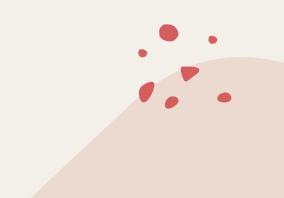
ROLES AND RESPONSIBILITIES

Program Director vs Program Manager

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Must have 3-5 years (depending upon the program0) of documented educational and/or administrative experience



Leading a residency program requires knowledge and skills that are established during residency and subsequently further developed. The time period from completion of residency until assuming the role of program director allows the individual to cultivate leadership abilities while becoming professionally established. The three-year period is intended for the individual's professional maturation.

Sub specialty PD requirements must include five years of experience as a physician in that sub specialty following completion of that sub-specialty fellowship

Whereas a **Program manager** must possess skills in leadership and personnel management appropriate to the complexity of the program. There is no amount of documented time required.



If a program has 11 or more trainees, the minimum support (FTE) /dedicated time required is .50.



Residency Program Director

The residency program director and, as applicable, the program's leadership team, must be provided with support adequate for administration of the program based upon its size and configuration. If 1-10 trainees, the minimum FTE is .40.

For program managers it is more varied depending upon the # of trainees.

Number of	Minimum Cumport	Minimum Additional Cunnert
Number of	Minimum Support	Minimum Additional Support
Approved	Required (FTE) for the	Required (FTE) for Program
Resident Positions	Program Director	Leadership in Aggregate
7-10	0.4	-
11-15	0.5	-
16-20	0.5	0.1
21-25	0.5	0.2
26-30	0.5	0.3
31-35	0.5	0.4
36-40	0.5	0.5
41-45	0.5	0.6
46-50	0.5	0.7
51-55	0.5	0.8
56-60	0.5	0.9
61-65	0.5	1.0
66-70	0.5	1.1
71-75	0.5	1.2
76-80	0.5	1.3

Residency Program Directors

Residency Program Managers

Number of Approved	Minimum FTE	Minimum Additional Aggregate
Resident Positions	Required for Coordinator Support	FTE Required for Administration of the Program
7-10	0.7	-
11-15	0.8	-
16-20	0.9	-
21-25	1.0	-
26-30	1.0	0.1
31-35	1.0	0.2
36-40	1.0	0.3
41-45	1.0	0.4
46-50	1.0	0.5
51-55	1.0	0.6
56-60	1.0	0.7
61-65	1.0	0.8
66-70	1.0	0.9
71-75	1.0	1.0
76-80	1.0	1.1

If a program has 9 or more trainees, the minimum support (FTE) /dedicated time required is .50.



Fellowship Program Manager

At a minimum, the fellowship program director must be provided with support equal to a dedicated minimum of 0.2 FTE for administration of the program.

The fellowship program manager must be provided with the dedicated time and support specified below for administration of the program

Number of Approved Fellow Positions	Minimum PM FTE
6 or fewer	0.3
7-8	0.45
9 or more	0.5

For the Clinical Competency Committee meeting the responsibility of taking meeting minutes and recording decisions is whose responsibility?



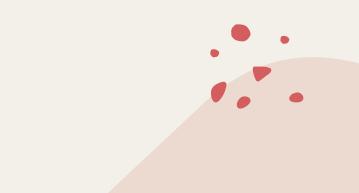
Program Manager

Program coordinators play a critical role in their programs and **may**, through the program's resident/fellow evaluation system, **provide valuable insight** on resident/fellow performance in areas such as **interpersonal and communication skills, teamwork, and professionalism.**

Further, the program coordinator may, at the program director's discretion, attend CCC meetings to support the activities of the CCC, such as **collation of data on each resident/fellow, taking meeting minutes, recording decisions, and managing the submission of Milestones data to the ACGME.**

However, evaluation of resident/fellow competence related to the Milestones for patient care and medical knowledge is a vital responsibility of the CCC and these assessments should be made by individuals with background and experience in health care. Therefore, program manager, although they **may administratively support** the committee and take part in the 360 assessments of the residents/fellows, **may not serve** as **voting members** of the CCC.

Serve on the Program Evaluation Committee



NEITHER

The Program Director must appoint the members of the Program Evaluation Committee which must be composed of at least two program faculty members, at least one of whom is a core faculty member, and at least one resident.

The Program Evaluation Committee must report their findings back to the Program Director.

The Program Director nor Program Manager are required to serve on this committee but often times do.



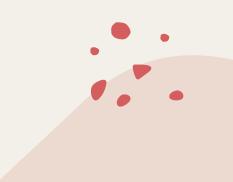
Completes and signs resident training verifications.



It is the responsibility of the **program director** to sign a residency verification. A program manager can support the program director by completing portions of the verification based upon review of the resident's training file.



Proctor the CREOG Exam



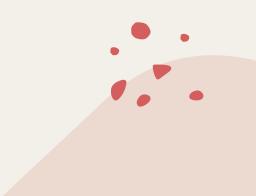
Either

It is required that there is one Chief Proctor per test site. The Chief Proctor is responsible for performing any actions that affect ALL examinees, such as starting the exam session, ending the exam session, and submitting the Test Administration Report. The Chief Proctor must remain on-site during the entire exam.

The Chief Proctor can be either the Program Director, Program Manager or another staff support/internal faculty.



Enter the program quota and SOAP participation status in the NRMP system.



The program manager my view all program data available through the R3 system and enter or change program data **with the exception** of the program's quota and the SOAP participation status.

Only the program director can change the program quote and/or the SOAP participation status in the NRMP R3 system.

Program quota is the number of positions a program intends to fill through the Match.

SOAP is the Supplemental Offer and Acceptance Program that provides a uniform system for programs to offer unfilled positions to eligible unmatched, or partially matched applicants through a series of offer rounds during Match Week. SOAP is only offered with residency programs.

Certify the Rank Order List in NRMP

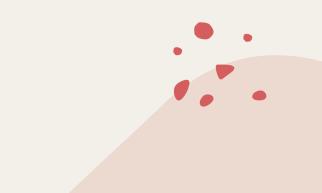


It is the responsibility of the program director to certify the rank order list in NRMP (National Resident Matching Program).

However, the program manager and/or program director can enter the rank order list in NRMP.



Sign ABOG Residency Training Affidavit



One of the requirements for sitting for the ABOG Qualifying Exam is a signed Residency Training Affidavit.

Each resident's **Program Director** signs the affidavit, attesting to the resident's satisfactory competence and completion of the program.

The affidavit now will be listed as a task on the current **Program Director's** ABOG portal.

Program Directors should log in to their portal and click on the Sign Training Affidavits.

Program Managers will be able to see a confirmation of completion of verification by the resident's name on the program's portal page in the Add/Maintain Residents Task.

The program letter of agreement (PLA) is a written document that addresses graduate medical education responsibilities between a program and a site other than the Sponsoring Institution at which residents have required educational experiences.

Who is responsible for designating the site director for PLAs at participating training sites?



At each participating site there must be one faculty member, designated by the **program director** as the site director, who is accountable for resident education at that site, in collaboration with the program director

