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THE ROLE OF THE RESIDENCY COORDINATOR

by

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Introduction

Managing a radiology residency program is a challenging occupation. In many programs the coordinator is the only member of the residency program team whose time is devoted 100% to the program. Although coordinators at smaller programs may also have non-residency program duties, most programs now have a full-time residency coordinator due to the increasing scope and complexity of program requirements and documentation. In recent years as clinical duties have increased for most program directors, the coordinator is often the person with the most global view of the program, including resident concerns, approaching deadlines, changes in Residency Review Committee (RRC) and American Board of Radiology (ABR) requirements that need to be implemented, and upcoming changes in institutional policies.

The coordinator establishes the schedule of program office activities, prioritizes program-related tasks, and ensures that the program director is aware of important deadlines related to program activities. As these duties imply, the rank of program coordinator is a managerial position, and should be clearly stated as such in the hiring documents originating from human resources.

Communication and Interpersonal Skills

Highly developed communication and interpersonal skills are a vital part of being an effective program coordinator. The coordinator is the front line representative of the program and needs to represent the program effectively and professionally. One of the coordinator's primary functions is to serve as a liaison: between program director and residents, between program director and chief residents, between residents and faculty, and between program director and institutional GME (graduate medical education) personnel. The coordinator is usually the first person a prospective residency applicant communicates with when requesting information about the program, and is usually the first person to greet a residency candidate arriving to interview for the program.

Organizational Skills

Equally as important as communication skills are organizational skills. The myriad of tasks to be completed and the number of organizations and agencies requesting information requires a highly developed ability to prioritize. The coordinator must identify those requests that should be addressed immediately and those that are less urgent. Maintaining flexibility is important, as priorities can change on a daily basis.

In addition to the ability to prioritize responsibilities, organizational skills are necessary to track the ongoing activities of the program office and to maintain accurate and easily retrievable records of resident training, certification, conference attendance, and resident evaluation and review.

Data Collection and Reporting

Data collection is an integral part of the coordinator's function. Accurate records of resident rotations must be maintained indefinitely. A sophisticated database should be designed and implemented for this purpose. Many programs are purchasing residency program management software to assist with data collection and program administration. In addition to the program's own records, many outside organizations require annual reports from the residency program. GME Track, administered by the American Association of Medical Colleges, and The American College of Radiology (ACR) require annual reports of the current resident census. In addition, professional societies such as the Radiological Society of North America (RSNA) and the Association of Program Directors in Radiology (APDR), request information on current residents in order to offer them free or reduced memberships or subscriptions to their journals and to send other information of interest to residents in training.

One of the most important aspects of data collection and reporting is the process of certifying resident training for the ABR. Programs must submit detailed records of resident training, including rotations completed, dates of rotations, and dates of all leave time taken, to the ABR before a resident can be approved to take the ABR examinations. Generally the ABR submits certification forms to programs in December for completion.

The coordinator should be aware that most communications from the ABR, ACR, RSNA, and other organizations regarding residency matters are addressed to the program director. These could include registration materials, reports to submit, announcements of resident award, and other requests for information that are primarily completed by the coordinator. Frequently these communications contain deadlines, and, if they are requesting on line reporting, user ID's and passwords to their websites. Therefore, if the coordinator does not have direct access to the program director's mail, a system for appropriate and timely distribution of this mail to the coordinator must be implemented to insure efficient operation of the program.

Accreditation

As part of the accreditation process for all residency programs, the RRC for Radiology will periodically schedule program site visits. Usually the program is notified 3-4 months in advance.

Preparation for these site visits is a major undertaking and is almost invariably managed and overseen by the residency coordinator. The coordinator should review the program information form (PIF), prepare a list of needed information and the source of that information, schedule dates for completion, and call a meeting of all personnel who will be involved in the site visit. It is important, even critical, to allow ample time for full and accurate completion of the PIF and prompt submission. The coordinator will also arrange the schedule on the day of the site visit, usually after receiving instructions from the site visitor.

