

2023 **AAMC GRA** Graduate Medical Education Leadership Competencies (GMELCs)

GROUP ON RESIDENT AFFAIRS
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

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AAMC Washington, D.C.

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Preface

The AAMC GRA represents institutional GME leaders who oversee GME quality, accreditation, administration, and financing in AAMC member medical schools and teaching hospitals. The GRA mission is to provide information, networking, and professional development programs to help members meet their responsibilities as GME leaders. Institutional GME Leadership Competencies (GMELCs) have been developed and maintained under the auspices of the GRA, as a dynamic, living compendium resource to be periodically updated with the changing GME and health care environments. As such, in 2019 the GRA Steering Committee charged the GMELCs Committee for maintenance and oversight of the GMELCs, including the 4th iteration of the GMELCs.

The goal of this monograph is to support the continuing development of current and aspiring institutional leaders of GME and to inform the academic medicine community about the myriad roles, functions, and professional contributions of its GME leaders. Building on the contributions of previous GMELCs work groups, the 2023 updated version has been informed by input from GME leaders across the continuum and has been specifically enhanced by the contributions of Julia Close and Heeyoung Han in the administration and analysis of the stakeholder survey. (See History and Development Process section). The Committee is grateful for all those who contributed ideas, critiques, and suggestions for the document and acknowledges the work of previous GMELCs Task Forces in developing the seminal framework upon which this document is founded.

THE GRA GME LEADERSHIP COMPETENCIES COMMITTEE, FALL 2023

Introduction

The environments of healthcare and GME continue to evolve rapidly. GME leaders are accountable for a wide range of responsibilities, including preparing learners for independent practice; clinical quality and patient safety; a learning and clinical environment characterized by diversity, equity and inclusion, and the well-being of the health care team, including residents and faculty. GME leaders are bound by a social contract and public accountability, positioning them uniquely at the intersection of clinical and educational pursuits. They play a prominent and significant role both within and outside their institutions. More than ever, today's GME leader must maintain an expanded sphere of influence and high level of integration with other strategic and operational leaders and professional groups.

Institutional GME leaders hold a variety of titles and roles, and function in a variety of settings and structures. Responsibilities extend to the educational, fiscal, and administrative health of the institution's GME enterprise; the institution's compliance with local, state, and federal laws and regulation; the support and development of residency program directors and coordinators; and the well-being of the residents and faculty. The role of the institutional GME leader includes a pivotal role in:

- · Educating various governing bodies about the value of GME and advocacy, both internal and external to the institution
- Defining and ensuring a healthy and inclusive clinical learning environment
- · Aligning GME resources and resident engagement with institutional mission(s), workforce, and societal needs
- Creating and monitoring a continuous educational improvement model

The way in which GME leaders lead and intersect in their environment is paramount. They must lead by example, embodying a leadership style that enhances GME's impact and fosters a culture of learning within and beyond the organization. They must demonstrate the ability to be a change catalyst and a persuasive communicator and to bridge multiple GME institutions and governance systems. GME leaders must influence and empower others, exercising authority often without control. Finally, they must balance multiple missions and institutional goals while ensuring the education and well-being of learners in the environment.

The GMELCs represent a compendium of competencies essential for excellence in institutional GME leadership roles and are intended to serve as a practical resource for GME leaders individually, for organizations, and for the GME community at large.

Summary of Competency Model

The GMELCs are organized around three Competency domains and one Essential Function domain:

Foundational Attributes:

Personal attributes and capabilities essential for high-performing GME leaders. They are the individual foundational characteristics that lead to success in the GME Leadership role and exemplify an effective role model and teacher to aspiring leaders.

Leadership Capabilities:

Leadership performance abilities that GME leaders must effectively demonstrate to be successful. They are the underlying leadership roles and abilities necessary to fulfill the mission of the institutional GME leader.

Knowledge and Skills:

Fundamental skills and knowledge essential to performing key functional and environmental aspects of the GME leader role. They are aligned to the Essential Functions and expectations of the institutional GME leader.

Essential Functions:

The range of activities and responsibilities that GME leaders are expected to successfully execute. They specifically define the profession and the outcomes expected by stakeholders. They are achieved through the integration of requisite Foundational Attributes, Leadership Capabilities and Knowledge and Skills, and are measured in terms of process and performance outcomes. Institutional GME leaders fulfill Essential Functions through their position of authority and through the work of teams.

