

**Protected Time for All
Anesthesiology Subspecialties:
Administrative or Scholarly Use**

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Disclosures

- No financial or industry disclosures or conflicts of interest

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Learning Objectives

- Describe the reasons to support protected time for Anesthesiology Fellowship Program Directors (PDs)
- List ACGME requirements for Anesthesiology PDs
- Explain strategies to document “productivity” for PD activities and use of protected time

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**Extrapolating from Anesthesiology Residency PDs –
In 2017 a PD was:**

- Average age: 52 years
- Average time since appointment: 3.6 years
- PD with senior academic rank (Associate/ Full Professor): 53%

Kenevan et. al. JEPM 2018. Purushothaman R, et al. Acad Radiol 2021.
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Program Director Turnover

Contemporary Challenges for Fellowship Training in Adult Cardiothoracic Anesthesiology: Perspectives From Program Directors Around the United States

Michelle Capdeville, MD*, Jennifer Hargrave, DO*, Prakash A. Patel, MD, FASE*, Kanjal M. Patel, MD*, Ronak G. Desai, PhD, Kenji C. Toyooka, MD*, Jared W. Feinman, MD*, Chandrika Garner, MD, FASE*, Rubesh J. Ferrando, MD, FASE*, Emily K. Gordon, MD, MScEd*, John G.T. Augustines, MD, FASE, FAHA*

Period	Programs	Total New PD	Percent New PD	Active Fellows	New Programs	Total Attrition	Percent Attrition
2019–20	70	12	17.14%	228	1	-11	15.7%
2018–19	69	13	18.84%	215	3	-10	14.5%
2017–18	66	7	10.61%	207	0	-7	10.6%
2016–17	66	16	24.24%	193	4	-12	18.2%
2015–16	62	7	11.29%	183	1	-6	9.3%
2014–15	61	11	16.39%	177	1	-10	16.4%
2013–14	60	6	10.00%	167	2	-4	6.7%
2012–13	58	7	12.07%	165	2	-5	8.6%
2011–12	56	3	5.36%	153	4	0	0
2010–11	52	8	15.38%	144	5	-3	5.8%
2009–10	47	6	12.77%	119	3	-3	6.4%
2008–09	44	5	11.36%	109	13	0	0
2007–08	33	2	6.06%	80	27	0	0
2006–07	4	0	0	15	4	0	0

Capdeville M, et al. J Cardio Vasc Anes 2020.

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Why is protected time important?

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II.C. Program Coordinator

II.C.1. There must be a program coordinator. ^(Core)
 Different language for one-year fellowship Common Program Requirements:
 There must be administrative support for program coordination

II.C.2. Requirement II.C.2 below was deleted from the one-year fellowship Common Program Requirements
 The program coordinator must be provided with support adequate for administration of the program based upon its size and configuration. ^(Core)

(The Program Committee may further amend.)

The program coordinator is a **member of the leadership team** and is **critical to the success of the program**. As such, the program coordinator **must possess skills in leadership and personnel management**. Program coordinators are expected to **develop unique knowledge of the ACGME and Program Requirements, policies, and procedures**. Program coordinators **assist the program director** in accreditation efforts, educational programming, and support of fellows.

procedures: program coordinators assist the program director in accreditation efforts, educational programming, and support of fellows.
 Programs, in partnership with their Sponsoring Institutions, should encourage the professional development of their program coordinators and avail them of opportunities for both professional and personal growth. Programs with fewer fellows
 Feist TB, et al. JGME 2019. Ewen AM, et al. JGME 2019. www.acgme.org 2020.

Considering Program Coordinators

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PC support and retention = ↑ time for PDs

- High degree of PC turnover
- High degree of PC burnout (even before COVID)

Including PCs in wellness initiatives and providing adequate support should help control some of the administrative burden for Program Directors.

Feist TB, et al. JGME 2019. Ewen AM, et al. JGME 2019. www.acgme.org 2020.

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Program Director Promotion

The review for promotion to Associate Professor shall be in accordance with the following guidelines:

<u>Meritorious performance in all:</u>	<u>Excellence in one:</u>
- Teaching	- Teaching
- Scholarly activity	- Research
- Service/clinical activity	- Clinical activity

The review for promotion to Professor shall be in accordance with the following guidelines:

<u>Meritorious in:</u>	<u>Excellence in two:</u>	<u>Excellence in:</u>
- Teaching	- Teaching	- Scholarly activity
- Service/clinical activity	- Research	
	- Clinical activity	

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Program Director Promotion con't

Professors in the regular faculty series should have the terminal degree appropriate to their field or its equivalent. They must demonstrate continued achievement in their areas of expertise; that is, they must have a record, since receiving tenure or promotion to associate professor, that indicates substantial, significant and continued growth, development and accomplishment in teaching, scholarship, and other applicable areas.

Success takes TIME

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Specialty-Specific Program Requirements: Support for Program Director
 Effective as of July 1, 2021
 Common Program Requirements are in bold

CORE Residency Program Director

Anesthesiology **II.A.2. At a minimum, the program director must be provided with the salary support required to devote 20 percent FTE of non-clinical time to the administration of the program. ^(Core)**
II.A.2.a) Additional support must be provided based on the program size as follows: ^(Core)

Number of approved resident positions	Minimum FTE
1-20	0.2
>20	0.4

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Specialty-Specific Program Requirements: Support for Program Director
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Fellowship* Program Director

Adult Cardiothoracic Anesthesiology **II.A.2. The program director must be provided with support adequate for administration of the program based upon its size and configuration. ^(Core)**


Anesthesiology Critical Care **II.A.2.a) At a minimum, the program director must be provided with the salary support required to devote 10 percent FTE of non-clinical time to the administration of the program. Additional support must be provided based on program size as follows: ^(Core)**

Number of Approved Fellow Positions	Minimum FTE
1-2	0.1
3	0.125
4	0.15
5	0.175
>5	0.2

Pediatric Anesthesiology
Regional Anesthesiology and Acute Pain Medicine

*ACGME Accredited Programs
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What about other specialties?