It should be noted that preparation for impending site visits can be minimized considerably if the coordinator regularly reviews and updates the PIF forms, preferably annually. These forms are posted on the ACGME website (<http://www.acgme.org>). Continually maintaining up-to-date information alleviates much of the stress of preparing for a scheduled site visit.

Resident Recruitment

A major activity of the residency program is recruitment of new residents, and the coordinator often organizes all aspects of this process. Throughout the year prospective applicants request information about the program. All programs are advised to have their program information posted on a website. Many programs have ceased producing printed materials and rely solely on their websites to disseminate information about their programs.

Recruitment begins in earnest when the Electronic Residency Application Service (ERAS) begins accepting applications in mid-August each year. The coordinator should monitor ERAS regularly and when the volume of applications increases, ERAS should be downloaded once or twice per day. Procedures for the review of applications and selection of candidates for interview should be worked out with the program director. Many coordinators have some responsibility for initial screening.

The coordinator will be primarily responsible for scheduling candidates for interview, as well as arranging faculty interviews, resident hosts, tours, and any other activities planned for the candidates. The coordinator will also oversee the preparation of information packets, CD's or other materials given to interviewees. After the interview, the coordinator may send follow-up letters to candidates. Candidates often contact the program for additional information after their visit, and sometimes may request a second visit to the program. The coordinator will often make these arrangements.

The coordinator will also submit any quota changes to the National Residency Matching Program (NRMP) and will input the match list on the NRMP website. Additional information regarding ERAS, the NRMP, and the recruitment process is discussed in chapter one.

Evaluation Process

The resident evaluation process is complex and multi-faceted. Most programs require supervising faculty to complete an evaluation form at the conclusion of each resident rotation. In addition, the RRC for Radiology requires that the program director meet individually with each resident twice per year to review resident performance. Once a year the resident's procedure

log must be reviewed. These reviews should be documented in the resident's file. Another aspect of resident evaluation is the annual Resident In-Training Examination sponsored in February each year by the ACR. Registration materials for this exam are generally distributed to programs in the fall. Finally, the RRC also requires that residents be given the opportunity to anonymously evaluate both the program and the faculty. The coordinator is often primarily responsible for the administration of all these evaluation activities.

Appointment Process and Credentialing

The process of appointing residents to the institution's house staff is the focus of most of the springtime activity in the residency office. Concurrent to this activity is the process of terminating graduating house staff. A myriad of forms must be completed in order for residents to be granted hospital privileges. The coordinator must insure that state medical licensing board requirements are fulfilled and that payroll forms are processed for incoming house staff. There are so many related functions to processing house staff changes for the new academic year that a checklist is often helpful to insure that nothing is overlooked. The checklist would include such things as ordering pagers, radiation dosimeters and lab coats; arranging orientation, and notifying all participating institutions in the program of new incoming and outgoing house staff. At the same time, the coordinator is also ordering certificates and arranging activities for graduating residents, such as a graduation banquet.

Credentialing of present and former residents is an ongoing task that occurs throughout the year. State medical boards, hospitals, radiology practices, and other agencies require certification of residency training for new hires. The coordinator should maintain an accurate, easily accessible database in order to complete these forms as expeditiously as possible. In addition, incoming residents often require completion of medical student loan deferment forms, mortgage loan forms, and other documentation of their residency status. Preparation of a few standard form letters can significantly reduce the time required to process these requests. Note that the processing of many forms can be expedited if the coordinator is a notary public.

Conferences and Teaching Materials

There are several activities related to the education of the residents that normally fall within the coordinator's domain. Resident teaching conferences must be held on a regular basis, and the scheduling and coordination of these must be managed. A file of conference schedules should be maintained as part of the residency program records. Frequently the coordinator is also responsible for the organization of the resident library and teaching materials, as well as ordering new educational materials.

Distribution of Schedules and Information

The coordinator is primarily responsible for the distribution of all schedules generated by the program. These will include schedules of resident rotations and assignments, call schedules, vacation and leave schedules, and conference schedules. Other specialized schedules, such as board review schedules, may be needed occasionally. Files of all schedules should be

maintained in the program office. They are used for credentialing, preparation of accreditation information forms, board exam certification, and many other purposes.

