A Position Profile

Clinical Learning Environment Review Program
Field Representative

Accreditation Council for Graduate Medical Education (ACGME)
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**Furst Group**
Academia Council for Graduate Medical Education (ACGME) is a private professional organization responsible for the accreditation of 8,887 residency education programs. The ACGME’s volume of accredited programs makes it one of the largest private accrediting agencies in the country, if not the world.

ACGME at a Glance

- The Accreditation Council for Graduate Medical Education is a private, non-profit council that evaluates and accredits residency programs in the United States.

- The ACGME was established in 1981 from a consensus in the academic medical community for an independent accrediting organization. Its forerunner was the Liaison Committee for Graduate Medical Education, established in 1972.

- The mission of the ACGME is to improve healthcare by assessing and advancing the quality of resident physicians’ education through exemplary accreditation.

- In academic year 2010-2011, there were 8,887 ACGME-accredited residency programs in 133 specialties and subspecialties. The number of active full-time and part-time residents for academic year 2010-2011 was 113,142.

- The ACGME has 28 Review Committees (one for each of the 26 specialties, one for a special one-year transitional-year general clinical program, and one for institutional review). Each Review Committee comprises about 6 to 15 volunteer physicians. Members of the Residency Review Committees are appointed by the AMA Council on Medical Education and the appropriate medical specialty boards and organizations. Members of the Institutional Review Committee and Transitional Year Committee are appointed by the ACGME Executive Committee and confirmed by the Board of Directors.

- The ACGME is in the process of implementing the Next Accreditation System (NAS), an outcomes-based system of accreditation designed to rapidly adapt to new knowledge, technology, and capabilities while being responsive to the public’s needs. One component of the NAS is the Clinical Learning Environment Review (CLER) program. CLER assesses graduate medical education engagement in hospital and medical center strategies to improve patient safety, quality, and other important areas of focus.

- The ACGME’s member organizations are the American Board of Medical Specialties, American Hospital Association, American Medical Association, Association of American Medical Colleges, and the Council of Medical Specialty Societies. Member organizations
each nominate four members to the Board of Directors, which also includes two resident members (the chair of the Council of Review Committee Residents and a resident member appointed by the Resident and Fellow Section of the AMA), three public directors, the chair of the Council of Review Committees, one to four at-large directors, and a non-voting federal representative.

Mission, Vision, and Values

Mission Statement

We improve healthcare by assessing and advancing the quality of resident physicians’ education through exemplary accreditation.

Vision

We imagine a world characterized by:

- A structured approach to evaluating the competency of all residents and fellows;
- Motivated physician role models leading all GME programs;
- High-quality, supervised, humanistic, clinical educational experience, with customized formative feedback;
- Residents and fellows achieving specialty-specific proficiency prior to graduation; and
- Residents and fellows prepared to become virtuous physicians who place the needs and well-being of patients first.

Values

- Honesty and Integrity
- Excellence and Innovation
- Accountability and Transparency
- Fairness and Equity
- Stewardship and Service
- Engagement of Stakeholders

Strategic Priorities

- Foster innovation and improvement in the learning environment.
- Increase the accreditation emphasis on educational outcomes.
- Increase efficiency and reduce burden in accreditation.
- Improve communication and collaboration with key external stakeholders.

Core Staff Values

- Customer Focus
- Integrity/Ethics
- Results Focus
- Teamwork
The Clinical Learning Environment Review (CLER) Program

The CLER Program was created as result of the 2009-2010 ACGME “Duty Hours Task Force.” The recommendations resulting from this task force were to create a program that:

- Links adherence to duty hours policies and integrity in reporting to professional responsibilities for patient safety and healthcare quality.
- Educates residents/fellows on institutional patient safety and quality improvement programs.
- Assigns the institution the onus of responsibility for engaging and monitoring residents/fellows across targeted areas.
- Provides assessment in the form of a “Sponsor Visit Program.”

The CLER Program defines the following six specific focus areas targeted in GME programs:

- Integration of residents/fellows (along with demonstration of impact) into:
  - Patient safety initiatives
  - Quality improvement programs
    - Reduction of disparities in healthcare delivery
  - Supervision
  - Transitions in care
  - Duty hours policy, fatigue management, and mitigation
  - Professionalism

Components to the CLER Program

**Site Visit Program.** The first cycle of visits started in August 2012, and is used solely for feedback, learning, and establishment of baseline information, with the exception being the identification of potential egregious violations involving threats to patient safety or resident safety/well-being. Eventually, the program will identify salutary practices.

