


Title: Graduate Medical Education - Committee Oversight of Programs Not Accredited by Accreditation Council for Graduate Medical Education - Policy

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I. Policy Statement

- a. The purpose of this policy is to set forth requirements for Graduate Medical Education Committee (GMEC) oversight of residency fellowship programs at University of Missouri Health Care (MUHC) that are not accredited by the Accreditation Council for Graduate Medical Education (ACGME.)
- b. This policy is important because non-ACGME accredited programs, including those that are accredited by other entities, must meet the same standards of quality as ACGME accredited programs at UMHC. This oversight is required by the ACGME to maintain institutional and program accreditation.

II. Definitions

- a. Not Applicable.

III. Process/Content

- a. Clinical departments may offer training to resident physicians in a specialty area that is outside of the oversight of the ACGME. Such programs may be one of two types:
 - i. Programs that are accredited or overseen by an American Board of Medical Specialties or medical society that provides standards for the curriculum and training experience.
 - ii. Programs where there is no accreditation process or oversight standards provided by an American Board of American Specialties or sponsoring medical specialty society, or programs offering “additional training” that is not a formal fellowship.
- b. Both types of programs should formally request permission from the Graduate Medical Education Committee (GMEC) to start new programs at MUHC.

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- c. Both types of programs are overseen by the GMEC and held to the same standards and requirements as programs that are accredited by the ACGME.
- d. Programs are expected to follow all GMEC policies and procedures at MUHC, including work hours, moonlighting, and supervision.
- e. Each program must:
 - i. Maintain an appropriately credentialed program director with protected time sufficient to fulfill administrative and teaching duties.
 - ii. Have defined funding.
 - iii. Have an explicit and well-defined curriculum based on the ACGME core competencies (Patient Care, Medical Knowledge, Practice-Based Learning and Improvement, Interpersonal and Communication Skills, Professionalism, and Systems-Based Practice).
 - iv. Develop and follow supervisory and administrative policies consistent with other MUHC graduate medical education programs.
 - v. Develop standards and procedures for the evaluation and promotion of residents that are consistent with other graduate medical education programs, including documentation in a fellow's file regarding evaluation no less frequently than every six (6) months.
 - vi. Submit a timely Annual Report to the GMEC, as is required of all graduate medical education programs.
- f. All participants are required to have formal contracts. Fellows in non-accredited programs are subject to the same rights, benefits, requirements, and standards as residents in accredited programs.
- g. Programs must provide an up-to-date letter from the recognized specialty board or professional association that shows the program to be in good standing with meeting the requirements of accreditation and oversight, as relevant for programs accredited by bodies other than the ACGME.
- h. This letter must be provided to the Office of Graduate Medical Education (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.
- i. Provide to the DIO copies of documentation submitted to the specialty board or professional association for accreditation purposes as well as copies of documents, including letters of accreditation, received from the specialty board or professional association concerning the accreditation process, as relevant for programs accredited by bodies other than the ACGME.
- j. The GMEC monitors action plans for correction of citations and areas of noncompliance.

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- k. The program is subject to a periodic Special Review by the GME and DIO when circumstances exist, including faculty and resident meetings with the DIO, where a review would be helpful.
- l. Departments must be in good standing with associated professional societies and with accrediting bodies for any other programs.
- m. 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 other non-accredited residency programs sponsored by the department.
- n. All of the above criteria must be met in order for a program to issue an official University of Missouri Certificate of Completion.

IV. Attachments

- a. Not Applicable.

V. References, Regulatory References, Related Documents, or Links

- a. Not Applicable.