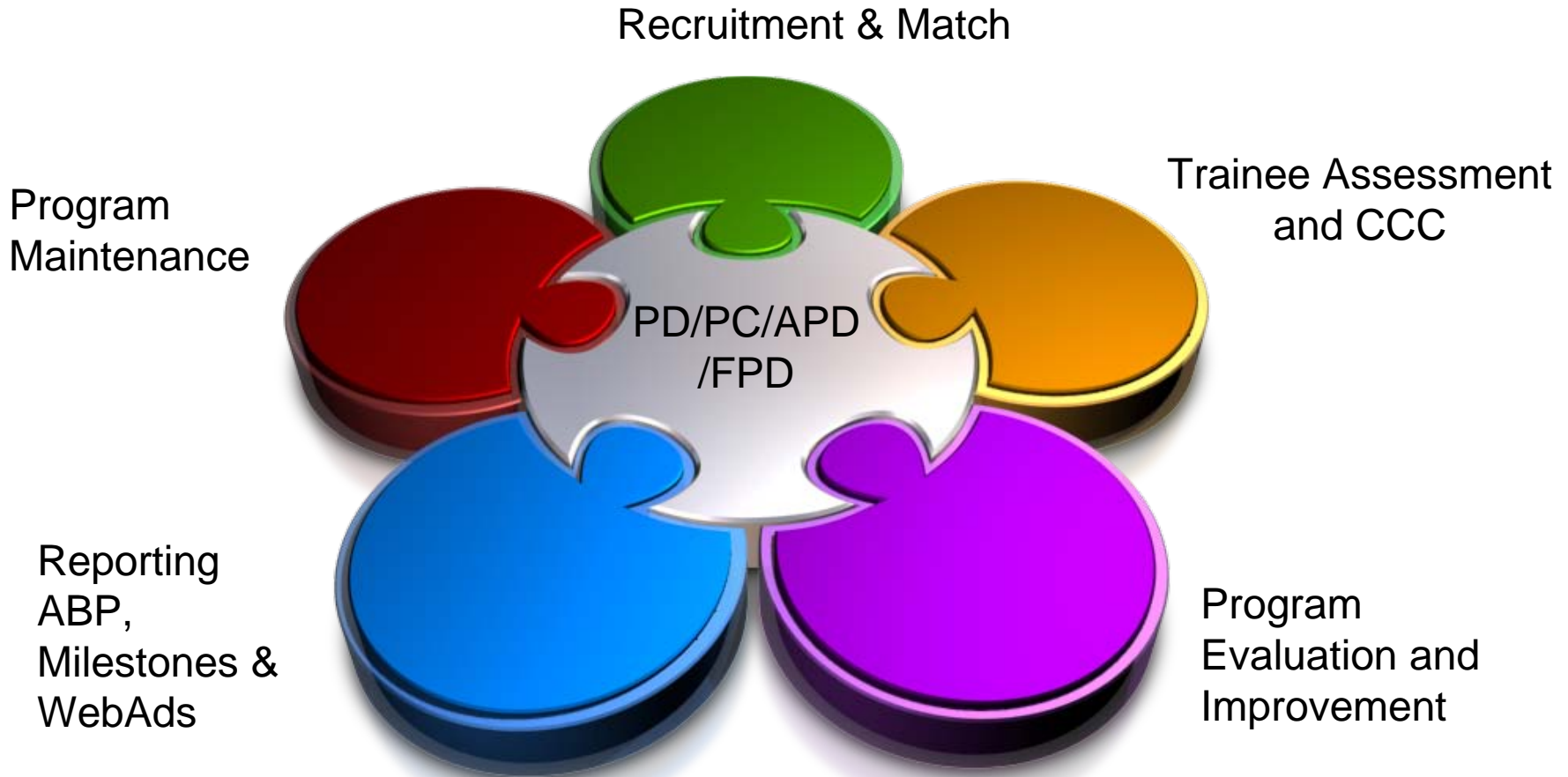




Program Organization 101

Geoffrey M. Fleming, MD
Amy Gaug
Michele Holloway Nichols, MD

The Circle of Life





What We Said We Would Do

PROGRAM ORGANIZATION 101: Basics of day-to-day program

This session is designed for all program leaders (PDs, APDs, Coordinators, FPDs) who are new to their roles and those wanting a refresher about the important activities of GME program leadership, including the annual cycle for both core programs and fellowships.

Topics include:

Recruitment

Match

Orientation

Reporting to the Governing Bodies

(ACGME, AAMC, ABP)

Program Assessment

Trainee Assessment

Program Evaluation



Introduce yourself to your table and
join our room at Today's Meet

<https://todaysmeet.com/FallAPPD2016>

Type your name,
join the room and you'll have opportunities
to communicate questions or best
practices to share during this presentation.

Your Team

Who are they?

- Program Director, Associate Program Director(s)
- Program Coordinator(s) or Administrator(s)
- GME Leaders (DIO, GMEC)
- Faculty
- Residents, Chief Resident(s), Fellows

Why is this important?

- Different point of views
- Helps prevent errors
- Creativity and collaboration





Recruitment & Match





Recruitment

Some discussion points as you begin thinking about your recruitment process.

What kind of candidate are you looking for?

What are your strengths as a program?

How do you want to be viewed?

This starts long before your interview days. Think about your website and how you advertise your program.

[Here's an example of our website.](#)

Social media?

*****These discussions should include your entire TEAM!*****



Recruitment Planning

Logistics - the who, what, when and where.
Budget?

