

GME Leadership Development Plan Packet

Packet includes detailed roles and responsibilities, along with timelines and individual learning plans by year

Part One: Program Director

- A. Roles & Responsibilities of the Program Director
- B. Years 1-2: Learning the Program Director Roles & Responsibilities
- C. Years 3-4: Mastering the Program Director Roles & Responsibilities
- D. Years 5+: Beyond the Program Director Roles & Responsibilities
- E. Individual Learning Plan for Program Director

Part Two: Associate Program Director

- A. Roles & Responsibilities of the Associate Program Director
- B. Years 1-2: Learning the Associate Program Director Roles & Responsibilities
- C. Years 3-4: Preparing to be a Program Director
- D. Individual Learning Plan for Associate Program Director



PART ONE: Program Director

Part A: Roles of the Program Director

I. Participation in the institutional governance of GME programs:

- Maintain current knowledge of and compliance with Sponsoring Institution GME policies and procedures.
- Maintain current knowledge of and compliance with ACGME institutional, common program, and program-specific requirements (www.acgme.org).
- Maintain current knowledge of and compliance with ACGME Clinical Learning Environment Review (CLER) expectations (<http://www.acgme.org/What-We-Do/Initiatives/Clinical-Learning-Environment-Review-CLER>).
- 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.

II. Annual Program Evaluation, Special Reviews and Internal Reviews:

- Conduct an Annual Program Evaluation (APE), assess and monitor any action items developed, and record in residency management system 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.

III. ACGME RRC-related Responsibilities:

- Maintain current knowledge of and compliance with the ACGME manual of policies and procedures (www.acgme.org).
- Maintain current knowledge of and compliance with all ACGME program requirements and expectations pertaining to program.
- Respond promptly to RRC requests for information and provide copies of any such information to the OGME.
- Provide accurate and complete program information to the RRC.
- Ensure that the DIO reviews and co-signs 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 ADS (Accreditation Data System) update is complete, accurate and timely.
- Direct and oversee a thorough and careful Self-Study at intervals requested by the ACGME.
- Ensure accurate and complete case log reporting by residents, if required by the specialty.
- 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.
 - Prepare Program Letters of Agreement with all clinical sites for which rotations are required and revise these program agreements at least every ten years.
- 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.

IV. 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), and faculty members.
- Provide applicant credentials to the affiliated hospitals for approval in a timely manner.
- Participate in the NRMP as part of the Institutional Agreement.

V. 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, 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.
- 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 major rotation or assignment.
- Ensure that residents receive the appropriate training and education in:
 - How to disclose adverse events to patients and families.
 - Social Determinants of Health.
 - Pain Management, including how to recognize signs of addiction.
 - Ethical principles that are foundational to medicine.
- Ensure resident involvement and experience in Quality and Patient Safety endeavors.
- Participate in or lead QI projects related to Residency Training.
- 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.

VI. Evaluation of Residents, Faculty and Program:

- 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.
 - 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.
 - 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.
 - 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.

VII. Faculty Oversight

- 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 aggregate resident evaluations and teaching effectiveness, at least annually.
 - Faculty development in education, assessment, wellness and Quality/Patient Safety skills that are pertinent to GME.

- Annual confidential 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.
- 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.
 - Performance of graduated residents.
 - Yearly APE, including the development and monitoring of quantifiable outcome measures.

VIII. 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.

IX. Resident Well Being:

- Ensure that the program is in compliance with clinical and educational work hour requirements.
- 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 that 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.

X. 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 GMEC policies for the following: resident selection, resident evaluation, resident promotion, resident dismissal, resident supervision, resident duty hours, moonlighting policy and written documentation for any resident participating in moonlighting, 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 residency applicants are provided, at a minimum, a written information sheet containing the website at which the terms and conditions of employment and benefits, policies and the most recent resident contract may be found.
- 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 the Program Coordinator and others to achieve all of the above.