**CLER Evaluation.** Evaluations are based on expectations, not requirements, and are being developed across a continuum that shows increasing GME/Institutional integration. Expectations are to be set by the CLER Evaluation Committee.

**CLER Evaluation Process**

- Site visits approximately every 18 months.
- Site visitors provide verbal review/feedback prior to leaving site
- Site visitors complete draft written report; CLER staff sends draft to sponsoring institution for review and response.
- CLER Evaluation Committee reviews site visit report and institutional response and develops and sends a final report.
Executive Biographies

Carl Patow, M.D., M.P.H., M.B.A., F.A.C.S.
Regional Vice President for Clinical Learning Environment Review

Dr. Carl Patow joined the Accreditation Council for Graduate Medical Education as Regional Vice President for Clinical Learning Environment Review (CLER) in January 2013. His principal responsibilities are to organize and oversee the CLER evaluations of teaching hospitals and other organizations, primarily in the south and east United States.

From 1998 to 2013, Dr. Patow served as Executive Director, Health Professional Education, HealthPartners Institute for Education and Research in Minneapolis, Minnesota, and Associate Dean of the University of Minnesota Medical School for Faculty at HealthPartners. His responsibilities included oversight of medical students, residents, fellows, nursing education, CME and CE programs, allied health professional training, clinical simulation, and the medical library in the HealthPartners system of care. He is active in many patient safety, clinical simulation, and patient care quality initiatives.

Dr. Patow has served on the Board of the Accreditation Council for Graduate Medical Education (ACGME), and he is Past President of the Alliance of Independent Academic Medical Centers (AIAMC). He is a 2011 recipient of the Parker J. Palmer Courage to Lead Award given by the ACGME to outstanding Designated Institutional Officials, and has received numerous national awards for excellence in leadership and innovation in continuing medical education and graduate medical education.

Dr. Patow received his medical degree at the University of Rochester School of Medicine and Dentistry, a master’s degree in public health from the Johns Hopkins Bloomberg School of Public Health, and a master’s degree in business from St. Thomas University. He completed a residency in Otolaryngology at Walter Reed Army Medical Center and fellowships at Columbia Presbyterian Medical Center and the National Cancer Institute, National Institutes of Health. He is Board Certified in Otolaryngology and Facial Plastic Surgery. Dr Patow is the recipient of a Bush Medical Fellowship for leadership advancement and studies related to innovation in graduate medical education. He has been a member of the clinical faculty at the Uniformed Services University of the health Sciences, the Johns Hopkins School of Medicine and Professor of Otolaryngology at the University of Minnesota Medical School.

Kevin Weiss, M.D.
Senior Vice President, Institutional Accreditation

Dr. Kevin Weiss has devoted his medical career to issues of healthcare quality, equity, and access to care and training physicians and other healthcare providers in healthcare improvement. In his role as ACGME’s Senior Vice President, Institutional Accreditation, he is responsible for the new Clinical Learning Environment Review (CLER) Program, co-Chairs the CLER Evaluation Committee, and has oversight of the ACGME Institutional Review Committee process.
Dr. Weiss came to the ACGME from the American Board of Medical Specialties (ABMS) where he served as its President and CEO from 2007 to 2012. During his tenure at the ABMS, he initiated the Enhanced Public Trust Initiative, which broadened public membership and involvement in governance and policy development; developed and implemented the new Ethics and Professionalism Committee and a Health and Public Policy Program; and established alignment with both Maintenance of Licensure, and public and private programs focused on physician accountability, such as the Center for Medicare and Medicaid Services Physician Quality Reporting Initiative. Other key initiatives advanced by Dr. Weiss while at ABMS include public reporting of Maintenance of Certification and Board Eligibility. Through Dr. Weiss’s leadership, ABMS-International was established with its first international collaboration with Singapore.

Since the 1990s, Dr. Weiss has been leading collaborative quality improvement efforts that seek to both improve healthcare and also train physicians and other healthcare providers in methods of quality improvement and patient safety. In 2005, Dr. Weiss established the first U.S. graduate-level Master’s Program in Patient Safety and Healthcare Quality at Northwestern University. In 2009, this program was enhanced toward faculty development in this field, and beginning in 2012, this program will be the first in the United States to offer a doctoral-level program leading to a Ph.D. in Healthcare Quality and Patient Safety.

