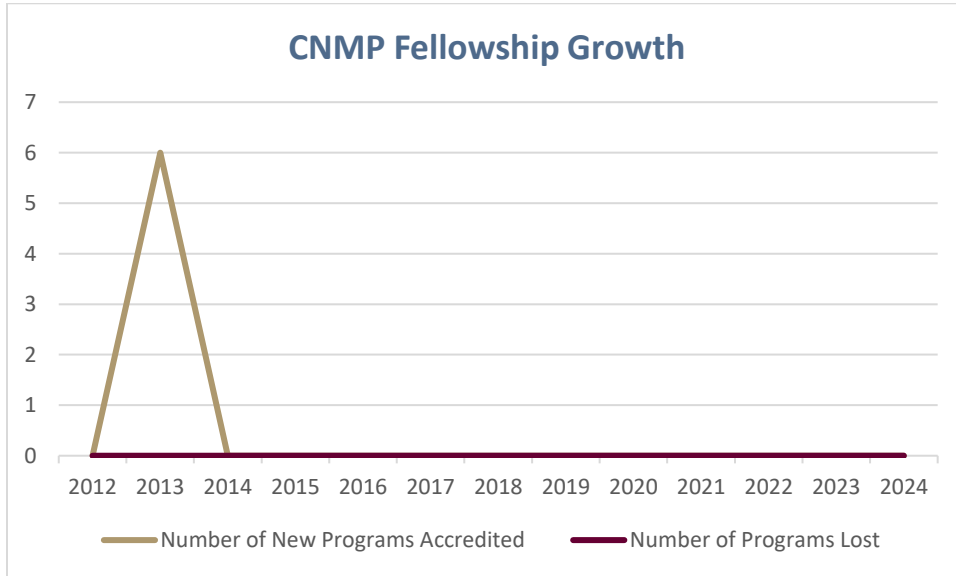
BNNP Graduate Certification



Subspecialty: Clinical Neuromuscular Pathology

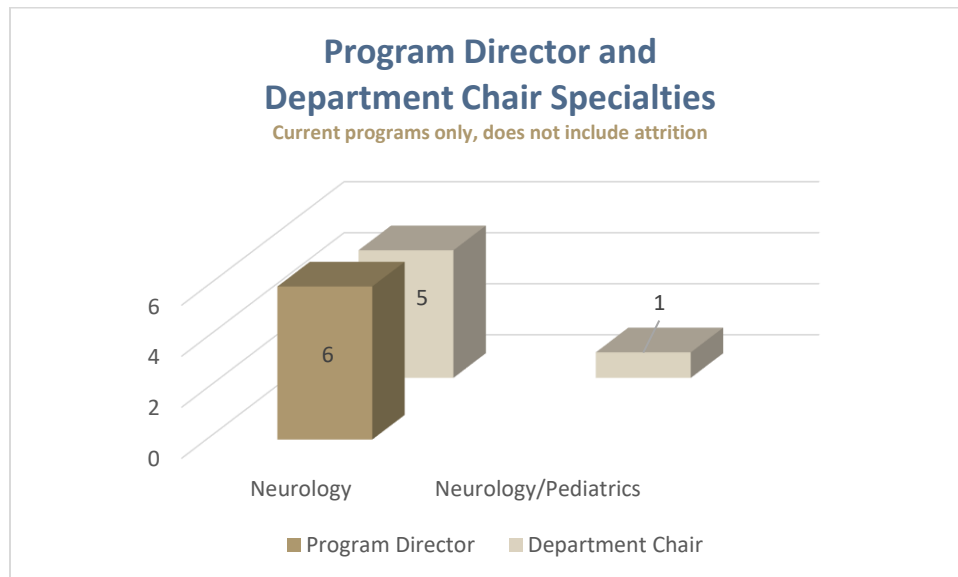
Fellowships

| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|---------------|----------------------|
| 2013 | 6 | 0 | 6 | |



| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 1 year | 4 |
| 1 or 2 years | 2 |

*Currently accredited programs only – does not include programs lost to attrition



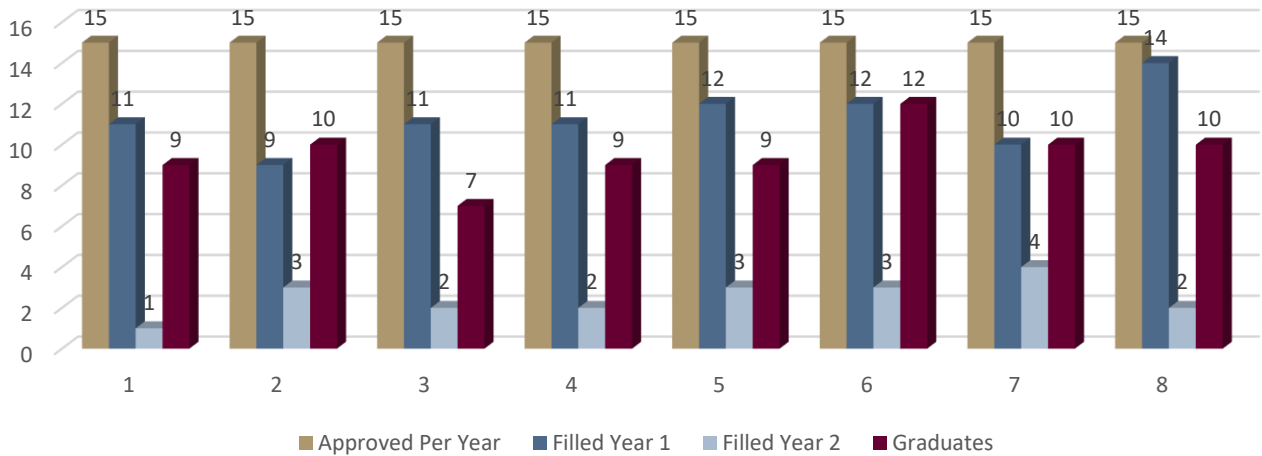
Fellows

Graduates: 92 | UCNS Certified: 30

Primary Specialty and Certification

| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|----------------------|---------------------|-----------------------|---------------------|
| Child Neurology | 1 | ABMS | 72 |
| Neurology | 89 | RCPSC | 6 |
| Neurology/Pediatrics | 1 | No | 14 |
| Pediatrics | 1 | | |

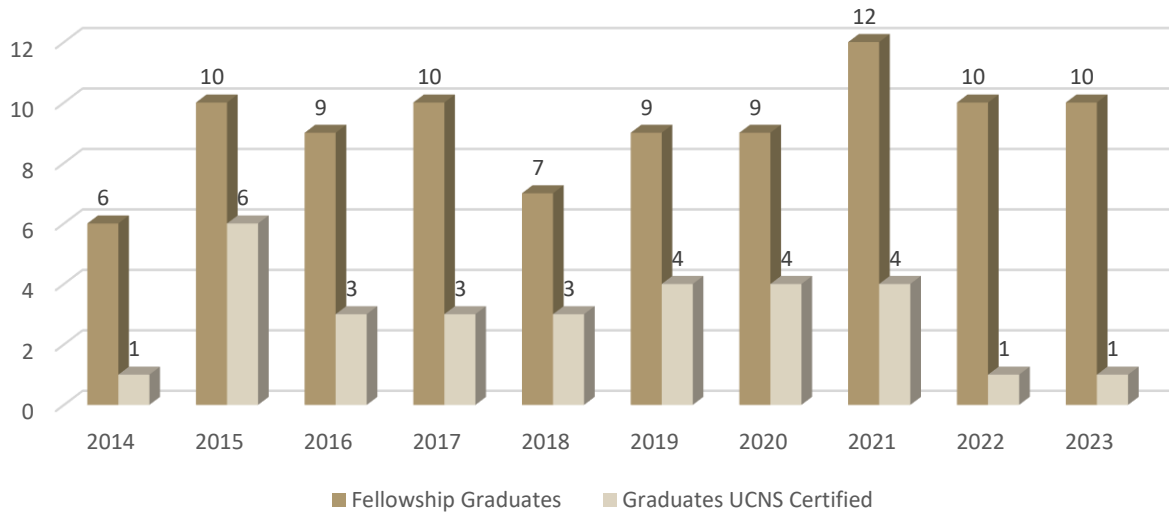
CNMP Fellow Enrollment 2016-2023



Certification Pass Rates (tracking began in 2014)

| Year | Pass Rate | |
|------|-----------|------------|
| | Fellow | Non-Fellow |
| 2015 | 86% | 94% |
| 2017 | 80% | 100% |
| 2019 | 100% | 100% |
| 2021 | 100% | 100% |
| 2023 | 60% | 29% |

