



## **GRADUATE MEDICAL EDUCATION COMMITTEE POLICY NO. 18**

A. SUBJECT: Reduction in Size/Closure of GME Training Programs

B: EFFECTIVE DATE: October 19, 2016(R)

C: REASONS FOR POLICY:

This policy establishes guidelines for Graduate Medical Education (GME) program reduction in trainee complement or closure of training programs in accordance with the Graduation Medical Education Committee (GMEC) oversight of the educational experiences in each GME programs.

D: POLICY STATEMENTS:

1. Reduction in Trainee Complement
  - A. Actions and procedures that may lead to reduction in GME Trainee complement include, but are not limited to:
    - Voluntary reduction due to decreased financial or educational resources to support adequate training in the program;
    - Non-voluntary reduction by the ACGME RC or other relevant accreditation bodies.
  - B. When reduction in Trainee complement is deemed necessary, the GMEC and individual programs shall make every attempt to reduce the Trainee Complement over a period of time.
2. Closure of a GME program
  - A. Actions and procedures that may lead to closure of a GME program include, but are not limited to:
    - Failure of the training program to comply with the accreditation requirements by Residency Review Committee (RRC) of the Accreditation Council for Graduate Medical Education (ACGME) or other relevant accreditation bodies;
    - Voluntary withdrawal of accreditation of the GME program
    - Failure of the training program to correct concerns and/or comply with recommendations of the GMEC based on the Annual Program Review or Special Review conducted by the GMEC;
    - Decreased financial or educational resources to support the training program;
    - Reallocation of positions among other GME programs;
    - No GME Trainees have matriculated into the program for six or more consecutive years.
  - B. When a GME program is deemed closed, the GMEC will issue of letter of notification to the program, the department chair, and/or its parent program when the program is a dependent subspecialty or sub-sub specialty program.
  - C. A GME program may seek the GMEC approval for re-opening after a period of 12 months following the effective date of the program closure.

3. GME Trainee Education in the Event of Trainee Complement Reduction or GME Program Closure
  - A. The Designated Institutional Official (DIO), GME Trainees, the program director, the department chair, and the GMEC will be notified by the Chief Executive Officer of the sponsoring institution as soon as possible when reduction of the Trainee complement or closure of one or more GME programs is deemed necessary.
  - B. Every attempt will be made to ensure that currently enrolled GME Trainees in the affected programs can complete their training in the current sponsoring institution.
  - C. If completing the program in the current sponsoring institution is not possible, the program director and the GME Office will assist displaced GME Trainees in securing an appointment to another training program in which they can continue their education/training.
  - D. If necessary, the Medical Center will continue stipend and benefits support until the end of the current appointment term or until the GME Trainee begins in a new program, whichever comes first.
  - E. The institution will protect remaining GME Trainees from inappropriate duty hours and service obligations resulting from reductions or closures.

Approved by: GMEC, July 2005

Updated: February, 2005

Updated/Approved by: GMEC, May 2, 200

Updated/Approved by GMEC – August 30, 2007

Updated/Approved by GMEC – March 15, 2010

Updated/Approved by GMEC-August 28, 2013

Reviewed/Revised by the GMEC Policy Subcommittee-October 11, 2016