GME Leadership Competency Domains

As portrayed in the graphic below, the Domains are interrelated and become increasingly specific to the progressive impact of institutional GME leaders. Proficiency in Leadership Capabilities and Knowledge and Skills builds upon Foundational Attributes. Integration of these competency domains enables successful execution of Essential Functions. While many of the Foundational Attributes are applicable to leadership roles outside of GME, these Leadership Competencies and Key Components represent those specifically required for success in GME leadership. The document is not intended to represent the entirety of leadership competencies. It is expected that individuals serving in GME leadership roles also achieve competency in other realms valued by their institutional setting, such as DEI, QIPS, medical education or clinical care.

Each Domain contains a number of defined Competencies or Functions delineated into Key Components or Key Responsibilities, described in terms of behaviors or outcomes. The Competency domains include a total of 22 Competencies and 91 Key Components. Essential Functions include seven Functions and 43 Key Responsibilities. While the Essential Functions domain is not a GME leader job description per se, we envision that outlining broad role functions and Key Responsibilities will help potential GME leaders better understand what the role entails and help current GME leaders educate others about the role. Individual items in this domain may be utilized to construct a job description. Functional Competencies in the Essential Functions Domain include suggestions for quantifiable outcome measures. An assessment instrument corresponding to each domain is available.

LEADERSHIP CAPABILITIES

KNOWLEDGE AND SKILLS

FOUNDATIONAL ATTRIBUTES

ESSENTIAL FUNCTIONS

Core GME Competencies and Essential Functions

Foundational Attributes	Leadership Capabilities	Knowledge and Skills
Emotional Intelligence Compelling Communication Professionalism/Values Driven Agility and Adaptability System Thinking and Focus Results Orientation	Delivering Education Systems Building and Enhancing Relationships Developing People Building and Leading Teams Driving Improvement and Innovation Strategic and Operational	Education and Learning Principles Health Care Industry and Health Systems Accreditation and Regulatory Requirement Human Resources and Legal Environment Teaming and Health Professions Education
Courage Commitment	Planning Organizational Proficiency and Agility	Clinical Learning Environment Business Skills/Acumen

ESSENTIAL FUNCTIONS

Obtaining and Maintaining Institutional and Program Accreditation Ensuring a Positive and Safe Learning Environment Integrating GME Effectively into the Environment Developing and Supporting GME Leaders, Faculty, and Staff Overseeing Operations: Monitoring and Measuring Results Working within the Larger Health Care Environment Innovating, Improving, and Learning

Uses of the GMELCs

These GMELCs reflect the range of current and emerging requirements for GME leaders and the expected outcomes they must achieve or guide others to achieve. Depending on the leader's specific role, the GMELCs may be seen as a menu, with some Competencies weighted more than others. For example, a user in a traditional Associate Dean for GME/DIO role may utilize all Domains and Competencies. A leader with a more defined role within their institution may focus on specific Competencies, selected Key Components or Functions as appropriate.

GME leaders who regularly use the GMELCs have found them highly useful for educating academic or hospital leaders about GME leadership expectations. Others have used the accompanying assessment instruments to help guide their personal professional development. Potential uses for the GMELCs include:

At the individual level

- · Individual self-assessment and practice-based learning and improvement
- · Formulation or assessment of GME leadership position descriptions. In particular, the Essential Functions Competencies and Key Responsibilities can be adapted as needed for this
- Ongoing performance/skill monitoring

At the organizational level

- · Educating academic or hospital leadership about the scope and nature of GME Leadership roles
- · Peer or 360-degree review-assessing overall effectiveness and integration of GME and of GME leaders
- · Cascading leadership competency development to other GME leaders
- Succession planning
- · Fostering internal collaboration and learning with other leader groups

At the GME community level

- Informing the AAMC GRA GME Leadership Development Certificate Program/other curricula
- · Informing and linking to other GME or healthcare leadership groups
- · Fostering partnerships for future professional development/ enhancements
- · Research



DEFINITION:

Personal attributes and capabilities essential for high-performing GME leaders. They are the individual foundational characteristics that lead to success in the GME Leadership role and exemplify an effective role model and teacher to aspiring leaders.

