

MODEL POSITION DESCRIPTION: RESPONSIBILITIES OF THE SIU SOM RESIDENCY PROGRAM DIRECTOR

The Program Director reports to his/her Department Chairperson. In SIU sponsored GME programs, the residency program director is responsible for overall program administration and operations with authority and accountability for compliance of all applicable program requirements, and for residents' recruitment and selection; education in the context of patient care; supervision; assessment and promotion; disciplinary actions; teaching and scholarly activity; and for the establishment and maintenance of an effective and safe learning environment at all teaching sites conducive to educating residents in each of the ACGME Competency domains. Specific responsibilities may be delegated by the program director but he/she is accountable to the Graduate Medical Education Committee (GMEC), the designated institutional official (DIO), and to the ACGME Residency Review Committee (RRC) for the timely and accurate completion of all tasks.

In addition to the ACGME, a number of other bodies impose requirements on our GME programs. These include (but are not limited to) SIU School of Medicine, SIU Health Care, bylaws of our Affiliated Hospitals, the Illinois Department of Financial and Professional Regulation, the Joint Commission and the NRMP. Compliance with these requirements is the responsibility of the program director, working in concert with the institution.

Physicians in training include residents and fellows, who, for the purposes of this document, will be referred to as "residents".

Responsibilities of the residency program director include all of the following: ^{1,2}

Participation in the institutional governance of GME programs:

- Maintain current knowledge of and compliance with SIU GME policies and procedures (<u>http://www.siumed.edu/gme</u>)
- Maintain current knowledge of and compliance with ACGME institutional, common program, and program-specific requirements (<u>www.acgme.org</u>).
- Maintain current knowledge of and compliance with ACGME Clinical Learning Environment Review (CLER) expectations (<u>https://www.acgme.org/initiatives/clinical-learning-environment-review-cler</u>).
- Participate in GMEC, subcommittees, task forces, and special and/or internal review committees as requested, including program representation at all GMEC meetings as appropriate.
- Cooperate promptly, accurately and completely with requests by the GMEC, Office of Graduate Medical Education (OGME), or ACGME for information, documentation, etc.
- Ensure that residents and faculty comply with periodic surveys by the ACGME, GMEC and OGME.

Annual Program Evaluation, Special Reviews and Internal Reviews:

¹ References are to the ACGME Institutional Requirements effective July 1, 2022 <u>www.acgme.org</u>.

² References are to the ACGME Common Program Requirements effective July 1, 2023 www.acgme.org.

- Conduct an Annual Program Evaluation (APE), assess and monitor any action items developed, and record in New Innovations in a timely fashion.
- Prepare internal or special review materials and reports as required by GMEC protocols and submit above information to the OGME by the dates requested.
- Develop action plans for correction of areas of non-compliance as identified by any of the above reviews, and provide periodic updates to the GMEC.

ACGME RRC-related Responsibilities:

- Maintain current knowledge of and compliance with the ACGME manual of policies and procedures. (<u>www.acgme.org</u>).
- Maintain current knowledge of and compliance with all ACGME program requirements and expectations pertaining to program.
- Submit accurate and complete information required and requested by the DIO, GMEC and ACGME in a timely manner
- Ensure that the DIO& GMEC review and approve all necessary correspondence or documents submitted to the ACGME by program directors that either address program citations, RRC requests for information, or program requests for changes in the program that could have a significant impact, including financial, on the program or institution.
- Develop action plans for correction of areas of non-compliance as identified by RRC annual accreditation reviews, site visits or other mechanisms and provide periodic updates to the GMEC.
- Ensure that the annual WebADS update is complete, accurate and timely.
- Direct and oversee a thorough and careful Self-Study as directed by the ACGME.
- Ensure accurate and complete case log reporting by residents.
- Oversee and ensure the quality of education and supervision at all clinical sites.
 - Communicate and liaise with appropriate personnel of other institutions or clinical sites participating in residency training.
 - Approve and remove physicians or non-physicians as faculty members at these sites, including designation of core faculty
 - Develop and oversee a process to evaluate potential teaching faculty prior to approval
 - Authority to remove residents from supervising interactions and/or learning environments that do not meet the standards of the program
 - Prepare Program Letters of Agreement with all clinical sites for which rotations are required and revise these program agreements at least every ten years.
 - Provide a learning environment that provides residents an opportunity to raise concerns, report mistreatment, and provide feedback in a confidential manner, free of fear of intimidation or retaliation.
- Ensure that HIPAA Business Associate Agreement forms (template on the ACGME website) are prepared for any clinical training site in which residents have access to protected health and/or demographic information.
- Comply with the Sponsoring Institution's policies and procedures related to grievances and dues process
- Document verification of education for all residents within 30 days of completion or departure from the program; provide verification of a resident's education within 30 days of the request.