Dr. Weiss has conducted epidemiological and health services research projects in the United States and internationally that are related to guideline implementation, chronic care management, outcomes measurement, quality improvement, and healthcare equity. With over 200 published articles, reviews, books, book chapters, and monographs, Dr. Weiss is internationally recognized as a leader in healthcare quality, patient safety, and healthcare equity. Dr. Weiss has served on the National Committee for Quality Assurance’s Clinical Performance Measures Committee and the Executive Committee of the American Medical Association’s Physicians Consortium for Performance Improvement, the National Quality Forum’s Consensus Standards Approval Committee, and the AQA Alliance’s Performance Measures Committee.

Dr. Weiss is a Member of the American College of Physicians’ (ACP) Board of Regents. Over the years, he has chaired the ACP’s clinical assessment subcommittee for clinical guidelines and helped establish and then chair the College’s performance measurement committee. Dr. Weiss is on the board of the Education Council for Foreign Medical Graduates and has served on Institute of Medicine committees, including those which developed the reports, “Crossing the Quality Chasm” and “Identifying Priority Areas for Quality Improvement.”

Dr. Weiss is Board Certified in internal medicine by the American Board of Internal Medicine. He also maintains a role as Professor of Clinical Medicine in the Division of General Medicine and in the Institute for Healthcare Studies in the Feinberg School of Medicine at Northwestern University.

Robin Wagner, R.N., M.H.S.A.
Vice President, CLER Program

Robin Wagner, R.N., M.H.S.A. is the Vice President of the Clinical Learning Environment Review (CLER) Program. The goal of the CLER site visit program is to assess institutional
engagement with GME across six focus areas: 1) patient safety, 2) healthcare quality (including disparities), 3) transitions in care, 4) supervision, 5) duty hours/fatigue mitigation, and 6) professionalism. Ms. Wagner is responsible for the development and implementation of all aspects of the CLER program – working closely with members of the institutional accreditation team on this newest component of the next accreditation system.

Ms. Wagner is a registered nurse with more than 25 years of experience in the healthcare environment. Prior to joining ACGME she was Program Director, Research and Evaluation at the American Board of Medical Specialties. In that role she was responsible for providing leadership and management in the design, conduct, and dissemination of various efforts in physician performance measurement, resource use measurement, and meaningful use of health IT as well as facilitating and supporting the ABMS Committee on Research and Evaluation Procedures. Prior to joining ABMS, Ms. Wagner administered the Institute for Healthcare Studies and the Division of General Internal Medicine at Northwestern University where she was responsible for oversight of strategic, managerial, and financial functions in support of the research and educational mission of the programs and their associated faculty, staff, and postdoctoral fellows. While at Northwestern, she also played a key role in the design and launch of a new master’s degree program in patient safety and healthcare quality. Prior to Northwestern she served as the Assistant Director of the Center for Health Services Research of the Rush Primary Care Institute. During her clinical career she worked in the in the areas of neonatal care, women’s health, and infertility. Ms. Wagner holds a Bachelor of Science in nursing from the University of Maryland and a Master of Health Services Administration from the George Washington University.

**Thomas J. Nasca, M.D., M.A.C.P.**  
*Chief Executive Officer ACGME*

Dr. Thomas J. Nasca is the Chief Executive Officer, Accreditation Council for Graduate Medical Education and Chief Executive Officer of ACGME International. He is also Professor of Medicine (vol.) for Jefferson Medical College. Dr. Nasca graduated from the University of Notre Dame with high honors, is an Alpha Omega Alpha graduate of Jefferson Medical College, completed his internship, residency, and was chief medical resident at Mercy Hospital of Pittsburgh, and completed his nephrology fellowship at Brown University and Rhode Island Hospital.

