



New Programs, Complement Change and Program Closure Procedures

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

Scope: Procedure applies to all UMKC School of Medicine sponsored ACGME accredited programs.

Due to the institutional caps on the number of trainees in ACGME or other programs, it is necessary for the Sponsoring Institution to monitor the number of residents and fellows training through the system. Therefore, there are procedures that must be followed when requesting a new training program, an increase in program size (complement change), and/or when changing the current FTE of trainees at the clinical affiliates, and/or adding a new clinical site for the program. **It is imperative to contact the DIO as soon as one of these requests is considered.**

Prior to beginning the process, programs should strategize timing of requests considering ACGME Review Committee (RC) meeting dates, educational resources, and potential impact on other learners.

New ACGME programs require an application in ACGME ADS and may require a site visit prior to ACGME approval. In general, it may take at least six months to complete all aspects of the application prior to submission of an application. Applicants cannot be considered for a program until the program has been approved.

Application for new programs or requests for complement change of an existing program must be approved and signed by the Designated Institutional Official (DIO) before any changes can be submitted to an ACGME accredited specialty RC.

Early notification to the DIO of intention for these requests is necessary as the Financial Advisory Committee (FAC) and Graduate Medical Education Council (GMEC) do not meet monthly.

Procedure: Review and complete the appropriate request form for your program. Send completed form and all required attachments to the DIO.

The DIO will review requests. **Completed requests** will first be reviewed at FAC for financial approval. Once approved by the FAC, the request will be reviewed at GMEC for approval. Once approved by GMEC, accredited programs must work with ACGME RC to submit application(s) for final approval.

Requests for change in FTE at affiliates (including the addition of a new training site) require FAC institutional approval only. For ACGME accredited programs, if the proposed training site is a new participating site for the institution, GMEC and ACGME approval of the site will need to occur. Additionally, any time the block diagram changes for the program's curriculum, a new block diagram and description to update "major changes" section in the ACGME ADS is required to be completed by the program.



The PD (or Assistant/Associate PD) must be present at the FAC and GMEC meeting to answer any questions raised by the committees (a calendar invite will be sent for the meeting with a specific presentation time). If the program representative cannot attend the FAC or GMEC meeting when requested, consideration of the request will be tabled until the next meeting.

Financial Support (New program and Complement increase)

1. Funds to support the salaries and benefits of the trainees/additional trainees must be identified. 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 new training program/ complement increase. A formal proposal to the Financial Advisory Committee (FAC) of the GME Council (GMEC) is then submitted, including the following elements:
 - a. Program Specialty and Program Director
 - b. Proposed start date for the training program, or increase in resident complement
 - c. Length of training period
 - d. Initial resident complement
 - e. Final resident complement (once program/increase 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. The program director will be asked to attend the Financial Advisory Committee to discuss the proposal for the program, and answer questions of the committee members. Once reviewed, the committee has the option to approve, deny, or withhold a decision until financial resources can be confirmed. The sole purpose of the FAC review is to confirm sufficient and stable financial resources are available to allow for educational support and program sustainability.

Review of Educational Resources (New program and Complement increase)

1. As a first step in the creation of a new training program, the ACGME/Review Committee (RC) specialty specific program requirements should be reviewed. For program accreditation, it is mandatory the basic infrastructure required by the RC—number and qualifications of faculty, designated time and support for program administration, clinical resources and experience, research—be in place including to support an increase in complement. If the specialty is lacking in any of these areas, this deficiency must be remedied prior to further proposal development or complement increase.

New Program Approval: UMKC School of Medicine and the Office of Graduate Medical Education (GME) strongly support the development of new post-graduate training programs. Whenever possible, accreditation by the Accreditation Council for Graduate Medical Education (ACGME) is recommended.



1. **Proposal Development.** Once the core educational resources are in place and financial support for the program is approved, the new program application must be completed from the ACGME. The completed program application should be submitted to the Associate Dean for GME for review and editing. Once in its final form it will be submitted to the GMEC for review. The program director will be asked to attend the GMEC 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, deny, or recommend proposal revision and resubmission.

2. **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 specialty RC.

Permanent Increase in Program Size: The request for a permanent increase in the resident complement of a training program is submitted in a manner like a new program proposal.

1. **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 planned increase—if the program's accreditation specific criteria (e.g., faculty to resident ratios, clinical encounters per trainee, procedural numbers per trainee, faculty research productivity per trainee)
- c. Any change in the training program curriculum that will occur because 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, deny, or recommend proposal revision and resubmission.

2. **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 GME must be notified immediately. It will be the Associate Dean's responsibility to notify the Designated Institutional Official (DIO), the GMEC, 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 GME, 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 the School of Medicine would close or no longer sponsor graduate medical education training programs, a procedure like that outlined for program closure should be followed:

1. The 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 GME, and UMKC School of Medicine to assist residents in enrolling in an ACGME accredited program to 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.

Background: Original policy approved: 06/12/09; 05/02/18. Procedure updated 2/10/2026.

Administered By:

A handwritten signature in black ink that reads "Phill Byrne".

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