PROCEDURE GME18

Subject: Effective Date:

RESPONSIBILITIES OF PROGRAM DIRECTORS NOVEMBER 2004

Applies to:HOUSTON METHODIST HOSPITAL SYSTEM

August 2024

Date Revised:
August 2024

GME PROGRAMS

Originating Area: Target Review Date:

GRADUATE MEDICAL EDUCATION COMMITTEE August 2027

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. Program Directors are appointed by and report to their respective Department Chair. 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.

II. DESCRIPTION OF RESPONSIBILITIES

A. Qualifications of Program Director:

- 1. A single faculty member appointed as Program Director must have the authority and accountability for the overall Program, including compliance with all applicable program requirements. The Program Director must:
 - Possess requisite specialty expertise and at least three years of documented educational and/or administrative experience or qualifications acceptable to the Review Committee;
 - Be certified in the specialty/subspecialty for which they are Program
 Director by the applicable American Board of Medical Specialties (ABMS)
 Board or specialty qualifications that are acceptable to the Residency
 Review Committee, the TMB, or other accrediting agency, or as otherwise
 set forth in the program-specific requirements;
 - Have and maintain a current unrestricted Texas Medical License;
 - Have ongoing clinical activity;
 - Have a medical staff appointment and be appointed in good standing;
 - Be approved by the GMEC prior to submission of appointment is made to the ACGME.

B. Responsibilities of Program Director:

- With respect to all GME Programs (GMEC/TMB-Approved/Non-Standard Training (NST) Programs as well a ACGME Accredited Programs) the Program Director must:
 - Have responsibility, authority, and accountability for: administration and operations; teaching and scholarly activities; resident recruitment and

selection, evaluation, and promotion of residents, and disciplinary action; supervision of residents; and resident education in the context of patient care;

- Be a role model of professionalism;
- Design and conduct the program in a fashion consistent with the needs of the community, the mission of Houston Methodist Hospital, and the mission of the program;
- Develop and oversee a process to evaluate candidates prior to approval as program faculty members for participation in the residency program education and at least annually thereafter;
- Have the authority approve program faculty members for participation in the residency program education at all sites;
- Have the authority to remove program faculty members from participation in the residency program education at all sites;
- Have the authority to remove residents from supervising interactions and/or learning environments that do not meet the standards of the program;
- For accredited programs, the Program Director must devote a minimum of 20% FTE of non-clinical time to the administration of the program when Review Committee does not specify a percentage of time. For GMEC/TMB/NST approved programs, Program Directors must devote a minimum of 20% FTE of non-clinical time to the administration of the program when the closest ACGME Program RC requirements do not specify a percentage of time.
- Promptly respond and submit accurate and complete information required and/or requested by the DIO, GMEC, the ACGME (including ADS Updates, complement changes, participating site changes, etc.) or any other accrediting bodies;
- Respond promptly to the ACGME, the GME Office/GMEC, or any other accrediting bodies in completing and forwarding all required applications, documents, etc. prior to any site visit or self-study visit;
- Prepare and submit required documents and materials for Internal or Special Reviews as required by the GME Committee's protocol for Internal Reviews (see Internal Review Procedure GME 20);
- Conduct an Annual Program Evaluation (APE) to submit to the GME Office;
- Develop and implement improvement plans to correct areas of noncompliance as identified by an annual program review, internal review, special review, annual surveys or site visit; and
- Obtain review and approval of the GMEC and DIO prior to submitting information or requests to the ACGME (as required in the Institutional Requirements and the Common Program Requirements) or any other accrediting body, including the following:
 - 1. applications for accreditation of new programs;
 - 2. changes in resident complement
 - 3. responses to program citations
 - 4. major changes in program structure or length of training
 - 5. progress reports requested by the RRC or accrediting body
 - 6. request for increase or any change to resident duty hours
 - 7. voluntary withdrawals of ACGME-accredited programs
 - 8. requests for appeal of an adverse action
 - 9. appeal presentations to a Board of Appeal or the ACGME
 - 10. requests for changes in a program that would have significant impact, including financial, on the Program or Houston Methodist.