COMPETENCIES		
Emotional Intelligence		
Compelling Communication		
Professionalism/Values Driven		
Agility and Adaptability		
System Thinking and Focus		
Results Orientation		
Courage		
Commitment		



EMOTIONAL INTELLIGENCE

Definition: Personal attributes and capabilities essential for high-performing GME leaders. They are the individual foundational characteristics that lead to success in the GME leadership role and exemplify an effective role model and teacher to aspiring leaders.

Key Components:

- 1. Accepts personal responsibility for feelings, thoughts, and actions.
- 2. Accurately assesses strengths, opportunities for improvement, and the overall impact of personal behavior and influence in the environment; takes appropriate steps to improve or modify actions.
- 3. Consistently uses social awareness skills and strives for positive social interactions to establish trusting, collaborative, and effective relationships.
- 4. Empathizes with others. Maintains an open mind to diverse views and actively seeks different perspectives to enrich experiences.
- 5. Proactively executes effective strategies within both the internal and external environments; balances appropriate levels of influence and power to achieve goals and manage conflict.

COMPELLING COMMUNICATION

Definition: Conveying information, ideas, opinions, and solutions to individuals and groups in a way that facilitates action and influences results.

- 1. Presents relevant, targeted, accurate, and compelling evidence to influence mission, vision, and strategic planning goals.
- 2. Uses multiple and appropriate modalities to deliver clear, succinct, and accurate information.
- 3. Actively listens and uses appropriate language, terminology and tone to achieve audience understanding and intended results.
- 4. Demonstrates engaging and facilitative communication that stimulates thinking and creativity and fosters successful interpersonal and professional relationships.



PROFESSIONALISM/VALUES DRIVEN

Definition: Maintaining professional standards and practice; demonstrating a values-driven approach to responsible decision making, actions, and interpersonal relationships with others within the internal and external environments.

Key Components:

- 1. Fosters an environment of mutual respect and trust among colleagues and team members.
- 2. Considers carefully the impact of actions to create a positive effect on others; offers constructive guidance, encouragement, and support.
- 3. Role-models integrity, honesty, humility and personal responsibility.
- 4. Seeks to advance the profession through self-development and learning, and through sharing learning with others.
- 5. Actively seeks and incorporates feedback.

AGILITY AND ADAPTABILITY

Definition: Anticipating, adopting, and driving change; creating organizational "nimbleness."

- 1. Demonstrates personal flexibility and adaptability to new ideas.
- 2. Promotes a culture which encourages change and innovation; establishes vision and sets expectations for positive organizational change.
- 3. Encourages and rewards innovation, forward thinking, and risk-taking strategies; empowers individual change and learning.
- 4. Effectively applies situational leadership.



SYSTEM THINKING AND FOCUS

Definition: Creating and sustaining a system-level, "big picture," focus on defining and implementing GME strategic and operational goals, processes, and services.

Key Components:

- 1. Advocates planning and processes which promote broader organization and health system goals; avoids and discourages thinking in "silos."
- 2. Actively seeks to acquire system knowledge and to identify the interconnectedness and relationships of GME to the health care system and the community.
- 3. Uses analytical and contextual thinking skills to address difficult decisions and to assess the impact of decisions from multiple perspectives.

RESULTS ORIENTATION

Definition: Conveying information, ideas, opinions, and solutions to individuals and groups in a way that facilitates action and influences results.

- 1. Designs and communicates effective strategies and solutions to achieve desired measurable results.
- 2. Pursues and achieves goals and expected performance results.
- 3. Sets high standards of performance and improvement for self and others.
- 4. Holds self and others accountable for actions and results.



COURAGE

Definition: Acting with conviction, integrity, and informed risk to achieve vision while maintaining

Key Components:

- 1. Assesses situations effectively before taking action. Exercises discernment, patience, and wisdom in decision-making.
- 2. Demonstrates readiness to accept necessary risk and to inspire others to do the same.
- 3. Takes a bold stance and initiates definitive action when necessary.
- 4. Exercises diplomacy: uses appropriate, candid, and direct communication to express opinions and concerns or to confront issues.
- 5. Encourages and supports others to explore alternative viewpoints.
- 6. Owns mistakes and learns from them.

COMMITMENT

Definition: Exhibiting dedication and ownership for work and results; inspiring commitment in others.

- 1. Demonstrates passion for establishing and leading the GME mission, vision, and values.
- 2. Communicates and promotes commitment to goals; takes progressive action to achieve results.
- 3. Actively pursues strategies to motivate performance of self and others.
- 4. Demonstrates a commitment to personal well-being and promotes work-life integration.



