

PROCEDURE GME18

Subject:
RESPONSIBILITIES OF PROGRAM DIRECTORS

Effective Date:
NOVEMBER 2004

Applies to:
THE METHODIST HOSPITAL SYSTEM -
GME PROGRAMS

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Originating Area:
GRADUATE MEDICAL EDUCATION COMMITTEE

Target Review Date:
NOVEMBER 2019

I. GENERAL STATEMENT

A Program of Graduate Medical Education (GME) must provide Residents with an extensive experience in the art and science of medicine so that Residents will achieve excellence in diagnosis, care, and treatment of patients. The Program Director, with the assistance of Faculty, is responsible for developing and implementing the academic and clinical program of education for Residents. This document describes the responsibilities of the Program Director in a Program of GME and applies to Programs of GME accredited by the Accreditation Council for Graduate Medical Education (ACGME), the Texas Medical Board (TMB), and other accrediting agencies.

III. DESCRIPTION OF RESPONSIBILITIES

A. Qualifications of Program Director:

1. A single Program Director, who is also a member of the medical staff of Houston Methodist, must have the authority and accountability for the operation of the Program. The Program Director must:
 - Possess requisite specialty expertise as well as documented educational and administrative abilities and experience in his or her field;
 - Be certified in the specialty by the applicable American Board of Medical Specialties (ABMS) Board or possess qualifications judged to be acceptable to the Residency Review Committee, the TMB, or other accrediting agency;
 - Have current medical licensure; and
 - Be appointed in good standing and based at the primary teaching site.

B. Responsibilities of Program Director:

1. With respect to ACGME Accreditation,¹ the Program Director must:
 - Respond promptly to RRC requests for information and maintenance of files;
 - Respond promptly to completing and forwarding all required applications, documents, etc. prior to an RRC site visit or self-study visit;

¹ Responsibilities apply only to Program Directors of ACGME-accredited Programs of GME

- Prepare documentation of Internal Review materials and reports as required by the GME Committee's protocol for Internal Reviews (see Internal Review Procedure GME 20);
 - Develop action plans to correct areas of noncompliance as identified by an annual program review, internal review, RRC site visit, or other accrediting body; and
 - Obtain review and approval of the GMEC and DIO prior to submitting information or requests to the ACGME, including the following:
 - applications for ACGME accreditation of new programs;
 - changes in resident complement
 - responses to program citations
 - major changes in program structure or length of training
 - progress reports requested by the RRC
 - request for increase or any change to resident duty hours
 - voluntary withdrawals of ACGME-accredited programs
 - requests for appeal of an adverse action
 - appeal presentations to a Board of Appeal or the ACGME
 - requests for changes in the programs that would have significant impact, including financial, on the Program or Houston Methodist.
2. With respect to Houston Methodist's governance of Programs of GME, the Program Director must:
- Participate in and represent the Program at the GME Committee and serve on subcommittees, task forces, and internal review panels as requested;
 - Comply with Houston Methodist's GME policies/procedures;
 - Comply with ACGME Institutional and Program-specific requirements¹;
 - Comply with requirements of other accrediting bodies;
 - Maintain accurate and complete program files;
 - Ensure residents and faculty comply with periodic surveys by the ACGME¹ and the GME Committee;
 - Respond promptly to requests for information, documentation, etc., from the Houston Methodist GME Department or the GME Committee; and
 - Report monthly the presence of other learners (including, but not limited to, residents from other specialties, subspecialty fellows, PhD students, and nurse practitioners) in the program to the DIO and GMEC.
3. With respect to the educational aspects of the Program, the Program Director must:
- Administer and maintain an educational environment conducive to educating Residents in each of the ACGME competency areas;
 - Oversee and ensure the quality of didactic and clinical education in all sites that participate in the program, including developing and periodically reviewing and revising the educational curriculum as defined in the ACGME Program Requirements for the specialty¹;
 - For non-ACGME accredited programs, develop and periodically review and revise the curriculum as defined by the appropriate specialty or accrediting body;
 - Provide instruction and experience with quality-assurance/performance improvement, including the tracking of autopsy results for patients cared for by the Program's Residents;
 - Use specialty specific milestones¹ to assess the competence of Residents in the General Competencies of patient care, medical knowledge, practice-