Sample Interview Day Schedule

Additional Sample Interview Day Schedule



Recruitment Planning

Interviews & Assessment

[Example of our sign up](#)

[Example of our Intern Selection Committee Google Site](#)

******Be sure that necessary program leadership are available on the interview days. ******



Managing Applications

- ERAS** - Who's reviewing?
What are you looking for in an applicant?
How are you tracking the process?
How are you inviting the applicants?



Recruitment Planning

Communication with the applicants.

How are you doing this?

E-mail? Other?

[Example of our Google Site](#)



Interview Day tips

The Do's

Do be organized!

Do have backup plans and alternates.

Do keep your team positive.



Interview Day tips

The Do Nots

Don't speak negatively about other programs.

Also new from the NRMP “*For all Matches opening after June 30, 2016, programs are prohibited from requesting applicants to reveal the names, specialties, geographic locations, or other identifying information about programs to which they have or may apply.*”



Post Interview Day

The Applicant

Do you have any follow up with the applicant?

E-mail? Phone calls?

Follow up survey?

The Program Team

How should they evaluate? Paper? Online form

******The longer you wait, the less people remember.******



Recruitment & Interview Day

Trainees Perspective

Organized information

Dinner at someone's home was appreciated

Being matched with faculty/trainees with common interests

Feeling that their application was read

Making sure they hear about the area



Recruitment & Interview Day

Fellowship Directors Perspective



Ranking

Where do you start?

Applicant data export from ERAS? Faculty interview rankings?

It is easier for people to make suggestions about an existing list than to create one from scratch.

Who gives input on final list and how?

Electronic file review? In person meeting?

******Team participation is crucial and keep in mind what you're looking for in a trainee. ******



Ranking

Fellowship Directors Perspective



Important Match Dates

Update FREIDA information (e-mail prompt in winter & spring) AAMC service, basic info about your program

Register for ERAS (email prompt in the spring/summer)

Check ERAS mailbox daily during the season

Sept 15 Residency

Sept 28 Fall Specialties

Feb 3 Spring Specialties (Cardiology, Heme-Onc)



Important Match Dates

Enter Quota for NRMP (deadline 2 weeks before Rank List due)

Jan 31 Residency

Nov 16 Fall Specialties

April 27 Spring Specialties (Cardiology, Heme-Onc)

Enter AND CERTIFY rank list

Feb 22 Residency

Nov 30 Fall Specialties

May 11 Spring Specialties (Cardiology, Heme-Onc)

Match Day

March 17 Residency

Dec 14 Fall Specialties

May 25 Spring Specialties (Cardiology, Heme-Onc)



Time to Discuss Match & Recruitment

At tables - small group discussion.

Join our room at Today's Meet

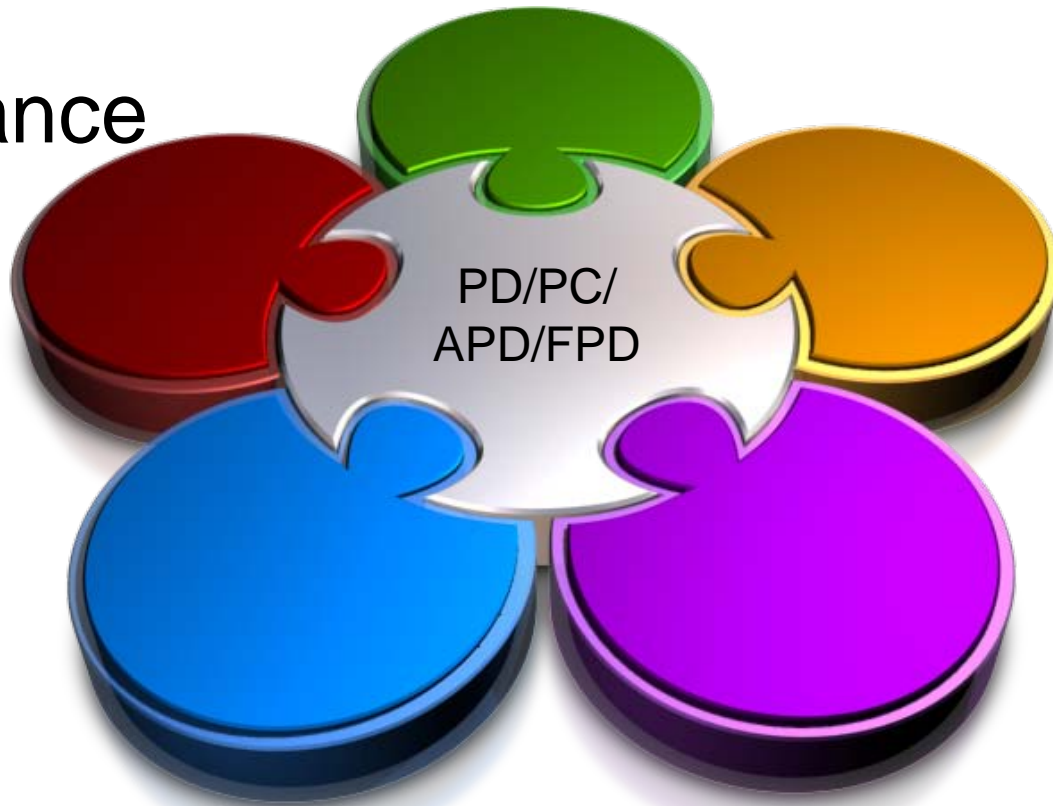
<https://todaysmeet.com/FallAPPD2016>

Type your name,
join the room and write your question or best
practice here.

5 minutes to discuss.