CNMP Graduate Certification



Subspecialty: Geriatric Neurology

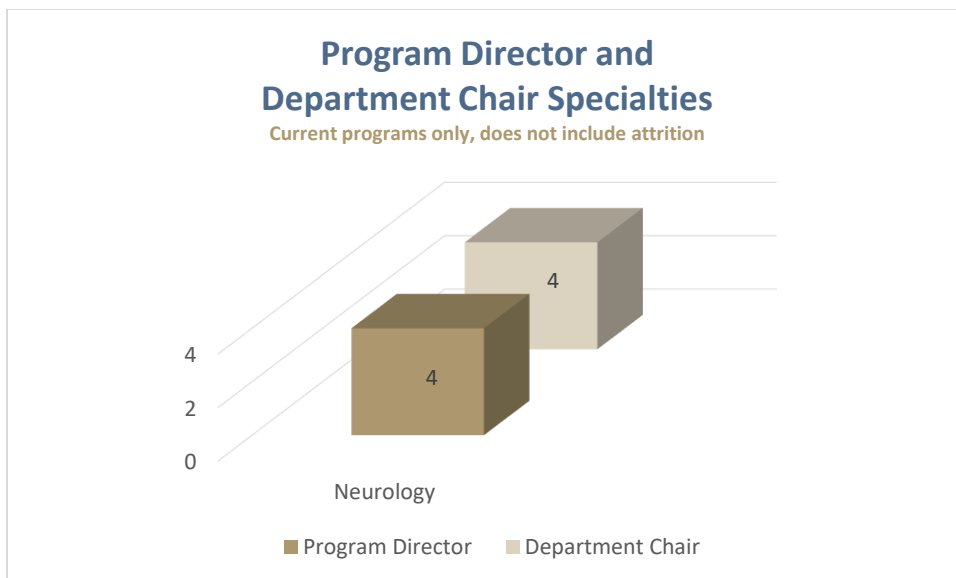
Fellowships

| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|------------------------|----------------------|
| 2010 | 7 | 3 | 4 <i>1 Inactive</i> | 2015 x2, 2019 |



| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 1 year | 2 |
| 1 or 2 years | 1 |
| 2 or 3 years | 1 |

*Currently accredited programs only – does not include programs lost to attrition



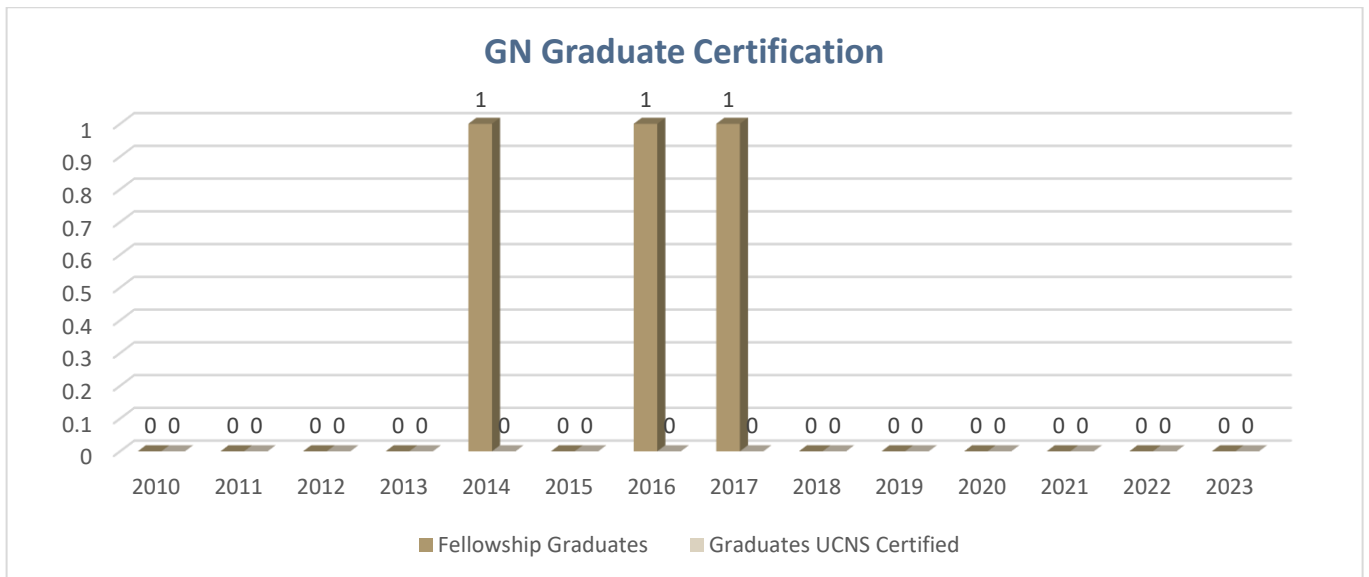
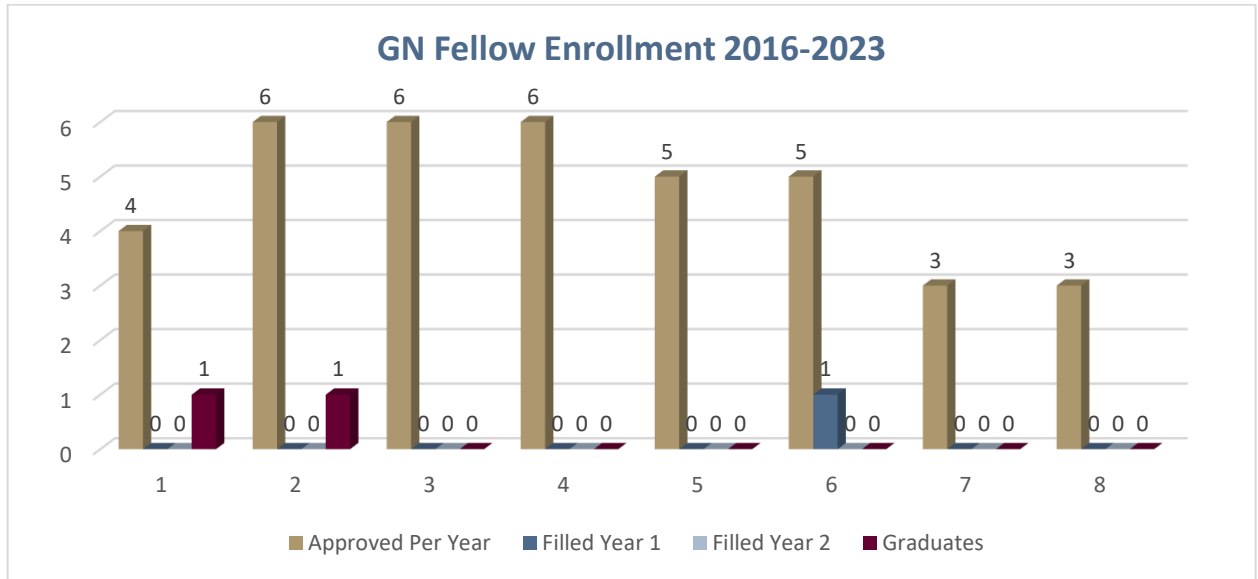
Fellows

Fellows

Graduates: 3 | UCNS Certified: 0 (Examination has not been offered since fellows graduated)

Primary Specialty and Certification

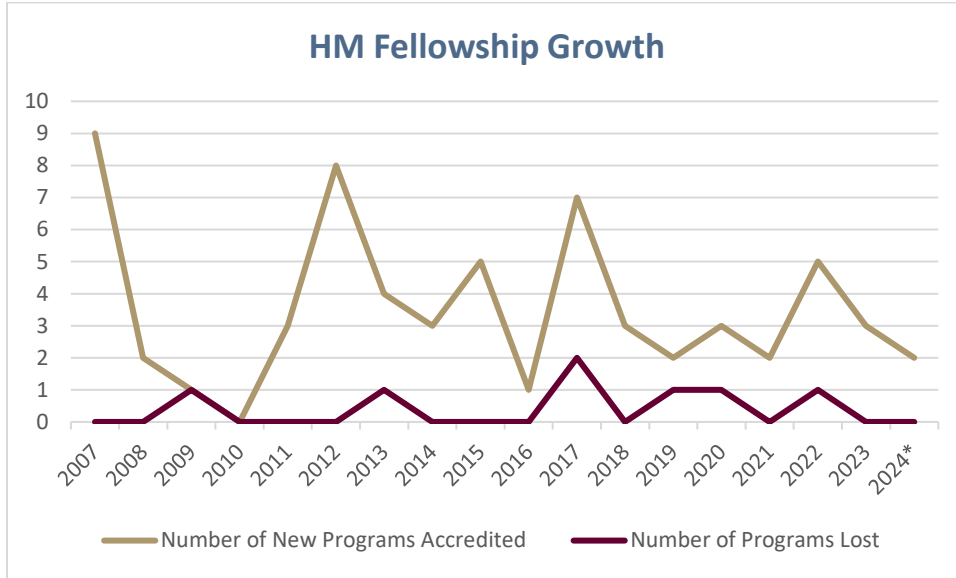
| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|-------------------|---------------------|-----------------------|---------------------|
| Neurology | 3 | ABMS | 3 |



