Policy Name: Residency Program Directors – Appointment, Review, Duties/Responsibilities and Support

Application/Scope: All PGME Residency Programs

Approved (Date): PGME Executive: September 9, 2013; Dean’s Council: Sept. 10, 2013

Review Date: 

Revised (Date): PGME Executive: September 16, 2014

Approved By: Faculty Executive Council Sept. 10, 2013

BACKGROUND

Residency Program Directors are responsible for the overall conduct, organization, and accountability of their Residency Programs. The Residency Program Director works with the Program Administrator or Assistant and the Residency Program Committee to achieve the goals and objectives of the Residency Program such that it meets the general and specific standards of accreditation.

It is recognized that Residency Program Directors require strong communication and interpersonal skills, leadership ability, effective advocacy skills, a commitment to the practice of lifelong learning and a working knowledge of the principles of adult learning and the educational objectives of the relevant discipline.

Generic duties and responsibilities are described, and provide a standardized framework for individual Residency Programs to add additional responsibilities, accountabilities, and/or qualifications as are appropriate for the relevant Residency Program. The FTE for PGME Directors will be determined based on the number of residents/fellows for which the respective director is responsible.

DEFINITIONS

CFPC – College of Family Physicians of Canada

FPGME – Faculty of Medicine Postgraduate Medical Education

FTE – Full Time Equivalent position, equal to 5 days per week

PARIM – Professional Association of Residents and Interns of Manitoba

RCPSC – Royal College of Physicians and Surgeons of Canada

1. PURPOSE

1.1 Describe the process of appointment of new Residency Program Directors.

1.2 Outline the generic duties and responsibilities of a Residency Program Director
2. STATEMENT OF POLICY

2.1 A Program Director is to be appointed for each Residency Program.

2.2 The Residency Program Director will not be the Department or Section Head.

2.3 The Residency Program Director is jointly accountable to the Head/Chair of the relevant Department, Section or Program and to the Associate Dean, PGME.

2.4 The Qualifications of the Residency Program Director will include but are not limited to the following:

2.4.1 Member of the University of Manitoba, Faculty of Medicine

2.4.2 Certification in the relevant discipline from the Royal College of Physicians and Surgeons of Canada (RCPSC) (or equivalent organization) or the College of Family Physicians of Canada (CFPC)

2.4.3 Strong communication and interpersonal skills

2.4.4 Demonstrated skill in teaching

2.4.5 Leadership ability

2.4.6 Resident advocacy skills and interest

2.4.7 Working knowledge of the principles of adult learning and postgraduate medical education

2.5 The minimum Resource Requirements for the Residency Program Director include the following:

2.5.1 Adequate remuneration relative to the size and circumstances of the Residency Program, as outlined in Appendix 1

2.5.2 Adequate protected time relative to the size and circumstances of the Residency Program, (Accreditation Standard)

2.5.3 Adequate Administrative support relative to the size and circumstances of the Residency Program, (Accreditation Standard) and outlined in Appendix 1

2.5.4 Additional faculty or administrative positions as required for Site Coordinators, depending on the size of the Residency Program and the number and distribution of educational sites

2.5.5 The support of the Department and faculty

2.5.6 Appropriately located and equipped office space in proximity to residents, the Program Administrator and resident files

2.6 All Program Directors must have a written job description

2.6.1 Development of the job description is the joint responsibility of the Head/Chair of the Department/Section and the Associate Dean, PGME.

2.6.2 The job description should be reviewed annually.
2.7 The **Duties and Responsibilities** of the Residency Program Director include the following:

2.7.1 The Residency Program Director, assisted by the Residency Program Committee and the Program Administrator are responsible for the following **General Duties**:

2.7.1.1 Development and operation of the Residency Program such that it meets the general and specific standards of accreditation as established by the Royal College of Physicians and Surgeons of Canada (RCPSC) and the College of Family Physicians of Canada (CFPC), including the following:

2.7.1.1.1 Selection and scheduling of rotations

2.7.1.1.2 Curriculum development

2.7.1.1.3 Selection and scheduling of other educational activities and educational sites

2.7.1.2 Selection of candidates for admission to the Residency Program in accordance with the University of Manitoba policy.

2.7.1.3 Assessment and promotion of residents in accordance with the University of Manitoba policy.

2.7.1.4 Maintenance of an appeal mechanism, procedural fairness, reasonable decision-making and appropriate transparency within the Residency Program.

2.7.1.5 Facilitation and promotion of career-planning.

2.7.1.6 Counseling of residents and responding to resident difficulties such as those related to stress, wellness and learning challenges in a timely manner.

2.7.1.7 Planning and advocacy for Residency Program growth when indicated by criteria such as health human resource needs and Residency Program quality and capacity.

2.7.1.8 Maintenance of a functional mechanism for faculty evaluation that ensures resident anonymity.

2.7.1.9 Ongoing Residency Program Review to include the following:

2.7.1.9.1 Each component of the educational experience to be certain that the educational objectives are being met.

2.7.1.9.2 Ensuring that the overall and rotation-specific Goals and Objectives are in place, are functional, are regularly reviewed (at least every two years) and are made readily available to all faculty and residents.

