Various roles and responsibilities of Associate/Assistant Program Directors

Recruitment

QI

Graduates contacts

Milestones

Website

Development MP conferences/curriculum

Advising of medical students, involved with students (teaching)

Categorical primary care curriculum

Resident schedules in clinic, ambulatory curriculum

Mentoring/advising some

Direct Med-Peds Elective

Clinic requirements

Administrative go-between for clinic vs hospital system

Monthly MP meetings – scheduling of meetings, timing, often in evenings

Interfacing with departme

Vague role

Clinic evaluations/milestones

CCC/PEC

Med Peds interest group

Women in Medicine – Diversity Curriculum

Ambulatory

Resident remediation

Semi-annual program reviews with residents

Quarterly meetings

**Opportunity to be innovative since we don't have the same administrative responsibilities of the PDs

Benefits of the Med-Peds APD role

- Build new ideas, new program
- Don't have to give as much negative feedback
- Face to face time with residents liaison
- Working with PD
- Get to do something wanted to do less academic at original basis (community clinic)
- Increased opportunities to interact with residents because don't have same responsibilities of the PD and have more varied clinical responsibilities inpatient and outpatient

Challenges of the Med-Peds APD role

- Undefined role in categorical programs
- Lack of defined job description and defined roles and responsibilities for the Med-Peds program
- Old school traditions Folks still learning about Med-Peds, being ambassador to categorical programs
- Lack of adequate protected time for administrative tasks challenge for worklife balance
- Balance time as APD and what you are required to do in medicine and peds programs
- Geographically distant from residents
- Morphed job so many positions, and not guite getting to PD
- Lack of mentorship
- Challenges setting limits and saying "no" as your job and responsibilities evolve over time
- Finding one's identity separate from the PD who is your friend/mentor
- PDs that leave suddenly and new PD comes in with limited experience of knowledge of the system
- Ambulatory curriculum lags behind hospital training
- Not having a role of "super chief resident" and getting pulled into jobs that should be assigned to chiefs
- Challenges being academically productive as an APD (Lack of time, training and support)
- If you are only inpatient, you lose connection with the outpatient clinic world, and vice versa
- Balancing other local and national roles

JOB DESCRIPTION for Associate Program Director Combined Internal Medicine/Pediatrics Residency Training Program Cincinnati Children's Hospital/University of Cincinnati Department of Internal Medicine Revised 8-20-2013

Reports to:

- Med-Peds Residency Program Director
- Division Director

Requirements:

Primary appointment at Cincinnati Children's Hospital

Consideration:

- Fellowship training or equivalent (Master's degree)
- Desired: experience in the Cincinnati clinical training system and GME experience

Responsibilities:

- Program Administration (5%)
 - Weekly meetings Med-Peds leadership administration meetings (1 hour weekly)
 - Participate in MP Chief selection process
 - Monitor duty hours of MP residents
 - Participate in development, implementation, and revision of educational experiences for the MP residents along with the PD
- Participate in recruitment (10%)
 - Review applications, create summary sheets, attend overview, one-on-one interviews with applicants, correspond with applicants, attend committee meetings for list
- Evaluation and mentoring of residents (5%)
 - Meet with all residents once a year and review monthly evaluations, clinic statistics, career planning, core competencies performance and credentialing items
 - Provide career mentoring to residents
 - Provide feedback and guidance to residents
- Med-Peds Conferences (2.5%)
 - Attend and participate in weekly med-peds conference
- Meetings (2.5%)
 - o Internal Medicine Educational Core Governance Committee (1 hour per month)
 - Med-Peds Competency Committee Meeting (0.5 hours per month)
 - o Program Directors Committee meeting at TUH (0.5 hour per month)
 - Cincinnati Children's curriculum committee (0.5 hours per month)
 - o APDIM, APPD, MPPDA (2 conferences per year)

Commitment:

- Begin with 25% effort
- Goal is for eventual promotion to program director

Resident Recruitment

- Interview 80 candidates (a full day per week for three months)
- Applicant communications, second site visits, and follow up planning
- Review applicant files and assist PD in applicant selection for interview
- Assist PD in producing applicant packet materials, website materials, interview presentation
- Assist PD with oversight of program coordinator duties: Prepare applicant packets, applicant travel and dinner arrangements with residents, tours, communications

Resident Advising

- Mentor for resident scholarly work: Match residents with appropriate mentor for scholarly interests. Serve as primary mentor for multiple ongoing advocacy and quality improvement projects per year. Poster and paper review.
- Career advising: regular meetings with residents for career exploration, mentor selection, preparation of CV and letters of recommendation for employment or fellowship
- Annual review of resident block schedules to assure meeting graduation requirements and career goals; coordination and communication of changing med-peds program requirements with categorical programs
- Assist PD in semi-annual resident review process for 22 residents
- Personal advising of med-peds residents in stress management, career balance and wellness to enhance resilience
- Student advising and promotion of the med-peds residency program through the med-peds interest group, mock interviews, and review of Vanderbilt student CVs and personal statements, community dinners, and letters of recommendation