Recruitment and Selection:

- Recruit residents of the highest caliber.
- Interview and select applicants in a fair, holistic and equitable manner.

- Develop and promote practices that focus on mission-driven, ongoing, systematic recruitment and retention of a diverse and inclusive workforce of residents, fellows (if present), faculty members, administrative program staff members, and other relevant members of its academic community.
- Provide applicant credentials to the affiliated hospitals for approval in a timely manner.
- Participate in the NRMP as part of the Institutional Agreement.
- Provide applicants who are offered an interview with information related to their eligibility for the relevant board exam.
- Obtain verification of previous educational experiences, summative performance evaluation and Milestones of residents who transfer into the program.
- Ensure applicants meet eligibility requirements as outlined by ACGME and SIU SOM.

Educational Aspects of the Program:

- Ensure the program is conducted in a fashion which is consistent with the needs of the community, the mission(s) of the Institution, and the aims of the program.
- Working with Department Chair and others, to ensure a positive learning climate.
- Develop and oversee an educational curriculum as defined in the ACGME program requirements for the specialty or, if the program is a non-ACGME accredited program, periodic review/revision of the educational curriculum. This should include delineation of resident responsibilities to patient care, progressive responsibility for patient management and graded supervision.
- Implement and oversee an effective, structured didactic program, providing protected time for residents to participate.
- Prepare competency-based written goals and objectives of the program with respect to knowledge, skills and other attributes of residents at each level of training and for each rotation or assignment. Distribute and review these with faculty & residents.
- Ensure resident & faculty involvement, experience, participation in and completion of Quality and Patient Safety endeavors/projects.
- Implement and oversee an effective and fair system for competency-based assessment of resident performance, which includes, at a minimum:
 - Regular feedback regarding individual performance by faculty during each rotation or assignment.
 - Dependable measures to assess residents' competence in the general competencies of Patient Care, Medical Knowledge, Practice Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism and Systems Based Practice. These must be completed by multiple evaluators and be provided to the CCC.
 - Dependable measures to assess residents' achievement of educational Milestones and report same to ACGME.
 - Dependable measures to assess residents' competence in other areas as defined in the ACGME program requirements for that particular specialty.
 - Documentation of evaluation at the completion of each assignment.
 - A Final Evaluation to be shared with residents upon completion of the program, that verifies if the resident has demonstrated the knowledge, skills and behaviors necessary to enter autonomous practice.
- Implement and oversee an effective process to meet with and reviews with each resident their documented semi-annual evaluation of performance, including progress along Milestones.
- Assist residents with developing and maintaining an individualized learning plan, including for non-succeeding residents following institutional policies and procedures.

- Implement and oversee an effective and fair system to ensure effective faculty performance in teaching and supervision, which includes at a minimum:
 - Effective feedback to faculty regarding teaching effectiveness.
 - Faculty development in education, assessment, wellness and Quality/Patient Safety skills that are pertinent to GME as assessed through faculty evaluations.
 - Annual confidential, written evaluation of faculty members by residents.
 - Annual evaluation of faculty performance, including clinical teaching abilities, engagement with the educational program, participation in faculty development, clinical performance, professionalism, and scholarly activities.
 - Provide summary of feedback to faculty at least annually by a member of the leadership team.
- 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.
 - Exercise the authority to approve program faculty members for participation in the residency program education at all sites.
 - Exercise the authority to remove program faculty members from participation in the residency program education at all sites if necessary.
 - Exercise the authority to remove residents from supervising interactions and/or learning environments that do not meet the standards of the program
 - Designate faculty as core faculty.
- Implement an educational quality improvement process that links educational and clinical outcomes with program improvement. This should include at a minimum:
 - Annual confidential evaluation of the program by faculty.
 - Annual confidential evaluation of the program by residents.
 - Yearly APE, including the development and monitoring of quantifiable action plan to be distributed and discussed with residents and teaching faculty and submitted to the DIO.
- Ensure that the program has a well-functioning Clinical Competence Committee (CCC) and Program Evaluation Committee (PEC).
- Facilitate residents' participation in the educational and scholarly activities and ensure that residents assume graduated responsibility for teaching and supervising other students and residents.
- Assist residents in obtaining appointment to appropriate institutional and departmental committees.
- Ensure residents' attendance at educational sessions required by the program, the institution and the agencies listed in the second paragraph.

