



**University of Kentucky
Graduate Medical Education
Resident/Fellow Complement Increase and New Program Request Policy**

Purpose:

The goal of this policy is to assure that requests from programs for increases in resident/fellow complement and/or new program requests are handled in a fair, equitable and timely manner.

Policy:

All requests for increase in resident/fellow complement and subsequent funding must be approved by both the GMEC, Sponsoring Institution, and the ACGME (or equivalent for non-physician specialties/programs) before implementation. Request for permanent complement increases and/or new program requests must be anticipated one to two years before they are to be effected to allow time for submission to the ACGME (or equivalent for non-physician specialties/programs) for approval. Because the recruitment process for fellows occurs at various times during the year, requests for complement increases and/or funding changes for fellows must be anticipated a full two years before they are to be effected. Requests for temporary complement increases relevant to individual learner situations such as off cycle training requiring AGCME approval or other specific learner or program circumstances are reviewed and approved for funding continuously throughout each academic year. Implementation remains dependent upon approval by the GMEC, assurance of funding to support the position, and ACGME (or equivalent for non-physician specialties/programs) approval.

Procedure:

- A. Program Directors should contact the Senior Associate Dean for GME/ACGME DIO to obtain additional information regarding the process for requesting a temporary or permanent complement increase or new program.
- B. Timelines for submission of future proposed complement increase and new programs are established annually by the Sponsoring Institution in collaboration with the Senior Associate Dean for GME/ACGME DIO.

1. Timelines typically require initial submission and review of complement increases and new program requests at least two years in advance of the proposed implementation
 2. Permanent complement increase and new program request timelines are communicated to the GMEC and department/unit leaders In February, which is at least six months in advance of the August educational rationale deadline.
 3. Requests for temporary complement increases relevant to individual learner situations such as off cycle training requiring AGCME approval or other specific learner or program circumstances are reviewed and approved for funding continuously throughout each academic year.
- C. Program Directors must prepare a written justification for the requested complement increase or new training program. This request must be submitted to the GME Committee (GMEC) Compliance Subcommittee for review. Documentation required differs by whether the request is for a temporary or permanent complement increase or a new program request as outlined below.
1. New program request documentation
 - a. Educational rationale for the training program including duration of training, participating institutions/facilities, faculty, program director, clinical rotations, adequacy of patient care and procedural volume to support the program, didactic conferences, evaluation processes, research, and resident/fellow complement requested.
 - b. Anticipated faculty to resident/fellow ratio
 - c. Potential positive and negative impact on other training programs
 - d. A letter of support from the Program Director, Division Chief, and/or Chair of any other training program that will be involved in the training of resident/fellows and/or will be impacted by the program
 - e. Impact on clinical productivity at a departmental and/or institutional level
 - f. Completion of PLA Development Tool for any proposed educational experiences outside the primary clinical site.
 - g. All ACGME (or other accrediting body as applicable) required new program application materials
 - h. Completion of letter from Program Director addressed to GMEC Compliance Subcommittee attesting that the application has been reviewed in its entirety by the Program Director and is in suitable condition for initial educational review.
 2. Permanent complement increase request documentation
 - a. Educational rationale for the training program including duration of training, participating institutions/facilities, faculty, program director, clinical rotations, adequacy of patient care and procedural volume to support the program, didactic conferences, evaluation processes, research, and resident/fellow complement requested.
 - b. Anticipated key faculty to resident/fellow ratio

- c. Potential positive and negative impact on other training programs
 - d. A letter of support from the Program Director, Division Chief, and/or Chair of any other training program that will be involved in the training of resident/fellows and/or will be impacted by the program
 - e. Impact on clinical productivity at a departmental and/or institutional level
 - f. All ACGME (or other accrediting body as applicable) required complement increase materials
3. Temporary complement increase request documentation
- a. Rationale for the request including duration of temporary increase requested, any impact on the program's rotation structure to incorporate the increase, adequacy of clinical, educational, and faculty resources to support the increase.
 - b. If applicable, for programs in which learners complete off service rotations, any potential positive and negative impact on other training programs
 - c. A letter of support from any other training program that will be involved in the training of resident/fellows and/or will be impacted by the increase, if applicable
 - d. All ACGME (or other accrediting body as applicable) required complement increase materials
- D. The GMEC Compliance Subcommittee will conduct the educational approval of each request on behalf of the GMEC and evaluate each request and the impact on other training programs. The subcommittee will (1) recommend approval of the proposal for submission as written or (2) will make suggestions, comments or revisions to the documentation.
- E. If the GMEC Compliance Subcommittee makes suggestions, comments, or revisions to the proposal the Program Director may withdraw the request, or make changes in the documentation and submit a revised copy for GMEC Compliance Subcommittee for review.
- F. The GMEC Compliance Subcommittee will then make a recommendation to the Graduate Medical Education Committee which determines final approval or disapproval based on educational merit of the proposal.
- G. The Senior Associate Dean for GME/ACGME DIO will provide a summary document of the GMEC decisions relative to any proposals considered to the Dean of the College of Medicine and other appropriate leaders within the Sponsoring Institution.
- H. This leadership group will review the GMEC approved proposals, discuss as needed with the involved departmental/unit leaders, and prioritize the proposals to review for allocation of funding.
- 1. For proposals with potential funding already described in the proposal the leadership group will obtain commitment of funding from the respective entity.

- Once a commitment of funding is secured, the Senior Associate Dean for GME/ACGME DIO will communicate a decision regarding proceeding with the requested increase or new program request accreditation approval process.
2. For proposals that do not outline available funding sources to support the proposal, the Sponsoring Institution leadership and UK Health Care Executive Vice President for Health Affairs leadership group will review each request for allocation of funding. Program Directors will be notified of the final decision by the Senior Associate Dean for GME/ACGME DIO.

 - I. Program Directors who have been provided with both GMEC and funding approval to proceed must work collaboratively with the Senior Associate Dean for GME/ACGME DIO and GME Office accreditation staff to submit the request to the ACGME (or equivalent for non-physician specialties/programs). Lack of timely completion of required materials or adherence to GME Office or accrediting body deadlines may result in delayed submission, accreditation approval, and implementation of the proposed increase.

Replaces GME Complement increase and New Program Request Individual Policies

Approved GMEC Compliance Subcommittee: 6-9-21

Approved by GMEC: 3-23-22