

## II. Program Personnel and Resources

### A. Program Director

#### Common Program Requirement:

1. *There must be a single program director with authority and accountability for the operation of the program. The sponsoring institution's GMEC must approve a change in program director. After approval, the program director must submit this change to the ACGME via the ADS.  
[As further specified by the Review Committee]*
2. *The program director should continue in his or her position for a length of time adequate to maintain continuity of leadership and program stability.*
3. *Qualifications of the program director must include:*
  - a) *requisite specialty expertise and documented educational and administrative experience acceptable to the Review Committee;*
  - b) *current certification in the specialty by the American Board of \_\_\_\_\_, or specialty qualifications that are judged to be acceptable by the Review Committee; and,*
  - c) *current medical licensure and appropriate medical staff appointment.  
[As further specified by the Review Committee]*
4. *The program director must administer and maintain an educational environment conducive to educating the residents in each of the ACGME competency areas. The program director must:*
  - a) *oversee and ensure the quality of didactic and clinical education in all institutions that participate in the program;*
  - b) *approve a local director at each participating institution who is accountable for resident education;*
  - c) *approve the selection of program faculty as appropriate;*
  - d) *evaluate program faculty and approve the continued participation of program faculty based on evaluation;*
  - e) *monitor resident supervision at all participating institutions;*
  - f) *prepare and submit all information required and requested by the ACGME, including but not limited to the program information forms and annual program resident updates to the ADS, and ensure that the information submitted is accurate and complete;*
  - g) *provide each resident with documented semiannual evaluation of performance with feedback;*
  - h) *ensure compliance with grievance and due process procedures as set forth in the Institutional Requirements and implemented by the sponsoring institution;*
  - i) *provide verification of residency education for all residents, including those who leave the program prior to completion;*
  - j) *implement policies and procedures consistent with the institutional and program requirements for resident duty hours and the working environment, including moonlighting, and, to that end, must:*
    - (1) *distribute these policies and procedures to the residents and faculty;*
    - (2) *monitor resident duty hours, according to sponsoring institutional policies, with a frequency sufficient to ensure compliance with ACGME requirements*

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- (3) *adjust schedules as necessary to mitigate excessive service demands and/or fatigue; and,*
  - (4) *if applicable, monitor the demands of at-home call and adjust schedules as necessary to mitigate excessive service demands and/or fatigue.*
- k) *monitor the need for and ensure the provision of back up support systems when patient care responsibilities are unusually difficult or prolonged;*
- l) *comply with the sponsoring institution's written policies and procedures, including those specified in the Institutional Requirements, for selection, evaluation and promotion of residents, disciplinary action, and supervision of residents.*
- m) *be familiar with and comply with ACGME and Review Committee policies and procedures as outlined in the ACGME Manual of Policies and Procedures;*
- n) *obtain review and approval of the sponsoring institution's GMCE/DIO before submitting to the ACGME information or requests for the following:*
  - (1) *all applications for ACGME accreditation of new programs;*
  - (2) *changes in resident complement;*
  - (3) *major changes in program structure or length of training;*
  - (4) *progress reports requested by the Review Committee;*
  - (5) *responses to all proposed adverse actions;*
  - (6) *requests for increases 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; and,*
  - (10) *proposals to ACGME for approval of innovative educational approaches.*
- o) *obtain DIO review and co-signature on all program information forms, as well as any correspondence or document submitted to the ACGME that addresses:*
  - (1) *program citations; and,*
  - (2) *request for changes in the program that would have significant impact, including financial, on the program or institution.*

*[As further specified by the Review Committee]*

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- **Documentation for program director qualifications:** This information will be documented through information provided in the PIF (entered through the Accreditation Data System – ADS). (See PIF questions below.) Verification that the program director has a current medical license and medical specialty certification occurs through the institutional credentialing process. Site visitors verify that the program director has an appropriate medical staff appointment.
- **Documentation for program director responsibilities:** Site visitors may spot check information that program directors must provide to residents and faculty and use interviews to verify that the program director organizes and oversees the educational activities in all sites and assures implementation of fair policies, grievance and due process procedures. Note the list of 10 items of information that need review and approval by the GMEC/DIO before submitting to the ACGME. (See CPR II.A.4.n.(1)-(10) above.) In addition, any document addressing program citations or program changes that would have significant impact (e.g., change in program director) must have DIO approval by signature.

The ADS (PIF) table related to these requirements is shown below.

#### Program Director Information

Name:							
Title:							
Address:							
City, State, Zip code:							
Telephone:		FAX:		Email:			
Date First Appointed as Program Director:							
Will Your Principal Activity Be Devoted to Resident Education?		<input type="checkbox"/> YES		<input type="checkbox"/> NO			
Term of Program Director Appointment:							
Date first appointed as faculty member in the program:							
Percentage of time the program director devotes to the program in the following activities:							
Clinical Supervision:		Administration:		Research:		Didactics/Teaching:	
Primary Specialty Board Certification:				Most Recent Year:			
Secondary Specialty Board Certification:				Most Recent Year:			
Number of years spent teaching in GME in this specialty:							

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**A. Program Director**

ADS (PIF) Questions:

*Does the program director approve the selection of program faculty as appropriate?*

Yes \_\_\_\_ No \_\_\_\_\_

*Does the program director evaluate the faculty and approve the continued participation of program faculty based on evaluation?*

Yes \_\_\_\_ No \_\_\_\_

*Does the program director comply with the sponsoring institution's written policies and procedures, including those specified in the Institutional Requirements, for selection, evaluation and promotion of residents, disciplinary action, and supervision of residents?*

Yes \_\_\_\_ No \_\_\_\_

*Is the program director familiar with and does he/she comply with ACGME and Review Committee policies and procedures as outlined in the ACGME Manual of Policies and Procedures?*

Yes \_\_\_\_ No \_\_\_\_