2.7.1.9.3 Assessment of resident performance in all domains based on CanMEDS or CanMEDS-FM competencies.

2.7.2 **Specific Duties** of the Residency Program Director include the following:

2.7.2.1 Ensuring that the formal teaching in the Residency Program is organized, relevant and continually updated.
2.7.2.2 Ensuring that there is an appropriate balance of education and service observed on all rotations in the Residency Program

2.7.2.3 Ensuring that all CanMEDS/CanMEDS-FM competencies are taught and assessed appropriately with mapping/tagging to curricular activities

2.7.2.4 Ensuring that the Residency Program functions in an environment free of intimidation, harassment, which respects diversity and gender, race, religion, ethnicity and sexual orientation.

2.7.2.5 Ensuring that there is assignment of residents to rotations in such a manner that there is a natural progression (graded responsibility) to the position of senior resident with appropriate supervision on clinical and research rotations

2.7.2.6 Reviewing the Residency Program resources to ensure adequate teaching faculty, clinical cases, acuity and mix, technical and physical resources

2.7.2.7 Ensuring that resident assessment and promotion occur in a timely manner using reliable methods and that there is maintenance of appropriate and secure documentation of resident progress within the Residency Program

2.7.2.8 Ensuring that the Residency Program and faculty evaluation occur in a timely manner using reliable and valid methods and that a process of regular programmatic review and improvement occurs

2.7.2.9 Meeting face-to-face formally with each resident regularly (at least semi-annually) to review progress, concerns or issues and for career planning

2.7.2.10 Ensuring that communication occurs to and from the faculty and at clinical teaching sites with the Site Coordinators in matters pertinent to the Residency Program

2.7.2.11 Escalating Residency Program issues of concern to the Associate Dean, PGME and to the Head/Chair of the Department/Section, as appropriate

2.7.2.12 Oversight of Human Resource activities, as follows

2.7.2.12.1 Ensuring compliance with the Professional Association of Residents and Interns of Manitoba (PARIM) - Collective Agreement

2.7.2.12.2 Procurement and maintenance of resident resources, including libraries and computer areas

2.7.2.12.3 Facilitating access to various resident supports, including resident wellness, credentialing offices, licensing bodies and examination boards

2.7.2.13 Oversight of Resident Documents, Credentialing and Licensing, as follows:

2.7.2.13.1 Ensuring that the Residency Program and that the residents meet credentialing requirements and deadlines

2.7.2.13.2 Maintenance of resident files and logbooks
2.7.2.13.3 Maintenance of web-based resources and tracking programs
2.7.2.13.4 Timely completion, signing and submission of the Final In-Training Evaluation Reports (FITER)
2.7.2.13.5 Ensuring that Inter-University Affiliation Agreements are documented and are current

2.7.2.14 Oversight of Financial particulars pertaining to the Residency Program, as follows:
2.7.2.14.1 Management of Residency Program financial resources
2.7.2.14.2 Liaison with external funding agencies to support educational activities in compliance with the University of Manitoba guidelines for interaction with industry

2.7.2.15 Oversight of Event Planning, Curriculum Delivery and Scheduling, as follows:
2.7.2.15.1 Planning of educational events, including Journal Club, examinations and resident retreats
2.7.2.15.2 Organization of the CaRMS Match and any other selection processes
2.7.2.15.3 Distribution of Residency Program information, notices and other communication to the residents
2.7.2.15.4 Developing and maintaining the annual rotation schedule for each resident
2.7.2.15.5 Assignment of call, vacation, study time, leaves of absence and attendance in compliance with the University of Manitoba policy.
2.7.2.15.6 Arrangement of electives for visiting residents and medical students
2.7.2.15.7 Tracking of resident assessments

2.7.2.16 Oversight of Accreditation, as follows:
2.7.2.16.1 Documentation, preparation and scheduling for internal and external reviews
2.7.2.16.2 Bi-annual revisions of the Residency Program documents

2.7.2.17 Participation on Committees, as follows:
2.7.2.17.1 Chair of the Residency Program Committee with the responsibility of maintaining appropriate function, membership, frequency of meetings documentation and distribution of minutes
2.7.2.17.2 Membership on the Departmental Postgraduate Education Committee

2.7.2.17.3 Membership on the Surgical Foundations Committee, if appropriate

2.7.2.17.3 Participate on the Faculty Postgraduate Medical Education (FPGME) Executive Committee and represent the Residency Program’s priorities to the Committee

2.7.2.17.4 Participation on national committees involved in Residency Program and Postgraduate Medical Education activities and issues

3. PROCEDURES

3.1 With respect to Selection and Appointment of the Residency Program Director, the following should apply:

3.1.1 The Head/Chair of the relevant Department/Section should convene a Selection Committee with faculty and resident representation

3.1.1.1 The Committee should be advisory to the Head/Chair of the Department/Section with respect to the selection and appointment of the Residency Program Director

3.1.1.2 The Associate Dean, PGME should be notified by the Department/Section of all searches.

3.1.1.3 The Associate Dean, PGME should co-chair all PD searches for programs with 10 or more residents.

3.1.2 The appointment of a new Residency Program Director will be performed conjointly by the Head/Chair of the Department and Associate Dean, PGME.