Supervision and Patient Safety:

- Ensure the availability of sufficient number of qualified supervisors at all sites
- Ensure appropriate supervision of residents by faculty so as to allow safe and effective patient care and progressively increasing responsibility by the resident according to their level of education, ability and experience.
- Structure on-call schedules to provide readily available supervision to residents on duty, appropriate monitoring for fatigue and appropriate back up support when needed.
- Create written policies outlining the lines of responsibilities and supervision for the care of all patients and all clinical sites and staff.
- Ensure that all supervisors are educated annually on supervision standards and requirements.
- Monitor faculty compliance with supervision standards.
- Ensure and monitor effective structured transitions of care.

- Ensure that residents and faculty members know how to report patient safety events and near misses at all sites, and are educated on their responsibility to do so.
- Ensure that residents receive the appropriate training and education in:
 - How to disclose safety events to patients and families
 - Social Determinants of Health
 - Pain Management, including how to recognize signs of substance use disorder

Resident Well Being:

- Ensure that the program is compliant with clinical and educational work hour requirements. Monitoring these hours on a frequent and consistent basis.
- Manage scheduling of residents including, but not limited to, creating clinical and didactic schedules with attention to work intensity and work compression that impacts resident well-being.
- Ensure the program emphasizes education in each of the ACGME competency domains.
- Monitor resident stress, including mental or emotional conditions or drug or alcohol-related dysfunction.
- Advocate for each resident, residency concerns in general, and interests within the department, institution and affiliated hospitals.
- Ensure program promotes opportunity to raise concerns or provide feedback in a confidential manner without fear of intimidation or retaliation.
- Regularly provide formative and reinforcing feedback.
- Be available for advice and counseling.
- Develop policies and programs that encourage optimal resident and faculty wellbeing, including policies/procedures to ensure coverage of patient care should a resident be unable to attend work.
- Approve time away from the program for residents to attend medical appointments.
- Provide education to residents and faculty in identifying symptoms of burnout, depression and substance use disorders, suicidal ideation or potential for violence, and recognition of these symptoms and the process for how to seek appropriate care.
- Provide education to residents and faculty in the signs and symptoms of fatigue and sleep deprivation, and process for mitigation of these signs and symptoms.
- Monitor and approve LOAs, including PCML requests, ensuring board requirements and potential extension of training have been reviewed and discussed with resident.

Leadership and Administration:

- Obtain and/or maintain program accreditation
- Establish processes, outcome measures and metrics to monitor and report program performance
- Provide leadership and role modeling for residents and faculty in the areas of professionalism, teaching and mentoring, scholarship, work-life balance and life-long learning.
- Pursue continuing professional development in education, assessment and leadership.
- Ensure that each resident maintains an up-to-date temporary license with the Illinois Department of Financial and Professional Regulation until/unless the resident obtains a permanent license.
- Ensure that each non-citizen resident maintains an up to date visa or work authorization.
- Create, implement, and review annually program specific policies consistent with SIU School of Medicine GMEC policies for the following: resident recruitment, selection, eligibility & appointment, resident evaluation, resident promotion, resident dismissal, resident supervision, resident clinical and educational work hours, moonlighting policy

and written documentation for any resident participating in moonlighting, leaves of absence, resident well-being and coverage of patient care in the event that a resident may be unable to perform their patient care responsibilities.

- Ensure that all interviewed applicants are provided with information regarding stipends, benefits, professional liability coverage, and disability insurance accessible to residents/fellows, institutional policy(ies) for vacation and leaves of absence, including medical, parental, and caregiver leaves of absence and health insurance accessible to residents/fellows and their eligible dependents.
- Maintain accurate and complete program files in compliance with ACGME requirements.
- Ensure that the DIO reviews and co-signs all Letters of Deficiency to any resident.
- Ensure that residents complete time records and medical records in a timely and accurate manner.
- Work collaboratively with Program Coordinator to achieve all of the above.