

Policies and Procedures

<i>Section:</i> School of Medicine		<i>NO.</i>			
<i>Chapter:</i> Graduate Medical Education	<i>Issued:</i> <i>October, 2014</i>	<i>REV. A</i> <i>1/27/2021</i>	<i>REV. B</i> <i>05/2022</i>	<i>REV. C</i>	
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PURPOSE

The purpose of this policy is to establish the Graduate Medical Education Committee (GMEC) approval process and the type of oversight that the GMEC has over any program for which there is no ACGME accreditation or American Board of Medical Specialties member board certification

SCOPE

This policy applies to all Creighton University residents, fellows, and their respective training programs.

DEFINITIONS

- **Non-ACGME Programs:** Post graduate training programs for physicians that are not recognized by the ACGME.
- **Non-Standard Training Program** – Programs which there is no ACGME accreditation or American Board of Medical Specialties member board certification that qualify to take Foreign national physicians with J-1 visas as sponsored by the ECFMG.

POLICY

Clinical departments may offer training to resident physicians in a specialty area that has no ACGME accreditation. These programs fall into two types.

First are those that are accredited or overseen by a non-ACGME and non-ABMS recognized specialty board, society or other accrediting body that provides standards for the curriculum and training experiences.

The second type of training program is one where there is not an accreditation process or set of standards. GME requirements for both situations are outlined below.

Required Documents for Submission and Approval to GMEC:

All programs, regardless of accreditation bodies, must follow basic principles of education for their residents and fellows. The following documentation is required for the program to apply to the GMEC for approval.

1. Departmental Supervision policy
 - a. must include criteria for trainee to move to indirect supervision
2. A curriculum that includes the following:
 - a. Pre-requisite training to enter program
 - b. Goals and objectives that learners are evaluated on
 - c. delineation of trainee responsibilities for patient care, patient management and supervision
 - d. Description of required educational experiences, didactic sessions, assessment methods and procedural experience requirements
3. Assessment
 - a. must use most closely related accredited programs ACGME milestones
3. Departmental Work hour policy
4. Departmental Moonlighting policy

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5. Block Schedule
6. PLA's
7. Program Director nomination
8. Description of required educational experiences, didactic sessions, assessment methods and procedural experience requirements

Accredited Graduate Medical Education programs not accredited by the ACGME

The School of Medicine will sponsor selected GME programs that are accredited or overseen by a recognized specialty board, professional association or accrediting body that provides standards for a structured curriculum and set of training experiences. All such programs must be approved by the Graduate Medical Education Committee. Each program is expected to follow all GME policies and procedures of the School of Medicine including, but not limited to, School of Medicine GME Selection and Eligibility Requirements, policy supervision and moonlighting. Each program must maintain an appropriately credentialed program director, stable funding, an explicit and well-defined curriculum, and fully developed supervisory and administrative policies consistent with all other School of Medicine GME programs. Evaluation and promotion of residents must also follow standards consistent with all other School of Medicine GME programs. All

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participants are required to have formal Resident Agreements that outline the responsibilities of both the resident and the School.

Note: To maintain sponsorship by the School of Medicine, these programs must remain in good standing with GMEC. Programs must also provide an, up to date letter from the recognized specialty board, professional association or accrediting body that shows the program to be in good standing with meeting the requirements of accreditation. **This letter must be provided to the Office of GME as soon as it becomes available and must clearly indicate the standing of the program and the period of accreditation that has been granted by the oversight body.**

Non-Accredited Graduate Medical Education Training:

To sponsor graduate medical education programs where there is no formal oversight body, a clinical department has two choices. First, the department may elect to formally request that a residency program be approved by the Graduate Medical Education Committee (GMEC) of the School of Medicine and function as an approved but non-accredited residency training program under GMEC. Secondly, the department may offer a course of additional faculty training without developing a formal program. The following outlines the arrangements:

1. School of Medicine Sponsored Non-Accredited Residency Program

This type of program is considered a formal residency program under the GMEC. It is expected to meet all standards of accredited GME programs including a designated program director, stable funding that is guaranteed under a contract and approved by University Office of General Counsel, an explicit and well-defined curriculum, and fully developed supervisory and administrative policies consistent with all other School of Medicine GME programs. Evaluation and promotion of residents must also follow standards consistent with all other School of Medicine GME programs.

To maintain sponsorship, the program must be able to maintain a good clinical learning and working environment at all of its participating sites. Oversight of program standards will be done through Annual Program Evaluations by the DIO/ADIO on a cycle of once a year.

Trainees will be considered Creighton employees and will be assigned a contract through GME similar to all other residents and fellows. They will be afforded the same rights and privileges and held to the same standards of conduct as all other residents.

Formal GMEC approval of a non-accredited residency program is required, and the development of such a program must follow procedures outlined by the Associate Dean of Graduate Medical Education. The program director must attend GEC meetings after the new training program begins.

Programs must also follow the standards below:

Assessment of learners:

Evaluations must utilize milestones of the most closely related program. Each learner must have a formative assessment in the first 3 months of their training cycle. They must also receive a semi-annual evaluation utilizing the GME portfolio and each learner will create their own learning plan

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as part of the semi-annual exam. There must be a summative evaluation done at the end of training.

Annual Program Evaluation:

Each program will fill out an annual program review (see addendum) and will go through the review with the DIO each year. Action plans need to be submitted for any deficiencies submitted.

Further requirements for program who wish to train Foreign National Physicians with J-1 visas.

As determined by the Non-standard training policy from the ACGME, in cooperation with the ECFMG, the following additional requirements must be met:

1. Program Director – the program director must be from the faculty of the most closely related ACGME accredited program.
2. Participating sites - training sites for the program are limited to sites that the most closely related ACGME accredited program rotates at
3. The sponsoring institution must sponsor an ACGME program in the most closely related specialty/subspecialty to the non-ACGME program

2. Additional Faculty Training

This arrangement occurs when a clinical department elects not to pursue development and maintenance of a formal non-accredited residency program as outlined above but still offers

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additional training to qualified professionals in a particular specialty or sub-specialty. In this case, additional training should only be offered to individuals qualified to become faculty in their core specialty and should be only for a defined period of time. Such training cannot be offered if a formally accredited residency program is already in place for this particular specialty. The individual would be given an appointment as *clinical instructor if they are also involved in teaching or supervising learners in their core specialty*, through the sponsoring department with the contractual arrangements set by the department and approved by Creighton’s Office of General Counsel. This arrangement would also require credentialing by all appropriate credentialing bodies for locations where the work and training would occur.

The sponsoring department must send a letter to the GME Office providing it with the name(s) of individual(s) receiving additional training. It needs to be approved by the local GEC and the GMEC to ensure it does not impact other learners. Verification of training will be completed by the sponsoring department.

All departments providing additional training opportunities must assure that the number of learners and the work done by them does not dilute the required experience of learners in the accredited and non-accredited residency programs sponsored by the department.

REFERENCES

ACGME Non-standard training requirements

AMENDMENTS OR TERMINATION OF THIS POLICY

This policy supersedes all program level policies regarding this area/topic. In the event of any discrepancies between program policies and this GME policy, this GME policy shall govern.

Creighton University reserves the right to modify, amend or terminate this policy at any time.

Addendums:

Annual Program Evaluation Form

List of Creighton Non-ACGME programs