Requirement #: **II.A.2.**

Requirement Revision (significant change only):

Common Program Requirements (Residency):

> The program director and, as applicable, the program's leadership team, must be provided with support adequate for administration of the program based upon its size and configuration. (Core)
>
> ~~At a minimum, the program director must be provided with the salary support required to devote 20 percent FTE of non-clinical time to the administration of the program.~~ (Core)
>
> [The Review Committee must further specify minimum dedicated time for program administration, and will determine whether program leadership refers to the program director or both the program director and associate/assistant program director(s).]
>
> [~~The Review Committee may further specify. If the Review Committee specifies support greater than 20 percent, II.A.2. and the accompanying Background and Intent will be modified to reflect the level of support specified by the Review Committee~~]
>
> [~~The Review Committee may further specify regarding support for associate program director(s)~~]

Background and Intent: ~~Twenty percent FTE is defined as one day per week.~~

~~"Administrative time" is defined as non-clinical time spent meeting the responsibilities of the program director as detailed in requirements II.A.4.-II.A.4.a).(16).~~

~~The requirement does not address the source of funding required to provide the specified salary support.~~

To achieve successful graduate medical education, individuals serving as education and administrative leaders of residency programs, as well as those significantly engaged in the education, supervision, evaluation, and mentoring of residents, must have sufficient dedicated professional time to perform the vital activities required to sustain an accredited program.

The ultimate outcome of graduate medical education is excellence in resident education and patient care.

The program director and, as applicable, the program leadership team, devote a portion of their professional effort to the oversight and management of the residency program, as defined in II.A.4.-II.A.4.a).(16). Both provision of support for the time required for the leadership effort and flexibility regarding how this support is provided

are important. Programs, in partnership with their Sponsoring Institutions, may provide support for this time in a variety of ways. Examples of support may include, but are not limited to, salary support, supplemental compensation, educational value units, or relief of time from other professional duties.

Program directors and, as applicable, members of the program leadership team, who are new to the role may need to devote additional time to program oversight and management initially as they learn and become proficient in administering the program. It is suggested that during this initial period the support described above be increased as needed.

Common Program Requirements (Fellowship) and Common Program Requirements (One-Year Fellowship):

> The program director and, as applicable, the program's leadership team, must be provided with support adequate for administration of the program based upon its size and configuration. (Core)

> [The Review Committee must further specify minimum dedicated time for program administration, and will determine whether program leadership refers to the program director or both the program director and associate/assistant program director(s)]

> [The Review Committee may further specify regarding support for associate program director(s)]

Background and Intent: ~~Twenty percent FTE is defined as one day per week. [This number will be modified to fit the level of support specified by the Review Committee]~~

~~"Administrative time" is defined as non-clinical time spent meeting the responsibilities of the program director as detailed in requirements II.A.4.-II.A.4.a).(16).~~

~~The requirement does not address the source of funding required to provide the specified salary support.~~

To achieve successful graduate medical education, individuals serving as education and administrative leaders of fellowship programs, as well as those significantly engaged in the education, supervision, evaluation, and mentoring of fellows, must have sufficient dedicated professional time to perform the vital activities required to sustain an accredited program.

The ultimate outcome of graduate medical education is excellence in fellow education and patient care.

The program director and, as applicable, the program leadership team, devote a portion of their professional effort to the oversight and management of the fellowship program, as defined in II.A.4.-II.A.4.a).(16). Both provision of support for the time required for the leadership effort and flexibility regarding how this support is provided are important. Programs, in partnership with their Sponsoring

Institutions, may provide support for this time in a variety of ways. Examples of support may include, but are not limited to, salary support, supplemental compensation, educational value units, or relief of time from other professional duties.

Program directors and, as applicable, members of the program leadership team, who are new to the role may need to devote additional time to program oversight and management initially as they learn and become proficient in administering the program. It is suggested that during this initial period the support described above be increased as needed.