Program Administration

- Monthly meetings with senior residents to coordinate: noon conference curriculum, clinic quality improvement, interview process, clinic scheduling, and problem solving both med-peds specific concerns and categorical program concerns affecting med-peds resident
- Assist PD in tracking of duty hours and justifications; participating in system remediation when appropriate
- Integration of changing educational and assessment program requirements for internal medicine, pediatrics and med-peds
- Assist PD in assuring adequate volume of clinic patients for resident learning (monthly audit review, coordination with pediatric clinical services, clinic scheduling adjustments)
- Assist PD in annual orientation, graduation, and ongoing med-peds community events to assure commemoration of milestones, training, and networking opportunities for residents

Teaching responsibilities:

- Weekly noon conference: curricular oversight and regular content delivery
- Weekly clinic curriculum: topic planning, writing, editing, and implementing
- Annual orientation to program and to med-peds continuity clinics
- Oversee resident clinic group quality improvement projects through conference didactics and inclinic data collection, staff recruitment, and longitudinal implementation and evaluation

- Assist PD in development of NAS mandated new assessment tools
- Assist PD in informing categorical clinical competence committees and integrating the data from those committees with med-peds specific data into a comprehensive evaluation plan for all MP residents
- Oversee resident patient care: assure adequate and timely documentation, answer clinical questions regarding difficult cases, telephone call and patient affairs questions

Quality Improvement MP APD Job Description, 10% commitment

Position: Internal Medicine-Pediatrics Faculty

Assistant Program Director for Quality Improvement, Internal Medicine-Pediatrics Residency Program

Primary Care Physician, UCMC Med-Peds Clinic

Revised 10-20-14

Description:

Noon conference teaching activities:

- Noon conference 4 times a year on quality improvement topics and clinic initiatives, average 2 hours per month
- Lead "defense of the measures" to be debated by the residents, to direct yearly QI projects

Other teaching activities:

· MP Clinic Re-Immersion Epic use optimization leader

Mentorship:

· Mentor med-peds residents and Med-peds chief resident

Scholarly activities:

- Faculty advisor for required MP3/MP4 scholarly projects:
 - 7 posters for clinical vignettes and quality improvement projects per year on average

Administrative role:

- Core Interviewer for the MP Residency, during recruitment/interview season. Participate in the MP Residency Overview on Tuesday mornings.
- Participate in the Internal Medicine CR5 weekly meetings on Wednesday morning
- Attend MP noon Conference

Assistant Program Director Quality Improvement direct role

- Develop and run QI workshops that constitute the four year longitudinal quality improvement curriculum for the Med-Peds residents
 - Small group on QI science with residents, 6 for each resident, delivered during Ambulatory Rotations, average 8 hours per month
- Mentor MP3 and MP4 quality improvement program development and execution
- Mentor creation of scholarly work stemming from these projects
- Interface with quality improvement leaders at UCMC/CCHMC, including
 - Jeff Norton, VP for Quality Improvement, UCMC
 - o Eric Warm, Clinic Director, UCMC IM Resident Clinic
 - o Christine Burrows, Clinic Director, UCMC Med-Peds Clinic,
 - Megan Sullivan, Director for Quality, UC Physicians
 - o Brad Mathis, Director for Clinical Operations, UC Internal Medicine
 - Uma Kotagal, Anderson Center at CCHMC
 - o Maria Britto, Anderson Center at CCHMC
- Lead interdisciplinary teams (including residents and faculty) for quality improvement initiatives at the UCMC Med-Peds Clinic
- Distribute and assist with interpretation of data on a monthly to weekly basis to MP Residents, Faculty, and Clinic Staff Members, as well as to patients
- Interface with EPIC Analysts to improve systems and to obtain data, including Jon Dinnesen

Med-Peds Residency Associate Program Director Job Description

Courtesy of Reed VanDeusen, Univ Pittsburgh

- Mentor to 8 residents per year: meet with them every 3 months for 1 hour at a time
- Director of ambulatory education for residents:
 - Director of pre-clinic conference curriculum
 - Coordinate the pre-clinic conference schedule and ensure timely review of topics by reviewers
 - Ensure that modules are posted on medhub
 - Director of Med-Peds Ambulatory (MPA) rotations
 - Coordinate residents' MPA schedules
 - Ensure residents have excellent ambulatory educational experiences by coordinating with categorical programs' ambulatory rotation leadership and by exploring new opportunities across the institution
 - Complete evaluations of residents for ambulatory rotation
 - Director of the Adult half of the Combined Med-Peds Continuity
 Clinic at the Primary Care Center of Turtle Creek
 - Coordinate with peds leadership on resident clinic templates
 - Meet with Turtle Creek leadership regularly
 - Notify preceptors and residents of changes/updates regarding the office
 - Accreditation:
 - Monitor resident continuity clinic patient numbers and report to leadership on regular basis
- Residency Recruitment activities:
 - Interview Applicants for residency: 2 applicants twice/week during the winter months of residency recruitment
 - Co-facilitate Med-Peds Residency Program Overview for applicants with Program Director. 1 hour session, twice/week, during recruitment months.
- Clinic preceptor: precept MP residents in continuity clinic