Electronic mail (e-mail) is becoming the preferred method of distribution of many schedules. The generation of hard copy schedules is declining, and residents should be strongly encouraged to check their e-mail regularly. Communication by e-mail can greatly reduce the time expended on these routine matters, and also diminishes the need to page residents engaged in clinical activities.

Resident Research

Residents involved in research may occasionally require the assistance of the coordinator. Activities could include preparation of manuscripts and coordination of travel to meetings. In addition, there are two national research programs that the coordinator should take primary responsibility for administering for the program. First is the Introduction to Research program sponsored by the RSNA, Association of University Radiologists (AUR) and the American Roentgen Ray Society (ARRS). Nominations are submitted annually, and the coordinator should insure that the program director nominates a resident for this program. The second program is the annual Roentgen Resident/Fellow Research Award sponsored by the RSNA -. When the call for nominations is received, the coordinator should follow up to insure that the appropriate paperwork is submitted from the program.

Budget and Payroll

The coordinator may perform many functions related to the financial management of the residency program. In most programs a regular payroll or report of house staff assignments is submitted to the institution. It is imperative that this report be accurate as it will be used for a number of purposes by the institution, not the least of which is government reimbursement.

Many programs have a resident education fund, and it will be the coordinator's responsibility to process expenditures from these funds. The coordinator may also be required to submit an annual budget for the program to departmental management. Armed Forces Institute of Pathology (AFIP) registrations and expenditures must be processed throughout the year. Finally, the coordinator may assist in the preparation of requests for additional house staff funding to institutional officials.

Coordination of Resident Functions

Many coordinators are called upon to organize various functions on behalf of the program during the year. These could include a reception or function for medical students interested in specializing in radiology and social functions for the residents, such as holiday parties or graduation ceremonies. Often these expenses are governed by strict institutional policies. Therefore, a departmental policy is recommended and a budget should be set for these activities.

Communications with Societies and Organizations

Throughout the year many organizations and agencies will contact the program office for information about the residents. Some of these reports are mandatory, such as GME Track and the ACGME WebADS system. Requests from official radiological societies, such as the RSNA, ARRS, APDR, ACR, and ABR need to be processed. However, many other requests are received from such sources as physician recruiting agencies, military recruiters, former residents in practice seeking new partners, marketing firms selling products such as books and software, and other commercial agencies. The program should develop a policy for the handling of such requests and the release of information about the residents to such organizations.

The Association of Program Coordinators in Radiology (APCR) meets annually in conjunction with the annual meetings of the Association of University Radiologists and the Association of Program Directors in Radiology. Membership in the APCR and attendance at the annual meeting are excellent ways for coordinators to interact with fellow coordinators, learn about upcoming changes in program requirements, and expand their knowledge base regarding program administration. In addition, the National Center for the Evaluation of Residency Programs (NCERP) holds an annual workshop for radiology program coordinators which addresses a wide variety of topics related to the administration of a residency program.

Annual Residency Program Cycle

In a residency program, the focus is constantly changing. Every month brings new challenges. Planning ahead and knowing what's coming next eliminates surprises, last minute crunches, and reduces stress for both the coordinator and the program director (not to mention the residents!). Outlined below is an approximate time line for the annual cycle of a residency program.

JULY:

- July 1 is the beginning of the academic year in all graduate medical education programs and is the day the majority of new residents begin their residency training.
- Assist with departmental orientation and training in information systems.
- Process requests for information about the training program.
- Process loan deferment forms, most of which are due this time of year.
- Update trainee information for organizations requesting it (ACR, RSNA, APDR).
- Input current resident and fellow data into GME Track.
- Prepare summaries of resident training for each resident who just graduated (ACGME requirement). Place in their permanent files.
- Remainder of month: assist new house staff in their transition into the program.