- A. Program Structure
 - PEC
 - CCC
 - APE
- B. Curriculum & Evaluations
 - Creating Evaluations
 - Writing goals and objectives
 - Milestones
- C. Faculty
 - Understanding the role
 - Evaluating faculty
 - Working with difficult faculty members
 - Site/Rotation Directors
- D. GME Administration
 - Developing a working relationship with GME support staff
 - Understanding the GME support staff role
- E. Well-being
 - Supporting the trainees
 - Supporting the faculty
 - Supporting the GME support staff
- F. Accreditation Basics
 - Citations
 - Annual Updates
 - Work hour monitoring
 - ACGME Surveys

Suggested Program Director Timeline

Edit this as you develop your plans for the year based on your specific due dates.

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June
Program Level Administration												
Review ACGME Program Requirements												X
Establish Annual Residency Calendar											X	
AOA Program Reports (Competencies)	X											
Complete Program Report for GMEC	X	X	X	X	X	X	X	X	X	X	X	X
Clinical Competency Committee (CCC) Schedule		X			X						X	
Milestone Reporting - ACGME						X						X
Program Evaluation Committee (PEC) Schedule		X		X		X		X		X		APE
Core Faculty Meetings		X		X		X		X		X		X
ADS Update - ACGME		X	X									
AMA Frieda Update		X	X									
Update program web page							X					
Review program budget	X											
Program Manual finalized for NAY											X	
Needs Assessment for Faculty Development											X	
Complete Faculty Evaluations												X
Update Opportunities (AOA)											X	
Review Program Letters of Agreement for NAY											X	X
Meet with participating sites (curriculum & issues)										X		
Curriculum												
Design rotation schedule for NAY									X	X	X	
Confirm preceptor continuity schedule (contracts)										X		
Design didactic schedule for NAY									X	X		
Review and update program handbook										X		X
Current residents												
Distribute program handbook and GME policies	X											
Monitor Work Hours (rotation, shifts, call & service changes)	X	X	X	X	X	X	X	X	X	X	X	X
Review Case Logs	X		X		X		X		X		X	X
Review rotation evaluations	X	X	X	X	X	X	X	X	X	X	X	X
Review resident scholarly activity	X			X			X			X		
Semi-annual evaluations of residents						X						X
Review quarterly eval w/ resident (AOA)				X			X			X		
Annual Resident Review (AOA)												X
Resident promotion decision									X			
Graduation Ceremony												X
Confirm Procedures - Indirect Supervision	X	X	X	X	X	X	X	X	X	X	X	X
Develop Resident Performance Improvement Plans	X	X	X	X	X	X	X	X	X	X	X	X
Recruitment												
Register for ERAS									X			
Register for NRMP/NMS		X										
Review ERAS apps & offer interviews			X	X								
Interviews				X	X	X	X					
Finalize, submit rank list								ACGME				
Match, SOAP, Scramble									ACGME			
Organize Orientation Schedule									X	X	X	
Set interview dates for next season										X		
Review applicant surveys for improvement									X			
Review & confirm # positions for next year match										X		

NAY - Next Academic Year

Part C: YEARS 3-5: Mastering the Roles & Responsibilities

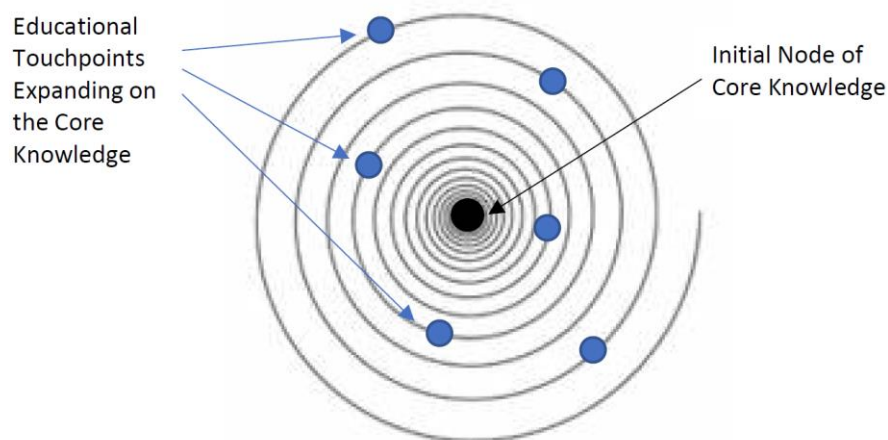
- A. Common Program Requirements
- B. Continuous Program Improvement
- C. Working with departments & service directors
- D. Working with the Central GME
- E. Sponsoring Institution
- F. Accreditation Issues