Subspecialty: Headache Medicine

Fellowships

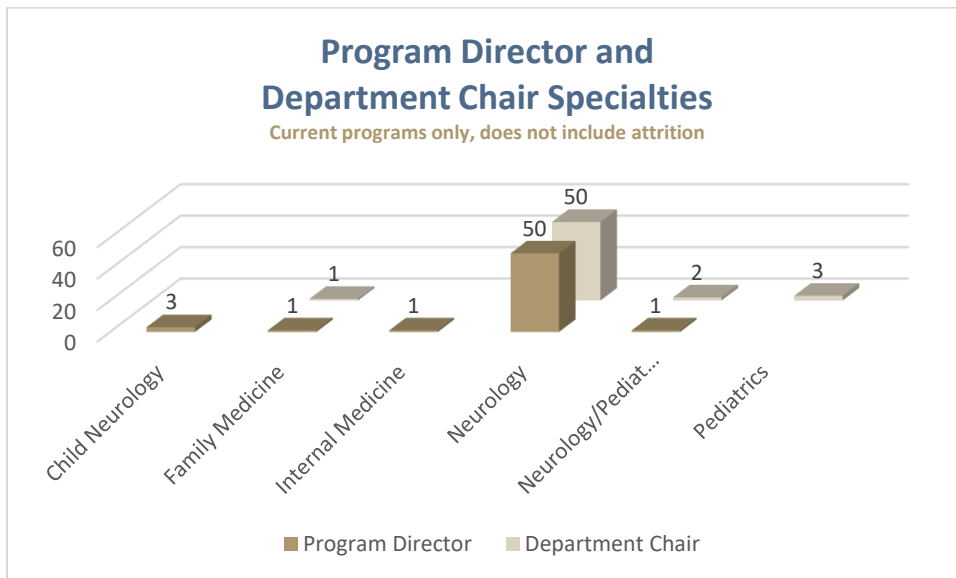
| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|------------------|---------------------------------------|
| 2007 | 63 | 7 | 56 3 Inactive | 2009, 2013, 2017 x2, 2019, 2020, 2022 |



*2024 fall accreditation actions TBD

| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 1 year | 50 |
| 1 or 2 years | 5 |
| 1, 2, or 3 years | 1 |

*Currently accredited programs only – does not include programs lost to attrition



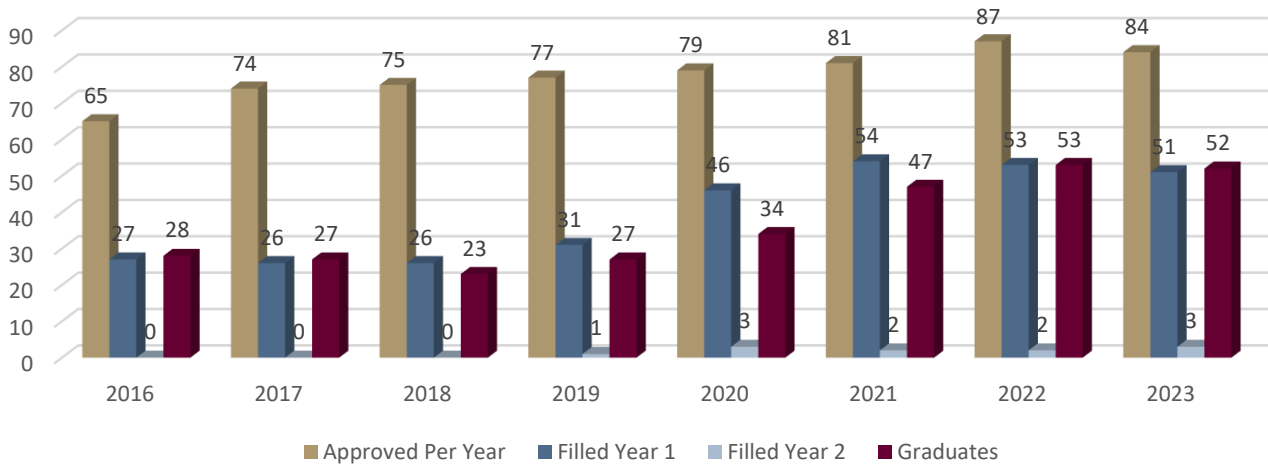
Fellows

Graduates: 404 | UCNS Certified: 282 (54 applications received for 2024 examination)

Primary Specialty and Certification

| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|--------------------------------------|---------------------|-----------------------|---------------------|
| Child Neurology | 24 | ABMS | 372 |
| Child Neurology/Pediatrics | 1 | RCPSC | 8 |
| Dentistry | 1 | AOA | 5 |
| Family Medicine | 11 | No | 18 |
| Internal Medicine | 11 | | |
| Neurology | 345 | | |
| Neurology/Pediatrics | 1 | | |
| Ophthalmology | 1 | | |
| Pediatrics | 3 | | |
| Physical Medicine and Rehabilitation | 3 | | |
| Psychiatry | 2 | | |

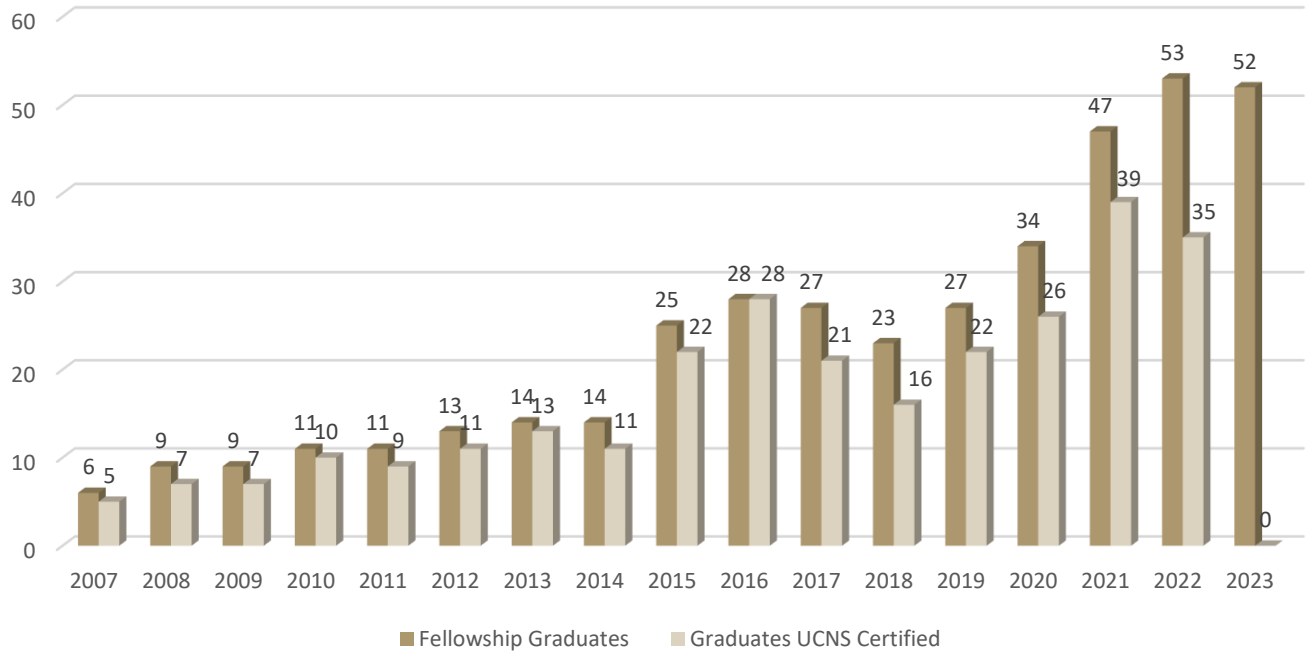
HM Fellow Enrollment 2016-2023



Certification Pass Rates (tracking began in 2014)

| Year | Pass Rate | |
|------|-----------|------------|
| | Fellow | Non-Fellow |
| 2014 | 100% | 83% |
| 2016 | 96% | 82% |
| 2018 | 96% | 83% |
| 2020 | 98% | 96% |
| 2022 | 100% | 96% |

