



Graduate Medical Education Policy for New Program Approval, Program Closure, and Change in Program Size

June 2009

Purpose: To define the procedures necessary for the development and approval of new post-graduate training programs, the permanent change in the resident or fellow complement of an existing program, and the closure of an existing program.

Scope: This policy and procedure applies to all ACGME accredited programs sponsored by UMKC School of Medicine.

New Program Approval:

UMKC School of Medicine and the Office of Graduate Medical Education strongly support the development of new post-graduate training programs. Whenever possible, accreditation by the ACGME or other accrediting body is recommended.

1. **Review of Educational Resources.** As a first step in the creation of a new training program, the ACGME/RRC (or other appropriate organization) training program requirements for the specialty should be reviewed. For program accreditation, it is mandatory that the basic infrastructure required by the accrediting body—number and qualifications of faculty, clinical resources and experience, research facilities—be in place. If the specialty is lacking in any of these areas, this deficiency must be remedied prior to further proposal development.
2. **Financial Support.** Funds to support the salaries and benefits of the trainees must be identified. Several sources of funding are available and consultation with the Associate Dean for Graduate Medical Education may be useful at this point to review funding options and develop a strategy for ongoing, stable funding of the training program. A formal proposal to the Financial Advisory Committee of the GME Council is then submitted, including the following elements:
 - a. Program Specialty and Program Director
 - b. Proposed start date for the training program
 - c. Length of training period
 - d. Initial resident complement
 - e. Final resident complement (once program is entirely phased in)
 - f. Sites of training
 - i. Length of training at each site during each year of the training period
 - ii. Nature of the experience at each site (clinical, research, other)
 - g. Proposed funding for the program

The program director will be asked to attend the Financial Advisory Committee to discuss the proposal and answer questions of the committee members. Once the proposal has been reviewed, the committee has the option to approve the proposal, deny the proposal, or withhold a decision until financial resources can be confirmed. The sole purpose of FAC review is to confirm that sufficient and stable financial resources are available to allow for ongoing educational support.
3. **Proposal Development.** Once the core educational resources are in place and financial support for the program is approved, the new program application from the accrediting body must be completed (e.g. the Program Information Form—PIF, from the ACGME). The completed program application should be submitted to the Associate Dean for Graduate Medical Education for review and editing. Once in its final form it will be submitted to the GME Committee for review. The program director

will be asked to attend the GME Committee meeting to discuss the proposal. The GME Committee will consider the following issues during its review:

- a. Does the program meet the accreditation requirements for the specialty, including educational infrastructure, clinical and research resources, sufficient, well-trained, and supportive faculty?
- b. Is there any concern that the proposed program could adversely affect the training of residents or fellows in existing programs?

Upon careful review, the committee has the option to approve the program, deny the program proposal, or recommend proposal revision and resubmission.

4. **Proposal Submission.** Once approval of both the FAC and the GME Committee has been obtained, the application for new program may be submitted to the appropriate accrediting body.

Permanent Increase in Program Size:

The request for a permanent increase in the resident complement of a training program is handled in a manner similar to a new program proposal.

1. **Review of Educational Resources.** It is mandatory that the basic infrastructure required by the accrediting body—number and qualifications of faculty, clinical resources and experience, research facilities—be in place in a quantity sufficient to support the training of additional residents or fellows. If the current program is lacking in any of these areas, this deficiency must be remedied prior to further proposal development.
2. **Financial Support.** Funds to support the salaries and benefits of the additional trainees must be identified. Several sources of funding are available and consultation with the Associate Dean for Graduate Medical Education may be useful at this point to review funding options and develop a strategy for ongoing, stable funding of the larger training program. A formal proposal to the Financial Advisory Committee of the GME Council is then submitted, including the following elements:
 - a. Program Specialty and Program Director
 - b. Proposed start date for the increase in resident complement
 - c. Length of training period
 - d. Initial resident complement
 - e. Final resident complement (once increase is entirely phased in)
 - f. Sites of training
 - i. Length of training at each site during each year of the training period for the additional residents/fellows
 - ii. Nature of the experience at each site (clinical, research, other)
 - g. Proposed funding for the programThe program director will be asked to attend the Financial Advisory Committee to discuss the proposal and answer questions of the committee members. Once the proposal has been reviewed, the committee has the option to approve the proposal, deny the proposal, or withhold a decision until financial resources can be confirmed. The sole purpose of FAC review is to confirm that sufficient and stable financial resources are available to allow for ongoing educational support.
3. **Educational Justification.** The program director must submit a request for increase in program size to the GME Committee. The request should include the following elements:
 - a. Reason for planned increase in resident complement
 - b. Educational and clinical resources available to support the planned increase—if the program's accreditation criteria have specific criteria (e.g. faculty to resident ratios, clinical encounter numbers per trainee, procedural numbers per trainee, faculty research productivity per trainee) these must be submitted
 - c. Any change in the training program curriculum that will occur as a result of the increase in resident complement
 - d. Any potential adverse effect that the increase in resident complement could have on the educational experience of other trainees—either those in the same program or in different programs

The program director will be asked to attend the GME Committee meeting to discuss the proposal. Upon careful review, the committee has the option to approve the requested increase, deny the requested increase, or recommend proposal revision and resubmission.

4. **Proposal Submission.** Once approval of both the FAC and the GME Committee has been obtained, the request for increase in resident complement may be submitted to the appropriate accrediting body.

Decrease in Program Size or Program Closure:

It is recognized that it becomes necessary, at times, to decrease the size of a training program or completely close the training program. In this situation, it is the primary goal of UMKC School of Medicine to ensure that residents or fellows in the training program at the time of the change receive an ongoing, high quality education and clinical experience with as little interruption as possible. To this end, the following procedure is required:

1. Once it is known that a training program will either decrease the size of its resident complement or close, the Associate Dean for Graduate Medical Education must be notified immediately. It will be the Associate Dean's responsibility to notify the Designated Institutional Official (if different from the Associate Dean), the GME Committee, the School of Medicine, and the residents. This notification should be accomplished in a timely manner.
2. Whenever possible, a training program should be down-sized in a phased-in manner, allowing all current trainees to complete their education without transfer to another program or interruption of their training experience. Similarly, program closure should ideally occur at a time that would allow all current residents or fellows to complete their educational experience without transfer or interruption.
3. When a decrease in the size of a training program, or a program closure must occur in a manner that will not allow for all current residents to complete their educational experience at UMKC, it is the responsibility of the program director, Department Chairman, Associate Dean for Graduate Medical Education, and UMKC School of Medicine to assist residents in enrolling in an ACGME accredited program at which they may continue their education. This assistance will include letters of recommendation, the timely provision of training and employment records, and, at times, financial support for the ongoing training.

Closure of the Institution:

In the event that the School of Medicine would close or no longer sponsor graduate medical education training programs, a procedure similar to that outlined for program closure should be followed:

1. The Designated Institutional Official (DIO), GME Committee, and residents must be notified as soon as possible.
2. Whenever possible, training programs should be closed in a phased-out manner, allowing all current trainees to complete their education without transfer to another program or interruption of their training experience.
3. When institutional closure does not allow for all current residents to complete their educational experience at UMKC, it is the responsibility of the program director, Department Chairman, Associate Dean for Graduate Medical Education, and UMKC School of Medicine to assist residents in enrolling in an ACGME accredited program at which they may continue their education. This assistance will include letters of recommendation, the timely provision of training and employment records, and, at times, financial support for the ongoing training.

Follow-up Responsibility: Director, Graduate Medical Education Operations.

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