Part D: YEARS 5+: Beyond the Roles & Responsibilities

- A. Meaningful Mission & Aims for your Program
- B. From Good to Great
- C. Working with struggling faculty members
- D. Working with struggling residents

- E. Succession planning
- F. Making the APE process work harder
- G. Mentoring other program directors

EDUCATIONAL TOUCHPOINTS



The goal of the educational touchpoints should be to encourage active learning—

1. self-assessment,
2. reflection,
3. self-directed learning,
4. problem-based learning,
5. learner interaction, and
6. feedback.

Part E: Individual Learning Plan for Program Directors

Program Director Individual Learning Plan -Year 1

Name: _____

Date Started: _____

Program: _____



Adult Learning Principles:

1. Adults prefer to choose their own learning activities.
2. Learning is individual – no one method fits all.

See the *Annotated Bibliography of GME Resources* OR search the internet for new resources

Tips for Searching the Internet for GME Resources:

- Put “GME” or “graduate medical education” in the search string.
- Come as close to the ACGME terminology to obtain the most resources.
 - “GME competency-based education” is a better search string than “GME curriculum”.
- These searches will bring up literature, PowerPoints, and other documents.

Year One (Choose 4):

- | | |
|---|--|
| <p>A. Program Structure</p> <ul style="list-style-type: none"> • PEC • CCC • APE <p>B. Curriculum & Evaluations</p> <ul style="list-style-type: none"> • Creating Evaluations • Writing goals and objectives • Milestones <p>C. Faculty</p> <ul style="list-style-type: none"> • Understanding the role • Evaluating faculty • Site/Rotation Directors | <p>D. GME Administration</p> <ul style="list-style-type: none"> • Developing a working relationship with GME support staff • Understanding the GME support staff role <p>E. Well-being</p> <ul style="list-style-type: none"> • Supporting the trainees • Supporting the faculty • Supporting the GME support staff <p>F. Accreditation Basics</p> <ul style="list-style-type: none"> • Citations • Annual Updates • Work hour monitoring • ACGME Surveys |
|---|--|

<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>	<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>
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Year One Goals:

<p>Thinking about the learning activities you have participated in, what goals do you have for the next year. Use the SMART GME Goals worksheet to develop goals.</p>	<ol style="list-style-type: none"> 1. 2.
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**Program Director
Individual
Learning
Plan – Year 2**



Name: _____

Date Started: _____

Program: _____

Adult Learning Principles:

1. Adults prefer to choose their own learning activities.
2. Learning is individual – no one method fits all.

See the *Annotated Bibliography of GME Resources* OR search the internet for new resources

Tips for Searching the Internet for GME Resources:

- Put “GME” or “graduate medical education” in the search string.
- Come as close to the ACGME terminology to obtain the most resources.
 - “GME competency-based education” is a better search string than “GME curriculum”.
- These searches will bring up literature, PowerPoints, and other documents.

