Augusta University House Staff Policies and Procedures

Policy
HS 38.0 Non-ACGME Programs Policy and Procedure

Graduate Medical Education Office

Source

1.0 Purpose

The intent of this policy is to ensure educational quality and institutional support and oversight of all Graduate Medical Education (GME) training programs within the Medical College of Georgia (MCG) at Augusta University (AU) that provide training in specialties/subspecialties for which accreditation by the Accreditation Council for Graduate Medical Education (ACGME) is not available.

Within MCG, there are training programs that are not accredited by ACGME. These programs support the interests of MCG at AU and affiliated hospitals, the patient care needs of the region, and/or other MCG at AU GME programs. The goal of this policy is to establish an organizational structure that promotes the educational quality of non-ACGME accredited MCG at AU GME training programs, complies with regulatory requirements, ensures that new programs do not unduly interfere with existing accredited programs, and ensures a similar level of institutional support for trainees in these non-accredited programs as is available for other GME trainees.

- 2.0 Support and oversight for non-ACGME-accredited programs by MCG are further necessitated by the policies of several national organizations:
 - 2.1 ACGME Requirement: Appointment of Fellows and Other Learners: The presence of other learners (including, but not limited to, residents from other specialties, subspecialty fellows, PhD students, and nurse practitioners) in the program must not interfere with the appointed House Staffs' education. The program director must report the presence of other learners to the DIO and GME Committee (GMEC) in accordance with sponsoring institution guidelines.
 - 2.2 National Resident Matching Program (NRMP) Required Oversight: Per the requirements of the National Resident Matching Program (NRMP) Specialties Matching Service, "the NRMP Institutional Official must attest to oversight responsibility for non-ACGME-accredited fellowships to indicate that unaccredited programs are under the institution's governance or that an affiliation agreement exists."

3.0 Definitions

- 3.1 Accredited Program: A residency or fellowship GME training program accredited by ACGME.
- 3.2 Non-Accredited Program: A GME training program for which ACGME accreditation is not available or has not been obtained by the program. Accreditation by a professional organization or accrediting body other than the ACGME is not sufficient to consider the program accredited for the purposes of this policy.

4.0 Policy

- 4.1 All clinical training programs within MCG that provide GME training must be approved by GMEC.
 - 4.1.1 Established Programs: Non-accredited programs currently offered at MCG must meet the minimum program requirements noted below.
 - 4.1.2 New Programs: The development of new non–accredited fellowship programs will be reviewed by the GMEC upon submission of a completed Request for New Residency or Fellowship Program form. This form is available in the GME Office. If approved by GMEC, a vote is held with the Governing Body to determine ultimate approval. The GMEC will not approve requests submitted for new non-accredited programs for which ACGME accreditation is available. These programs must seek accreditation by the ACGME.
 - 4.1.3 Program Leadership: All non-accredited programs must have a designated program director, who will report to the Department Chair or Division/Section Head/Chief.
 - 4.1.4 Stipends: House Staff will be paid according to the training year in which they are participating in a MCG GME training program and according to the MCG Stipend Schedule.
 - 4.1.5 Education Agreement: All non-accredited programs must maintain Program Letters of Agreement for all participating sites to ensure educational oversight.

Effective Date: Revision/Review Date: Number: 1
5/20 HS 38.0

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- 4.1.6 Evaluation: All programs must have an established clinical competency committee for House Staff evaluation.
- 4.1.7 Continued Improvement: All programs must establish a process for continual program evaluation and improvement.
- 4.1.8 If ACGME accreditation becomes available for an established non-accredited program, the program must apply for ACGME accreditation within the next fiscal year cycle. Failure to apply for accreditation will require a review of the program by GMEC/DIO.

This policy does not affect hospital privileging, professional fee billing, or funding processes for individual trainees participating in such programs. Those issues should be addressed with appropriate Offices.

5.0 Procedures:

The MCG at AU GMEC and GME Office provide educational support and oversight to these programs in order to assist their educational missions and their trainees. GMEC and GME Office also strive to ensure the provision of a high-quality educational experience comparable to that of ACGME-accredited programs. This includes ensuring compliance with the following program requirements:

- maintain a committed faculty and provide faculty development opportunities
- have clearly defined overall educational goals for the program
- develop and regularly update goals and objectives for each assignment at each educational level
- provide appropriate supervision
- establish and maintain a robust evaluation system of trainees, faculty, and the program
- develop appropriate program-specific policies, as stipulated below
- track outcomes of graduates
- monitor duty hours and ensure that trainees do not exceed 80 hours/week when averaged over 4 weeks
- 5.1 Program and Trainee Compliance with AU GME Policies and Procedures:

To ensure high-quality educational programming and to provide support to trainees comparable to that of ACGMEaccredited programs, non-accredited programs must comply with GME policies and procedures, which are designed to ensure compliance with statutory, ACGME, ABMS, MCG, AU, and/or AU Health policies, rules, and/or regulations.

5.2 Orientation:

Individuals in non-accredited programs must be scheduled by their program to attend Institutional Orientation along with House Staff in our accredited programs.

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Date

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