Dr. Nasca has been involved in medical education since 1981. He was the Chairman and Residency Program Director of the Department of Medicine, and Director of Medical Services at The Mercy Hospital of Pittsburgh. Dr. Nasca assumed the role of Vice Chairman of the Department of Medicine at Jefferson Medical College and Thomas Jefferson University Hospital in 1992, with leadership responsibility for the medical student, residency, and fellowship educational programs of the department. Dr. Nasca was then named the Associate Dean for Education and Research for the Jefferson Health System, Associate Dean for Academic Affairs and Affiliations, Jefferson Medical College. He became Acting Dean of Jefferson Medical College in July 2000 and was appointed Senior Vice President for Academic Affairs of Thomas Jefferson University, Dean of Jefferson Medical College, and President of Jefferson University Physicians in January 2001. In April 2007, Dr. Nasca was named the first Anthony F. and Gertrude M. DePalma Dean of Jefferson Medical College. Dr. Nasca left the deanship at Jefferson to assume the leadership of the Accreditation Council
Dr. Nasca is certified by the American Board of Internal Medicine in Internal Medicine and Nephrology. He was a member of the Council of the Association of Program Directors in Internal Medicine, having served as both Secretary Treasurer and President of that organization. He served as the Associate Editor of the Nephrology MKSAP for the American College of Physicians, was a member of the Internal Medicine In-Training Exam Steering and Writing Committees, the Alliance for Academic Internal Medicine, and the Federated Council for Internal Medicine. He is a former Chairman of the Residency Review Committee for Internal Medicine, served as special accreditation consultant to the Residency Review Committee for Internal Medicine and the Accreditation Council for Graduate Medical Education. Dr. Nasca was a member of the Council on Graduate Medical Education (COGME) of the Department of Health and Human Services and the United Stated Congress. Dr. Nasca's professional memberships have included the International Society of Nephrology, the American Society of Nephrology, the American College of Physicians, the American Society for Apheresis, and the Association of Program Directors in Internal Medicine. He is a former member of the Council of Deans of the Association of American Medical Colleges, former member of the Board of the Exchange Commission for Foreign Medical Graduates (ECFMG), the National Board of Medical Examiners (NBME), a Fellow of the College of Physicians of Philadelphia, and was elected a Master of the American College of Physicians in 2006. Dr. Nasca served on the Initiative to Transform Medical Education (ITME) of the American Medical Association, the Committee to Evaluate the U.S. Medical Licensing Examination (CEUP), and is a past member of the Liaison Committee on Medical Education (LCME). Among many awards, Dr. Nasca has received the Dema C. Daley Founders Award for Excellence in Internal Medicine Education from the Association of Program Directors in Internal Medicine, the Rev. Clarence Shaffrey, S.J. Award from St. Joseph’s University in Philadelphia, and the Jefferson Medical College Alumni Achievement Award. He was named one of the 50 most powerful physician executives in 2009, 2010, and 2011 by Modern Healthcare. He is the author of over 100 peer reviewed articles, chapters, and other publications, and has delivered more than 300 invited lectures and presentations on topics related to medical education.
Position Description

The CLER Program Field Representative (CLER-FR) will conduct site visits at ACGME-accredited sponsoring institutions and their participating sites. These visits will assess how sponsoring institutions fulfill their responsibility to integrate residents and fellows in the quality and safety of the environment for learning and patient care. The CLER-FR will produce reports following each visit that describe findings from semi-structured interviews with institutional leaders, residency program and other clinical and administrative personnel, faculty, residents and fellows, and direct observations in the clinical environment. The CLER-FR will also assess how sponsoring institutions oversee practices around transitions of care, supervision, duty hours oversight, fatigue management/mitigation, and specified aspects of professionalism in the clinical and learning environment.

The CLER-FR will be responsible for periodic direct follow-up discussion with the CLER Evaluation Committee. The CLER-FR will also participate in ongoing professional development activities to develop, maintain, and enhance the knowledge and skills appropriate to these tasks.

Reporting Relationship

The CLER-FR will report to the RVP, CLER Site Visits Program as well as provide direct reports to the CLER Evaluation Committee.