Program Maintenance





APPD



Program Maintenance

Year in Pediatrics:

Ongoing process

- Juggling act: Many balls at one time
- Timelines: Essential
- Teamwork: Divide and conquer
- Communication: KEY





Program Maintenance

- Onboarding/Orientation
- Annual events/ meetings
- Program Schedules (meetings, retreats)
- Committee selection
- In-Training Exams (ITE)
- Budgets
- Graduation
- Resident Curriculum (schedules, responsibilities)
- Mentors/ Mentees
- Reviews
- Individualized Learning Plans (ILP)
- Documentation
 - Duty Hours,
 - Procedures
- Courses: PALS/NRP
- Faculty Evals/ Dev



Onboarding!

Also known as: organizational socialization

Mechanism through which new employees:

- acquire the necessary:
 - Knowledge
 - Skills
 - Behaviors
- to become effective organizational members
- to become insiders.



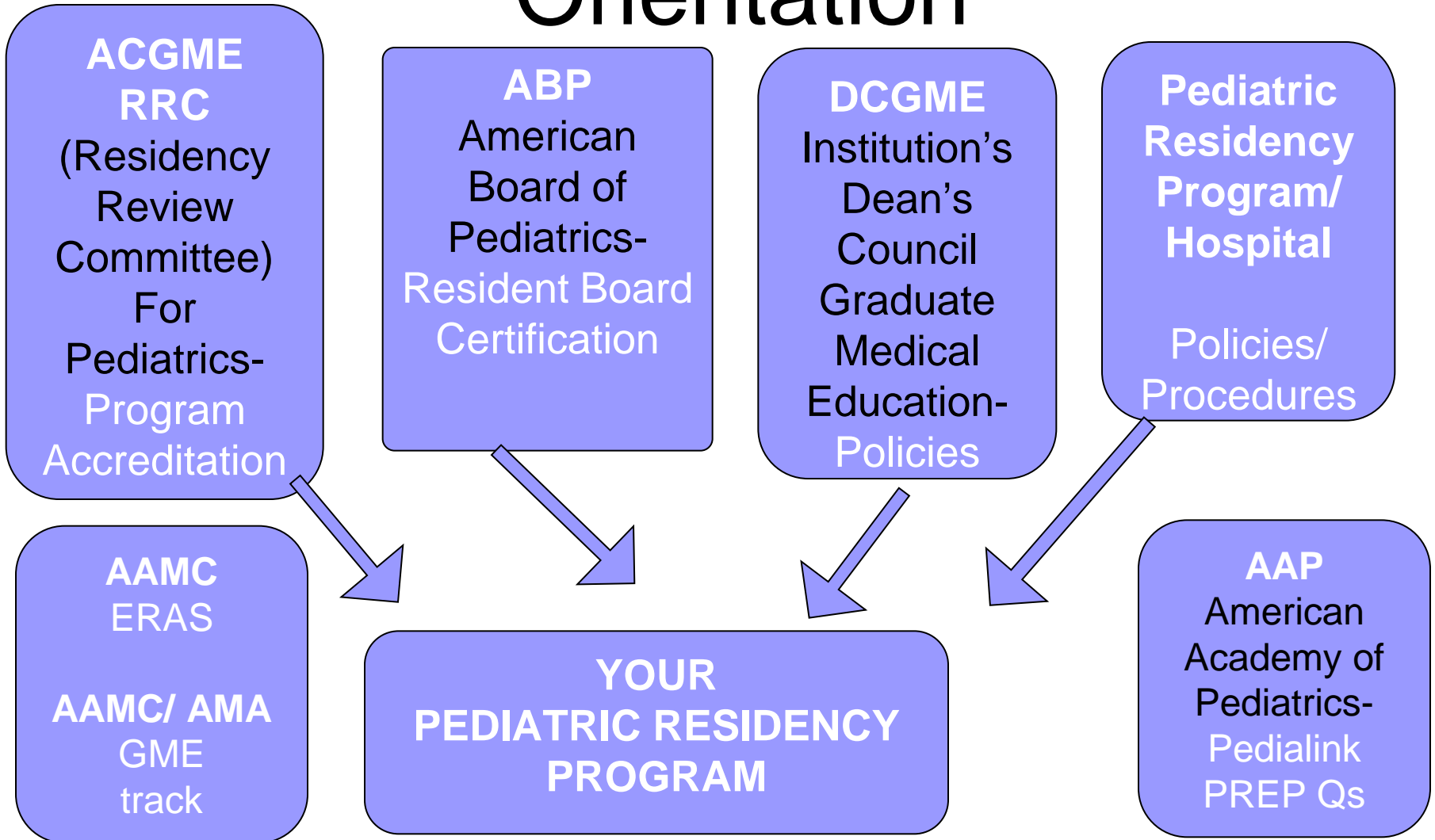


Bird's eye view...





Pediatric Residency Leadership Orientation





Program Maintenance

- Onboarding/Orientation
- Program annual events
- Program Schedules *
(meetings, retreats)
- Committee selection
- In-Training Exams (ITE)
- Budgets
- Graduation
- Resident Curriculum
(schedules, responsibilities)
- Mentors/ Mentees
- Reviews
- Individualized Learning
Plans (ILP)
- Documentation
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2016

July 2016							
No.	M	T	W	T	F	S	S
26					1	2	3
27	4	5	6	7	8	9	10
28	11	12	13	14	15	16	17
29	18	19	20	21	22	23	24
30	25	26	27	28	29	30	31

August 2016							
No.	M	T	W	T	F	S	S
31	1	2	3	4	5	6	7
32	8	9	10	11	12	13	14
33	15	16	17	18	19	20	21
34	22	23	24	25	26	27	28
35	29	30	31				

