

# Criteria for Review and Approval of Program Directors Review Committee for Thoracic Surgery

In addition to meeting the criteria outlined under section 2.1. of the Program Requirements, the following information should be provided and/or updated in the ACGME's Accreditation Data System (ADS) with the submission of a new program director.

#### **Rationale for Program Director Change**

A concise, clearly defined rationale for the change in program director should be provided. In the event that additional information needs to be provided that extends beyond the character limit, the rationale may be submitted via email to Senior Accreditation Administrator Caleb Mitchell at <a href="mailto:cmitchell@acgme.org">cmitchell@acgme.org</a>.

#### **Term of Appointment Duration**

The appropriate term of appointment duration should be selected from the drop-down menu in ADS when changing the program director. In most cases, this will likely be "Permanent," but in some extenuating circumstances, "Interim" appointment may be appropriate. Refer to the criteria on page 3 of this document for requests for interim appointments.

#### **Administrative Hours**

Programs should ensure that both the proposed program director's **and** the associate/assistant program director's faculty hours are properly updated in the ADS Faculty Roster before submitting the change in program director. In particular, it should be confirmed that the individuals' profiles reflect the requisite minimum dedicated time and/or support for administration of the program, as outlined in section 2.3. of the Program Requirements (section 2.4. for integrated programs).

#### **Qualifications of the Program Director**

Programs should ensure the proposed program director's CV and/or ADS profile accurately detail the individual's qualifications and readiness to step into the role. In addition to the qualifications outlined in section 2.4. of the Program Requirements (section 2.5. for integrated programs), the following information should be highlighted:

- Prior experience as an associate/assistant program director
- Relevant local/national educational leadership experience
- Faculty development in education the individual has completed

As outlined in the Program Requirements, program directors must have a minimum number of years of documented educational and/or administrative experience, and it is suggested that they have a minimum number of years of experience as a faculty member in graduate medical education and some experience as an associate program director or other residency/fellowship program leadership experience. These requirements are outlined in full in the following sections:

- Program Requirements for Thoracic Surgery (Independent): Specialty-Specific Background and Intent, page 10
- Program Requirements for Thoracic Surgery (Integrated): Specialty-Specific Background and Intent, page 12
- Program Requirements for Congenital Cardiac Surgery: 2.4.c.1. and Subspecialty-Specific Background and Intent, page 9

In the event that the proposed program director does not possess these minimum qualifications, program and institutional leadership should strongly consider whether the individual is the best candidate to assume the role of program director and should be aware that the request may be denied by the Review Committee. If the program/institution believes that the proposed program director is the best candidate despite lacking this qualification, program and/or institutional leadership must submit an outlined plan for the mentorship and development of the proposed program director, which must be signed by the designated institutional official (DIO).

# Criteria for Review and Approval of Interim Program Directors Review Committee for Thoracic Surgery

#### Rationale for Appointment of an Interim Program Director

Programs may experience situations in which a qualified program director cannot be immediately appointed, or when a temporary absence of the permanent program director occurs, such as in the following examples:

- Illness or injury
- Death
- Military deployment
- Sudden relocation of the program director to another institution
- Appointment of the program director to a new role in the institution under urgent circumstances

Under such conditions, the proposed program director may lack some of the required qualifications, such as time in rank, experience with graduate medical education, or scholarly activity, but appears to have the time and support of the institution to perform the operational duties of the role.

### **Approval Process**

- In situations when an interim program director is temporarily needed to provide stability to a program, a request should be entered into ADS as outlined on page 1, and "Interim" should be the chosen term of appointment.
- Upon submission of the request for approval, the Sponsoring Institution/program must submit an action plan outlining the support (e.g., institutional, division, department, program) that will be provided to the interim program director, the plan for recruitment or placement of a qualified permanent program director, and the anticipated timeline until such placement. This action plan should be submitted by email to Senior Accreditation Administrator Caleb Mitchell at <a href="mailto:cmitchell@acgme.org">cmitchell@acgme.org</a>.
- If approved, the program will be notified that the program director has a "term appointment."
- The program must submit a progress report six months after submission of the request for approval of the interim program director if a qualified program director has not yet been appointed and approved by the Review Committee for Thoracic Surgery. This progress report should be submitted to Mr. Mitchell at the above-noted email address.

### All correspondence sent to Mr. Mitchell must be reviewed and signed by the Sponsoring Institution's DIO.

If an interim program director with a term appointment is approved, the program will be granted a temporary exception to the program requirements regarding program director qualifications. Programs failing to identify a qualified program director in a timely manner or failing to submit the required progress report after six months may be reviewed by the Review Committee for compliance.