Principal Accountabilities

- The primary duties and responsibilities of the CLER-FR include but are not limited to accomplishing the following:
  - Prepare for the CLER site visit.
  - Be thoroughly familiar with CLER process documents and interview protocols.
  - Study documentation prior to and during site visits and interviews.
  - Contact the CLER program staff for additional information or clarification of information, as needed.
- Identify pertinent issues which emerge during the CLER visit.
  - Work with the CLER program staff to confirm the schedule of interviews set with the sponsoring institution’s and/or participating site leadership, faculty members, administrators, residents, and other key institutional personnel.
• Conduct interviews and observations to ascertain integration and demonstration of resident and fellow engagement in focus areas.
• Identify and address ambiguities in determining the integration of the CLER focus areas in the institutional clinical and learning environment.
• Prepare a comprehensive, objective report according to CLER guidelines in a timely fashion following the site visit that assists the CLER Evaluation Committee in developing its final report.
  • Compose a concise, objective, factual report using the information gathered from review of documentation and from observations conducted during the site visit.
  • Report omissions and/or discrepancies discovered during interviews and through comments and observations gathered during walkarounds in clinical environments.
  • Conduct exit interview to report initial findings to institutional leadership.
  • Transmit reports electronically to the ACGME offices; meet pre-established deadlines for the submission of the reports and associated materials.
  • Participate as required in CLER Evaluation Committee meetings to provide clarification and to address Committee members’ questions.
• Maintain current knowledge in the fields of quality and patient safety and accreditation standards related to the six focus areas.
  • Keep informed about changes in the process for conducting CLER site visits and in the six focus areas through written documentation, conference calls, electronic mail, and face-to-face briefings with CLER program staff.
  • Participate in the annual professional development meeting for the CLER Program Field Representatives as well as other meetings scheduled on an ad hoc basis;
  • Together with the Regional Vice President, design an ongoing personalized professional education program.
  • Study and keep informed about developments in the fields of patient safety and quality improvement, particularly in medical education environments through workshops, meetings, and written material.
• Manage an extensive travel schedule.
  • Be willing and able to travel nationwide to carry out assigned CLER site visits.
  • Travel to and from institutional sites.
• Perform logistical, clerical, and training functions to support the CLER site visit process.
  • Communicate with CLER program staff to make arrangements for site visits.
  • Make arrangements for travel and hotel accommodations.
  • Review preliminary schedule and inform CLER Program staff well in advance of scheduling conflicts, conflicts of interest, vacation plans, and attendance at Evaluation Committee and/or other professional development meetings.
  • File expense reports and perform other required clerical tasks.
  • Participate in the orientation of new CLER-FRs as assigned by the Regional Vice President, CLER Program.
• Participate in ongoing efforts to improve the CLER site visit process.
  • Review evaluations from designated institutional officials and the CLER Evaluation Committee for suggestions on how to improve the CLER site visit process and/or the reports.
  • Share suggestions for improvement in any aspect of the site visit process with the Regional Vice President, CLER Program.
• Complete other additional and/or alternative duties as assigned.
Experience and Qualifications

- Candidates must be an M.D., ideally with an advanced degree in health services administration, healthcare management, education, behavioral sciences or other healthcare-related field.
- Physician applicants are expected to have extensive experience as patient safety or quality improvement leaders or as designated institutional officials, program directors with greater than five years of experience, or associate/assistant dean-level administrative experience in medical education.
- The CLER-FR is expected to become sufficiently knowledgeable in the expectations of the CLER program in order to conduct a competent site visit on behalf of the CLER Evaluation Committee.
- Additional skills required include the ability to:
  - Meet and interact successfully with a wide range of personalities and establish professional credibility within an abbreviated timeframe, especially with those individuals in executive hospital leadership positions.
  - Establish rapport and mutual respect rapidly while working in varying teams which include volunteer CLER site visitors.
  - Review policy documents to become conversant with expectations defined by institutional policies regarding patient safety, quality improvement, and additional policies related to the other focus areas.
  - Synthesize information gathered from multiple perspectives to meet expectations of the CLER Evaluation Committee.
  - Write comprehensive and objective reports.
  - Meet established deadlines for the submission of CLER site visit reports.
  - Manage a heavy travel schedule, including significant air travel.
  - Work independently with minimal supervision.
  - Function comfortably in a staff role in conducting site visits and providing initial feedback to the sponsoring institution on behalf of the CLER Evaluation Committee.

Personal and Professional Attributes

The successful candidate will possess a wide range of needed personality traits, work habits, and social skills necessary to perform effectively within ACGME. This individual will possess both personal and professional integrity, strong communication skills, and a professional appearance and presentation.