September 2016							
No.	M	T	W	T	F	S	S
35				1	2	3	4
36	5	6	7	8	9	10	11
37	12	13	14	15	16	17	18
38	19	20	21	22	23	24	25
39	26	27	28	29	30		

October 2016							
No.	M	T	W	T	F	S	S
39						1	2
40	3	4	5	6	7	8	9
41	10	11	12	13	14	15	16
42	17	18	19	20	21	22	23
43	24	25	26	27	28	29	30
44	31						

November 2016							
No.	M	T	W	T	F	S	S
44		1	2	3	4	5	6
45	7	8	9	10	11	12	13
46	14	15	16	17	18	19	20
47	21	22	23	24	25	26	27
48	28	29	30				

December 2016							
No.	M	T	W	T	F	S	S
48				1	2	3	4
49	5	6	7	8	9	10	11
50	12	13	14	15	16	17	18
51	19	20	21	22	23	24	25
52	26	27	28	29	30	31	

2017

January 2017							
No.	M	T	W	T	F	S	S
52							1
1	2	3	4	5	6	7	8
2	9	10	11	12	13	14	15
3	16	17	18	19	20	21	22
4	23	24	25	26	27	28	29
5	30	31					

February 2017							
No.	M	T	W	T	F	S	S
5			1	2	3	4	5
6	6	7	8	9	10	11	12
7	13	14	15	16	17	18	19
8	20	21	22	23	24	25	26
9	27	28					

March 2017							
No.	M	T	W	T	F	S	S
9			1	2	3	4	5
10	6	7	8	9	10	11	12
11	13	14	15	16	17	18	19
12	20	21	22	23	24	25	26
13	27	28	29	30	31		

April 2017							
No.	M	T	W	T	F	S	S
13						1	2
14	3	4	5	6	7	8	9
15	10	11	12	13	14	15	16
16	17	18	19	20	21	22	23
17	24	25	26	27	28	29	30

May 2017							
No.	M	T	W	T	F	S	S
18	1	2	3	4	5	6	7
19	8	9	10	11	12	13	14
20	15	16	17	18	19	20	21
21	22	23	24	25	26	27	28
22	29	30	31				

June 2017							
No.	M	T	W	T	F	S	S
22				1	2	3	4
23	5	6	7	8	9	10	11
24	12	13	14	15	16	17	18
25	19	20	21	22	23	24	25
26	26	27	28	29	30		



Annual Events/ Meetings

Recruiting – (ERAS/NRMP) Holiday Schedules

Residency- Sept - Mar Retreats

Fellowships- Fall, Spring Graduation

Match/ Orientation (Int/Fel) Social Events

Milestones (2x/ year)*

ACGME Annual Survey*

ACGME/ AAMC/ DCGME

GME Tracker Database

ACGME WebADS*

APE/ PIP (DCGME)

Examinations –

Res: Step III, ABP*

All: ITE*/ SITE*

Licenses

Semi-annual meetings



Program Maintenance

- Onboarding/Orientation
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- Faculty Evals/ Dev



Common to All Programs



Committee Selection

- RRC: Program Evaluation (PEC)
- RRC: Clinical Competency (CCC)
- AAP Representative (Res)
- Institution specific
 - Recruiting Committee
 - Housestaff Council
 - Global Health Academy
 - Research Group
 - Social Committee
 - Other

Plan/ Schedule:

- PEC
- CCC
- Recruiting Season
- Resident Committees
- Faculty Meetings/ Development
- Class Retreats
- Social events



Recurring Dates 2016-2017

Dates	CCC	PEC	Fac Meet	Career Dev	Research	Global Health	Gen'l Inpt	House staff Council	EBM Talks	RNICU	Special Events/ Social
	Wed. 1:00pm Stagno Center	Wed. 12:00pm Surgical Library	Surgical Library	Wednesday 12:00pm Noon Conf. Room/ Neuro Library/ Small Conf. if 3	2 nd Wed. 12:00pm Small Conf. Room	Thursday COA Harbor 3 rd Floor Neuro Library	1 st Wed. 8:00am Hospitalist Office	2 nd Thurs. 3:00pm Stagno Center	Monday. 12:00pm Bradley	Thursday RNICU Work Room	In Training Exam July 13-20, 2016 APPD/Memphis September 2016
July			Thursday July 21 7:00am		July 13		July 6	July 14	July 18 Kulkarni Udine	July 21	Intern Retreat Thursday/Friday Sept. 8-9, 2016
Aug		August 24		August 17 3 Rooms	August 10	August 18	August 3	August 11	July 25 Roth Tyner	August 18	UAB Student Recruiting Lunch Wednesday Sept. 21, 2016
Sept	September 14			September 21 2 Rooms	September 14		September 7	September 8	August 15 Speight Willis	September 15	Halloween Recruiting Kick-off Party Monday Oct 31, 2016
Oct		October 19	Tuesday October 18 12:00pm	October 19 2 Rooms	October 12	October 20	October 5	October 13	September 19 Kabani Saadoun	October 20	Holiday Party Gabrella House Tuesday Dec 6, 2016
Nov					November 9		November 2	November 10	October 17 Elam Sawyer	November 17	Spring APPD April 5-8
Dec	December 14				December 7 (1 st Wed)	December 15	December 7	December 8	November 14 Grizzle Pyburn	December 15	PALS April 2017
Jan			Wednesday January 25 12:00pm		January 11		January 4	January 12	December 12 Dugan Schlappi	January 19	PGY II Retreat April 2017
Feb		February 8		February 15 1 Room	February 8	February 16	February 1	February 9	January 23 Martin Schaefer	February 16	PGY III Retreat May 2017
March	March 22			March 22 2 Rooms	March 8		March 1	March 9	February 13 Flaniken Lewis	March 16	NRP May 2017
April			Thursday April 27 4:30pm	April 19 2 Rooms	April 12	April 20	April 5	April 13	March 20 Cotti McCall	April 20	Graduation Banquet Friday, June 2, 2017
May	May 10	May 3			May 10		May 3	May 11	April 17 LaBrecque Poore	May 18	Intern Orientation Wednesday June 14, 2017
June					June 14		June 7	June 8	May 15 Raulston Reynolds	June 15	



