

**Title:** Designated Institutional Official Responsibilities

**Reference(s):** [ACGME Common Program Requirements](#) (CPR, focused revision effective July 1, 2020), [ACGME Institutional Requirements](#) (IR, July 1, 2021)

## I. Purpose

- A. The purpose of this policy is to define the responsibilities of the Designated Institutional Official in Accreditation Council for Graduate Medical Education (ACGME)-accredited programs at the University of Texas Rio Grande Valley (UTRGV) School of Medicine (SOM). Assessing resident performance, providing useful feedback in a timely manner, and conducting and documenting meaningful evaluations are essential elements of graduate medical education (GME).

## II. Definitions

- A. Sponsoring Institution (SI): Residency and fellowship programs accredited by the ACGME must function under the ultimate authority and oversight of one Sponsoring Institution. Oversight of resident/fellow assignments and of the quality of the learning and working environment by the Sponsoring Institution extends to all participating sites. [IR: I.A.1.]
- B. Designated Institutional Official (DIO): The individual who, in collaboration with a Graduate Medical Education Committee (GMEC), must have authority and responsibility for the oversight and administration of each of the Sponsoring Institution's ACGME-accredited programs, as well as for ensuring compliance with the ACGME Institutional, Common, and specialty-/subspecialty-specific Program Requirements. [IR: I.A.5.a)]
- C. Governing Body: The single entity that maintains authority over and responsibility for the Sponsoring Institution and each of its ACGME-accredited programs. [IR: I.A.6]
- D. Resident: Any physician in an ACGME-accredited graduate medical education (GME) program, including residents and fellows.
- E. Program: Any accredited GME program sponsored by the UTRGV SOM.

## III. Policy

- A. **DIO Responsibilities include (but are not limited to) the following:**

- a. Maintain current knowledge of and compliance with ACGME Institutional, Common, and specialty-/subspecialty-specific Program Requirements;
- b. Document the SI's commitment to GME by indicating in writings the GME mission; and, commitment to GME by ensuring the provision of the necessary administrative, educational, financial, human, and clinical resources. This statement must be reviewed, dated, and signed at least once every five years by the DIO, a representative of the SI's senior administration, and a representative of the Governing Body [IR I.A.7., I.A.7.a-b)];
- c. Participate as a voting member in GMEC [IR I.B.1.a).(1)];
- d. Annually submit a written executive summary of the AIR to the Sponsoring Institution's Governing Body. The written executive summary must include: (1) a summary of institutional performance on indicators for the AIR; and, (2) action plans and performance monitoring procedures resulting from the AIR [IR I.B.5.b)];
- e. Approve program letters of agreement (PLAs) that govern relationships between each program and each participating site providing a required assignment for residents/fellows in the programs [IR I.A.5.b).(1)];
- f. Oversee submissions of the Annual Update for each program and the Sponsoring Institution to the ACGME [IR I.A.5.b).(2) and CPR II.A.4.a).(16)];
- g. Oversee the submission of applications for ACGME accreditation and recognition, requests for voluntary withdrawal of accreditation and recognition, and requests for changes in residency and fellowship complements, after GMEC approval [IR I.A.5.b).(3)];
- h. Prepare accurate and complete documentation for institutional self-studies and site visits;
- i. Review the annual program evaluation (APE) submitted by each accredited program [CPR V.C.1.e).(2)];
- j. Review and approve all program information forms and any documents or correspondence submitted to the ACGME by program directors [CPR II.A.4.a).(16)], including but not limited to:
  - i. Requests for data related to the program (such as encounter/case number, faculty, etc.);
  - ii. Program self-study documentation prior to their 10-year accreditation & other site visits [CPR V.C.2.a)];
  - iii. Exceptions requests regarding ACGME-mandated clinical and educational work hour limitations [CPR VI.F.4.c).(2)];
- k. Ensure that programs provide an educational curriculum as defined in the ACGME Program Requirements for the specialty/subspecialty;
- l. Cooperate promptly with requests by various regulatory bodies for information, documentation, etc.;
- m. Lead institutional involvement with the National Resident Matching Program (NRMP) and all other matching systems (SF Match, American Urological Association Residency Match Program, etc.) as well as with the Electronic Residency Application Service (ERAS); Texas Medical Board (TMB); and other entities; and
- n. Maintain effective communication with appropriate personnel of other institutions participating in Residency training.

- B. With respect to the DIO, SI Responsibilities include (but are not limited to) the following:**
- a. Ensure sufficient financial support, protected time, and resources to effectively carry out educational, administrative, and leadership responsibilities, both by the DIO and the GME Office [IR II.A.1. & II.A.3.]; and
  - b. Ensure that the DIO engages in professional development applicable to responsibilities as an educational and administrative leader [II.A.2.]