Residency or Fellowship Program Director Job Description

General Statement

Directors of graduate medical education programs (i.e., residency and fellowship program directors) must meet the highest standards of excellence including those standards set forth in Medical Center policies 0262 (Standards for Professional Behavior) and 0283 (Behavioral Code of Conduct). For the purpose of this document, trainees and fellows shall be referred to as GME Trainees.

Program directors shall provide an organized educational program with guidance and supervision of the trainee, facilitating the trainee’s ethical, professional, and personal development while ensuring safe and appropriate care for patients. The educational program shall foster the development of the skills, knowledge, and attitudes leading to proficiency in all the domains of clinical competency. The program must also provide for each trainee the essential learning activity of personal and graduated patient care under the guidance and supervision of faculty members who give value, context, and meaning to those patient interactions. Within the program, trainees are given graded and progressive responsibility. As they gain competence, experience, and demonstrate growth in their ability to care for patients, trainees assume roles that permit them to exercise their skills with greater independence.

Specific responsibilities of each program’s administration may be delegated by the program director, but he/she is responsible to the Designated Institutional Official (DIO), the GME Committee (GMEC), and to the Accreditation Council for Graduate Medical Education (ACGME) Residency Review Committee (RRC) or appropriate accrediting institution for the timely, thorough, and accurate completion of all tasks.

Training programs at the University of Virginia include those involved with the training of physicians and non-physicians, such as chaplaincy, clinical laboratory medicine, clinical psychology, dentistry, pharmacy, physical therapy, and radiation physics. GME programs may also be characterized as:

- Accredited – for which there are specific Accreditation Council for Graduate Medical Education (ACGME) or other accrediting organization’s common or specialty-specific program requirements
- Non-accredited - for which there are no specific program requirements

The program directors of non-accredited or non-ACGME programs are exempted from some responsibilities. Such exemptions are designated with an asterisk (*) below.

Compliance with Accrediting Organizations

In addition to meeting the goals and expectations of the University of Virginia Medical Center and School of Medicine, each program director must meet the requirements of any and all accreditation organizations. In addition to the ACGME, a number of other regulatory bodies impose requirements on GME programs. These agencies include (but are not limited to) the Department of Health Professions of the Commonwealth of Virginia, and the Joint Commission on Accreditation of Healthcare Organizations. Compliance with these requirements is the responsibility of the program directors, working together with the Graduate Medical Education Office (GMEO) and the institution.
Appointment and Qualifications of the Program Director

- There must be a single program director with authority and accountability for the operation of the program as outlined by the ACGME in its Common Program Requirements [https://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRs_07012016.pdf] or other relevant accrediting institution.
- Nominations of persons for the position of Program Director shall be made by the Department Chair and or Division Chief. Nominations must be brought before the GMEC and DIO for final approval. Approval (appointment) is finalized by a majority vote of the GMEC.
- The program director must possess the requisite specialty expertise, as well as documented educational and administrative abilities as outlined by the ACGME and its Review Committees [https://www.acgme.org/Portals/0/PDFs/Specialty-specific%20Requirement%20Topics/DIO-PD_Qualifications.pdf] and those required by any specialty certifying boards.
- The program director must demonstrate active involvement in patient care and education as demonstrated by meeting clinical practice metrics, involvement in continuing medical education and regional and national professional organization and scientific society activity. It is particularly important that the program director fully participates in and supports the many educational efforts of his or her program directors’ organization (if applicable).
- The program director must hold current medical licensure and appropriate medical staff appointment, remain in good standing, and be based at the primary teaching site.