Year in the Program

X-Res X-SS	Jul	Aug	Spt	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Ju
ERAS	X		X									
Recruit		X	X	X	X	X	X		Match			
Mile- stones							X					X
ACGME survey							X	X	X	X	X	
GME track	X			X								
CCC				X						X		
PEC		X			X			X			X	
Other	ITE	Web- ADS	APE due								APE grad	grad

SITE

APE



Common to All Programs

Social Activities (retreats, ballgames, etc)

- Not required but appreciated
- Promotes bonding
- Plan ahead, advertise, arrange coverage





Program Maintenance

- Onboarding/Orientation
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Common to All Programs

Annual In-Training Exam (ITE)

RRC: Administer the ABP ITE annually

Pediatric Residency (ITE) -

- July 13-20, 2016
- July 12-19, 2017

Subspecialty (SITE)-

- Feb 13-18, 2017

Preparation:

- Registration: ITE Feb-Apr
SITE Nov - Jan
- ITE – secure room for ITE
- Block schedule - vacations

Further ITE prep- June

- Contact IT- ITE link
- Check res coverage
- Schedule Proctors

SITE – Prometric Center

Results:

- ITE - October
- SITE - May





Program Maintenance

- Onboarding/Orientation
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Budgets

Department of Pediatrics, Hospital, Institution

Program

- # Residents
- House Staff PCs/ Admin
- Recruiting Season
- Intern Orientation
- Graduation
- Retreats
- Socials
- Office/ Lounge Supplies
- In-training examinations

Resident Perks

- Parking
- Lunches
- On-call meals
- Book funds
- Licenses, DEA
- Courses (PALS, NRP, etc)
- Memberships
- Research meetings
- Incentives
- Moving allowance





Program Maintenance

- Onboarding/Orientation
- Annual events/ meetings
- Program Schedules
(meetings, retreats)
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- Courses: PALS/NRP
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Graduation

- Event – plan, invite, honor
- Exit Evaluations
- Certificates – ending dates
- ABP verifications
- RRC: Summative Evaluation (perf, comp)
- Awards/ parting gifts
- Turn in: pagers, white coats, etc.
- Future contact (email, phone, address)





Program Maintenance

- Onboarding/Orientation
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- Program Schedules (meetings, retreats)
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- Budgets
- Resident Curriculum (schedules, education)
- Mentors/ Mentees
- Reviews
- Individualized Learning Plans (ILP)
- Documentation:
 - Duty Hours, Procedures
 - Courses: PALS/NRP
 - Faculty Evas/ Dev



Curriculum/ Schedules



Resident curriculum –

Set schedule requests deadlines

Block Schedules (12 mo/ 13- 4 wk blocks)

Check RRC, own program requirements

Update goals/ obj, distribute to fac/ res

Plan Individualized Curriculum (6 months)

ABP: 48 weeks/ academic year

Medical/ Personal leave



Curriculum/ Schedules

RRC: Must have regularly scheduled didactic sessions/
planned educational experiences



Educational conferences –

- Intake, Noon, Grand Rounds, Simulation, etc.
- Set curriculum, invite speakers (chiefs or ?)
- Space
- Food
- Supplies (White board, markers, ARS, etc)
- AV equipment, Tech support

Mentees/ Mentors

RRC: The program must assist residents in faculty mentorship to create goals

- Select Faculty Mentors
- Set timing of Mentor assignment
- Match Mentors and Mentees
- Set expectations – meet, report
 - Personal advisor/ advocate
 - Research
- Give feedback






Common to All Programs Reviews

- Annual ACGME Survey –
60% faculty, 70% resident
- Annual Program review (APE) - PEC
Program Improvements/ Goals
- ACGME WebADS - next accreditation system
- Resident semi-annual evaluation/ feedback



Common to All Programs

RRC: Residents create and document an Individualized Learning Plan

- Define individual goals
 - Self-assessment
 - Personal attributes
 - Clinical competency
 - Summarize learning needs
 - Define learning objectives
 - Establish strategies to accomplish
- 
- A graphic of a hand where the fingers and palm are composed of various words related to learning and education. The words are in different sizes and orientations, creating a textured effect. Some visible words include 'LEARNING', 'PERSONALISED', 'PLANS', 'PERSONALIZED', 'LEARNING PLAN', 'LEARNING OBJECTIVES', 'LEARNING NEEDS', 'LEARNING STRATEGIES', 'LEARNING GOALS', 'LEARNING OBJECTIVES', 'LEARNING NEEDS', 'LEARNING STRATEGIES', 'LEARNING GOALS', 'LEARNING OBJECTIVES', 'LEARNING NEEDS', 'LEARNING STRATEGIES', 'LEARNING GOALS'.
- Track, monitor, review, update annually with:
 - Mentor or
 - Director
 - Document – AAP Pedialink, ILP program



Program Maintenance

- Onboarding/Orientation
- Annual events/ meetings (schedules, education)
- Program Schedules (meetings, retreats)
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- Reviews
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- Documentation
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- Faculty Evals/ Dev



Documentation

Individual Resident/ Fellow

- Evaluations/ Milestones
- Curriculum
- Duty hours
- Procedure logs
- Educational conference attendance
- Other: (req education, license, etc)