DEFINITION:

Leadership performance abilities that GME leaders must effectively demonstrate to be successful. They are the underlying leadership roles and abilities necessary to fulfill the mission of the institutional GME leader.

COMPETENCIES

Delivering Education Systems

Building and Enhancing Relationships

Developing People

Building and Leading Teams

Driving Improvement and Innovation

Strategic and Operational Planning

Organizational Proficiency and Agility



DELIVERING EDUCATION SYSTEMS

Definition: Facilitating the design and measurement of educational processes and learning environments that support GME programs.

Key Components:

- 1. Sustains effective structures, technologies, programs, and consultative support for curriculum design, development, implementation and evaluation.
- 2. Ensures learning solutions that support overall program development and individual leader and staff development.
- 3. Designs monitoring and evaluation methods for the assessment of the effectiveness of programs and learning solutions.
- 4. Fosters interprofessional education and learning; promotes common language and platforms for learning across professions and disciplines.

BUILDING AND ENHANCING RELATIONSHIPS

Definition: Developing and using effective partnerships and professional relationships to accomplish GME and institutional goals.

- 1. Role models inclusion and cultivates diversity of thought, experience, backgrounds, skills and abilities.
- 2. Demonstrates positive interpersonal and networking skills to influence collaboration and support of GME from stakeholders and interdependent working relationships that positively affect GME.
- 3. Identifies and pursues internal and external partnerships and affiliations that can advance the vision and goals of GME.
- 4. Demonstrates the ability to manage interpersonal disagreements by facilitating solutions.



DEVELOPING PEOPLE

Definition: Supporting the development and performance of individuals as it relates to advancing GME mission, vision, and goals.

Key Components:

- 1. Informs and engages stakeholders regarding their roles and expectations in GME.
- 2. Sets clear performance goals and standards; inspires and coaches performance; rewards and recognizes excellence.
- 3. Promotes and supports the ongoing development of those within the GME enterprise.
- 4. Leads by example; serves as a role model to mentor and guide others involved in meeting the goals and objectives of GME.
- 5. Demonstrates and promotes the practice of self-reflection and the use of effective strategies to mitigate the effects of explicit and implicit bias.

BUILDING AND LEADING TEAMS

Definition: Gaining team commitment and synergy to achieve GME and institutional goals.

- 1. Recruits, engages, and develops a diverse talent pool for building team capacity and capability.
- 2. Establishes a shared GME vision among stakeholders.
- 3. Facilitates collaboration and alignment among the GME team and other operational units within and beyond the institution.
- 4. Optimizes diversity and inclusivity to enrich team performance.
- 5. Fosters and role models principles of teaming to achieve GME and institutional goals.



DRIVING IMPROVEMENT

Definition: Creating and sustaining a culture of continuous performance improvement and innovation.

Key Components:

- 1. Operationalizes continuous assessment, monitoring, and review of GME stakeholder expectations.
- 2. Maintains a comprehensive and systematic approach to performance improvement.
- 3. Establishes accountability for individual and organizational learning through continuous performance improvement and feedback.
- 4. Empowers innovation and rewards performance improvement efforts.

STRATEGIC AND OPERATIONAL PLANNING

Definition: Advancing the overall effectiveness and contribution of GME within the organization and the community at large.

- 1. Develops and translates a clear vision, mission, and strategic focus for GME within the overall educational and health systems environment.
- 2. Facilitates alignment of GME planning to institutional planning and workforce development.
- 3. Deploys an ongoing, systematic approach to assessing the roles, functions, and performance results of the GME enterprise.
- 4. Anticipates future needs and defines, prioritizes, and implements appropriate GME strategies and action plans designed to meet them.



ORGANIZATIONAL PROFICIENCY AND AGILITY

Definition: Adapting GME to changing organizational culture, structure, expectations and requirements; facilitating GME responsiveness to change.

- 1. Maintains current awareness and knowledge of organizational policy, business, and operational trends that affect GME and shape the framework of the educational mission.
- 2. Navigates and influences organizational politics, structures, and systems to position GME for success.
- 3. Acts as a catalyst for necessary change to maintain a positive alignment of GME amidst changing institutional, system, and community needs.
- 4. Effectively leads and manages through change and crisis.



