

YALE-NEW HAVEN MEDICAL CENTER (YNHMC)

POLICIES AND PROCEDURES

Subject: Educational Resources Committed to Pediatric Anesthesiology

Policy #: I.010

Effective Date: July 1, 2010

Distribution: Accredited and GMEC Approved Programs

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Revision Date:

Introduction:

YNHMC recognizes that Pediatric Anesthesiology is a multidisciplinary activity. The ACGME mandates that there be an institutional policy governing the educational resources committed to the pediatric Anesthesia program. This is intended to assure cooperation of all involved disciplines and to provide a high level of education to all of the disciplines. The Office of GME, the Designated Institutional Official (DIO) and the GMEC are responsible for coordinating interdisciplinary requirements and assuring appropriate and fair processes which govern the allocation of resources for GME programs. Thus, a policy is established to define institutional responsibility for the coordination of interdisciplinary educational requirements of trainees, and to ensure compliance with the specific institutional and program requirements.

In addition to the current policy starting new programs, the GMEC will give special consideration to existing programs when a department requests a new program that potentially could compete for limited clinical or other educational resources.

If programs report difficulties in the distribution of resources committed to similar or competing training, the DIO will meet with program leaders to assess the distribution and to report these findings to the GMEC, which will recommend corrective action.

Policy:

1. The Anesthesia and Pediatric Anesthesiology program directors are expected to work in a cooperative fashion
2. The DIO and the GMEC will monitor the educational resources of each of the programs through the annual report of the Program Director, the annual resident survey from the Office of GME, and the Internal Review process.
3. If imbalances appear to have arisen in the distribution and utilization of resources, either between these programs or between other programs, the DIO will meet with the relevant

Program Directors to affirm and assess the perceived imbalances and to recommend possible corrective action if affirmed.

4. The DIO will report these findings to the GMEC so that recommendations can then be forwarded to the appropriate institutional officials.
5. The GMEC will discuss the distribution of resources to training programs at the time of the Internal Reviews if appropriate.
6. Any request for an increase in resident/fellow complement by any program, or for the establishment of a new program, must be evaluated for the potential impact on compliance with institutional and RRC-specific requirements of all the programs using that resource.