



Appointment of Residency Program Leadership Policy

GMEC approved February 26, 2026

In compliance with ACGME requirements and Affiliate agreements between the University of Missouri-Kansas City School of Medicine and the participating hospitals this describes the policy and procedures regarding the appointment of residency program director for UMKC sponsored ACGME programs.

From ACGME Common Program Requirements, effective July 1, 2026:

2.1. Program Director

There must be one faculty member appointed as program director with authority and accountability for the overall program, including compliance with all applicable program requirements. ^(Core)

2.2. The Sponsoring Institution's GMEC must approve a change in program director and must verify the program director's licensure and clinical appointment. ^(Core)

2.2.a. Final approval of the program director resides with the Review Committee. ^(Core)

[For specialties that require Review Committee approval of the program director, the Review Committee may further specify. This requirement will be deleted for those specialties that do not require Review Committee approval of the program director.]

Background and Intent: While the ACGME recognizes the value of input from numerous individuals in the management of a residency, a single individual must be designated as program director and have overall responsibility for the program. The program director's nomination is reviewed and approved by the GMEC.

2.3. The program must demonstrate retention of the program director for a length of time adequate to maintain continuity of leadership and program stability. ^(Core)

[The Review Committee may further specify]

Background and Intent: The success of residency programs is generally enhanced by continuity in the program director position. The professional activities required of a program director are unique and complex and take time to master. All programs are encouraged to undertake succession planning to facilitate program stability when there is necessary turnover in the program director position.

2.4. The 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. ^(Core)

[The Review Committee must further specify minimum dedicated time for program administration, and will determine whether program leadership refers to the program director or both the program director and associate/assistant program director(s).]

Background and Intent: To achieve successful graduate medical education, individuals serving as education and administrative leaders of residency programs, as well as those significantly engaged in the education, supervision, evaluation, and mentoring of residents, must have sufficient dedicated professional time to perform the vital activities required to sustain an accredited program.



The ultimate outcome of graduate medical education is excellence in resident education and patient care.

The program director and, as applicable, the program leadership team, devote a portion of their professional effort to the oversight and management of the residency program, as defined in 2.6. – 2.6.1. Both provision of support for the time required for the leadership effort and flexibility regarding how this support is provided are important. Programs, in partnership with their Sponsoring Institutions, may provide support for this time in a variety of ways. Examples of support may include, but are not limited to, salary support, supplemental compensation, educational value units, or relief of time from other professional duties.

Program directors and, as applicable, members of the program leadership team, who are new to the role may need to devote additional time to program oversight and management initially as they learn and become proficient in administering the program. It is suggested that during this initial period the support described above be increased as needed.

In addition, it is important to remember that the dedicated time and support requirement for ACGME activities is a minimum, recognizing that, depending on the unique needs of the program, additional support may be warranted. The need to ensure adequate resources, including adequate support and dedicated time for the program director, is also addressed in Institutional Requirement 2.2.a. The amount of support and dedicated time needed for individual programs will vary based on a number of factors and may exceed the minimum specified in the applicable specialty/subspecialty-specific Program Requirements. It is expected that the Sponsoring Institution, in partnership with its accredited programs, will ensure support for program directors to fulfill their program responsibilities effectively.

2.5. Qualifications of the Program Director

The program director must possess specialty expertise and at least three years of documented educational and/or administrative experience, or qualifications acceptable to the Review Committee. (Core)

Background and Intent: Leading a 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.

The broad allowance for educational and/or administrative experience recognizes that strong leaders arise through a variety of pathways. These areas of expertise are important when identifying and appointing a program director. The choice of a program director should be informed by the mission of the program and the needs of the community.

In certain circumstances, the program and Sponsoring Institution may propose and the Review Committee may accept a candidate for program director who fulfills these goals but does not meet the three-year minimum.



2.5.a. The program director must possess current certification in the specialty for which they are the program director by the American Board of _____ or by the American Osteopathic Board of _____, or specialty qualifications that are acceptable to the Review Committee. (Core)

[The Review Committee may further specify acceptable specialty qualifications or that only ABMS and AOA certification will be considered acceptable]

2.5.b. The program director must demonstrate ongoing clinical activity. (Core)

Background and Intent: A program director is a role model for faculty members and residents. The program director must participate in clinical activity consistent with the specialty. This activity will allow the program director to role model the Core Competencies for the faculty members and residents.

[The Review Committee may further specify additional program director qualifications]

2.6. Program Director Responsibilities The program director must have responsibility, authority, and accountability for: administration and operations; teaching and scholarly activity; resident recruitment and selection, evaluation, and promotion of residents, and disciplinary action; supervision of residents; and resident education in the context of patient care. (Core)

Procedures

1. The Department Chair recommends new Program Director (PD) to the Designated Institution Official (DIO) to include agenda item and plans to present at future GME Council (GMEC) meeting. Materials for submission include:
 - a. Brief letter (or e-mail) of support addressing the qualifications of the nominee, including attestation that the nominee meets requirements regarding:
 - i. Years of experience in clinical practice, teaching, administration
 - ii. Scholarly work
 - iii. Appropriate certification, licensure, and medical staff appointment
 - b. Curriculum Vitae
 - c. Acknowledge and affirm designated time and support to Program Director for program administration according to specialty specific requirement.
2. GMEC must review and approve the nomination and send a recommendation to the Dean of the medical school. If the nominee is not recommended by the GMEC, the Chair who submitted the nominee will be notified.
3. The Dean appoints the Program Director after considering the review and approval by the GMEC. If the nominee is not recommended by the Dean, the Chair who submitted the nominee will be notified.
4. The DIO will inform the Chair and new program director of the Dean's appointment decision.
5. The DIO will notify ACGME via ADS. The new program director will be notified by the ACGME and asked to update information in ADS. This must be completed timely for review and approval



by the ACGME.

For non-ACGME programs, the Chair or new program director will notify the accrediting organization per requirements. For ACGME programs,

6. If the accrediting organization does not approve the nominee, a new nominee must be reviewed and approved according to process above.

Administered By:

A handwritten signature in black ink that reads "Phil Byrne". The signature is written in a cursive, flowing style.

Phillip D. Byrne, EdD
Associate Dean of Graduate Medical Education