DEFINITION:

Fundamental skills and knowledge essential to performing key functional and environmental aspects of the GME leader role. They are aligned to the Essential Functions and expectations of the institutional GME leader.

COMPETENCIES

Education and Learning Principles

Health Care Industry and Health Systems

Accreditation and Regulatory Requirements Human

Resources and Legal Environment Teaming and Health Professions Education

Clinical Learning Environment

Business Skills/Acumen



EDUCATION AND LEARNING PRINCIPLES

Definition: Maintaining high standards of educational development and practice.

Key Components:

- 1. Utilizes education and adult learning concepts in planning and designing programs and curricula.
- 2. Identifies and promotes appropriate use of education technology and methodology.
- 3. Applies methods to evaluate and measure educational effectiveness.
- 4. Maintains and applies knowledge of interprofessional education principles.

HEALTH CARE INDUSTRY AND HEALTH SYSTEMS

Definition: Understanding the overall health care environment and its contextual influence on GME.

- 1. Maintains current knowledge of health systems' organizational structures and delivery models.
- 2. Maintains expertise related to GME integration with clinical practice models, structures, and policies.
- 3. Continuously evaluates and reviews health industry and economic changes and the impact of GME on the local environment.
- 4. Identifies and evaluates the impact and value of GME for overall clinical operations, patient care and community benefit.



ACCREDITATION AND REGULATORY REQUIREMENTS

Definition: Maintaining proficient knowledge of the overall accreditation and regulatory environment affecting GME.

Key Components:

- 1. Demonstrates expertise in institutional and common program requirements of ACGME and other applicable GME accrediting bodies.
- 2. Applies an understanding of health care policy, including GME financing policy, to institutions and programs.
- 3. Effectively identifies and links health care accreditation, regulatory and compliance requirements to GME policies, practices and accreditation requirements.
- 4. Operationalizes the regulations of other organizations that impact GME: LCME®, NRMP®, ERAS®, ECFMG®, ABMS, FSMB, CMSS, and state licensing boards, etc.

HUMAN RESOURCES AND LEGAL ENVIRONMENT

Definition: Operating effectively within the human resources and legal environment.

- 1. Exercises working knowledge of educational law; human resource regulations, including employment, impairment, risk management, labor, discrimination and immigration law; licensing and credentialing laws, policies, and practice.
- 2. Collaborates effectively with human resources and legal experts.



TEAMING AND HEALTH PROFESSIONS EDUCATION

Definition: Organizing and integrating GME within the overall health professions education and clinical learning environment.

Key Components:

- 1. Applies a collaborative approach to interprofessional education, learning and practice.
- 2. Facilitates organizational awareness and strategies to promote teaming as an essential component of learning and safe, patient centered care.
- 3. Effectively integrates GME into the medical education continuum (UME-GME-CME).

CLINICAL LEARNING ENVIRONMENT

Definition: Sustaining a clinical learning environment that optimizes education and focuses on patient safety and high-quality cost-effective care.

- 1. Demonstrates a comprehensive understanding of the essential components of a safe and optimal culture in which to learn and practice.
- 2. Integrates the ACGME CLER pathways to ensure a safe and effective learning environment for trainees at all clinical sites.
- 3. Applies a working knowledge of quality improvement and patient safety principles and methodology.
- 4. Engages institutional leaders in improving the clinical learning environment.
- 5. Applies the fundamentals of scientific and research methodologies and the use of medical informatics to evaluate the impact or influence of GME on patient care, population health, and health care disparities.
- 6. Utilizes principles of well-being to advance an optimal learning culture.



BUSINESS SKILLS/ACUMEN

Definition: Applying effective business and operational strategies to provide oversight of the GME enterprise.

- 1. Exhibits sound financial management practices, including budgeting, forecasting, grant writing and reporting.
- 2. Engages in strategic planning; aligns with the overall institutional strategic and operational planning functions.
- 3. Creates consistent methods for measuring and communicating GME performance and value.



DEFINITION:

The range of activities and responsibilities that GME leaders are expected to successfully execute. They specifically define the profession and the outcomes expected by stakeholders. They are achieved through the integration of requisite Foundational Attributes, Leadership Capabilities and Knowledge and Skills, and are measured in terms of both process and performance outcomes. Institutional GME leaders fulfill Essential Functions through their position of authority and through the work of teams.

