

JCTSE Surgical Director of Education – Call for Applications

The newly organized Joint Council on Thoracic Surgery Education, Inc. (JCTSE) is seeking an ABTS-certified thoracic surgeon to serve in a half- to full-time position as its first *Surgical Director of Education*. Details of the requirements and expectations for this position are shown in the job description below. Interested applicants should mail or e-mail a cover letter (of no more than 2 pages) and curriculum vitae to the following address or e-mail address:

Irving L. Kron, MD
Chair, Search Committee
Surgical Director for Cardiothoracic Surgery Education
c/o The Society of Thoracic Surgeons
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The cover letter should summarize the applicant's thoughts about the challenges facing present day thoracic surgery resident and post-resident education and what approaches might meet these challenges. **The deadline for the submission of applications is July 31, 2008.**

Job Description

The Surgical Director of Education (SDE), hereafter known as the Surgical Director, is a compensated half to full-time position that will coordinate and facilitate educational efforts across the specialty of cardiothoracic surgery. The Surgical Director will direct and propose initiatives in thoracic surgical residency education in conjunction with the Thoracic Surgery Directors Association (TSDA), will assist in the coordination of thoracic surgical post-residency education, and will work for the Joint Council of Thoracic Surgery Education, Inc. (JCTSE), created by the American Association for Thoracic Surgery (AATS), American Board of Thoracic Surgery (ABTS), Society of Thoracic Surgeons (STS), and Thoracic Surgery Foundation for Education and Research (TSFRE). The major focus of the Surgical Director is improving CT surgical resident education, the development of innovative techniques for both resident and post-graduate education, and the redesign of the resident training paradigm. This redesign will inherently address the scope of practice of cardiothoracic surgery and the knowledge and content appropriate to cardiothoracic surgery, and will include methods for enhancing cardiothoracic educational methods and assessment of the effectiveness of these educational efforts. The redesign will address professionalism and communication skills as well as cognitive and technical ability. The Surgical Director should address the organizational structure and length of training in cardiothoracic surgery, develop templates for alternatives to the traditional general surgery followed by CT surgery residency, including the integrated 6-year residencies, and the combined 4/3 surgery/cardiothoracic surgery programs, make suggestions for possible other training algorithms. This position will collaborate with other specialty organizations, particularly those in general and vascular surgery, to improve and redefine pre-requisite and requisite curriculum in cardiothoracic surgery and to ensure that educational efforts are sufficiently flexible, coordinated, and forward-thinking that changes in medical technology and medical knowledge are anticipated and the educational response both promotes excellent patient outcomes and broadens the scope of practice of thoracic and cardiovascular surgery.

The position and activities of the Surgical Director and supporting staff will be funded by the JCTSE. The SDE will report to the Board of Directors of the JCTSE (BOD), will submit annual budget requests to the BOD for approval, and submit annual written progress reports to the JCTSE Board. The Surgical Director will chair the Joint Council for Thoracic Surgery Education Advisory Board, hereafter known as the Advisory Board, constituted of two representatives each from the AATS, ABTS, American College of Surgeons (ACS), STS, Thoracic Surgery Directors Association (TSDA), TSFRE, Thoracic Surgery Residents Association (TSRA), and *ad hoc* representatives from the Thoracic Surgery Residency Review Committee (RRC).

The Surgical Director should also address the exposure and recruitment of medical students and general surgery residents into the specialty of cardiothoracic surgery and should catalog programs that have successfully increased interest in students and residents to pursue careers in CT surgery.

The Surgical Director should help to develop and encourage postgraduate education in collaboration with the AATS, STS and others, to meet the needs of the practicing CT surgeon, especially the acquisition of new technology. The Surgical Director should work in collaboration with the ABTS to help diplomates to meet the requirements of Maintenance of Certification (MOC). The Director should increase the availability of methods by which CT surgeons acquire new technical skills, partnering with the specialty societies, individually developed courses, and industry.

The Surgical Director will need to be a collaborator, listener, informed resource, and conduit of information and be recognized and respected as a leader in CT surgery. The individual must be flexible, an advocate of change, and must be willing and able to take innovative approaches. This individual must keep the appropriate constituent organizations on track and informed, energized, and thus the Surgical Director must be a consensus builder.