HM Graduate Certification



Subspecialty: Interventional Neurology

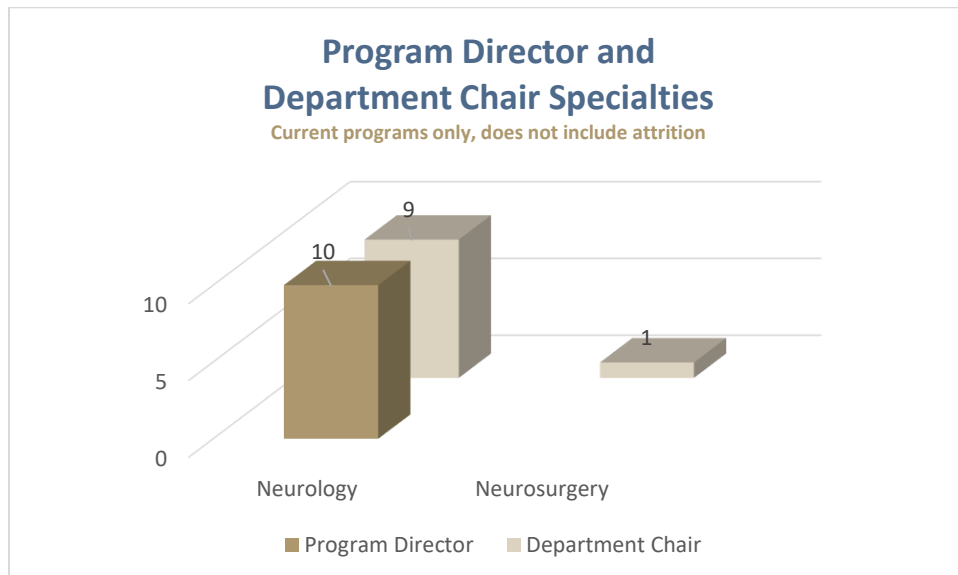
Fellowships

| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|---------------|----------------------|
| 2022 | 10 | 0 | 10 | |



| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 2 years | 10 |

*Currently accredited programs only – does not include programs lost to attrition

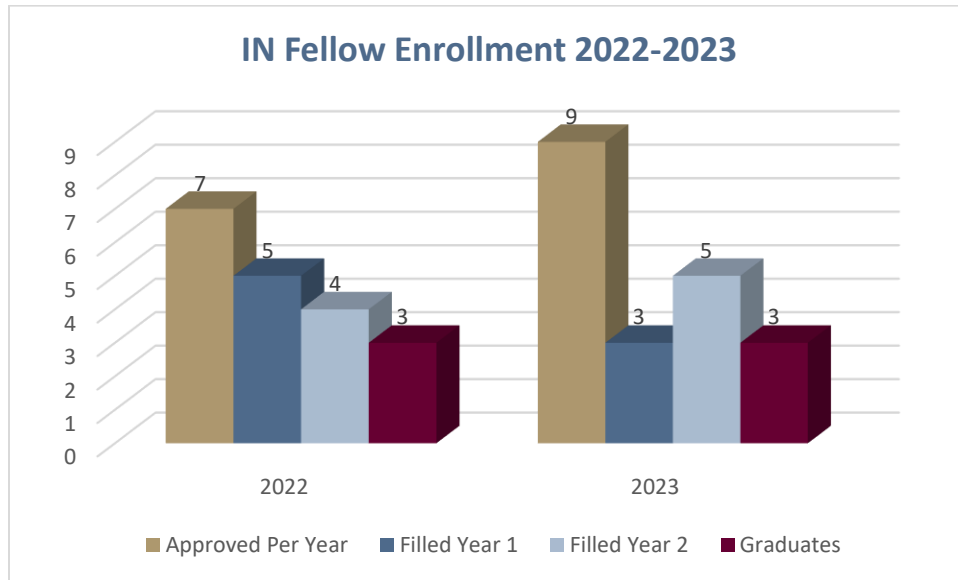


Fellows

Graduates: 6 | UCNS Certified: 0 (1 application received for 2024 examination)

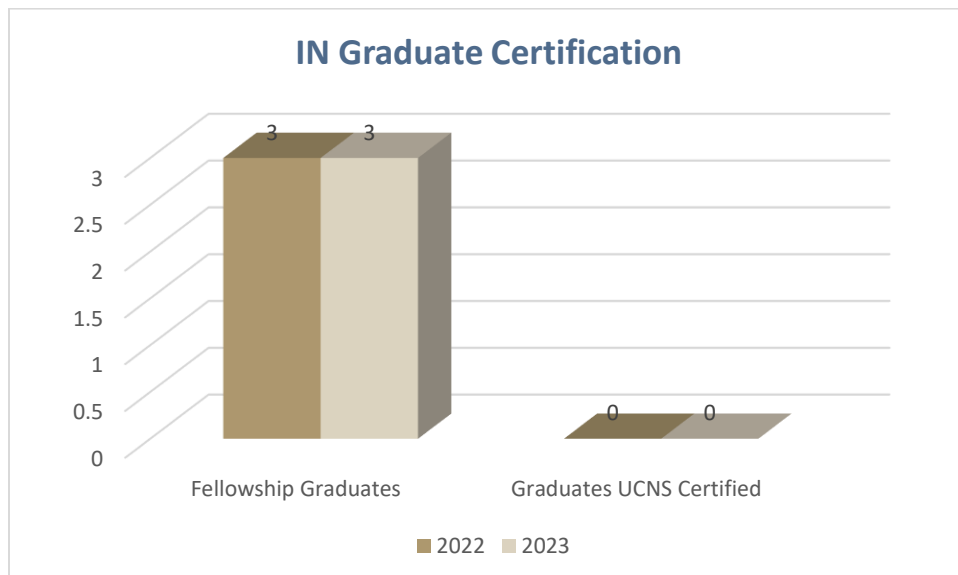
Primary Specialty and Certification

| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|------------------------------|---------------------|-----------------------|---------------------|
| Neurology | 3 | ABMS | 6 |
| Neurology/Vascular Neurology | 3 | | |



Certification Pass Rates (tracking began in 2014)

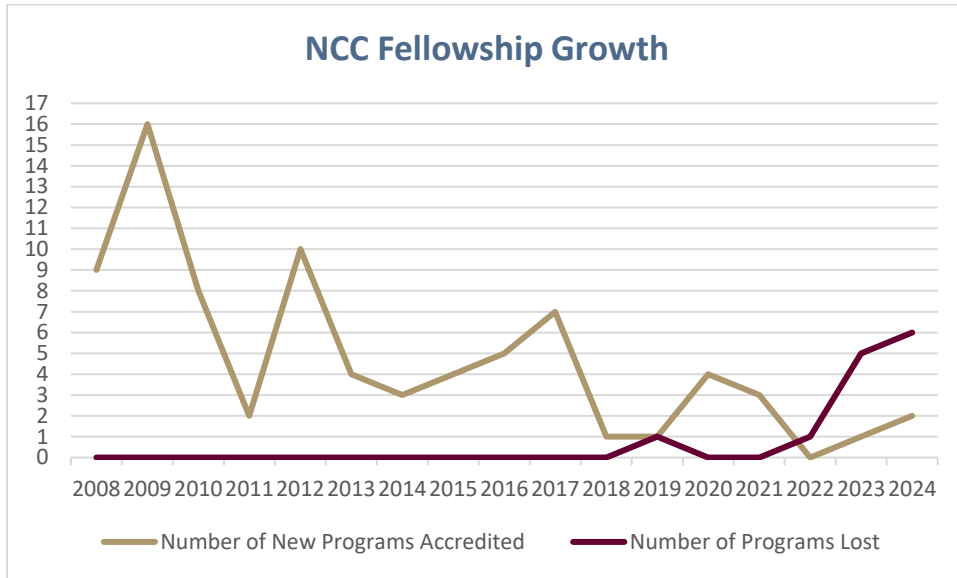
| Year | Pass Rate | |
|------|-----------|------------|
| | Fellow | Non-Fellow |
| 2022 | N/A | 96% |