Common Program Requirements (Post-Doctoral Education):

The program director and, as applicable, the program's leadership team, must be provided with support adequate for administration of the program based upon its size and configuration. (Core)

[The Review Committee must further specify minimum dedicated time for program administration, and will determine whether program leadership refers to the program director or both the program director and associate/assistant program director(s)]

[The Review Committee may further specify regarding support for associate program director(s)]

Background and Intent: ~~Twenty percent FTE is defined as one day per week. [This number will be modified to fit the level of support specified by the Review Committee]~~

~~"Administrative time" is defined as non-clinical time spent meeting the responsibilities of the program director as detailed in requirements II.A.4.-II.A.4.a).(16).~~

~~The requirement does not address the source of funding required to provide the specified salary support.~~

To achieve successful graduate medical education, individuals serving as education and administrative leaders of post-doctoral education programs, as well as those significantly engaged in the education, supervision, evaluation, and mentoring of post-doctoral fellows, must have sufficient dedicated professional time to perform the vital activities required to sustain an accredited program.

The ultimate outcome of graduate medical education is excellence in post-doctoral fellow education and patient care.

The program director and, as applicable, the program leadership team, devote a portion of their professional effort to the oversight and management of the post-doctoral education program, as defined in II.A.4.-II.A.4.a).(16). Both provision of support for the time required for the leadership effort and flexibility regarding how this support is provided are important. Programs, in partnership with their Sponsoring Institutions, may provide support for this time in a variety of ways. Examples of support may include, but are not limited to, salary support, supplemental

compensation, educational value units, or relief of time from other professional duties.

Program directors and, as applicable, members of the program leadership team, who are new to the role may need to devote additional time to program oversight and management initially as they learn and become proficient in administering the program. It is suggested that during this initial period the support described above be increased as needed.

1. Describe the Review Committee's rationale for this revision:
   Based on information provided in response to the Request for Position Papers and the ACGME Congress on Dedicated Time held last fall, it is apparent that the minimum of 20 percent dedicated administrative time for program directors (Residency version) is more than is needed for many small programs.

   The Task Force, therefore, determined that the Common Program Requirements should not include a minimum to be applied across specialties. Rather, each Review Committee will determine the appropriate minimum for each applicable specialty, based on factors including program size, number of participating sites, Case Log requirements, and other factors that impact administrative workload.

   There were also requests to allow flexibility in terms of how support is provided. The revised requirements continue to recognize the need for program leadership to be provided with support for program administration and introduce flexibility by allowing decisions regarding how this support is provided to be made at the local level.

   In addition, many organizations requested that the administrative time requirements be more flexible, allowing administrative time to be divided among the program director and one or more associate/assistant program directors. The proposed changes provide that flexibility.

   Additionally, at the direction of the ACGME Board, the ACGME Committee on Requirements will develop guidance for Review Committees to use in the creation of specialty-specific requirements related to the program leadership's minimum dedicated time to administer the program. Review Committees will then review their current requirements and, if needed, propose modifications consistent with the guidance provided by the Committee on Requirements. Proposed changes will be subject to the ACGME's established policies and procedures for Program Requirement revisions, including a 45-day public comment period. Additional information will be shared as it becomes available.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   Requirements related to dedicated time are intended to ensure that the program director and, if applicable, assistant or associate program directors, are able to devote the time required to effectively administer the program as described in Common Program Requirements Section II.A.4. Provision of this time is essential to maintaining high performing educational programs, and failure to do so would negatively impact the education of residents and fellows.

3. How will the proposed requirement or revision impact continuity of patient care?
   No Impact on continuity of care is anticipated.

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
   The changes provide more flexibility regarding how support is provided, allowing decisions regarding resource allocation to support this time to be made at the local level. Additionally, the elimination of the minimum 20 percent FTE in the Residency version of the Common Program Requirements will allow Review Committees to potentially set a lower minimum, as needed, for smaller programs. As stated above, specialty-specific requirement changes will be subject to the ACGME's established policies and procedures for Program Requirement revisions, including a 45-day public comment period.

5. How will the proposed revision impact other accredited programs?
   Not applicable, as all programs are subject to the Common Program Requirements.