Additional Responsibilities of the Program Director at UVA

- Submit an Annual Program Evaluation (APE) to the GMEC through New Innovations annually. APEs must include required metrics, areas for improvement and corrective action plans*
- Cooperate in a formal review of the program (Annual Program Review or APR) by the GMEC, DIO or Vice Chair of the GMEC which will be held no less frequently than annually.
- Maintain current knowledge of and compliance with ACGME Institutional Requirements – (www.acgme.org)*
- Participate in GME Committees, subcommittees, ad hoc committees, and task forces when requested (including program representation at all GMEC meetings and participation in GMEC Executive Committee activities, if so named by the Clinical Staff Executive Committee)
- Cooperate promptly with requests by the GMEO and/or GMEC for information or documentation.
- Maintain accurate and complete program files in compliance with institutional record retention policies.
- Ensure that trainees and faculty complete all surveys conducted by the ACGME (ACGME Trainee and Faculty Survey)*
- Work collegially with other program directors, chairs, faculty and staff in the University of Virginia Medical Center and School of Medicine to develop off-service clinical and educational rotations and experiences necessary for trainee education.
- Complete all GMEO requirements to maintain current and continuous contracting, credentialing and appointment of trainees in training programs.
• Arrange and maintain oversight of the annual participation in Electronic Residency Application System (ERAS), the National Resident Matching Program (NRMP) or other similarly approved application and matching programs

• Create, implement, and review annually program-specific policies consistent with GME policies for the following:
  i. Trainee selection
  ii. Trainee supervision
  iii. Trainee evaluation
  iv. Trainee promotion
  v. Trainee dismissal
  vi. Trainee duty hours
  vii. Moonlighting policy and written documentation for any trainee participating in moonlighting
  viii. Trainee grievance process and procedure

• Convene a Clinical Competency Committee, including the appointment of a chair other than self, as required by ACGME Common Program Requirements

• Facilitate institutional monitoring of trainee duty hours by reviewing trainees’ duty hours regularly and report findings through New Innovations to the GMEO and GMEC

• Ensure that all interviewed residency applicants meet eligibility requirements and are provided, at a minimum, a written information sheet containing the URL at which the terms and conditions of employment and benefits, visa policies, and the trainee contract may be found. Importantly, ensure that applicants invited for an interview with the program meet eligibility requirements to do so.

• Provide verification of residency education for trainees who may leave the program prior to completion of their education.

• Determine the appropriate level of education for trainees who are transferring from another residency program. The program director must receive written verification of previous educational experiences and a statement regarding the performance evaluation of the transferring trainee prior to their acceptance into the program. This information must be shared with the DIO prior to final acceptance.

• Provide appropriate supervision of trainees (via the program faculty) so as to allow progressively increasing responsibility by the trainee, according to their level of education, ability, and experience

• Coordinate efforts with the Program Coordinator to manage clinical scheduling of trainees including, but not limited to
  i. Creating clinical rotation and on-call schedules
  ii. Entering these schedules into institutional electronic tracking software, and revising schedules at each cycle completion (e.g., monthly) and communicating the revised schedule to the GME Office to enable accurate IRIS reporting
  iii. Structuring on-call schedules to provide readily available supervision to trainees on duty, and ensure appropriate backup support is available when patient care responsibilities are especially difficult or prolonged
  iv. Structuring duty hours and on-call time periods so as to focus on the needs of the patient, continuity of care, and the educational needs of the trainee, and to comply with requirements as set by the institution, ACGME, and the appropriate RRC
• Provide an evaluation for each trainee at least semi-annually and verify that each trainee has completed the requirements for his/her year of training and will be promoted to the next level of training unless remediation measures have been instituted.

• Provide a final evaluation for each trainee who completes the program. This evaluation must include a review of the trainee’s performance during the final period of education, and should verify that the trainee has demonstrated sufficient professional ability to practice competently and independently. This evaluation must be entered into New Innovations. Final evaluation should include an assessment of the trainee on each of the ACGME General Competencies*.

• Participate, personally, in GME related faculty development at least annually. Facilitate and or support GME related faculty development opportunities for Program’s teaching faculty.

• Support the Program’s Coordinator’s participation in Coordinator specific development opportunities sponsored by the institution (e.g. Coordinator monthly meetings).

• Recognize the CLER pathways of Patient Safety, Health Care Quality, Care Transitions, Supervision, Duty Hours/Fatigue Management & Mitigation, and Professionalism and lead program trainees and faculty to obtain excellence in each one

Financial Support of Program Director

• The Medical Center will provide a minimum annual salary support to each program director in an amount outlined in a agreement between the Medical Center and School of Medicine [AE100].