Subspecialty: Neurocritical Care

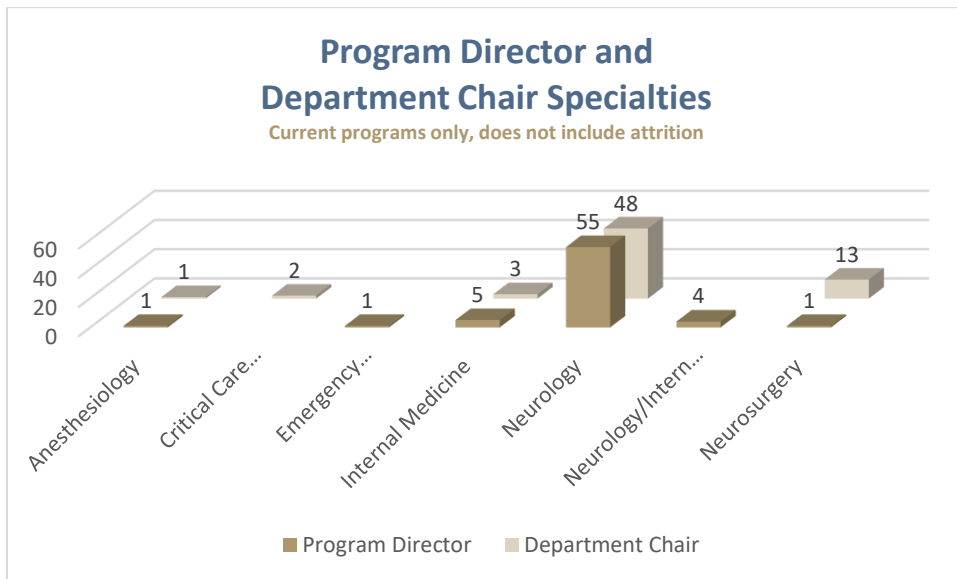
Fellowships

| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|-------------------------|------------------------------|
| 2008 | 80 | 13 | 67 <i>1 Inactive</i> | 2019, 2022, 2023 x5, 2024 x6 |



| Program Construction | Number of Programs* | One-Year Tracks | Number of Programs* |
|----------------------|---------------------|------------------------|---------------------|
| 2 years | 23 | Critical Care Medicine | 13 |
| 1 or 2 years | 43 | Neurosurgery | 3 |
| 1, 2, or 3 years | 1 | Both | 27 |

*Currently accredited programs only – does not include programs lost to attrition



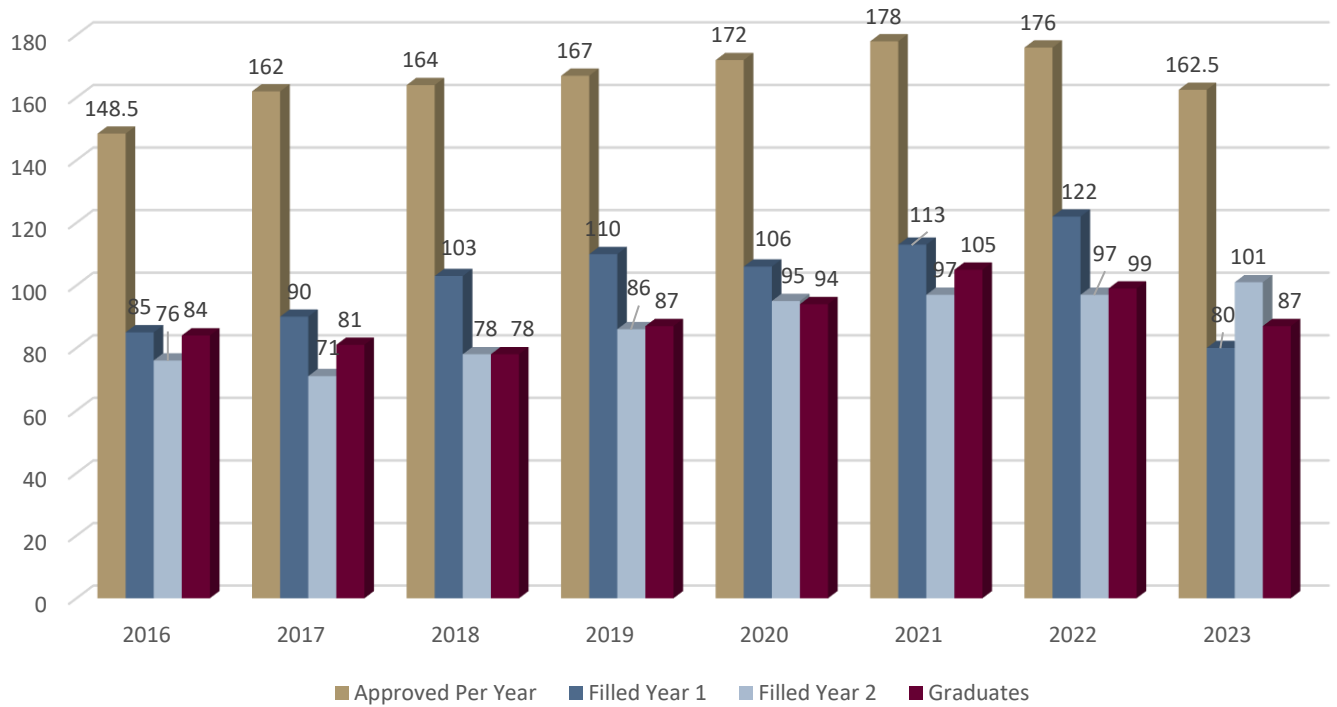
Fellows

Graduates: 1037 | UCNS Certified: 550

Primary Specialty and Certification

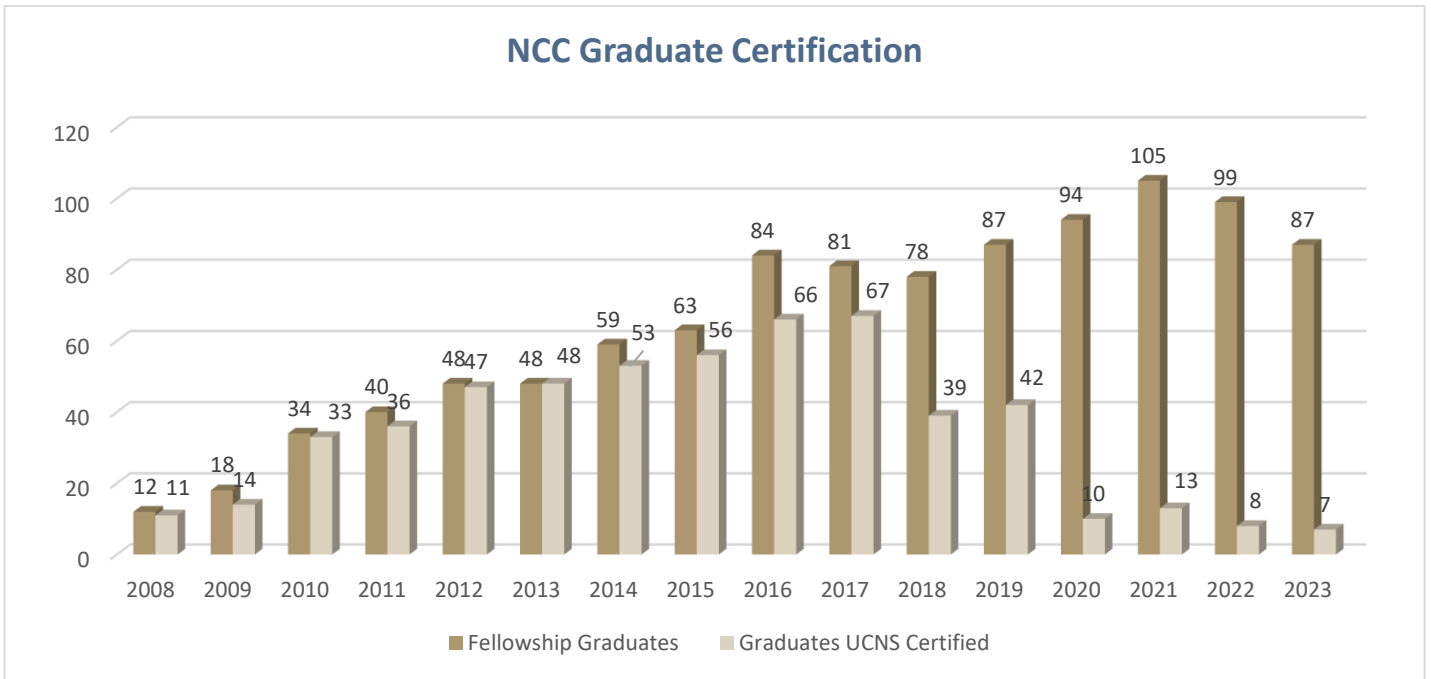
| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|--------------------------------------|---------------------|-----------------------|---------------------|
| Anesthesia | 25 | ABMS | 963 |
| Anesthesia/Internal Medicine | 1 | RCPSC | 4 |
| Emergency Medicine | 41 | AOA | 5 |
| Family Medicine | 2 | No | 65 |
| Internal Medicine | 116 | | |
| Internal Medicine/CCM | 1 | | |
| Internal Medicine/Emergency Medicine | 1 | | |
| Neurology | 797 | | |
| Neurology/Internal Medicine | 12 | | |
| Neurology/Pediatrics | 1 | | |
| Neurosurgery | 34 | | |
| Pediatrics | 1 | | |
| Pulmonology | 1 | | |
| Radiology | 1 | | |
| Surgery | 2 | | |
| Vascular Surgery | 1 | | |