Requirement #: **II.B.4.b)**

Revision (significant change only):

All Versions:
[The Review Committee may further specify requirements regarding <u>dedicated time</u> ~~support~~ for core faculty members]

Common Program Requirements (Residency) Background and Intent:

Background and Intent: ~~Core faculty members are critical to the success of resident education. They support the program leadership in developing, implementing, and assessing curriculum and in assessing residents' progress toward achievement of competence in the specialty. Core faculty members should be selected for their broad knowledge of and involvement in the program, permitting them to effectively evaluate the program, including completion of the annual ACGME Faculty Survey.~~

<u>**Core faculty members are critical to the success of resident education. They support the program leadership in developing, implementing, and assessing curriculum, mentoring residents, and assessing residents' progress toward achievement of competence in and the independent practice of the specialty. Core faculty members should be selected for their broad knowledge of and involvement in the program, permitting them to effectively evaluate the program. Core faculty members may also be selected for their specific expertise and unique contribution to the program. Core faculty members are engaged in a broad range of activities, which may vary across programs and specialties. Core faculty members provide clinical teaching and supervision of residents, and also participate in non-clinical activities related to resident education and program administration. Examples of these non-clinical activities include, but are not limited to, interviewing and selecting resident applicants, providing didactic instruction, mentoring residents, simulation exercises, completing the annual ACGME Faculty Survey, and participating on the program's**</u>

Clinical Competency Committee, Program Evaluation Committee, and other GME committees.

Common Program Requirements (Fellowship) and Common Program Requirements (One-Year) Fellowship Background and Intent:

Background and Intent: ~~Core faculty members are critical to the success of fellow education. They support the program leadership in developing, implementing, and assessing curriculum and in assessing fellows' progress toward achievement of competence in the subspecialty. Core faculty members should be selected for their broad knowledge of and involvement in the program, permitting them to effectively evaluate the program, including completion of the annual ACGME Faculty Survey.~~

Core faculty members are critical to the success of fellow education. They support the program leadership in developing, implementing, and assessing curriculum, mentoring fellows, and assessing fellows' progress toward achievement of competence in and the independent practice of the specialty. Core faculty members should be selected for their broad knowledge of and involvement in the program, permitting them to effectively evaluate the program. Core faculty members may also be selected for their specific expertise and unique contribution to the program. Core faculty members are engaged in a broad range of activities, which may vary across programs and specialties. Core faculty members provide clinical teaching and supervision of fellows, and also participate in non-clinical activities related to fellow education and program administration. Examples of these non-clinical activities include, but are not limited to, interviewing and selecting fellow applicants, providing didactic instruction, mentoring fellows, simulation exercises, completing the annual ACGME Faculty Survey, and participating on the program's Clinical Competency Committee, Program Evaluation Committee, and other GME committees.

Common Program Requirements (Post-Doctoral Education) Background and Intent:

Background and Intent: ~~Core faculty members are critical to the success of post-doctoral fellow education. They support the program leadership in developing, implementing, and assessing curriculum and in assessing post-doctoral fellows' progress toward achievement of competence in the specialty. Core faculty members should be selected for their broad knowledge of and involvement in the program, permitting them to effectively evaluate the program, including completion of the annual ACGME Faculty Survey.~~

Core faculty members are critical to the success of post-doctoral fellow education. They support the program leadership in developing, implementing, and assessing curriculum, mentoring post-doctoral fellows, and assessing post-doctoral fellows' progress toward achievement of competence in and the independent practice of the specialty. Core faculty members should be selected for their broad knowledge of and involvement in the program, permitting them to effectively evaluate the program. Core faculty members may also be selected for their specific expertise and unique contribution to the program. Core faculty members are engaged in a broad range of activities, which may vary across programs and specialties. Core faculty members provide clinical teaching and supervision of post-doctoral fellows, and also participate in non-clinical activities related to post-doctoral fellow education and program administration. Examples of these non-clinical activities include, but are not limited to, interviewing and selecting post-doctoral fellow applicants, providing

> **didactic instruction, mentoring post-doctoral fellows, simulation exercises, completing the annual ACGME Faculty Survey, and participating on the program's Clinical Competency Committee, Program Evaluation Committee, and other GME committees.**

1. Describe the Review Committee's rationale for this revision:
   Based on information provided to the Task Force on Dedicated Time in the form of position papers and testimony at the ACGME Congress on Dedicated Time, it is apparent that there is not consensus among specialties regarding the need for requirements that define dedicated time for core faculty members. Therefore, the development of such requirements remains optional for Review Committees. The change from "support" to "dedicated time" reflects the variability across specialties and programs in terms of how dedicated time is provided.