Year Two:

- | | |
|---|---------------------------------|
| 1. Common Program Requirements | 4. Working with the Central GME |
| 2. Continuous Program Improvement | 5. Sponsoring Institution |
| 3. Working with departments & service directors | 6. Accreditation Issues |
| | 7. Other |

TOPIC: List learning modes used (online module, small group session, reading, other) 1. 2. Key Learning Point: Date completed:	TOPIC: List learning modes used (online module, small group session, reading, other) 1. 2. Key Learning Point: Date completed:
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Year Two Goals:

Thinking about the learning activities you have participated in, what goals do you have for the next year. Use the SMART GME Goals worksheet to develop goals.	1. 2.
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**Program Director
Individual
Learning
Plan – Year 3**



Name: _____

Date Started: _____

Program: _____

Adult Learning Principles:

1. Adults prefer to choose their own learning activities.
2. Learning is individual – no one method fits all.

See the *Annotated Bibliography of GME Resources* OR search the internet for new resources

Tips for Searching the Internet for GME Resources:

- Put “GME” or “graduate medical education” in the search string.
- Come as close to the ACGME terminology to obtain the most resources.
“GME competency-based education” is a better search string than “GME curriculum”.
- These searches will bring up literature, PowerPoints, and other documents.

Year Three:

- | | |
|---|---------------------------------------|
| 1. Meaningful Mission & Aims for your Program | 5. Succession planning |
| 2. From Good to Great | 6. Making the APE process work harder |
| 3. Working with struggling faculty members | 7. Mentoring other program directors |
| 4. Working with struggling residents | 8. Other |

<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>	<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>
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Year Three Goals:

<p>Thinking about the learning activities you participated in, what goals do you have for the next year. Use the SMART GME Goals worksheet to develop goals.</p>	<ol style="list-style-type: none"> 1. 2.
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PART TWO: Associate Program Director

Part A: YEARS ONE and TWO: Learning the Role & Responsibilities

These are activities that as APD, you will want to participate in or investigate in your first years as a associate program director:

I. Participation in the institutional governance of GME programs:

- Attend in Graduate Medical Education Committee (APDs may be voting members or they may be guests. This all depends on the sponsoring institution GMEC voting members.

II. Annual Program Evaluation:

- Assist or conduct an Annual Program Evaluation (APE), assess and monitor any action items developed.
- Chair or co-chair the PEC (Program Evaluation Committee).

III. Recruitment and Selection:

- Actively participate in recruitment – for example, chair the recruitment committee, or lead the education for faculty.

IV. Educational Aspects of the Program:

- Develop an understanding of the CCC, PEC, Leadership structure.
- Curriculum: 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 major rotation or assignment.
- Participate in or lead QI projects related to Residency Training.
- Facilitate residents' participation in the educational and scholarly activities and ensure that residents assume graduated responsibility for teaching and supervising other students and residents.

V. Evaluation of Residents:

- Help 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.
 - 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.
 - 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.

VI. Supervision and Patient Safety:

- 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.

VII. Resident Well Being:

- 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.

VIII. Leadership and Administration:

- Become familiar with the requirements for 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 residents complete time records and medical records in a timely and accurate manner.
- Work collaboratively with Program Coordinator and others to achieve all of the above.

Part B: YEARS ONE and TWO: Learning the Role & Responsibilities

Associate Program Director Job Description:

Each Associate Program Director role will have it's unique role.

Part of your responsibility as an Associate Program Director will be, along with the guidance of your program director, will be to develop your job description.

The previous section outlines some possible elements for your job description that can be personalized to meet your specific role.

Associate Program Director Annual Evaluation:

Once your job description has been developed, your annual evaluation can be drafted.

The annual evaluation should be a document that is negotiated between yourself and program director.

Mentoring Responsibilities:

One of the "unwritten" roles of the associate program director is the role of mentor.

Mentoring is an important role of the associate program director.

- Sounding board for all things resident-related:
 - Questions not "worthy" of the program director.
 - Complaints/suggestions people aren't comfortable bringing to the program director.
- An "open door" for informal advice.