COMPETENCIES

Obtaining and Maintaining Institutional and Program Accreditation

Ensuring a Positive and Safe Learning Environment

Integrating GME Effectively into the Environment

Developing and Supporting GME Leaders, Faculty, and Staff

Overseeing Operations: Monitoring and Measuring Results

Working within the Larger Health Care Environment

Innovating, Improving, and Learning



OBTAINING AND MAINTAINING INSTITUTIONAL AND PROGRAM ACCREDITATION

Definition: Sustaining institutional and program accreditation and achieving high-quality performance outcomes.

Key Components:

- 1. Effectively performs or oversees performance of the functions of the DIO as prescribed by the ACGME.
- 2. Collaborates with the GMEC to exercise authority and responsibility for the oversight and administration of the Sponsoring Institution's programs and compliance with the ACGME's Common Program, Institutional, and Specialty-specific requirements.
- 3. Collaborates with the leadership at all clinical sites to ensure compliance with CLER standards.
- 4. Implements and sustains a systematic approach to measuring and monitoring the administration and performance of sponsored programs, including the special review process.
- 5. Applies assessment and tracking systems to define and implement improvements at the institutional level and to assist in program-level improvement.
- 6. Provides effective oversight of compliance with ACGME annual institutional and program reporting requirements, including the APE and WebADS updates.
- 7. Stays current with new or changing accreditation requirements and proactively defines action steps collaboratively with program directors and the GMEC.



Suggested outcome measures:

Institutional and program accreditation status; CLER visit reports; targeted institutional GME measures, results, and outcomes (for example, performance goal/action plan results/scorecards).



ENSURING A POSITIVE AND SAFE LEARNING ENVIRONMENT

Definition: Exercising administrative influence and authority to ensure that the Sponsoring Institution and its affiliated training sites create and sustain an educational and clinical learning environment focused on patient safety, quality, and well-being.

Key Components:

- 1. Advocates for and secures funding for sufficient institutional resources to support educational and clinical requirements and trainee- centered programs and services.
- 2. Establishes policies and assigns resources to support trainees in the work environment as required by the ACGME, including appropriate compensation and benefits, health and disability insurance, professional liability insurance, access to vacation, parental and personal leave, educational tools, and support services and systems.
- 3. Facilitates an integrated approach to meeting expectations of the CLER pathways as defined by the ACGME.
- 4. Defines and implements institutional GME policies and programs that foster an environment of learning, respect, diversity, equity, inclusivity and belonging, appropriate feedback, and professional interactions among learners and the health care team. Advocates for and pursues action to ensure a non punitive environment free from intimidation, retaliation, and learner mistreatment or neglect.
- 5. Serves as a resource to trainees, programs, and others for achieving culture change and innovation to support improvements in the learning environment.



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CLER visit reports; ACGME surveys; institutional assessments and surveys; institutional patient safety and quality metrics; number of Title IX or other complaints.



INTEGRATING GME EFFECTIVELY INTO THE ENVIRONMENT

Definition: Demonstrating the value of GME and aligning GME to the overall environment and the clinical enterprise of the Sponsoring Institution and affiliate sites.

Key Components:

- 1. Serves as GME principal interface and advocate to institutional governance, senior institutional leaders, and medical staff; represents GME to institutional forums and affiliate sites.
- 2. Aligns GME strategic planning and development with institutional strategic plans and initiatives. Creates and communicates a shared vision for GME among institutional governance, c-suite, and affiliate partners.
- 3. Facilitates and secures strategic linkages between the Sponsoring Institution and its affiliate sites to achieve educational and clinical outcomes that address health care disparities and positively affect population health.
- 4. Designs and implements operational structures and processes that optimally integrate GME and the clinical learning environment; cultivates opportunities for trainee engagement in appropriate institutional initiatives, including equity, quality and patient safety.
- 5. Fosters interprofessional learning and interprofessional team participation for residents and faculty.
- 6. Educates institutional leaders and staff about GME requirements and GME roles and functions; communicates and markets the GME enterprise to engage support for GME vision and goals.
- 7. Monitors, measures, and reports GME performance results as required by the institution, the ACGME, and other entities.



Suggested outcome measures:

CLER visit reports; ACGME surveys; performance metrics and scorecards; GME leader and staff turnover.



DEVELOPING AND SUPPORTING GME LEADERS, FACULTY, AND STAFF

Definition: Identifying and implementing strategies for ensuring competent, informed, educated, and high-performing GME program directors and other key GME leaders, faculty, and staff.