   At the direction of the ACGME Board, the ACGME Committee on Requirements will develop guidance for Review Committees to use in the creation of specialty-specific requirements related to the dedicated time for core faculty. Review Committees will then review their current requirements and, if needed, propose modifications consistent with the guidance provided by the Committee on Requirements. Proposed changes will be subject to the ACGME's established policies and procedures for Program Requirement revisions, including a 45-day public comment period. Additional information will be shared as it becomes available.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   The opportunity for Review Committees to specify requirements related to core faculty dedicated time, and the accompanying Background and Intent, emphasize the critically important role these faculty members have in the education of residents and fellows and in maintaining a successful program through additional non-clinical activities.

3. How will the proposed requirement or revision impact continuity of patient care?
   No impact on continuity of care is anticipated.

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?
   The requirements are structured to provide programs with flexibility in terms of how dedicated time is provided, allowing decisions regarding resource allocation to be made at the local level. In addition, given the variation in terms of how core faculty time is approached across specialties, each Review Committee will be able to assess whether dedicated time requirements are needed.

5. How will the proposed revision impact other accredited programs?
   Not applicable, as this is a Common Program Requirement.

Requirement #: **II.C.2.**

Requirement Revision (significant change only):

Common Program Requirements (Residency):

>> The program coordinator must be provided with dedicated time and support adequate for administration of the program based upon its size and configuration. (Core)
>>
>> ~~At a minimum, the program coordinator must be supported at 50 percent FTE for the administration of the program.~~ (Core)
>>
>> [The Review Committee must further specify minimum dedicated time for the program coordinator.]
>>
>> ~~[The Review Committee may further specify. If the Review Committee specifies support greater than 50 percent, II.C.2. and the accompanying Background and Intent will be modified to reflect the level of support specified by the Review Committee]~~

Background and Intent: ~~Fifty percent FTE is defined as two-and-a-half (2.5) days per week.~~

The requirement does not address the source of funding required to provide the specified salary support.

Each program requires a lead administrative person, frequently referred to as a program coordinator, administrator, or as otherwise titled by the institution. This person will frequently manage the day-to-day operations of the program and serve as an important liaison ~~with~~ and facilitator between the learners, faculty and other staff members, and the ACGME. Individuals serving in this role are recognized as program coordinators by the ACGME.

The program coordinator is a key member of the leadership team and is critical to the success of the program. As such, the program coordinator must possess skills in leadership and personnel management appropriate to the complexity of the program. Program coordinators are expected to develop ~~unique~~ in-depth knowledge of the ACGME and Program Requirements, including policies~~,~~ and procedures. Program coordinators assist the program director in meeting accreditation ~~efforts~~ requirements, educational programming, and support of residents.

Programs, in partnership with their Sponsoring Institutions, should encourage the professional development of their program coordinators and avail them of opportunities for both professional and personal growth. Programs with fewer residents may not require a full-time coordinator; one coordinator may support more than one program.

Common Program Requirements (Fellowship):
>> The program coordinator must be provided with dedicated time and support adequate for administration of the program based upon its size and configuration. (Core)
>>
>> [The Review Committee ~~may~~ must further specify minimum dedicated time for the program coordinator]

Background and Intent: ~~Twenty percent FTE is defined as one day per week. [If applicable, this Background and Intent will be included in the subspecialty-specific program requirements and the number will be modified to fit the level of support specified by the Review Committee]~~

The requirement does not address the source of funding required to provide the specified salary support.