AUGUST:

- The primary focus this month is processing requests for information about the training program and sending out recruitment materials.
- ERAS opens mid-August. Install ERAS software on PC's of all staff who will be using it. Work with information systems personnel to be sure ERAS is installed and operating properly.
- Organize event for senior medical students interested in radiology and prepare materials for students seeking radiology residency.
- Current residents are preparing for written Board exams. Extra conferences may need to be scheduled.
- Submit match quotas to NRMP.
- Update program information in Web ADS (Web-based Accreditation Data System).

SEPTEMBER:

- Residency applications begin to arrive. Download ERAS every day. Establish procedures with program director for review and screening of applications. Set up local data fields on ERAS.
- Late September or early October: American Board of Radiology written examinations.
- September-October: optimal time for semiannual resident reviews with program director.
- Update form letters used in recruitment and prepare enclosures for interview confirmations.
- Assemble packets or materials to be distributed to residency candidates.
- Order supplies and make other advance preparations for the coming interview season.

OCTOBER:

- The majority of residency applications are received in October. Many programs have late October or early November deadlines.
- Determine interview dates.
- Orient interviewing faculty to ERAS.
- Begin to send out invitations to interview.
- Resident selection committee may meet around this time to plan upcoming interview season.
- Registration for ACR Resident In-Training Exam in February.

NOVEMBER:

- Dean's letters are released November 1. Complete review of residency applications during November.
- Many applicants will be calling to find out their status and whether they will be offered an interview.
- Interviews of residency candidates begin.
- Notify faculty, residents, and other appropriate personnel in department that interviews are underway for the next several months.
- Coordinate scheduling faculty to give interviews. Coordinate scoring of applicants.
- Assist interview committee with applicant information, ERAS, or other recruitment-related activities.

DECEMBER:

- RSNA meets in Chicago in early December. May not want to schedule interviews during this time.
- Use RSNA break to catch up and prepare schedules for upcoming interviews.
- Interviews continue.

JANUARY:

- January is generally the busiest interview month.
- Coordinate "second look" visits from applicants.
- Send follow-up letters to interviewees.
- Collect final scores and comments from interviewers and residents.
- Register the program for ERAS for the following year.
- Note deadline for match quota changes.

FEBRUARY:

- Coordinate match list. Many applicants will be contacting the program in early February.
- Enter match list on NRMP web site.
- Mid-February: ACR In-Training Exam.

MARCH:

- Early March: The National Center for Evaluation of Residency Programs holds an annual workshop for radiology residency program coordinators.
- Mid-March: Match Day! Results of the match are posted on the NRMP web site—an exciting day in a residency program.
- Begin appointment process for new house staff. Send out packets with necessary forms and information.
- Reappoint returning house staff.
- Make a checklist of all tasks that need to be completed for incoming and outgoing house staff. Note the target date for completion. This can be very helpful as it is easy to overlook something.
- Revise recruitment materials for next recruitment year.
- Update website with current information on training programs, deadlines, contact information, and match numbers.
- Update database with house staff information for the following year. Distribute information on new house staff to pertinent institutional personnel as needed.
- March-April is a good time for semiannual resident reviews with program director.

APRIL:

- Order certificates for graduating house staff.
- Process new house staff appointments.
- Order books, lab coats, film badges, and other items for new house staff.
- Results of ACR In-Training Exam are received. Distribute to residents.
- Process new house staff appointments.
- The Association of Program Coordinators in Radiology (APCR) APDR, AUR and American Association of Academic Chief Residents in Radiology (A3CR2) meet concurrently.

MAY:

- ABR oral examinations occur.
- Preparation of annual resident rotation schedule.
- Process termination paperwork for graduating house staff.
- Plan events for graduating house staff.
- Plan orientation schedule for incoming house staff.

JUNE:

- Finalize and distribute orientation program for incoming house staff to all participants.
- Reserve conference rooms, caterer, etc. as needed
- Graduation ceremony for graduating house staff.
- Check out graduating house staff. Collect forwarding addresses, keys, etc.