- Orthopedic Surgery Fellowships**
 - 1-4 fellows → 0.1 FTE for PD
 - ≥ 5 fellows → 0.2 FTE for PD
- Psychiatry Fellowships**
 - 1-2 fellows → 0.25 FTE for PD
 - ≥ 3 fellows → 0.375 FTE for PD
- Surgical Critical Care**
 - 1-4 fellows → 0.1 FTE for PD
 - 5-9 fellows → 0.15 FTE for PD
 - ≥ 10 fellows → 0.2 FTE for PD
- Obstetrics/ Gyn Fellowships**
 - Minimum of 0.2 FTE for PD
- Radiology Fellowships**
 - 1-4 fellows → 0.1 FTE for PD
 - 5-7 fellows → 0.2 FTE for PD
 - ≥ 8 fellows → 0.3 FTE for PD

****Varying requirements for # and aggregate protected time for Associate Fellowship PDs**

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Time = Money

What is the value of 0.1 FTE protected time?

Conservatively ...
~ \$33,000

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Preaching to the Choir...Fellowship PDs are BUSY

- Administrative tasks**
 - Fellowship interviews
 - Fellow semi-annual reviews
 - Clinical Competence Committee
 - Annual Program Evaluation
 - Program Evaluation Committee
 - PLAs, Rotation Goals/ Objectives
 - And more!**
- Educational/ Scholarly activities**
 - Fellow didactics
 - Fellow project/ research mentorship
 - Personal research
 - Book chapters and peer reviewed publications
 - Editorial activities
 - Hospital/ Institutional roles
 - National subspecialty society service
 - National speaking engagements
 - And more!**


How do you justify protected time to your Chair (and Department colleagues)?

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How do we compare to others?

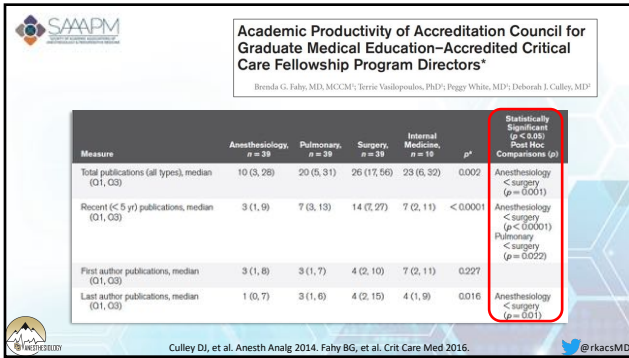
Academic Productivity of Directors of ACGME-Accredited Residency Programs in Surgery and Anesthesiology

Deborah J. Culley, MD,* Brenda G. Fahy, MD,† Zhongcong Xie, MD, PhD,† Robert Lekowski, MD,* Sascha Buetler, MD, PhD,* Xiaoxia Liu, MS,* Neal H. Cohen, MD,|| and Gregory Crosby, MD¶

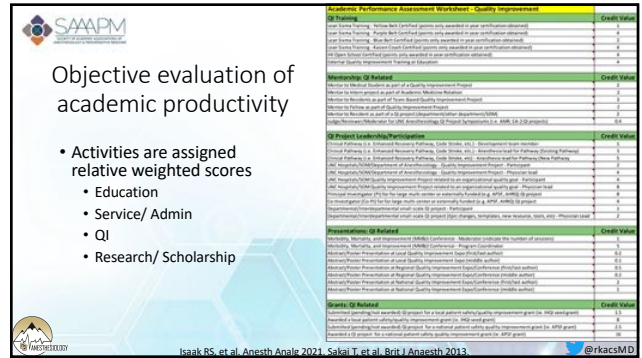
Table 2. Publication Comparison	Anesthesiology (N = 127)	Surgery (N = 127)	P
Publications, median (Q1, Q3)	6.0 (2.0, 14.0)	25.8 (11.0, 55.0)	<.001
Education publications, median (Q1, Q3)	0.0 (0.0, 1.0)	1.0 (0.0, 3.0)	<.001
<5 y publications, median (Q1, Q3)	1.0 (0.0, 3.0)	6.0 (2.0, 12.0)	<.001

Culley DJ, et al. Anesth Analg 2014. Fahy BG, et al. Crit Care Med 2016. @rkacsMD

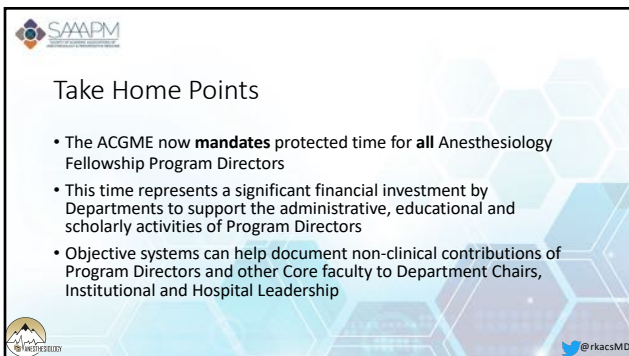
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