NCC Fellow Enrollment 2016-2023



Certification Pass Rates (tracking began in 2014)

| Year | Pass Rate | |
|------|-----------|------------|
| | Fellow | Non-Fellow |
| 2013 | 94% | 73% |
| 2015 | 96% | 47% |
| 2017 | 86% | 51% |
| 2019 | 83% | 70% |
| 2021 | 88% | 76% |
| 2023 | 85% | 76% |



Subspecialty: Neuroimaging

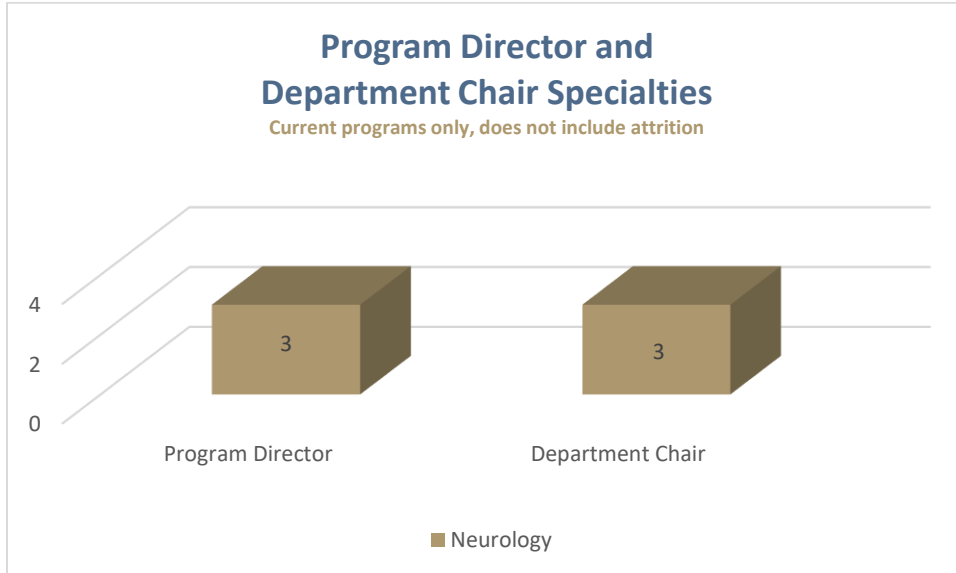
Fellowships

| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|------------------------|----------------------|
| 2009 | 6 | 3 | 3 <i>1 Inactive</i> | 2013, 2019, 2024 |



| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 1 year | 3 |

*Currently accredited programs only – does not include programs lost to attrition

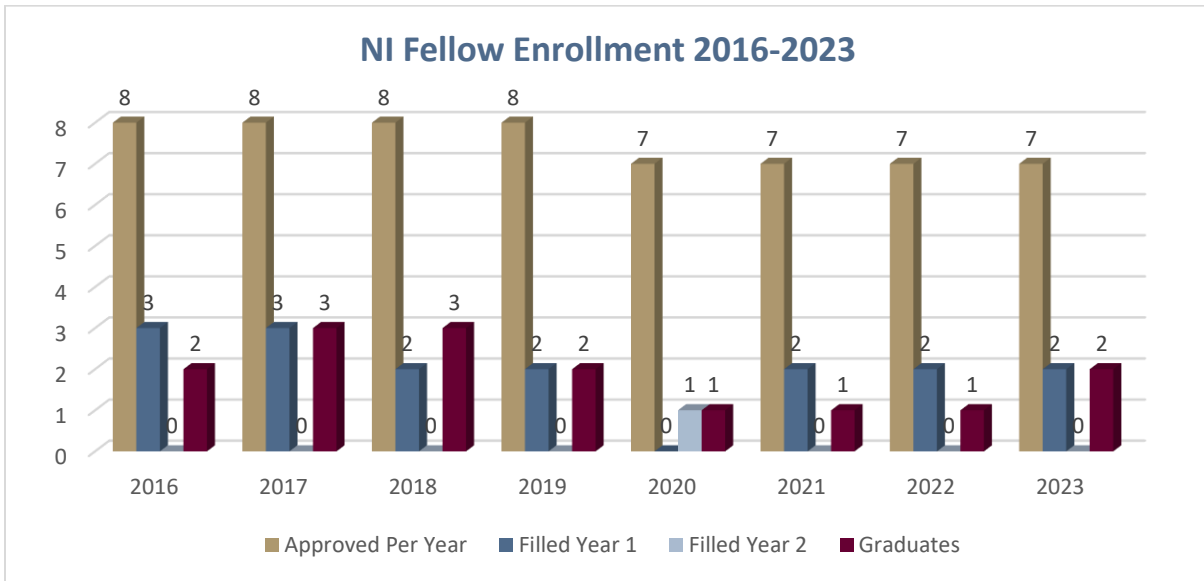


Fellows

Graduates: 42 | UCNS Certified: 30 (1 application received for 2024 suspended examination)

Primary Specialty and Certification

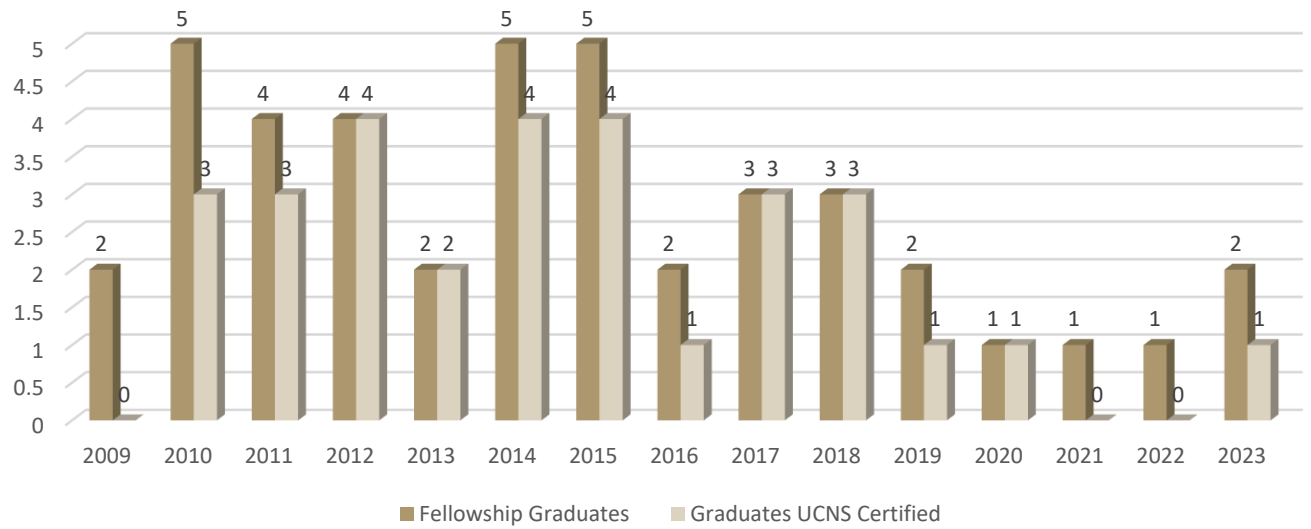
| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|-------------------|---------------------|-----------------------|---------------------|
| Neurology | 42 | ABMS | 40 |
| | | No | 1 |
| | | Unknown | 1 |



Certification Pass Rates (tracking began in 2014)

| Year | Pass Rate | |
|------|-----------|------------|
| | Fellow | Non-Fellow |
| 2015 | 90% | 86% |
| 2017 | 100% | 84% |
| 2019 | 100% | 100% |
| 2021 | 100% | 100% |
| 2023 | 100% | 60% |

