

<b>Graduate Medical Education Policy</b>	Faculty Appointment and Removal
<b>Facility/Sponsor</b>	CMC/GMEC
<b>Policy Origin Date</b>	December 2019
<b>Revision Date</b>	January 2026

## **PURPOSE**

Faculty members are a foundational element of graduate medical education. As the Sponsoring Institution, Carilion Medical Center is committed to ensuring faculty members involved in residency and fellowship training are appropriately qualified, selected, and supervised. The purpose of this policy is to establish fair and transparent processes for faculty appointment, periodic review, and removal, in compliance with the Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirements and Common Program Requirements.

## **SCOPE**

This policy applies to all Accreditation Council for Graduate Medical Education (ACGME), Council on Podiatric Medical Education (CPME), and Commission on Dental Accreditation (CODA) accredited graduate medical education programs sponsored by Carilion Medical Center (CMC). The policy further applies to all full-time, part-time, volunteer, physician, and non-physician faculty participating in accredited graduate medical education programs across all training sites.

## **DEFINITIONS**

**Faculty:** refers to the entire teaching force responsible for educating residents and fellows. The term “faculty,” including “core faculty,” does not imply or require an academic appointment.

**Core Faculty:** designated faculty with a significant role in teaching and supervising residents/fellows, having documented qualifications, and devoting substantial time to educational/administrative duties, not just direct patient care, to ensure a robust learning environment for trainees

**Non-Core Faculty:** faculty members who are involved in teaching or supervision of residents and fellows and are not designated as core faculty.

**Program Director:** physician or qualified individual designated by the institution, registered with the appropriate accrediting body, with responsibility for educational and administrative oversight of the program.

**Review Committee:** a group composed of volunteers that sets recognition standards, provides peer evaluation of Sponsoring Institutions or programs to assess the degree to which these comply with the applicable published recognition requirements, and confers a recognition status on each Sponsoring Institution or program with regard to substantial compliance with those requirements.

## **PROCEDURE**

1. Faculty Administration
  - a. Per ACGME, there must be a sufficient number of faculty members with competence to instruct and supervise all trainees. Specialty-specific Review Committees may further specify.
  - b. The Program Director is responsible for the educational program and all educators. Program Directors maintain ultimate authority to approve and remove physicians

and non-physicians as faculty members at all participating sites, including the designation of core faculty members.

- c. Program Directors must develop and oversee a process to evaluate faculty candidates prior to approval. See Faculty Evaluation Policy.

## 2. Faculty Responsibilities

- a. Faculty members' responsibilities include but are not limited to the following. The Review Committee may further specify additional faculty responsibilities.
  - i. Be role models of professionalism
  - ii. Demonstrate commitment to the delivery of safe, high-quality, cost-effective, patient-centered care.
  - iii. Demonstrate strong interest in the education of residents, including devoting sufficient time to the educational program to fulfill their supervisory and teaching responsibilities.
  - iv. Administer and maintain an educational environment conducive to educating residents.
  - v. Regularly participate in organized clinical discussions, rounds, journal clubs, and conferences.
  - vi. Pursue faculty development designed to enhance their skills at least annually:
    - 1. as educators and evaluators;
    - 2. in quality improvement, eliminating health care disparities, and patient safety;
    - 3. in fostering their own and their residents' wellbeing; and,
    - 4. in patient care based on their practice-based learning and improvement efforts

## 3. Faculty Qualifications

- a. Faculty members must have appropriate qualifications in their field and hold appropriate institutional appointments. The Review Committee may further specify.
- b. Physician faculty members must have current certification in the specialty by the board in which they are trained, or possess qualifications judged acceptable to the Review Committee.
- c. The Review Committee may further specify additional qualifications and/or requirements regarding non-physician faculty members.
- d. Core faculty members must complete the annual ACGME Faculty Survey.
- e. The Review Committee must specify the minimum number of core faculty and/or the core faculty-resident ratio.
- f. The Review Committee may further specify either the requirements regarding dedicated time and support for core faculty members' non-clinical responsibilities related to resident education and/or administration of the program, or may further specify the requirements regarding the role and responsibilities of core faculty members including both clinical and non-clinical activities, and the corresponding time commitment required to meet those responsibilities.
- g. All faculty must have a faculty appointment with Virginia Tech Carilion School of Medicine.

Designated Institutional Official	Reviewing Committee	Date Approved
Donald Kees, MD	GMEC	December 17, 2019
Arthur Ollendorff, MD	GMEC	March 21, 2023
Arthur Ollendorff, MD	GMEC	January 20, 2026