Each program requires a lead administrative person, frequently referred to as a program coordinator, administrator, or as <u>otherwise</u> titled by the institution. This person will frequently manage the day-to-day operations of the program and serve as an important liaison ~~with~~ <u>and facilitator between the</u> learners, faculty and other staff members, and the ACGME. Individuals serving in this role are recognized as program coordinators by the ACGME.

The program coordinator is a <u>key</u> member of the leadership team and is critical to the success of the program. As such, the program coordinator must possess skills in leadership and personnel management <u>appropriate to the complexity of the program</u>. Program coordinators are expected to develop ~~unique~~ <u>in-depth</u> knowledge of the ACGME and Program Requirements, <u>including</u> policies~~,~~ and procedures. Program coordinators assist the program director in <u>meeting</u> accreditation ~~efforts~~ <u>requirements</u>, educational programming, and support of fellows.

Programs, in partnership with their Sponsoring Institutions, should encourage the professional development of their program coordinators and avail them of opportunities for both professional and personal growth. Programs with fewer fellows may not require a full-time coordinator; one coordinator may support more than one program.

Common Program Requirements (Post-Doctoral Education):
> The program coordinator must be provided with <u>dedicated time and</u> support adequate for administration of the program based upon its size and configuration. ^(Core)
>
> [The Review Committee must further specify <u>minimum dedicated time for the program coordinator</u>]

members, and the ACGME. Individuals serving in this role are recognized as program coordinators by the ACGME.

The program coordinator is a <u>key</u> member of the leadership team and is critical to the success of the program. As such, the program coordinator must possess skills in leadership and personnel management <u>appropriate to the complexity of the program</u>. Program coordinators are expected to develop <s>unique</s> <u>in-depth</u> knowledge of the ACGME and Program Requirements, <u>including</u> policies<s>,</s> and procedures. Program coordinators assist the program director in <u>meeting</u> accreditation <s>efforts</s> <u>requirements</u>, educational programming, and support of post-doctoral fellows.

Programs, in partnership with their Sponsoring Institutions, should encourage the professional development of their program coordinators and avail them of opportunities for both professional and personal growth. Programs with fewer post-doctoral fellows may not require a full-time coordinator; one coordinator may support more than one program.

1. Describe the Review Committee's rationale for this revision:
   Residency version: Based on information provided in response to the Request for Position Papers and the ACGME Congress on Dedicated Time held last fall, it is apparent that the minimum of 50 percent support for the program coordinator is more than is needed for many small programs. Review Committees will be required to define the minimum dedicated time and support needed for programs in the specialty, based upon program size and configuration.

   At the direction of the ACGME Board, the ACGME Committee on Requirements will develop guidance for Review Committees to use in the creation of specialty-specific requirements related to the program coordinator's minimum dedicated time to the program. Review Committees will be asked to review their current requirements and, if needed, propose modifications consistent with the guidance provided by the Committee on Requirements. Proposed changes will be subject to the ACGME's established policies and procedures for Program Requirement revisions, including a 45-day public comment period. Additional information will be shared as it becomes available.

2. How will the proposed requirement or revision improve resident/fellow education, patient safety, and/or patient care quality?
   Program coordinators are essential to the administration of an effective graduate medical education program and failure to provide sufficient time and support for the program coordinator would likely have a negative impact on education. Proposed Requirement II.C.2. recognizes the need to ensure that coordinators are provided with sufficient time and support to effectively contribute to program administration and resident education.

3. How will the proposed requirement or revision impact continuity of patient care?
   No impact on continuity of care is anticipated.

4. Will the proposed requirement or revision necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?

> **The changes acknowledge that the current requirements specify a level of support that is more than needed for many smaller programs. The change allows Review Committees to determine the minimum dedicated time and support, consistent with the guidelines to be developed by the Committee on Requirements. The impact on institutional resources will vary across specialties, as some Review Committees may set a lower minimum for smaller programs, and others may determine that the minimum should be increased based on the new guidelines. All changes will be subject to public comment, in accordance with ACGME policies and procedures.**

5. How will the proposed revision impact other accredited programs?
   Not applicable, as all programs are subject to the Common Program Requirements.