Duty Hours



RRC: Must monitor resident duty hours

- Rules – residents, faculty must know
 - (1 in 7 days off, 16 or 24+4 hrs straight, 8 hr break, 6 straight nights, 80 hours ave/ wk)
- Documentation –
 - Institution requirements
 - Identify problem areas, residents w/ problems
- Troubleshoot- improve upon problems
- Survey – ACGME survey, institution, evals



Procedure Logs: Pediatrics

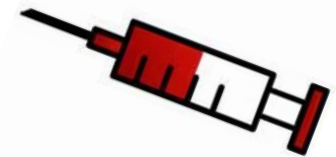
Competent in performance of:

- Bag-mask ventilation
- Bladder catheterization
- Immunizations
- Abscess Incision/ drainage
- Lumbar puncture
- Neonatal intubation
- Peripheral IV, IO placement
- Dislocation-reduction (simple)
- Laceration repair (simple)
- Foreign body removal
- Splinting of fracture
- Umbilical catheter placement
- Venipuncture

Knowledgeable of:

“must be competent in understanding of” with procedural knowledge of:

- Arterial puncture
- Chest tube placement
- Circumcision
- Non-neonatal intubation
- Thoracentesis





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COURSES

RRC: Maintain certification in PALS, IO simulation, NRP

Required:

RRC: PALS

RRC: NRP

Original cert - pre-PGY I

Re-cert- PGY II/III

Other:

Simulation courses

Procedure courses

Educational courses

QI courses

Research courses





Program Maintenance

- Onboarding/Orientation
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- Courses: PALS/NRP
- Faculty Evals/ Dev



Common to All Programs

RRC: Faculty

Faculty Evaluations

- **RRC:** Evaluate faculty performance annually
- **RRC:** Annual written confidential evaluations
- Meet with faculty/ rotation leaders

Faculty Development

- Identify Fac Dev program
- Perform Needs Assessment
- Program sponsored topics
- **RRC:** Encourage Faculty leadership/ core faculty members' participation (minimum annually)



Common to All Programs

Often Overlooked Items:

- Flu shots/ TB tests/ FIT testing (OSHA)
- Pediatric Boards sign-up (Feb – March, late fee until May)
- Step III, Medical License, DEA, NPI #'s, Medicaid #, etc.
- Credentialing for other hospitals besides home-base
- Program Letters of Agreement (PLA) with participating sites (renew 5 yrs)
- Program Letters of Agreement - Resident Away Rotations
- Program policy updates (annually minimum)
- Website updates (annually)



Orientation: New Interns!



Orientation schedule –
plan EARLY!

Welcome on Match Day

Send new interns info/
emails of colleagues

Welcome Events

ID badge, parking pass

Health requirements

Program orientation

GME orientation

Hospital orientation

BLS/ NRP/ PALS/ other

Procedure Boot Camp

Simulation Cases

Computer training- EMR

Shadow Day



Orientation: The Program



House Staff Office Team/ Chiefs
Mentor/Mentee/ Wellness
Schedules/ Schedule requests
Primary Care Clinic Assignments
ACGME RRC/ ABP/ AAP/ DCGME

POLICIES

GME requirements
Jeopardy Call Policy
Holiday Vacation Policy
Administrative/ Professionalism
Bereavement Policy

Discipline and Dismissal Policy
Duty Hours Policy
Excessive Fatigue
Family Leave Policy
Moonlighting Policy
Procedure Competency
Promotion/ Graduation Criteria
Resident Supervision Policy
Stress and Grief Policy
Transitions of Care Policy
Travel Policy



APPD



Trainee Assessment and CCC





Trainee Assessment

- **Establish expectations**
 - For the year
 - For the rotation
- **Determine purpose and frequency of evaluations**
- **Determine the method of evaluation**
 - Will vary based on subject/rotation
 - Will vary based on level of resident/fellow



Trainee Assessment

Types

- PD/Faculty
- Advisor
- Chief(s)
- Peer-to-Peer
 - INPT, ER, NICU, PICU
- 360 degree
 - Members of the interdisciplinary team (peer, student learner, nurse, RT, faculty, parent, etc.)



Tracking Evaluations

- **An automated method helps here**
 - Ex. New Innovations
 - Reminders can be set
 - Template for evals
 - Mapping the milestones, the journey to competency



Tracking Evaluations

- How do you summarize it all?
- By program
 - Gen peds program vs. primary care program
- By advisor, by PD
 - Monthly at a minimum



Method of Evaluation

CCC structure/method

- Each resident/fellow level done q6 mos
- All evals pulled together, reviewed, and plotted
- All projects, committee work reviewed as well by CCC

Innovative methods

- M&M presentations
- Research days
- Advocacy
- Professionalism
- Primary care program