- based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice;
- Use dependable measures to assess the competence of Residents in other areas as define by program- or specialty-requirements;
 - Implement of a process that links educational outcomes with program improvement;
 - Ensure that each Resident develops a personal program of learning to foster continued professional growth;
 - Facilitate the participation of Residents in the educational and scholarly activities of the program;
 - Ensure that Residents receive the appropriate training to teach and supervise other Residents and students and that they assume these teaching responsibilities;
 - Assist Residents in obtaining appointment to appropriate institutional and departmental committees and councils whose actions affect their education and/or patient care;
 - Ensure that Residents have the opportunity at least annually to evaluate Faculty and their educational experiences in writing and in a confidential process;
 - Ensure that Residents' evaluations of the Faculty and of the Program are used to improve the Program's educational effectiveness;
 - Ensure that Residents participate in an educational program regarding physician impairment, including substance abuse;
 - Ensure that Residents and Faculty participate annually in an educational program concerning fatigue recognition and management; and
 - Ensure that Residents can attend educational programs required by the Program, Houston Methodist, or other accrediting agencies.
 - Appoint members of the clinical competency committee and the program evaluation committee.
4. With respect to Program administration, the Program Director must:
- Ensure that each Resident maintains a current and continuous TMB Physician-In-Training Permit or that the Resident obtains a full Texas medical license;
 - With the assistance of the DIO, develop, implement, and periodically review program-specific policies that are consistent with Houston Methodist GME procedures for:
 - Resident selection
 - Resident evaluation
 - Resident promotion and reappointment
 - Resident dismissal and adverse Academic Actions
 - Residency Duty Hours and Program surveys or mechanisms to document compliance
 - Moonlighting policy and documentation of any Resident who chooses to moonlight;
 - Resident Supervision
 - Protocol outlining the circumstances in which Residents must communicate with supervisory faculty. Ensure that only eligible Residents, according to ACGME requirements, Houston Methodist GME procedures, and other accrediting agencies are enrolled in the Program;
 - Ensure that all Applicants for the Program are informed in writing of the terms and conditions of employment and benefits including a copy of the Resident's Agreement of Appointment;

- Provide written notice of intent not to renew a Resident's Agreement of Appointment no later than four (4) months prior to the end of the Resident's current Appointment, except for extenuating circumstances;
 - Develop means for supervising Residents to provide progressive increasing responsibility according to the Resident's level of education, ability, and experience;
 - Assess and document Resident's abilities for clinical procedures;
 - Obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation for each resident transferring from another program before accepting the resident;
 - Provides timely verification of residency education and summative performance evaluations for residents who leave the program prior to completion;
 - Provide timely and appropriate information to residents about the effect of leave time on eligibility for specialty board examinations.
5. With respect to oversight of the Program, the Program Director must:
- Oversee and organize the activities of the educational program in all institutions that participate in the Program to include:
 - Approving the selection of program faculty and other Program personnel as appropriate
 - Approving a local director at each participating site who is accountable for resident education
 - Monitoring Resident supervision at all participating institutions;
 - Oversee and liaise with appropriate personnel of other institutions or clinical sites participating in the training of the Program's Residents;
 - Create clinical rotation and on-call schedules to provide readily available supervision to Residents on duty, particularly backup support for when patient care responsibilities that are especially difficult or prolonged;
 - Structure Duty Hours and on-call periods to focus on the needs of the patient, continuity of care, and the Resident's educational needs and comply with limitations as set by the institution and the appropriate RRC;
 - Revise schedules as needed and communicate revisions to the Houston Methodist GME Department to enable accurate IRIS reporting;
 - With the assistance of the GME Office and the Department of Legal Services, prepare and maintain appropriately executed Program Letters of Agreement between Houston Methodist (the Program) and each participating institution, including clinical sites that:
 - Identifies the faculty who will assume both educational and supervisory responsibilities for Residents
 - Specifies the faculty's responsibilities for teaching, supervision, and formal evaluation of Residents
 - Specifies the content of the education experience, including educational goals and objectives by competency and by year of training
 - Specifies the period of assignment of the Residents, the financial arrangements, and the details for insurance and benefits
 - States the policies and procedures that govern the Resident's education while assigned;
 - Are reviewed and revised every five years.
 - Submit any additions or deletions of participating sites routinely providing an educational experience, required for all residents, of one month full

time equivalent (FTE) or more through the ACGME Accreditation Data System (ADS)

IV. COMMITTEE REVIEWING/APPROVING PROCEDURE

1. Graduate Medical Education Committee [11 November 2004] [revised 13 September 2007] [revised 12 November 2009] [10 November 2016]

AUTHORITATIVE REFERENCES

Accreditation Council for Graduate Medical Education, Institutional Requirements, effective July 1, 2015.

Accreditation Council for Graduate Medical Education, Common Program Requirements, effective July 1, 2016. 1.B.2., II,A.