Specifically, the following knowledge, skills, and abilities will be required to be successful in this position:

- Honest and highly ethical.
- Functions effectively in a team environment.
- Strong people management and leadership skills. Ability to communicate and work well with people at all levels.
- The ability to lead a team of up to three Physician Field Representatives as they conduct site visits with teams of volunteer reviewers as well as conduct own site visits concurrently with teams of volunteers (is required).
• The presence to engage with sponsoring institution CEOs, DIOs, and others, including program directors, combined with the skills to facilitate group meetings. The ability to work broadly and understand various residency programs is critical.
• An extremely organized, disciplined, hands-on, and process-oriented leader who is not afraid of digging into details when necessary.
• The ability to observe, report, and share findings in real time is required. The ability to refrain from providing advice or potential solutions to subject institutions and programs is required.
• Ability to travel regularly. One should expect three days a week on average, but travel could occasionally be up to four days per week for approximately 40 weeks annually.
• Initiative, self-confidence, good judgment, and the ability to make decisions in a timely fashion.
• Highly engaged, energetic, focused, and execution-oriented.
• Willing and able to roll up sleeves and do hands-on work one minute and discuss strategic positioning and the “big picture” the next.
• Strong business acumen, intelligence, and capacity; able to think strategically and implement tactically.
• Strong work ethic; achievement-oriented; and motivated beyond personal interests.
• Open leadership style. Actively seeks out and supports collaborative thinking and problem solving with others in the organization. Does not view collaborative dialogue around decisions as a personal attack on abilities.
• Problem-solves and approaches work from a “return on investment” perspective.
• Facility in writing reports.

Opportunity Assessment

In 2012, the Accreditation Council for Graduate Medical Education (ACGME) launched the Clinical Learning Environment Review (CLER) Program. The purpose of the CLER Program is to assess resident/fellow engagement in institutional initiatives across six focus areas: patient safety, healthcare quality, care transitions, supervision, duty hours/fatigue mitigation, and professionalism. As part of this effort, ACGME is seeking several Field Reviewers (three in each of the three geographic regions) to work in conjunction with their respective Regional Vice President, CLER who will be one of three physician leaders tied to Graduate Medical Education and experienced in patient safety and healthcare quality work. The Field Reviewers are critical to the success of this important component of graduate medical education assessment.

This opportunity provides a national platform for a physician leader who is passionate about quality and patient safety, and wants to lead change efforts at a national level on graduate medical education. This is an outstanding opportunity to interact with executive leadership of hospital/medical center administration and other leaders in graduate medical education. This executive will be a public face of ACGME in the context of CLER and provide leadership and scholarly input to advance national efforts in faculty development and inform the evolution of the next accreditation system.

Based regionally, these physician executives will work collaboratively with other Field Reviewers working in conjunction with Regional Vice President, CLER Site Visit Program.
Furst Group is in its fourth decade of providing leadership solutions for the healthcare industry. Our experience in evaluating talent, structure, and culture helps companies align their organizations to execute their strategic initiatives.

Our offerings are a comprehensive array of executive services, from retained executive search to consulting in integrated talent management, succession planning, and leadership development. As a leading executive search and consulting firm exclusively focused on healthcare, we provide a depth of understanding and analysis that our clients find most beneficial. We find optimal talent to implement your vision, mitigating risk as you build your leadership team.

Our clients include hospitals and health systems, managed care organizations, medical group practices, healthcare products and services companies, venture capital- or equity-backed firms, insurance companies, integrated delivery systems, and end-of-life care businesses.

Many of the premier organizations in healthcare choose to partner with Furst Group, including Rush University Medical Center, Health Care Service Corporation, Allina Hospitals & Clinics, Johns Hopkins Health System, UCLA Medical Center, Prime Therapeutics, Caremark, Amerisource Specialty Group, Ann & Robert H. Lurie Children’s Hospital, and Tufts Medical Center.

Furst Group recognizes candidates are the cornerstone of our business. In today’s competitive labor environment, having a defined process that provides individuals with clarity and feedback throughout the entire job search is paramount to our business model.

We take extra steps to ensure candidates:

• Understand the nuances of a particular position or organization.
• Are prepared for interviews and conversations.
• Have access to interview and travel schedules.
• Are provided timely feedback.
• Remain in our database for future contact.
• Value diversity and the principles and ethics practiced by our client organizations.

We look forward to working with you as a potential candidate for the CLER Program Field Representative position for ACGME.

For additional information on Furst Group, please visit our Website at furstgroup.com. To learn more about this particular position, please call (800) 642-9940 or contact:

Kevin Reddy kreddy@furstgroup.com

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