Time to Discuss - CCC

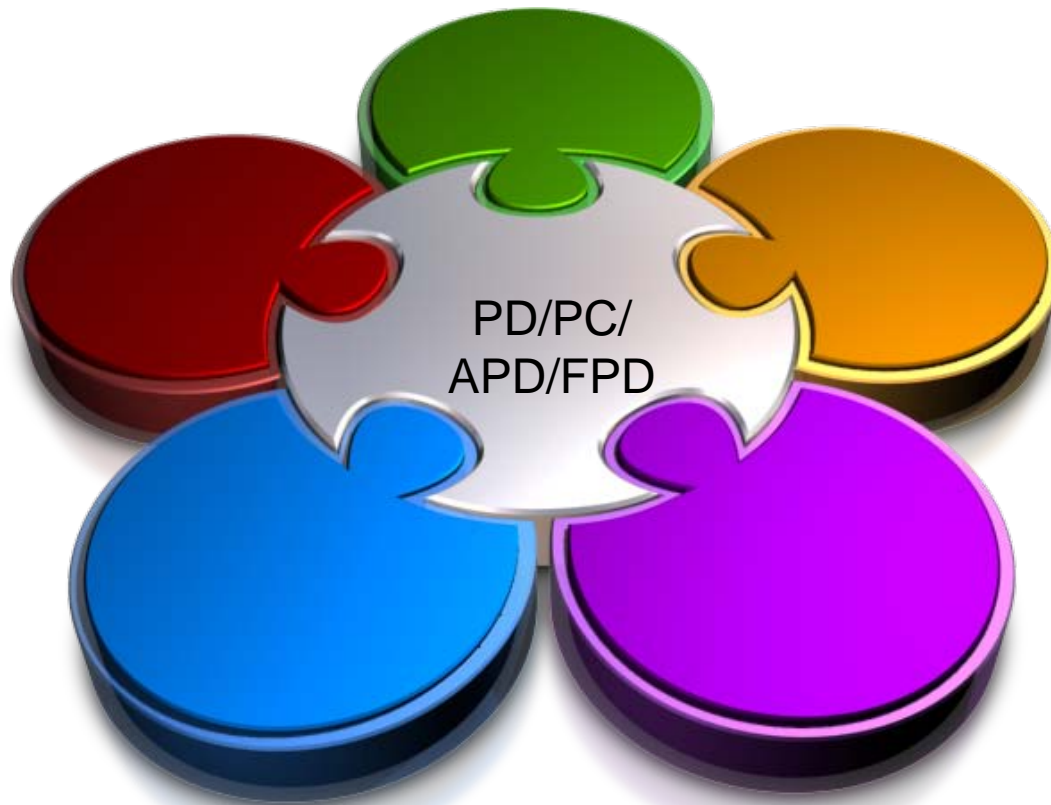
At tables - small group discussion.

Join our room at Today's Meet

<https://todaysmeet.com/FallAPPD2016>

Type your name,
join the room and write your question or best
practice here.

5 minutes to discuss.



Program Evaluation and Improvement



Program Evaluation and Improvement

- RRC: Program Evaluation Committee (PEC)
- RRC: Program Director appoints the PEC members
- RRC: Specific PEC composition set by ACGME:
 - Two Program Faculty Members (minimum)
 - One resident (minimum)
- RRC: Written description of responsibilities must be set
- No requirements on how PEC carries out responsibilities
- PEC or PD may carry out improvement plans
- PEC work can go beyond meeting minimum standards
- NAS self-study must be incorporated into PEC



RRC Pediatrics: PEC



The PEC must actively participate in...

- Planning, developing, implementing, evaluating educational activities of program;
- Reviewing, making recommendations for revision of competency-based curriculum goals and objectives;
- Addressing areas of non-compliance with ACGME standards;
- Reviewing program annually using evaluations of faculty, residents, and others.



Annual Program Evaluation

- The program, through the PEC, must document formal, systematic evaluation of the curriculum at least annually.
- PEC responsible for rendering a written Annual Program Evaluation (APE).
- APE elements: res perf, fac dev, grad perf, program quality, progress on action plan, perf improvement plan.

Program Improvement Data

- RRC: Program must monitor and track:
 - Resident performance;
 - Faculty development;
 - Graduate performance, including performance of program graduates on the certification examination;
 - Program quality:
 - Confidential faculty /res evaluation of program annually
 - Results of faculty/ res assessment for improvement
 - Progress of previous year's action plan





PEC

- Prepare a written performance improvement plan (PIP) – a plan of action - to document initiatives to improve performance in one or more of the areas listed.
- Delineate how improvement will be measured and monitored – data, facts, focus.
- Review and approve plan through PEC and document in meeting minutes.
- Track improvements...





APE Action Plan/ Follow up

Areas identified for Improvement 2015-2016	Point Person/ Group	Data – current	Intervention	Data-outcome	Follow up
ABP pass rate	Chiefs/ PD	60% pass rate over last 3 years	Board Review Course; QOD	Evaluate pass rate after review course, QOD	Improved to 75%; continued monitoring
QI projects	QI Director, PD	Participation 25%/ Knowledge low	Mini-quality academy; individual meetings; inc opportunity	# of residents participating; QI knowledge evaluation	Improved 60% participation; offer more opportunities



Time to Discuss - PEC

At tables - small group discussion.

Join our room at Today's Meet

<https://todaysmeet.com/FallAPPD2016>

Type your name,
join the room and write your question
or best practice here.
5 minutes to discuss.



Milestones,
ABP, WebAds



ACGME Reporting

Milestones

- Reported via WebAds in January and June
- Manually enter the data



ACGME Reporting

Surveys

- The faculty and trainee surveys come out in mid-January
- Survey goes straight to trainees
- PD must notify Faculty of the survey and the log in process
 - There will be an email.



ACGME Reporting

Annual Program Update in ADS

- This is CRUCIAL as it now forms the core of the NAS review process.
- Due August 31st this year

The major focus is in the Responses to Citations as this is where you document ongoing program improvement efforts.



ACGME Reporting

Annual Program Update in ADS

- Update Faculty roster
 - The “trigger” for sending a faculty the survey is not published, but is dependent upon the hours of contact in your program.
- Need Faculty Scholarly Activity
 - Need Fellow scholarly activity as well



ADS Update

Faculty Scholarly Activity

Please review the Faculty Roster located within the 'Faculty' Tab to ensure that your faculty roster is up-to-date before proceeding. Once verified, enter scholarly activity that occurred during the previous academic year only.

