



Substantial Disruptions in Patient Care or Education & Closure or Reduction in Size of a Program Policy

Purpose

In compliance with the ACGME Institutional Requirements, the Graduate Medical Education Committee (GMEC) must establish a written policy that addresses a reduction in size or closure of an ACGME-accredited program, or closure of the sponsoring institution. This process should be established to minimize the negative impact on trainees and to ensure the communication of these decisions as soon as possible.

The ACGME Institutional Requirements (2021) state:

- I.B.4.a).(6)** *GMEC responsibilities must include oversight of all processes related to reductions and closures of individual ACGME-accredited programs, major participating sites, and the Sponsoring Institution; and, (Core)*
- IV.N.** ***Substantial Disruptions in Patient Care or Education:** The Sponsoring Institution must maintain a policy consistent with ACGME Policies and Procedures that addresses support for each of its ACGME-accredited programs and residents/fellows in the event of a disaster or other substantial disruption in patient care or education. (Core)*
- IV.N.1. This policy must include information about assistance for continuation of salary, benefits, professional liability coverage, and resident/fellow assignments. (Core)*
- IV.O.** ***Closures and Reductions:** The Sponsoring Institution must maintain a policy that addresses GMEC oversight of reductions in size or closure of each of its ACGME-accredited programs, or closure of the Sponsoring Institution that includes the following: (Core)*
- IV.O.1. the Sponsoring Institution must inform the GMEC, DIO, and affected residents/fellows as soon as possible when it intends to reduce the size of or close one or more ACGME-accredited programs, or when the Sponsoring Institution intends to close; and, (Core)*
- IV.O.2. the Sponsoring Institution must allow residents/fellows already in an affected ACGME-accredited program(s) to complete their education at the Sponsoring Institution, or assist them in enrolling in (an) other ACGME-accredited program(s) in which they can continue their education. (Core)*

Procedure

A. Closure or Reduction of Program with Affected Residents

1. In the event of a decision to close the Sponsoring Institution or any of its ACGME-accredited and NST programs the University of Arizona College of Medicine – Tucson (UACOM-T) will inform the Designated Institutional Official (DIO) as soon as possible.
2. The DIO will be responsible for informing the GMEC, Program Directors, GME staff, and the affected residents/fellows as soon as possible.
3. The DIO and GMEC will have oversight of the process(es) for reduction or closure of the institution, an ACGME-accredited/NST program, or a major participating site.
4. The DIO will notify the ACGME of any decision by the Sponsoring Institution to close or reduce the size of a program as soon as possible.
 - a. The ACGME may invoke the Extraordinary Circumstances policy in response to circumstances that significantly alter the ability of a Sponsoring Institution and its programs to support graduate medical education. Examples of extraordinary circumstances include an abrupt hospital closure, a natural disaster, or a catastrophic loss of funding. (25.00 ACGME Policy and Procedures to Address Extraordinary Circumstances; https://www.acgme.org/globalassets/ab_acgmepoliciesprocedures.pdf; Effective 06/10/2023)
 - b. The ACGME shall consider invocation of the Extraordinary Circumstances policy at the request of a Sponsoring Institution’s DIO, in response to verified public information, or on the basis of other information received by the ACGME.
 - c. If the Extraordinary Circumstances policy is invoked, the DIO, or designee(s), on behalf of the affected Sponsoring Institution, shall:
 - i. contact the ACGME President and Chief Executive Officer, or designee, to provide preliminary information regarding any major changes to the Sponsoring Institution and its programs resulting from the extraordinary circumstances within 10 days of the invocation of the policy;
 - ii. provide a plan describing the continuation of residents’/fellows’ educational experiences and any major changes to the Sponsoring Institution and its programs, consistent with the applicable ACGME Requirements, to the ACGME President and Chief Executive Officer within 30 days of the invocation of the policy, unless another due date is approved by the ACGME;
 - iii. arrange timely reassignment of residents and fellows, including their temporary or permanent transfers to other ACGME-accredited programs as needed to ensure they can continue their education;
 - iv. ensure that residents and fellows are prospectively informed of the estimated duration of any temporary transfer to another ACGME-accredited program; and,

- v. ensure that residents/fellows continually receive timely information regarding reassignments, transfer arrangements, and/or major changes to the Sponsoring Institution or its programs.
- d. Every effort will be made to allow affected residents/fellows to complete their education at the UACOM-T.
- e. Whenever possible, the preferences of the affected residents/fellows will be considered when arranging temporary or permanent transfers to other ACGME-accredited and ACGME-recognized programs.
- f. There will be no further recruitment into the affected program(s) until the ACGME Review Committee and the GMEC determines them to be back in good standing.

B. Closure of Program without Affected Residents

1. All ACGME-accredited and recognized NST programs are required to have the minimum FTE protected for Program Director(s) and Program Coordinators, regardless of whether trainees are currently enrolled in the program.
2. Annually, the GME office will review all the UACOM-T ACGME-accredited and recognized NST programs to identify programs that did not recruit any trainees for the upcoming academic year.
3. The DIO and/or Associate Dean of GME will meet with the Program Director of any identified program to determine the reason for not recruiting such as 1) the program attempted to fill approved positions and was unable to successfully match; 2) the program does not currently have the necessary resources to meet program-specific requirements for training and is currently on “pause”; or 3) the program chose not to fill the approved positions secondary to a lack of qualified candidates.
 - a. Programs that choose not to fill their approved complement secondary to a lack of qualified candidates may do so for up to two consecutive recruitment cycles.
4. Programs that are unable to successfully recruit, or do not have sufficient resources for training, will be brought into Special Review to assist in identifying barriers to successful recruitment or in meeting program requirements.
 - a. Programs that chose not to fill approved positions secondary to a lack of qualified candidates will be brought into Special Review after the second recruitment season.
5. Programs in Special Review will develop an action and monitoring plan for successful recruitment.
 - a. If a program can successfully recruit after developing and implementing an action plan, the program may spend one additional year in Special Review for monitoring before being removed from Special Review.
6. If a program is unable to successfully recruit after developing and implementing an action plan for recruitment, the DIO and/or Associate Dean of GME will meet with the Program Director, the Department

Chair, and the Banner Physician Executive to decide whether to continue efforts for successful recruitment, or to close the program.

- a. If the decision is made to continue efforts to recruit, Banner Health will continue to fund the minimum FTE requirements for the Program Director(s) and Program Coordinator.
- b. If the decision is made NOT to continue efforts to recruit and to close the program, the plan for the closure will go to the GMEC for review and approval.

7. The decision to either maintain the program or to recommend closure will be indicated in writing and signed by the Program Director, Department Chair and Banner Physician Executive (or their designee.)

8. If the GMEC approves the plan to close the program, the request will be entered into ADS for RC final review and approval.

9. Programs that are determined to remain open and continue efforts for recruitment will remain in Special Review for oversight.

10. These programs will be reviewed annually to assess progress toward successful recruitment and decide whether to continue the program for another year or recommend for closure.

C. Reduction in Size of Program without Affected Residents

1. When a decision is made to reduce the number of approved positions in a program's complement, the plan will be submitted in writing to the GMEC.

2. If the GMEC approves the plan, the request will be entered in ADS.

3. The program's Review Committee will have final review and approval of the reduction.

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