Key Components:

- 1. Enhances the value of the GMEC oversight process as an opportunity for professional development and dissemination of best practices; serves as a resource and/or mentor to program directors and others.
- 2. Identifies emerging GME leaders, program directors, educators, and others and creates opportunity for mentorship and career development; targets emerging leaders for succession to leadership roles; sustains an ongoing succession planning process.
- 3. Develops competencies and performance standards for program directors and others as appropriate to roles and functions; participates in selection of program directors with appropriate skills and competencies.
- 4. Contributes to program director annual performance evaluation; sets expectations for learning and development aligned to roles and functions.
- 5. Facilitates alignment of program director roles and responsibilities within overall duties and departmental roles; functions as a program director advocate.
- 6. Implements a systematic approach to assessing and prioritizing development needs of leaders and staff; creates opportunities for development that address identified needs.
- 7. Secures institutional and department support for professional development at local, regional, and national forums.



(\checkmark) Suggested outcome measures:

Program accreditation status; ACGME surveys; program scorecard metrics; program director recruitment and turnover; program coordinator recruitment and turnover; aggregate performance evaluation metrics; GME Office staff recruitment and turnover. Participation in and certification by national GME organizations (i.e. TAGME, AAMC GRA GME Leadership Development Certificate Program).



OVERSEEING OPERATIONS: MONITORING AND MEASURING RESULTS

Definition: Sustaining the resources and administrative structures and systems necessary for effective operations of the institution's central GME and program support functions.

Key Components:

- 1. Advocates for and secures adequate funding and resources for GME and for GME programs, including appropriate facilities, tools, information systems, data, and system support.
- 2. Oversees the functioning of the GME office, including hiring, supervising, developing and evaluating personnel.
- 3. Develops the GME operational budgets and apprises the GMEC and program directors of institutional budgets and resources.
- 4. Establishes processes, scorecards, and metrics for reporting and monitoring budget and operational performance.
- 5. Serves as a resource for program-level budgeting and operational effectiveness.



Suggested outcome measures:

GME scorecards; operational performance metrics and measures; budget performance metrics and measures.



WORKING WITHIN THE LARGER HEALTH CARE ENVIRONMENT

Definition: Monitoring and addressing external influences on GME; representing the GME institution and its programs within the larger health care and GME policy environment.

Key Components:

- 1. Manages GME across an integrated health system.
- 2. Oversees program and institutional interfaces with accrediting organizations and other GME affiliate organizations (for example, NRMP® and ECFMG®).
- 3. Monitors emerging policy at state regional, and national levels with potential impact on GME; collaborates with senior leadership to position the institution to optimize advantages or to mitigate negative impact.
- 4. Educates institutional and affiliate health care leaders about current and changing federal GME financing regulations.
- 5. Engages with professional groups and other forums to advocate for and advance GME.
- 6. Serves as institutional GME liaison to local, regional, or national forums.



Suggested outcome measures:

Status of accreditation and sanctions; professional interactions and appointments.



INNOVATING, IMPROVING, AND LEARNING

Definition: Fostering a culture of development, achievement, and professional contribution through innovating, improving, and continuous learning.

Key Components:

- 1. Models a commitment to personal and professional development.
- 2. Cultivates a culture of self-improvement and innovation through example.
- 3. Identifies and participates in professional development opportunities offered by GME professional associations or other leadership forums and groups.
- 4. Networks with GME or other leaders to foster continuing awareness of challenges and opportunities and to optimize learning from others.
- 5. Creates and conducts programs internally or externally through professional organizations to contribute to the learning of others.
- 6. Promotes and supports scholarly activity to advance medical education; engages personally in scholarly work to contribute new knowledge to the GME profession.



Suggested outcome measures:

Self-development planning; goal achievement; presentations, publications, and other scholarly work.

History and Development **Process**

Since 2004, the Institutional GMELCs have been maintained under the auspices of the AAMC GRA, which represents institutional GME leaders and promotes exemplary leadership for high-quality GME. Originally focused on the core competencies of the ACGME/DIO role, the GMELCs were viewed from their inception as an organic document. They were first revised in 2008. A GRA Core Competency Task Force was charged with a subsequent revision in 2015. The 2015 revision reflected expanding requirements for GME leaders and the evolution of the GME environment and were reorganized into four domains: Foundational Attributes, Leadership Capabilities, Knowledge and Skills, and Entrustable Professional Activities (EPAs). The 2015 GMELCs achieved widespread acceptance among the GME leadership community and formed the basis for the curriculum of the AAMC GME Leadership Development Certificate Program, as well as the GRA Annual Spring Meeting Program. In 2019, the Task Force was transitioned to a permanent GRA GME Leadership Competencies Committee.