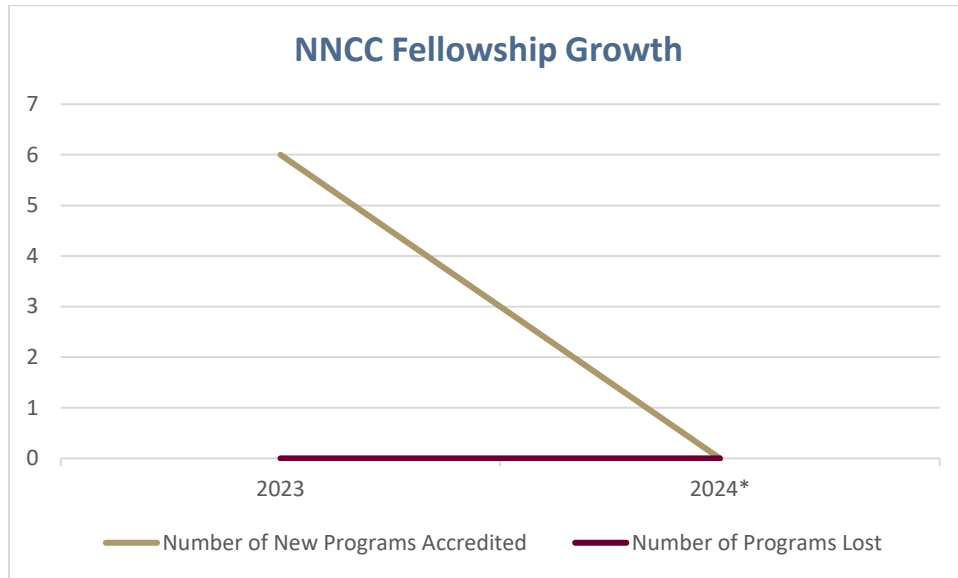
NI Graduate Certification



Subspecialty: Neonatal Neurocritical Care

Fellowships

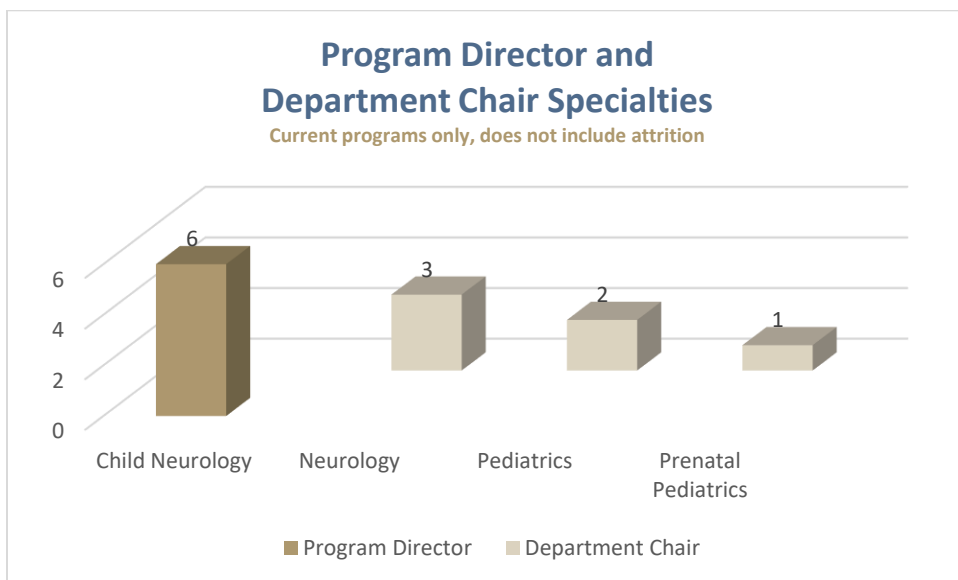
| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|---------------|----------------------|
| 2023 | 6 | 0 | 6 | |



*2024 fall accreditation actions TBD

| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 1 year | 5 |
| 1 or 2 years | 1 |

*Currently accredited programs only – does not include programs lost to attrition



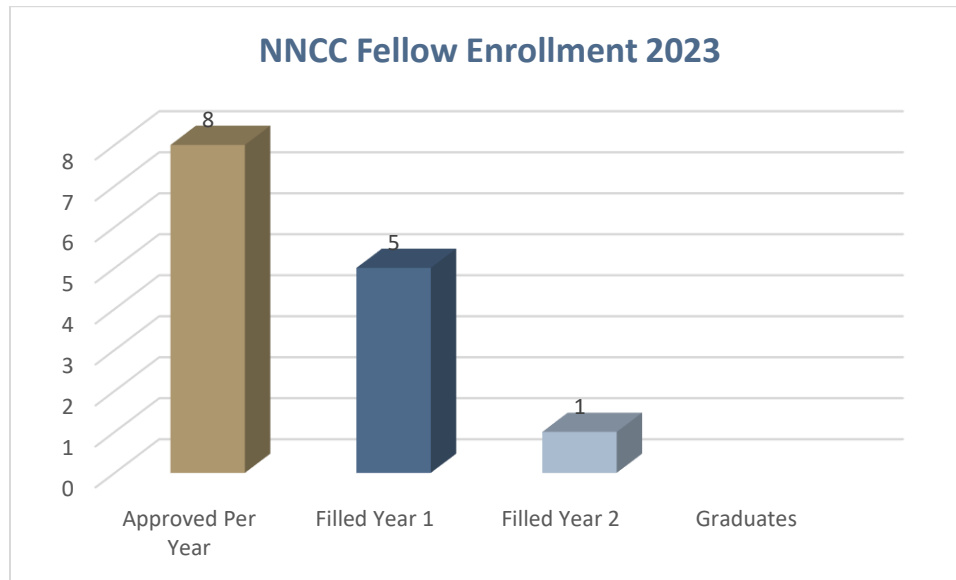
Fellows

Graduates: 0 | UCNS Certified: 0

Primary Specialty and Certification

Primary Specialty: NA

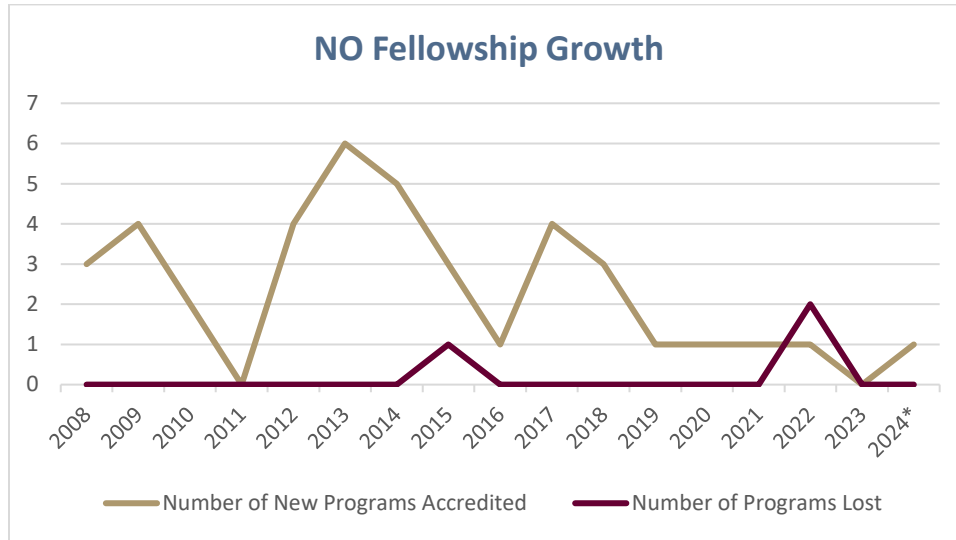
Primary Board Certification: NA



Subspecialty: Neuro-oncology

Fellowships

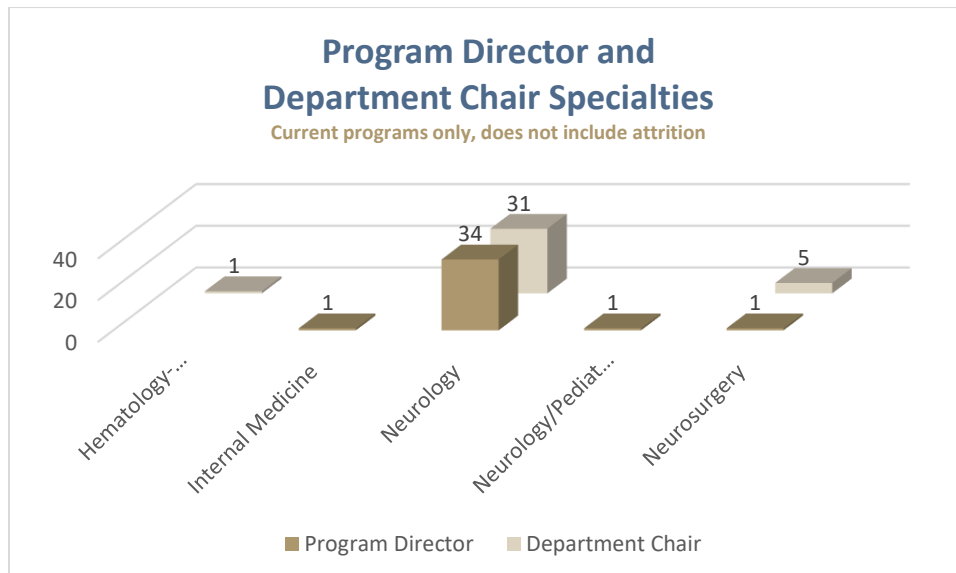
| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|-------------------------|----------------------|
| 2008 | 40 | 3 | 37 <i>3 Inactive</i> | 2015, 2022 x2 |