- 11. Additions or deletions of participating sites routinely providing an educational experience.
- 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;
 - Maintain current knowledge and compliance with Houston Methodist as well as GME policies/procedures, including those related to grievances and due process; adverse academic actions; and employment and nondiscrimination;
 - Maintain current knowledge and compliance with ACGME Institutional and Program-specific requirements;
 - Maintain current knowledge and compliance with ACGME Clinical Learning Environment Review (CLER) expectations;
 - Maintain current knowledge and compliance with requirements of other accrediting bodies;
 - Maintain accurate and complete program files;
 - Ensure residents and faculty comply with periodic surveys by the ACGME and the GME Committee;
 - Respond promptly to requests for information, documentation, etc., from the Houston Methodist GME Department or the GME Committee; and
 - Report to the DIO and GMEC any circumstances when the presence of other learners (including, but not limited to, residents from other specialties, subspecialty fellows, PhD students, and nurse practitioners) has interfered with the residents' education in the program.
- 3. With respect to the educational aspects of the Program, the Program Director must:
 - Administer and maintain a positive learning environment conducive to educating Residents in each of the ACGME competency domains;
 - Provide a learning environment in which residents can raise concerns and provide feedback in a confidential manner as appropriate without fear of intimidation or retaliation.
 - 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 specialty;
 - For non-ACGME accredited programs, develop and periodically review and revise the curriculum as defined by the appropriate specialty or accrediting body;
 - Ensure Residents participate in quality and patient safety activities, including activities aimed at reducing health care disparities;
 - Prepare and distribute to Residents and faculty the content of the education experience, including competency based educational goals and objectives by year of training;
 - Use specialty specific milestones to assess the competence of Residents in the General Competencies of patient care, medical knowledge, practicebased 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 defined by program or specialty-requirements;

- Implement 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 are provided instruction and experience in pain management, if applicable for the specialty, including recognition of the signs of addiction.
- 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:
 - Attend GMEC or appoint an official proxy to attend the meetings on his/her behalf. The proxy must be an associate program director or a core faculty member that will provide the Program Director the information shared during GMEC.
 - Ensure that each Resident maintains a current TMB Physician-In-Training Permit or a full and unrestricted 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 mechanisms to document compliance
 - Resident moonlighting and documentation of any Resident who chooses to moonlight;
 - Resident Supervision
 - Establish guidelines outlining the circumstances in which Residents must communicate with supervising faculty.
 - Ensure that candidates for Houston Methodist GME Programs meet the qualifications and prerequisite post-graduate clinical education required for initial entry or transfer, according to ACGME requirements, Houston Methodist GME procedures, (including GME03, Resident Eligibility, Selection

- and Appointment and GME30, Passage of Medical Licensing Examinations) or other accrediting agencies prior to entry in the Program;
- Ensure that all Applicants for the Program are informed in writing of the terms and conditions of employment and benefits including receiving a copy of the Resident's Agreement of Appointment;
- Ensure that all Applicants who are offered an interview are provided with information related to the applicant's eligibility for the relevant specialty board exam(s).
- 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;
- Provide verification of residency education within 30 days of a resident's request
- Document verification of program completion for all graduating residents within 30 days
- Provide verification of an individual resident's completion upon a resident's request, and within 30 days.
- Provide 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:
 - 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 a site director at each participating site who is accountable for resident education in collaboration with the program director.
 - Specifies the faculty's responsibilities for teaching, supervision, and formal evaluation of Residents;
 - Specifies the content of the education experience, including competency based educational goals and objectives 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 ten years.
 - Approving the selection of program faculty and other Program personnel as appropriate
 - 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;
- Comply with institutional and ACGME Clinical and Education Work Hours and structure these work hours and on-call periods to focus on the needs of the patient, continuity of care, the Resident's educational needs as well as reasonable opportunities for rest and personal activities;
- Revise schedules as needed and communicate revisions to the Houston Methodist GME Office to enable accurate IRIS reporting;
- 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)

III. COMMITTEE REVIEWING/APPROVING PROCEDURE

1. Graduate Medical Education Committee [11 November 2004] [revised 13 September 2007] [revised 12 November 2009] [10 November 2016] [14 November 2019] [13 March 2024] [14 August 2024]

AUTHORITATIVE REFERENCES

Accreditation Council for Graduate Medical Education, Institutional Requirements, effective July 1, 2022.

Accreditation Council for Graduate Medical Education, Common Program Requirements for Residency and Fellowship Programs effective July 1, 2023.