To add scholarly activity (add one year of activity only), click the "Add" link. If there was no scholarly activity for the previous academic year, click "No Scholarly Activity".

If this is a specialty program, only complete for core faculty.

If this is a subspecialty program, complete for all faculty.

[Download Scholarly Activity Template](#)

[Download Scholarly Activity FAQs](#)

- Similar data is required for Fellow Scholarly Activity. There is a similar template for download to help with data gathering
- Gather data in Late Spring or Summer to catch graduates and to have time to get data from Faculty



AAMC Reporting (GME Track)

National GME Census

Program Update & Survey

FREIDA update.

Basic data about your program

Trainee Update & Survey

Updates trainee information and their progression in the program.



ABP Reporting

These are received in the mail, but e-mail prompts when sent.

Yearly Tracking Roster (July)

Basic demographic for new trainees

Progress of Remaining trainees

Clinical and Professional Evaluation

Final Evaluation (Arrives mid May, due mid June)

You are certifying them as Board Eligible

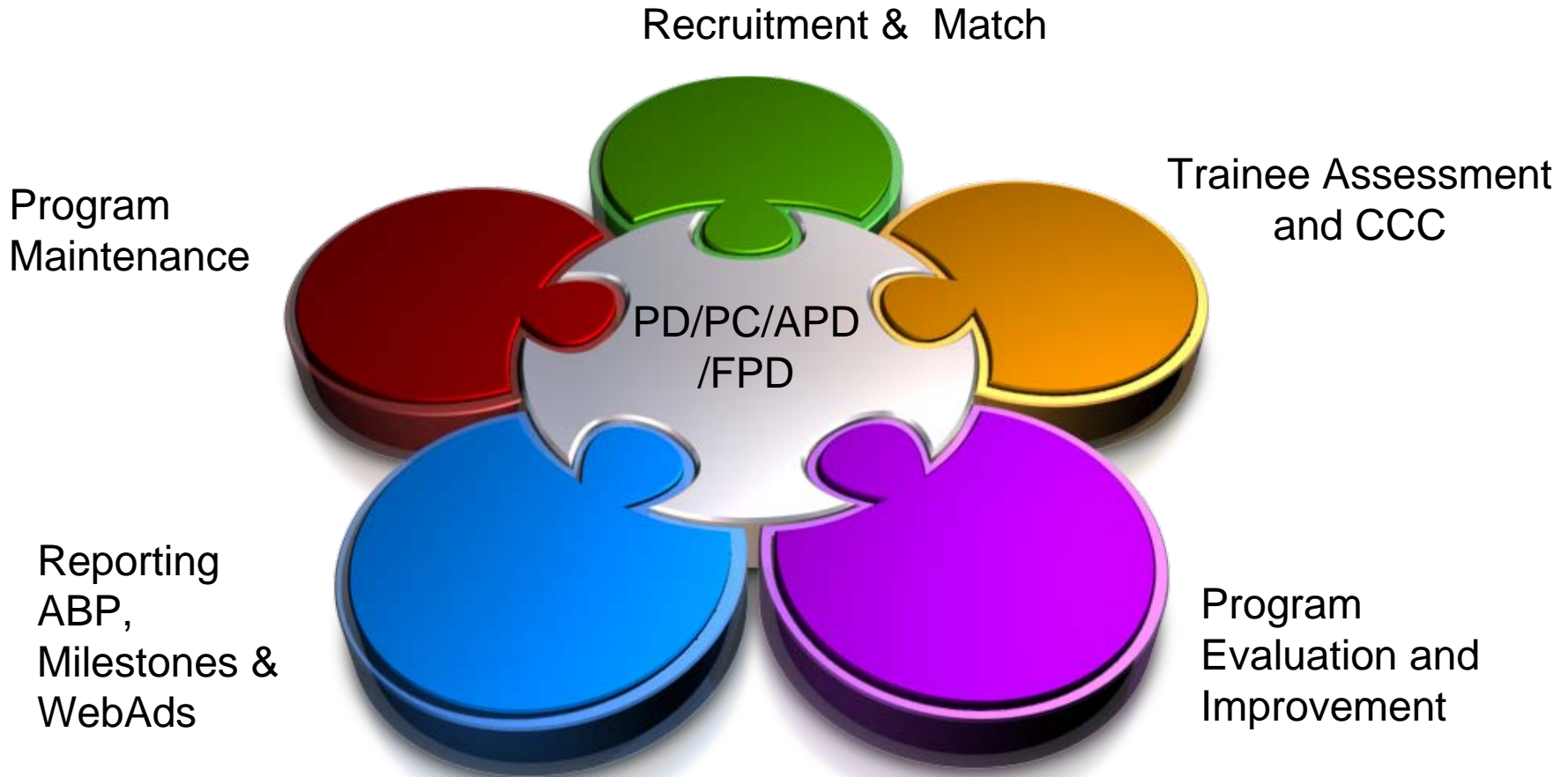
Final assessment of Trainee

Total Clinical training time

Scholarly Time for Fellowships

Scholarly Work Product for Fellowships

The Circle of Life





What We Said We Would Do.

PROGRAM ORGANIZATION 101: Basics of day-to-day program

This session is designed for all program leaders (PDs, APDs, Coordinators, FPDs) who are new to their roles and those wanting a refresher about the important activities of GME program leadership, including the annual cycle for both core programs and fellowships.

Topics include:

Recruitment

Match

Orientation

Reporting to the Governing Bodies

(ACGME, AAMC, ABP)

Program Assessment

Trainee Assessment

Program Evaluation



Thank You!