ESSENTIAL DUTIES AND RESPONSIBILITIES

1. Ensures appropriate coordination and integration of cardiothoracic education from the exposure and recruitment of students, to the training of cardiothoracic surgery residents, and to the maintenance of certification and new skills training of cardiothoracic surgeons in practice.
2. Applies principles of knowledge management to maximize the use of technology to design, manage and deliver education programs.
3. Explores and recommends relevant new technologies, including web-based and simulation technologies to generate innovative and integrated educational programs.
4. Explores and develops relationships with other associations, learning organizations, foundations, and strategic business partners to support on-going and future educational initiatives, including the establishment of sources of funding for educational efforts
 - a. Industry
 - b. Private philanthropy

c. Non-profit Foundations

5. Enhances and facilitates the ability of committees, taskforces, and workgroups in sponsoring cardiothoracic surgical organizations to achieve their goals. Assists in developing new programs and coordination of postgraduate medical education efforts across the specialty.
6. Assists in assessing future educational needs that are aimed at improving patient care, patient safety, and quality outcomes for patients with cardiovascular and thoracic disease.
7. Develops education programs that maintain and enhance innovation in cardiothoracic surgery and the attractiveness of the specialty to highly capable medical students and general and vascular surgery residents.
8. Ensures that educational programs are presented in a variety of learning formats consistent with adult learning principles and optimal educational technologies.
9. Maintains relationships and collaborates with other associations and professional groups.
10. Fosters collaboration through effective communication, cooperation and conflict resolution.
11. Serves as curriculum resource and provides assistance to existing and developing CT residency programs.
12. Builds consensus on CT Surgery educational efforts by interacting with groups involved in existing educational efforts, including input to relevant committees of existing entities
 - a. Editorial board of ATS and JTCVS
 - b. Post-graduate education and program committees of STS, AATS, WTSA, STSA, GTSC
 - c. ABTS
 - d. Thoracic Surgery RRC
 - e. TSDA
 - f. ACS
 - g. Professional organizational in related disciplines (*e.g.*, ACC, AHA, ATA, ASCO, *etc.*)

TRAVEL

Travel for the Surgical Director will likely be substantial, including the AATS, STS, Southern Thoracic Surgical Association (STSA), Western Thoracic Surgical Association (WTSA), and meetings of the TSDA and ABTS. At times travel to other meetings in the U.S. and overseas may be required, including the American College of Surgeons, European Association for Cardiothoracic Surgery, etc.

REQUIRED COMPETENCIES

QUALIFICATIONS

A valid medical license in the United States, and certification by the American Board of Thoracic Surgery with experience as a practicing cardiothoracic surgeon in the United States for at least 15 years with significant experience in resident education.

Work Experience:

1. Experience and expertise in adult education, particularly in development of medical or health care educational programs
2. Demonstrated ability to design and develop innovative educational programs
3. Experience and expertise in CT Surgery education, preferably as Program Director or Associate Program Director of an ACGME approved cardiothoracic residency in the United States.
4. Ten years of experience developing and delivering cardiothoracic educational programs/services.
5. Experience utilizing knowledge management systems and technology to design, manage and deliver education programs.
6. Knowledge of and experience in ACCME, ACGME, and ABMS accreditation guidelines and ABTS certification process is highly desired.

Expertise in:

1. Medical and/or health care education programming
2. Adult learning principles
3. Integrating strategic educational initiatives with knowledge management systems and information technologies

Demonstrated success and abilities in:

1. Designing and developing innovative educational programming.
2. Translating knowledge management principles into integrated solutions and deliverables in an adult learning environment.
3. Building knowledge repositories using technology systems.
4. Leading and building consensus among constituent groups over which there is no direct authority.
5. Effectively engaging with funding sources to support educational efforts.

6. Developing educational content for new areas of educational focus or engaging CT surgeons in developing educational content.
7. Assessing educational needs, evaluating program outcomes, and measuring resident and practicing surgeon satisfaction.
8. Building successful relationships, collaborations, partnerships and/or affiliations with external organizations.
9. Managing multiple functions and group processes, including operational planning, resource allocation, budgeting, program evaluation, staff supervision and performance management.
10. Identifying talent and developing skills that result in the efficient and effective creation, sharing and use of knowledge and information.