

TOP 10 Responsibilities of the DIO & GMEC



An educational resource brought to you by Margie Kleppick, President & CEO

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The DIO and GMEC function as the Sponsoring Institution's "organized administrative system" to oversee all ACGME accredited programs within the institution. This means more than writing policy.

Below is what I hope to be the beginning of a dialogue that will continue in our upcoming Telecourse "Role of the DIO (and GMEC)" coming this June 1st.

While this is not an all-inclusive list of DIO and GMEC responsibilities their place in helping you to achieve compliance with the requirements, it is my top ten of areas that I find that my DIO and GMEC clients can be unaware of or unclear about. Join me in June to learn more about HOW to meet these responsibilities, as well as the requirements, while improving your leadership within the institution and GME program.

The DIO & GMEC...

1 Must have knowledge of, and comply with, the ACGME Institutional, Common and Program requirements as well as the institution's policies.

2 Are the liaisons among the organized medical staff, all program leaders and the administration. This requires ongoing communication regarding the entire GME program within the institution.

3 Are the monitoring system for compliance with duty hours. Even though the programs are expected to monitor and comply, the DIO and GMEC are held accountable for compliance with duty hour standards for all programs.

4 Communicate with the ACGME and various other regulatory agencies. The collection and accuracy of data is essential when reporting to any/all of these agencies.

5 Act as advocates for the programs in obtaining adequate time and resources to ensure quality GME programs. They need to obtain data on what the programs need and negotiate successfully for those resources.

6 Must oversee the well-being of the residents. This is more than monitoring duty hours. The DIO and GMEC must know what institutional resources are available to support the residents' well-being. The DIO and GMEC must take the responsibility to educate the residents and faculty

on physician impairment, fatigue and sleep deprivation and what resources are available to them.

7 Advocates for patient safety. This includes identifying what topics are needed to educate the residents, faculty, patients and other healthcare professionals appropriately on patient safety and quality improvement.

8 Assist programs in identifying areas needing improvement and assists in developing action plans. For example, this can be done by reviewing the ACGME letters, Internal Reviews and each program's Annual Program Review Report and working with the program to improve any weaknesses.

9 Assist programs in securing resources to promote professional development. This can be done within the institution or by providing time and funding for program leaders and faculty to attend local and national programs.

10 Ensure communication mechanisms for all program directors and site directors at each participating site. This can be done by meetings with the program directors and site directors individually as well as inviting them to the GMEC, and visits to participating sites, just to name a few.

WRITTEN BY MARGIE KLEPPICK
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The Role of the DIO (and GMEC)

One 1.5 hour power-packed session...

Tuesday, June 1
11:30 a.m.-1:00 ET

**Sign up today! For registration and cost details,
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