

**UNIVERSITY AT BUFFALO  
OFFICE OF GRADUATE MEDICAL EDUCATION  
THE ROLE OF THE PROGRAM DIRECTOR**

**COMMON REQUIREMENTS FOR ALL GME PROGRAM DIRECTORS AT THE UNIVERSITY AT BUFFALO:**

The Program Director must administer and maintain an educational environment conducive to educating residents/fellows in each of the ACGME competency areas and in conformance with University at Buffalo policies and procedures.

Selected duties may be delegated to faculty or training program administrators, however, the Program Director is responsible to the Designated Institutional Official, the Graduate Medical Education Committee, and to the ACGME's Residency Review Committee for the timely and accurate completion of all tasks and their quality. Program director duties include, but are not limited to:

**Oversight of Education:**

- 1) Oversee and ensure the quality of didactic and clinical education in all sites that participate in the program;
- 2) review, update, and revise didactic and clinical educational curricula as needed;
- 3) select and oversee work of associate program directors; evaluate their GME-related performance annually; enter evaluations in E\*Value;
- 4) approve a local director at each participating site who is accountable for resident education; and must comply with UB GME protocol for approval of training sites;
- 5) approve the selection and, based on annual evaluations of faculty performance, the continuation of program faculty as appropriate; and maintain an accurate current list of core ("key") faculty for accreditation purposes (through the ACGME Accreditation Data System (ADS));
- 6) complete an annual program evaluation and document it annually in E\*Value; establish and monitor action plans through completion;
- 7) adopt appropriate evaluation tools and ensure evaluations of residents by faculty are completed on a timely basis;
- 8) provide each resident with documented, semiannual, competency-based evaluation of performance, providing the evaluation both in-person and in E\*Value; at the completion of the program, provide the residents with a final summative evaluation in E\*Value that also documents the resident's performance during the final period of education, and verify that the resident has demonstrated sufficient competence to enter practice without direct supervision;

**Participation in GME Governance:**

- 1) Manage GME staff in the program office, including the Training Program Administrator; ensure protected time for Training Program Administrators to attend monthly GME/TPAC meetings
- 2) attend at least 75% of UB GME Program Directors Advisory Committee meetings;
- 3) participate in one or more UB GME Special Reviews of residency/fellowship program(s) and associated meetings as assigned by DIO;
- 4) serve as mentor for new program director(s);
- 5) comply with the University at Buffalo's written policies and procedures governing GME, including those specified in the Institutional Requirements; in particular, adhere to the terms of the academic action, grievance and due process procedures; notify the office of GME of any

academic actions pertaining to residents and collaborate with UB GME on development of corrective action plans;

#### **Compliance with Regulatory Requirements affecting GME**

- 1) Provide accurate information on resident schedules and rotations in support of GME reimbursement from Medicare, the Veterans Administration, and others. This is accomplished by ensuring correct and timely entry of schedules in E\*Value/E\*GME pertinent to quarterly rotation data submission;
- 2) ensure faculty document their supervision of residents/fellows, in accordance with regulatory bodies, in the medical record;
- 3) create resident schedules in compliance with duty hour regulations established by New York State Code 405 and ACGME;
- 4) ensure residents obtain identification numbers required for ordering tests, labs, and medications (e.g. NPI and HCS account for narcotic prescribing)

#### **Maintenance of Accreditation:**

- 1) Monitor resident supervision at all participating sites; ensure the supervision of residents through distribution of explicit written descriptions of supervisory lines of responsibility for the care of patients to all faculty and residents; provide residents with prompt, reliable systems for communicating and interacting with supervisory physicians;
- 2) establish and maintain a standing Clinical Competency Committee to assess resident achievement of milestones on a twice yearly basis, at minimum; maintain minutes of the meetings; enter milestone assessments in E\*Value;
- 3) monitor resident record of all required index cases and/or procedures and ensure data is entered in ADS (if required by the ACGME) or E\*Value; in accordance with guidelines established by specialty; adjust schedules or assignments as required to ensure residents achieve adequate case volumes; establish guidelines for procedural supervision that include assessing indications, contraindications, anatomical landmarks, technical skills, anticipating and managing complications, and obtaining informed consent;
- 4) complete summative competency-based assessment for graduating residents and submit "Final Verification of Training" form (available on GME website and in E\*Value) to GME Office; respond promptly to inquiries for qualitative recommendations for graduates; consult with GME office in cases where there were performance concerns that were not resolved during training or delayed completion of training;
- 5) implement and monitor 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:
  - (a) distribute these policies and procedures to the residents and faculty;
  - (b) monitor resident duty hours in accordance with the determinations of the Duty Hours Subcommittee of the GMEC;
  - (c) adjust schedules as necessary to mitigate excessive service demands and/or fatigue and ensure that the schedule in E\*Value is updated; respond to requests for information regarding violations from the GMEC Duty Hour Subcommittee in a timely fashion; educate all residents and faculty about fatigue mitigation and fitness for duty;
  - (d) if applicable, monitor the demands of at-home call and adjust schedules as necessary to mitigate excessive service demands and/or fatigue;

- 6) monitor the need for and ensure the provision of back up support systems when resident patient care responsibilities are unusually difficult or prolonged;
- 7) ensure data is submitted and/or updated through E\*Value on a timely basis, including but not limited to: program information, residents' demographics, schedules, duty hours, evaluations, procedures;
- 8) prepare and submit all information required and requested by the ACGME, including but not limited to annual updates to ADS, and ensure that the information submitted is accurate and complete;
- 9) abide by any and all program matching requirements of the NRMP and/or applicable matching programs;
- 10) prepare and submit by the applicable deadline all information required and requested by the University at Buffalo Office of Graduate Medical Education in an accurate and complete manner;
- 11) participate in the annual budgeting resident allocation process; manage program operating budgets within established guidelines and in consultation with departmental academic and administrative leadership, and;
- 12) carry out budgeting and budget management processes in close consultation and collaboration with the Office of Graduate Medical Education;
- 13) obtain review and approval of the sponsoring institution's GMCEC/DIO before submitting to the ACGME information or requests for the following:
  - (a) all applications for ACGME accreditation of new programs;
  - (b) changes in resident complement;
  - (c) major changes in program structure or length of training;
  - (d) progress reports requested by the Review Committee;
  - (e) responses to all proposed adverse actions;
  - (f) requests for increases or any change to resident duty hours;
  - (g) voluntary withdrawals of ACGME-accredited programs;
  - (h) requests for appeal of an adverse action;
  - (i) appeal presentations to a Board of Appeal or the ACGME;
  - (j) proposals to ACGME for approval of innovative educational approaches;
- 14) obtain DIO review and co-signature on all program information forms, as well as any correspondence or document submitted to the ACGME that addresses:
  - (a) program citations, and/or
  - (b) request for changes in the program that would have significant impact, including financial, on the program or institution;
- 15) be familiar with and comply with ACGME and Review Committee policies and procedures as outlined in the ACGME Manual of Policies and Procedures.