

## **PROGRAM DIRECTOR RESPONSIBILITIES POLICY**

### **General Summary**

The Program Director (PD) is the physician or dentist with the authority and accountability for the Graduate Medical Education (GME) Program. The PD assures that the Program meets or exceeds all accreditation, regulatory, quality and safety, educational, and institutional standards. The PD provides leadership to develop and continuously improve the Program at Nationwide Children's Hospital (NCH). The PD may delegate duties to an Associate Program Director (APD) while retaining ultimate accountability for each responsibility.

### **Principal Duties and Responsibilities**

The following duties and responsibilities are common to all PDs. Additional responsibilities may be delineated by NCH, the sponsoring department, and/or the accrediting organization(s).

1. Develop and maintain a clinical learning environment conducive to educating residents/fellows (hereafter trainees) who are competent as defined by NCH and the ACGME/AOA/CODA, other accreditation organizations, the certifying Board(s), and/or professional organizations.
  - a. Oversee and ensure the quality of didactic, clinical, quality improvement, and research educational activities in all sites that participate in the Program. Develop and regularly update the Program curriculum to meet accreditation and medical education standards, including methods by which the goals and objectives are assessed and achieved.
  - b. Provide a learning and working environment in which trainees (1) have the opportunity to raise concerns about the Program, faculty, and/or staff and (2) provide feedback in a confidential manner as appropriate, without fear of intimidation or retaliation.
  - c. Orient trainees and complete requisite documentation in a timely manner. Assure that trainees maintain an active license to practice in Ohio and any other state in which they are providing patient care.
  - d. Monitor trainee supervision at all institutions. Update trainee privileges at NCH annually.
  - e. Approve an affiliate Program Director at each participating site who is accountable for trainee education.
  - f. Ensure provision of back up support systems with particular emphasis on situations in which patient care responsibilities are unusually difficult or prolonged.

- g. Ensure that each trainee in the Program is informed of, and performs in accordance with, Medical Staff Bylaws and NCH policies, procedures, and regulations (see GME Leadership Role in Trainees' Performance Management policy).
  - Initiate appropriate educational interventions and/or disciplinary actions to address concerns.
  - Support trainees during investigations into violations of NCH policies, external regulations, and/or laws.
  - Inform trainees of adverse action, grievance and due process procedures as needed.
- h. Serve as a primary mentor/coach for trainees
  - Counsel trainees who experience professional or personal challenges during the Program. Make reasonable adjustments to the Program to accommodate individual needs.
  - Mutually develop an individual learning plan with each trainee. Assess trainee's ongoing progress in meeting the plan. Make adjustments as needed.
  - Ensure that each trainee receives career planning and counseling.
- i. Provide formative and summative evaluation to each trainee
  - Provide each trainee a written evaluation at least semiannually (quarterly for 1 year programs) that includes feedback from faculty and staff knowledgeable about the trainee's performance. For ACGME programs, enter trainee performance on Program Milestones in the ACGME database semiannually.
  - Ensure that each trainee is advancing and gaining experience and progressive responsibility in accordance with individual performance, Program curriculum and ACGME Milestones if appropriate.
  - Review with the trainee operative data and/or procedural logs to verify that these clinical experiences meet requirements necessary for successful Program completion and Board eligibility, if applicable. Change trainee assignments as needed.
  - Document verification of program completion for all graduating trainees within 30 days; provide verification of trainee's completion upon trainee's request within 30 days.
  - Maintain in the permanent files a Final GME Trainee Evaluation of each trainee.
2. Implement mechanisms for periodic, confidential trainee evaluation of faculty and annual evaluation of the overall program.
  - Appoint the Program Evaluation Committee (PEC) to conduct and document the Annual Program Evaluation (APE) as part of the Program's continuous improvement process. PEC must include faculty and trainees.
  - Submit the APE and the annual Action Plan to the GMEC annually and on time using the templates specified by the GME Office.
3. Administer the Program to meet the highest standards of excellence in GME
  - a. In collaboration with the Program faculty, appoint and retain trainees who meet or exceed Program, NCH, and accreditation/regulatory requirements.
    - Periodically update the web page and other Program materials.
    - Evaluate the effectiveness of the recruitment process; make changes as needed.
    - Assure trainees complete mandatory education requirements and the ACGME or NCH annual resident survey, as appropriate.

- b. Select Program faculty in conjunction with the Section/Department Chair; meaningfully engage faculty in Program activities, e.g. curriculum development, APE.
  - Evaluate Program faculty and approve continued participation based on evaluation data.
  - Assure faculty receive feedback on teaching performance at least annually.
- c. Collaborate with Department, Section, and medical education leaders to offer faculty development programs and coaching/mentoring opportunities.
  - Document that core faculty fulfill faculty development and scholarly activity requirements.
  - Assure core faculty complete the ACGME faculty survey, if appropriate.
  - Address trainees' concerns about faculty performance in a timely and confidential manner
- d. Select, orient, and support ongoing professional development of the Program Coordinator (PC).
  - Collaborate with the PC to assure satisfactory completion of Program requirements.
  - Provide input into the PC annual performance review.
- e. In conjunction with the Department Section/Division Chief, develop a succession plan for program leadership and appoint an APD as appropriate.
- f. Comply with all NCH and accreditation policies, procedures, and other accreditation common and program requirements.
  - Develop and update program-specific policies.
  - Monitor Board pass rate and trainees' performance after graduation.
- g. Prepare, submit in a timely manner, and ensure accuracy of all information required or requested by the ACGME/AOA/CODA, other accrediting organizations, NRMP, CHGME, NCH, GMEC, and participating institutions.
- h. Maintain records to verify education of all trainees, including those who leave the Program prior to completion.
- i. Obtain approval of the GMEC/DIO before submitting information to the ACGME.
- j. Attend or send a designee to at least 75% of GMEC meetings.
- k. Recommend and administer Program expense budgets according to NCH policies.
- l. Oversee activities of the Program Coordinator and provide input into his/her annual performance review.
- m. Develop a succession plan to maintain continuity of leadership and Program stability.

### **Reporting Relationships**

1. The PD reports to his/her Section/Division/Department Chief for clinical and academic activities and to the Designated Institutional Official (DIO) for GME activities.
2. GMEC must approve all PD and APD appointments. The PD and APD are members of the GMEC.
3. The DIO and Chiefs assure that the PD and APD have time specified by NCH and ACGME, as appropriate, to fulfill their duties and responsibilities.

### **Qualifications**

The DIO and GMEC, upon the recommendation of the appropriate Section/Division/ Department Chief, review the academic, administrative, and educational credentials of PDs and makes final appointment of each PD. The PD must have and maintain:

1. Unrestricted license to practice medicine or dentistry in the State of Ohio.
2. Active appointment in good standing to NCH Medical Staff and, as applicable, at any participating institutions of the Program
3. Requisite specialty expertise acceptable to accrediting organizations.
4. Board certification in the appropriate specialty and/or subspecialties, as applicable.
5. Appropriate clinical, educational, and administrative experience beyond residency training (minimum of 3 years post-residency/fellowship experience required).
6. Ongoing involvement in scholarly activities.
7. Demonstration of professional behavior standards to serve as a role model.

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