Part C: YEARS THREE to FIVE: Preparing to be a Program Director

Program Director Timeline Template

	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June
Program Level Administration												
Review ACGME Program Requirements												x
Establish Annual Residency Calendar											x	
AOA Program Reports (Competencies)	x											
Complete Program Report for GMEC	x	x	x	x	x	x	x	x	x	x	x	x
Clinical Competency Committee (CCC) Schedule		x			x						x	
Milestone Reporting - ACGME						x						x
Program Evaluation Committee (PEC) Schedule		x		x		x		x		x		APE
Core Faculty Meetings		x		x		x		x		x		x
ADS Update - ACGME		x	x									
AMA Frieda Update		x	x									
Update program web page							x					
Review program budget	x											
Program Manual finalized for NAY											x	
Needs Assessment for Faculty Development											x	

Complete Faculty Evaluations													X
Update Opportunities (AOA)												X	
Review Program Letters of Agreement for NAY												X	X
Meet with participating sites (curriculum & issues)											X		
Curriculum													
Design rotation schedule for NAY									X	X	X		
Confirm preceptor continuity schedule (contracts)										X			
Design didactic schedule for NAY									X	X			
Review and update program handbook										X			X
Current residents													
Distribute program handbook and GME policies	X												
Monitor Work Hours (rotation, shifts, call & service changes)	X	X	X	X	X	X	X	X	X	X	X	X	X
Review Case Logs	X		X		X		X		X		X		X
Review rotation evaluations	X	X	X	X	X	X	X	X	X	X	X	X	X
Review resident scholarly activity	X			X			X				X		
Semi-annual evaluations of residents							X						X
Review quarterly eval w/ resident (AOA)				X			X				X		
Annual Resident Review (AOA)													X
Resident promotion decision										X			
Graduation Ceremony													X
Confirm Procedures - Indirect Supervision	X	X	X	X	X	X	X	X	X	X	X	X	X
Develop Resident Performance Improvement Plans	X	X	X	X	X	X	X	X	X	X	X	X	X
Recruitment													
Register for ERAS										X			
Register for NRMP/NMS		X											
Review ERAS apps & offer interviews			X	X									
Interviews				X	X	X	X						
Finalize, submit rank list									ACGME				
Match, SOAP, Scramble										ACGME			
Organize Orientation Schedule										X	X	X	
Set interview dates for next season											X		
Review applicant surveys for improvement										X			
Review & confirm # positions for next year match											X		

NAY - Next Academic Year

Part D: Individual Learning Plan for Associate Program Director

Associate Program Director Individual Learning Plan – Year 1



Name: _____

Date Started: _____

Program: _____

Adult Learning Principles:

1. Adults prefer to choose their own learning activities.
2. Learning is individual – no one method fits all.

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Tips for Searching the Internet for GME Resources:

- Put “GME” or “graduate medical education” in the search string.
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“GME competency-based education” is a better search string than “GME curriculum”.
- These searches will bring up literature, PowerPoints, and other documents.

Year One Topics (Choose 4):

- | | |
|---|--|
| <p>A. Program Structure</p> <ul style="list-style-type: none"> • PEC • CCC • APE <p>B. Faculty</p> <ul style="list-style-type: none"> • Understanding the role • Evaluating faculty • Site/Rotation Directors | <p>C. Well-being</p> <ul style="list-style-type: none"> • Supporting the trainees • Supporting the faculty • Supporting the GME support staff <p>D. Accreditation Basics</p> <ul style="list-style-type: none"> • Citations • Annual Updates • Work hour monitoring • ACGME Surveys |
|---|--|

<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>	<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>
<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>	<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>

End of Year Goals

<p>Thinking about the learning activities you have participated in, what goals do you have for the next year. Use the SMART GME Goals worksheet to develop goals.</p>	<ol style="list-style-type: none"> 1. 2.
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**Associate Program Director
Individual
Learning
Plan – Year 2**



Name: _____

Date Started: _____

Program: _____

Adult Learning Principles:

1. Adults prefer to choose their own learning activities.
2. Learning is individual – no one method fits all.

See the *Annotated Bibliography of GME Resources* OR search the internet for new resources

Tips for Searching the Internet for GME Resources:

- Put “GME” or “graduate medical education” in the search string.
- Come as close to the ACGME terminology to obtain the most resources.
“GME competency-based education” is a better search string than “GME curriculum”.
- These searches will bring up literature, PowerPoints, and other documents.

