

## II. Program Personnel and Resources

### B. Faculty and

### C. Other Program Personnel

#### Common Program Requirement:

#### B. Faculty

1. *At each participating site, there must be a sufficient number of faculty with documented qualifications to instruct and supervise all residents at that location.*

*The faculty must:*

- a) *devote sufficient time to the educational program to fulfill their supervisory and teaching responsibilities; and to demonstrate a strong interest in the education of residents, and*
  - b) *administer and maintain an educational environment conducive to educating residents in each of the ACGME competency areas.*
2. *The physician faculty must have current certification in the specialty by the American Board of \_\_\_\_\_, or possess qualifications acceptable to the Review Committee.*  
*[As further specified by the Review Committee]*
  3. *The physician faculty must possess current medical licensure and appropriate medical staff appointment.*
  4. *The nonphysician faculty must have appropriate qualifications in their field and hold appropriate institutional appointments.*
  5. *The faculty must establish and maintain an environment of inquiry and scholarship with an active research component.*
    - a) *The faculty must regularly participate in organized clinical discussions, rounds, journal clubs, and conferences.*
    - b) *Some members of the faculty should also demonstrate scholarship by one or more of the following:*
      - (1) *peer-reviewed funding;*
      - (2) *publication of original research or review articles in peer-reviewed journals, or chapters in textbooks;*
      - (3) *publication or presentation of case reports or clinical series at local, regional, or national professional and scientific society meetings; or,*  
*participation in national committees or educational organizations.*
    - c) *Faculty should encourage and support residents in scholarly activities.*  
*[As further specified by the Review Committee]*

#### C. Other Program Personnel

*The institution and the program must jointly ensure the availability of all necessary professional, technical, and clerical personnel for the effective administration of the program.*

*[As further specified by the Review Committee]*

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#### Explanation:

Requirements for faculty include **qualifications** in the specialty, **time for and dedication to resident education** (including the competency areas), and **scholarship**.

**Qualifications:** Key physician faculty must have current certification in the specialty. Most Review Committees will not approve key physician faculty members who are not ABMS board certified and not eligible for certification. In the rare event that a program has such an individual, the program director should contact the Review Committee executive director for information on whether the Review Committee would consider approval and, if so, what information the Review Committee would need to determine if the individual is acceptable. In addition to information provided in the PIF, this would include a complete CV and letters of recommendation. Scholarship, training, teaching experience and national reputation are important factors for such decisions.

**Dedication to resident education:** Programs must demonstrate that the faculty are not only qualified in terms of credentials and experience, but are also active participants in teaching and mentoring residents. There should be sufficient depth and breadth within the faculty roster to assure that the curriculum can be implemented as planned. That is, the quality of faculty teaching and supervision and the total time per week that faculty devote to teaching and supervising is adequate both as documented in the PIF (where the role of each faculty - both physician and nonphysician - in the program must be described) and as perceived by residents. It should be evident that each participating site has a local director accountable for resident education, that residents are supervised at each site, and that there are adequate faculty resources for implementing the curriculum (teaching, evaluation, supervision, role modeling, and patient care).

**Scholarship** includes contributions of faculty to new knowledge, encouraging and supporting resident scholarship, and contributing to a culture of scholarly inquiry by active participation in organized clinical discussions, rounds, journal clubs and conferences. An expanded definition of scholarship recognizes not only the traditional scholarship of discovery (research as evidenced by grants and publications), but also the scholarship of integration (translational or cross-disciplinary initiatives that typically involve more risk and fewer recognized rewards), the scholarship of application (patient-oriented research that might include the systematic assessment of the effectiveness of different clinical techniques), and the scholarship of education (includes not only educational research but also creative teaching and teaching materials). Therefore, some members of the faculty should have one or more of the following:

- Peer-reviewed funding;
- Publication of original research or review articles in peer reviewed journals, or chapters in textbooks;

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- Publication or presentation of case reports or clinical series at local, regional, or national professional and scientific society meetings; or
- Participation in national committees or educational organizations.

Specialties may have additional requirements for the following items, delineated in the specialty/subspecialty-specific program requirements:

- Documentation requirements for changes in program director via ADS
- Qualifications for program director
- Program director responsibilities for administering and maintaining the program
- Faculty qualifications
- Expectations for faculty scholarship
- Requirements for other program personnel
- Specific resources for resident education