The 2023 revision builds on the considerable work done by previous GMELCs work groups. In particular, the 2015 revision involved extensive research and engagement of the GRA membership and other stakeholders. Literature on various health care leadership models was reviewed. Stakeholder input was gathered about new and emerging roles and competencies for GME leaders. The GRA membership was surveyed electronically and interviews were conducted with program directors and institutional leaders, including hospital and health system CEOs, CMOs, deans, and quality and patient safety officers. Focus groups and other reviewers provided invaluable feedback about the final document. Building on this work and collective experience with practical application of the 2015 Competencies, the GMELCs Committee approached the 2023 revision in the following manner:

- Review of relevant literature since the 2015 revision
- GMELCs Committee review of the Four Domain Model
 - 4 step line-by-line review and edit of 2015 GMELCs by GMELCs Committee members
 - Initial review by member dyads/triads
 - · Initial all-committee group review
 - · Second all-committee group review
 - Final editorial review (following stakeholder input)
- Focus groups and other stakeholder input

We collected stakeholder feedback from multiple sources from December 2021 through January 2023, through consultation with the AAMC GRA GME Leadership Development Certificate Program team, multiple constituent focus groups and poster presentations at the 2021 and 2022 AAMC GRA and Learn-Serve-Lead meetings, 2022 ACGME Educational Conference, and an AAMC-sponsored webinar. An electronic survey was developed and administered to solicit additional input on the specific Competencies, Key Components, Essential Functions and Key Responsibilities, including how well they represent the essential knowledge, skills, and attitudes necessary for successful GME leadership. Input was solicited from a number of GME leadership organizations.

The GMELCs Committee utilized the above input to revise and refine the document. During the review process we learned that the GMELCs remain relevant and helpful to GME leaders. The following opportunities for improvement were identified:

- Competencies in DEI and leadership through crisis and change would benefit from further delineation. As a result, these competencies have been expanded and integrated throughout the document.
- Competencies related to business and finance have increased in importance. Upon review the GMELCs Committee found that the 2015 GMELCs included all the necessary competencies and skills related to business and finance; however, mastery of these skills remains a challenge area for many GME leaders. As such, these competencies remain in the document without substantial revision.
- · GME leaders would benefit from more direction on how the GMELCs might be put into practice. The level of specificity and detail of the key components was seen as both a strength and a barrier to use by some stakeholders. The format and narrative of this current version have been updated to simplify wording and provide more direction on how the GMELCs might be of use.
- The EPAs domain was not as uniformly utilized as the other three domains. As a result, the EPA domain was reconceptualized as Essential Functions of the GME Leader role writ large.
- · Finally, the document would benefit from simplification and condensation. This current version was thoroughly edited for reduced redundancy and simplified competencies wherever possible. The total number of Key Components and Key Responsibilities was reduced from 145 to 134.

Abbreviations

AAMC

Association of American Medical Colleges

ABMS

American Board of Medical Specialties

ACGME

Accreditation Council for Graduate Medical

Education

ADGME

Associate Dean for Graduate Medical Education

CEO

Chief Executive Officer

CLER

ACGME Clinical Learning Environment Review

CME

Continuing Medical Education

СМО

Chief Medical Officer

Council of Medical Specialties Society

C-TAGME

Certificate - Training Administrators of GME

DEI

Diversity, Equity, and Inclusion

DIO

Designated Institutional Official

ECFMG®

Educational Commission for Foreign Medical

Graduates®

EPA

Entrustable Professional Activity

ERAS®

Electronic Residency Application Service

FSMB

Federation of State Medical Boards

GME

Graduate Medical Education

GMEC

Graduate Medical Education Committee

GMELCs

GME Leadership Competencies

GRA

AAMC Group on Resident Affairs

LCME®

Liaison Committee on Medical Education®

NRMP®

National Resident Matching Program®

OIPS

Quality Improvement and Patient Safety

UME

Undergraduate Medical Education

WebADs

ACGME Accreditation Data System

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