Year Two Topics (Choose 4):

- | | |
|---|--|
| <p>A. Program Structure</p> <ul style="list-style-type: none"> • PEC • CCC • APE <p>B. Faculty</p> <ul style="list-style-type: none"> • Understanding the role • Evaluating faculty • Site/Rotation Directors | <p>C. Well-being</p> <ul style="list-style-type: none"> • Supporting the trainees • Supporting the faculty • Supporting the GME support staff <p>D. Accreditation Basics</p> <ul style="list-style-type: none"> • Citations • Annual Updates • Work hour monitoring • ACGME Surveys |
|---|--|

<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>	<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>
<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>	<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>

End of Year Goals

<p>Thinking about the learning activities you have participated in, what goals do you have for the next year. Use the SMART GME Goals worksheet to develop goals.</p>	<ol style="list-style-type: none"> 1. 2.
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**Associate Program Director
Individual
Learning
Plan – Year 3**



Name: _____

Date Started: _____

Program: _____

Adult Learning Principles:

1. Adults prefer to choose their own learning activities.
2. Learning is individual – no one method fits all.

See the *Annotated Bibliography of GME Resources* OR search the internet for new resources

Tips for Searching the Internet for GME Resources:

- Put “GME” or “graduate medical education” in the search string.
- Come as close to the ACGME terminology to obtain the most resources.
“GME competency-based education” is a better search string than “GME curriculum”.
- These searches will bring up literature, PowerPoints, and other documents.

Year Three (Choose 3):

- | | |
|---|---------------------------------|
| 1. Common Program Requirements | 4. Working with the Central GME |
| 2. Continuous Program Improvement | 5. Sponsoring Institution |
| 3. Working with departments & service directors | 6. Accreditation Issues |
| | 7. Other |

Year Three Topics (Choose 3):

<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>
<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 1. 2. <p>Key Learning Point: Date completed:</p>
<p>TOPIC: List learning modes used (online module, small group session, reading, other)</p> <ol style="list-style-type: none"> 3. 4. <p>Key Learning Point: Date completed:</p>

End of Year Goals

<p>Thinking about the learning activities you have participated in, what goals do you have for the next year. Use the SMART GME Goals worksheet to develop goals.</p>	<ol style="list-style-type: none"> 1. 2.
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**Associate Program Director
Individual
Learning
Plan – Year 4**



Name: _____

Date Started: _____

Program: _____

Adult Learning Principles:

1. Adults prefer to choose their own learning activities.
2. Learning is individual – no one method fits all.

See the *Annotated Bibliography of GME Resources* OR search the internet for new resources

Tips for Searching the Internet for GME Resources:

- Put “GME” or “graduate medical education” in the search string.
- Come as close to the ACGME terminology to obtain the most resources.
“GME competency-based education” is a better search string than “GME curriculum”.
- These searches will bring up literature, PowerPoints, and other documents.

Year Four (Choose 3):

- | | |
|---|---------------------------------|
| 1. Common Program Requirements | 4. Working with the Central GME |
| 2. Continuous Program Improvement | 5. Sponsoring Institution |
| 3. Working with departments & service directors | 6. Accreditation Issues |
| | 7. Other |

TOPIC:

List learning modes used (online module, small group session, reading, other)

- 3.
- 4.

Key Learning Point:

Date completed:

TOPIC:

List learning modes used (online module, small group session, reading, other)

- 5.
- 6.

Key Learning Point:

Date completed:

TOPIC:

List learning modes used (online module, small group session, reading, other)

- 7.
- 8.

Key Learning Point:

Date completed:

End of Year Goals

Thinking about the learning activities you have participated in, what goals do you have for the next year. Use the SMART GME Goals worksheet to develop goals.

- 1.
- 2.