3.1.2.1 The Faculty appointment of the newly-appointed Residency Program Director will be at the level of Assistant Professor or higher.

3.1.3 The Associate Dean, PGME will advise the Dean of Medicine of the appointment of new Residency Program Directors.

3.1.4 The Associate Dean, PGME will meet with the newly appointed Residency Program Director to discuss his/her duties and expectations and to answer any questions.

3.1.5 The FPGME Office will notify the Royal College of Physicians and Surgeons of Canada (RCPSC) or the College of Family Physicians of Canada (CFPC) of the names of the newly-appointed Residency Program Directors.

3.1.6 A Residency Program Director will be appointed to serve a term of up to six years, once renewable.

3.2 With respect to Review of the Residency Program Director’s performance, the following should apply:
3.2.1 The Residency Program Director’s performance should be reviewed by the Head/Chair of the relevant Section/Department on an annual basis as part of the Performance Appraisal process with input from the Associate Dean, PGME.

3.2.2 A Residency Program Director may be replaced at the request of the Associate Dean, PGME in consultation with the Residency Program Director's Department/Section Head/Chair.

3.3 With respect to **Resources and Support** for the Residency Program Director, the following applies:

3.3.1 All payments and budgets for PGME Program Directors are centralized in the PGME unit budget.

3.3.2 The PGME Office and Finance will work with Departments to coordinate transfers of funds for each position, as well as the timely renewal of respective contracts and/or recruitment of new positions as required.

3.3.3 The Department/Section Head/Chair will provide the key resources to support the Residency Program Director, including protected time to carry out responsibilities, administrative and faculty support and appropriate remuneration.

3.3.4 The Residency Program Director, in consultation with the Faculty PGME Office and Finance as required, will develop an annual budget/business plan to justify the acquisition of funding for non-salary educational materials such as books, microscopes and other items required for the successful functioning of the Residency Program.

3.3.4.1 The Program Director will submit the budget/business plan to his/her Department Head for approval.

4. **POLICY CONTACT:** Associate Dean, PGME

5. **REFERENCES**

   UBC, Residency Program Director - UBC, September 2013

   University of Calgary, Faculty of Medicine, Postgraduate Medical Education Residency Program Director Job Description
   [http://www.ucalgary.ca/files/med/Program%20Director%20job%20description.pdf](http://www.ucalgary.ca/files/med/Program%20Director%20job%20description.pdf)

   Queen’s University, Faculty of Medicine, Postgraduate Medical Education, Program Director Role Description
   [http://meds.queensu.ca/assets/Program_Director_Role_-_January_2012.pdf](http://meds.queensu.ca/assets/Program_Director_Role_-_January_2012.pdf)

   Royal College of Physicians and Surgeons of Canada and College of Family Physicians, Accreditation B Standards Descriptors Document, July 2011, Descriptors, July 2012
### APPENDIX 1: Residency Program Director Time & Administrative Support by Program Size

<table>
<thead>
<tr>
<th>Residency Program Size By No. of Residents/Fellows</th>
<th>Program Director FTE+</th>
<th>Minimum Administrative Program Support FTE (Specific to PGME; does not include time spent on research, clinical, UGME or CME activities)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td><strong>No. of Residents</strong></td>
</tr>
<tr>
<td>0-1</td>
<td>0.05</td>
<td>0 or inactive</td>
</tr>
<tr>
<td>2-5</td>
<td>0.10</td>
<td>1-5</td>
</tr>
<tr>
<td>6-10</td>
<td>0.15</td>
<td>6-15</td>
</tr>
<tr>
<td>11-15</td>
<td>0.25</td>
<td>16-30</td>
</tr>
<tr>
<td>16-20</td>
<td>0.30</td>
<td>31-50</td>
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<tr>
<td>21-25</td>
<td>0.35</td>
<td>51-75</td>
</tr>
<tr>
<td>26-30</td>
<td>0.40</td>
<td>76-100</td>
</tr>
<tr>
<td>31-40</td>
<td>0.50</td>
<td>Over 101</td>
</tr>
<tr>
<td>41-50</td>
<td>0.60</td>
<td>31-50</td>
</tr>
<tr>
<td>51-75</td>
<td>0.70</td>
<td>51-75</td>
</tr>
<tr>
<td>Over 75</td>
<td>0.80</td>
<td>76-100</td>
</tr>
</tbody>
</table>

+ For those Residency Programs that wish to appoint an Assistant Program Director, the salary for the positions would be shared on a two thirds : one third (2/3 : 1/3) basis.