# Integrated Adult and Pediatric GME Programs
# Guidelines for OSU-NCH Coordination

OSU and NCH are ACGME-accredited Sponsoring Institutions (SIs) that collaborate across GME programs in order to offer the best educational experience for residents and fellows. The GME Master Agreement between OSU and NCH governs all GME programs in which trainees spend time at both institutions. These Guidelines for OSU-NCH Coordination address administrative and budgetary aspects unique to combined and/or integrated programs. Deviations from these Guidelines must be jointly approved in writing by the DIOs at each institution.

## "Combined" GME Programs with a Single ACGME or Other Accreditation

Some GME programs are designed and accredited as combined programs. Examples include:

1. Internal medicine-pediatrics residency program (separate ACGME accreditation). OSU is the SI. NCH shares financial and coordination responsibility per established agreement.
2. ACGME-accredited fellowships in which trainees spend 50% of their time at each site, e.g., Adult Congenital Heart Disease. The SI is designated by ACGME. OSU and NCH share financial and coordination responsibility per established agreement.
3. Designated track within an accredited fellowship program, e.g., pediatric neurophysiology. NCH will be responsible for salary and benefits of trainees in a pediatric track and must approve all appointments to a pediatric track.
4. Programs for which ACGME mandates the SI, regardless of the amount of time trainees spend at the other institution, e.g., Child and Adolescent Psychiatry. OSU and NCH share financial and coordination responsibility per established agreement.

## Integrated Programs: Two Accredited GME Programs, each leading to ABMS Board Certification

Advancements in healthcare have led to a growing patient population in need of coordinated care beyond the traditional fellowship-level training. Med-Peds trained subspecialists can fill important needs, especially in transitioning populations and highly complex adult patients with childhood disorders. They have broad skills that can make them attractive fellowship candidates.

Certifying ABMS Boards have a process for qualified trainees to apply for an integrated fellowship. Requests are approved on a case-by-case basis, i.e., the individual plan not the overall program is approved. If requested by a qualified trainee and endorsed by the both Program Directors (PDs), OSU and NCH may coordinate an integrated internal medicine and pediatrics GME program.

Approval of any integrated program is a two-step process:

1. Trainee must get *prior approval from each Board* to pursue an integrated program.
2. Both OSU and NCH must agree to support the program according to the guidelines outlined below.

General principles applying to all integrated programs:

- OSU and NCH must agree on the need for the integrated program to meet current and projected patient and/or societal needs.

  - Each of the programs comprising the integrated program be in good standing with ACGME/accrediting body and the integrated program may not adversely impact current GME programs.
  - Since both the internal medicine and pediatrics fellowship programs are separately accredited by ACGME, each SI and its DIO, GME Committee (GMEC), and PD retain authority and responsibility for its respective program and trainees, i.e., OSU is the SI for the internal medicine fellowship and NCH is the SI for the pediatric fellowship.
- Integrated programs are generally time-condensed. Therefore both the trainee and the SIs must coordinate the administrative aspects of the integrated program as much as possible.
- The trainee will be a fulltime employee of only one SI. This assures continuity of employee benefits, malpractice coverage, and other administrative issues, e.g., Due Process procedure.
  - NCH typically will be the employer since generally stand-alone pediatric fellowships are 3 years and stand-alone internal medicine fellowships are 2 years. The goal is to complete an integrated fellowship in 4 years.
  - Different employment arrangements may be arranged if justified. Any change must be approved in writing by the OSU and NCH DIOs prior offering the trainee a GME contract.
  - No employment change in that academic year can be made after the applicant signs the employment contract.
- Fellows in integrated programs receive the employment and program benefits of the employing institution and are not eligible for the benefits available to trainees at the other SI.

## Program Administration

- **Program Director (PD)** – integrated programs have two PDs – one for internal medicine and one for pediatrics
  - Each PD is appointed by the SI's GME Committee (GMEC) and is responsible for compliance with ACGME requirements including WebADS.
  - Both PDs may attend the GMEC at either OSU or NCH.
- **Program Coordinator (PC)** – *each* institution must identify an administrative staff person to support the program. The PC is responsible for (1) respective WebADS, recruitment, evaluation, milestones, and other ACGME expectations and (2) coordination of schedules, vacation, and data collection on information needed for accreditation.
- **Evaluation** – the PDs, in consultation with the faculty, must agree on the evaluation tools and processes for trainee, faculty, and program evaluations. Results must be shared.
- Both PDs must retain a copy of the final summative evaluation for each integrated trainee.

## Policies & Procedures

- If there are differences in policies or procedures between the SIs, the policies and procedures of the employing SI take precedence.
- Trainees' adverse performance issues follow the policies and procedures of the employing SI as outlined in the trainee contract. They must be reported to the both PDs and DIOs as soon as possible.

## Trainee Issues

- Trainees will sign two contracts (one from each SI). One will be a non-compensation contract.
- Due process – trainees may pursue only one due process (specified in the trainee contract)
- Salaries & Benefits (specified in the trainee contract)

  - OSU and NCH offer generally comparable total salary, healthcare benefits, and retirement plans. Trainees must be employed by a single institution. The employing institution is determined by guidelines outlined above.
  - Vacation, sick and other non-educational times are specified in the trainee contract and can only be amended per written agreement approved by both PDs and DIOs in accordance with the policies and guidelines of each SI.
- Non-compensation benefits, e.g., travel, are provided per the employing SI GME template. Items which need to be addressed include, but are not limited to, travel, books and supplies, Board exams, moving expenses, office space, computers, personal devices (phone, pager, etc.). Trainees are eligible for comparable benefits from the employing institution and do not receive additional benefits from the other SI.
- Recruitment and selection – PDs and faculty at both institutions must collaborate in the recruitment and selection of trainees.
- The programs should participate in the appropriate match(es) whenever possible.
- Verification of training – SIs and PDs must retain all trainee verification records and must provide this information for future credentialing and privileging as requested by graduates.

## Budget

- PD & PC release time and FTE coverage – OSU and NCH have different approaches to release time as do different Residency Review Committees. These must be addressed, reconciled, and approved by the DIOs prior to initiating an integrated program.
- Med Peds fellows likely will impact the approved and budgeted complement of fellows. PDs must identify the budgetary and compliment impact over the entire duration of the program and get both DIO's approval prior to offering an integrated GME position.
- Trainee salaries & insurance benefits – these must be specified in the trainee contract
  - Salary and benefits are shared by each SI and are determined by the standard schedule for trainees in the integrated program, i.e., determined for the program and not separately negotiated for each trainee. Typically each institution will cover 50% of the total salaries and benefits if trainees spend equivalent time at each institution. Exceptions must be approved in writing by both DIOs before offering a position.
  - Vacation and sick time will be apportioned according to the same formula used for salary and benefits. Schedules must be arranged so as to not disproportionately impact either institution.
- ACGME accreditation fees
  - The SI is responsible for all accreditation fees.

## Coordinated Programs: GME Programs with No External Accreditation or ABMS Board Certification

GME Programs with no external accreditation are separately approved by the GME Committees at each SI. The basic approach for integrated programs applies.