*2024 fall accreditation actions TBD

| Program Construction | Number of Programs* |
|----------------------|---------------------|
| 1 year | 7 |
| 2 years | 5 |
| 1 or 2 years | 21 |
| 1, 2, or 3 years | 3 |
| 2 or 3 years | 1 |

*Currently accredited programs only – does not include programs lost to attrition



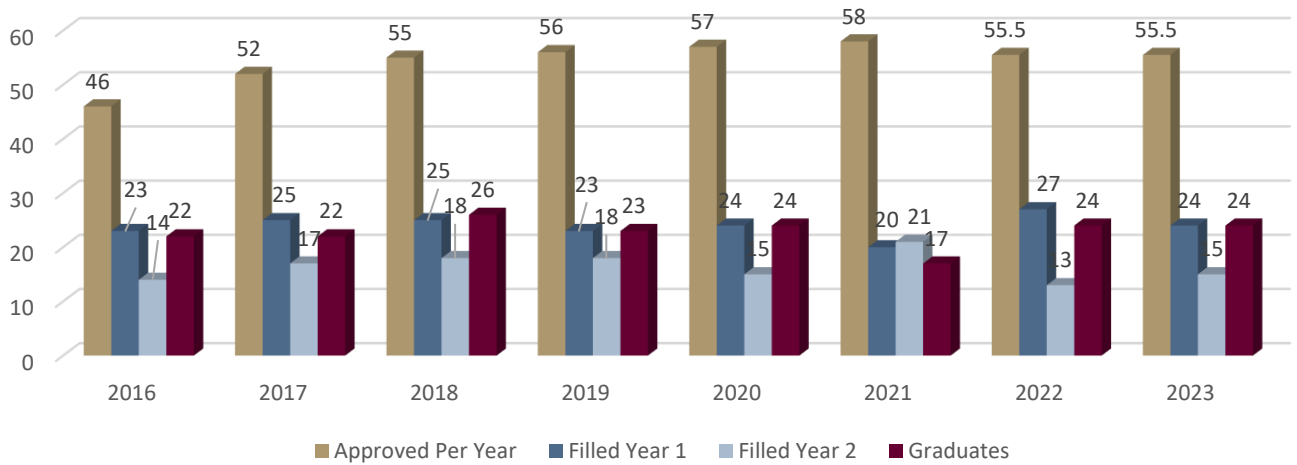
Fellows

Graduates: 291 | UCNS Certified: 231

Primary Specialty and Certification

| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|---|---------------------|-----------------------|---------------------|
| Child Neurology | 3 | ABMS | 278 |
| Internal Medicine | 6 | RCPSC | 4 |
| Internal Medicine/Hematology-Oncology | 1 | AOA | 1 |
| Internal Medicine/Medical Oncology | 12 | No | 8 |
| Neurology | 258 | | |
| Neurology/Psychiatry | 2 | | |
| Neurosurgery | 3 | | |
| Pediatrics | 1 | | |
| Pediatrics/Pediatrics Hematology-Oncology | 5 | | |

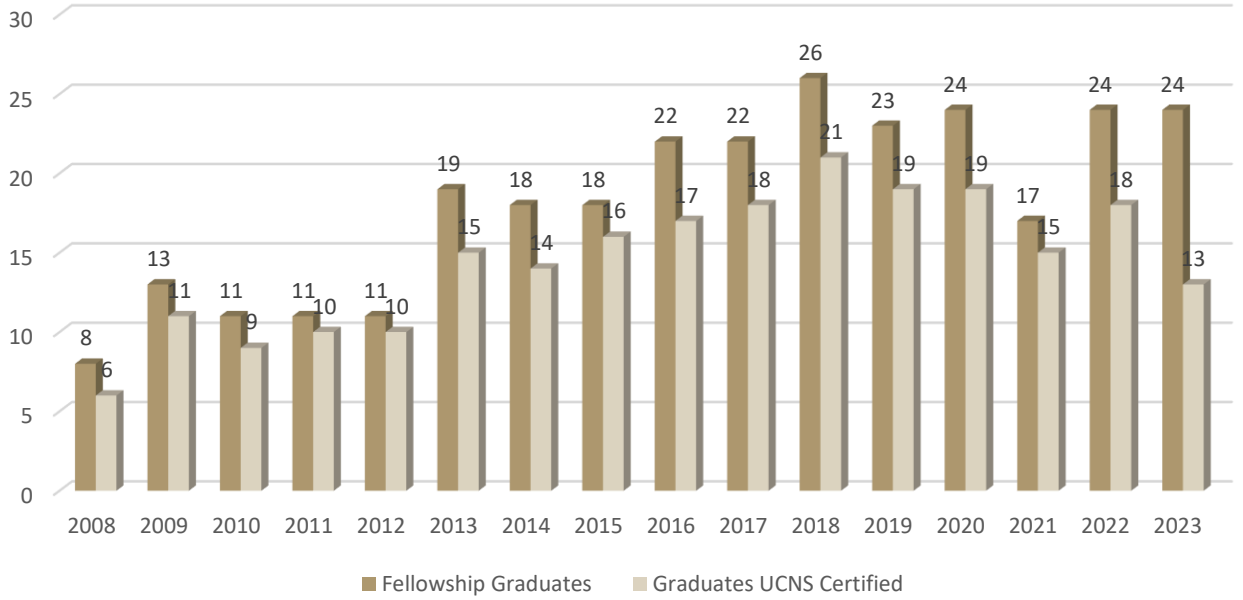
NO Fellow Enrollment 2016-2023



Certification Pass Rates (tracking began in 2014)

| Year | Pass Rate | |
|------|-----------|------------|
| | Fellow | Non-Fellow |
| 2015 | 89% | 76% |
| 2017 | 83% | 67% |
| 2019 | 77% | 56% |
| 2021 | 86% | 70% |
| 2023 | 98% | 100% |

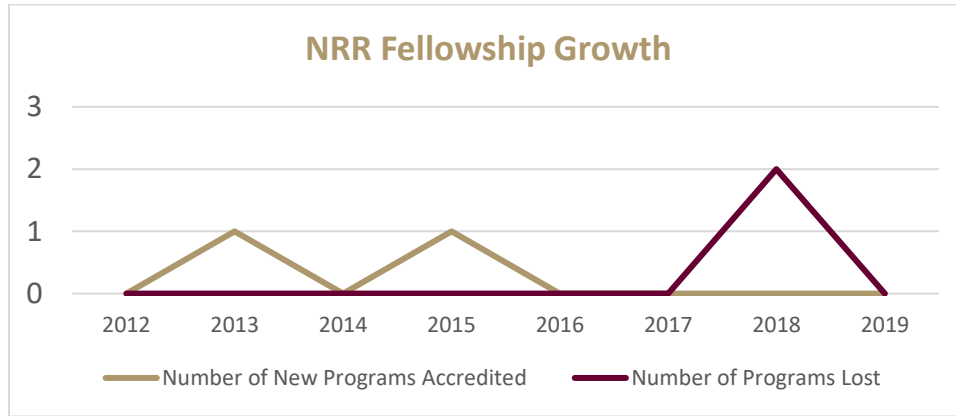
NO Graduate Certification



Subspecialty: Neural Repair and Rehabilitation

Fellowships

| First Program Accredited | Accredited | Lost | Current Total | Years with Attrition |
|--------------------------|------------|------|---------------|----------------------|
| 2013 | 2 | 2 | 0 | 2018 x2 |



Fellows

Graduates: 2 | UCNS Certified: 0

Primary Specialty and Certification

| Primary Specialty | Number of Graduates | Primary Certification | Number of Graduates |
|-------------------|---------------------|-----------------------|---------------------|
| Neurology | 2 | ABMS | 2 |

