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POLICY	
PURPOSE	The purpose of this policy is to protect residents and provide for a smooth and orderly transition in accordance with ACGME Institutional Requirements, should a reduction or closure of an individual training program, major participating site, or sponsoring institution occur. This policy does not apply to minor reductions in size of residency programs due to annual Match variations, transfers, off cycle residents and the like.
SCOPE	<p>The policy applies to all MHS-sponsored GME residency training programs, both accredited and non- accredited.</p> <p><i>Note:</i> In addition to being subject to specific policies and procedures required by all applicable accrediting bodies, GME Residents are also subject to policies and procedures applicable to MHS employees generally and enjoy those benefits of employment applicable to MHS employees of comparable classification.</p>
ACRONYMS	ACGME — Accreditation Council for Graduate Medical Education CAO — Chief Academic Officer CMO (H) – Chief Medical Officer of individual hospitals in MHS CMO (S) – Chief Medical Officer of MHS CPME – Council on Podiatric Medicine DIO — Designated Institutional Official GMEC — Graduate Medical Education Committee MHS — Memorial Healthcare System OAA – Office of Academic Affairs PD — Program Director RRC — Resident Review Committee SI – Sponsoring Institution WARN Act — Worker Adjustment Retraining Notification Act
DEFINITIONS	The term "resident" refers to all medical graduate trainees (interns, residents, fellows) in all postgraduate GME training programs sponsored by MHS.
PROCEDURES	<ol style="list-style-type: none"> 1. MHS Executive Leadership, in conjunction with the CMO, CAO, GMEC, PD and Program Faculty will make appropriate efforts to avoid the reduction in size and/or closure of sponsored residency training programs. Only after careful consideration will a decision be made to reduce or close an ACGME-accredited training program. The SI will inform the GMEC, individual programs and its trainees of a planned reduction/closure as soon as possible, but no more than 10 business days after a decision by SI has been made. The SI will make an effort to assist the affected residents/fellows in transitioning to another training program. 2. If the SI is required to do so due to adverse actions by an accrediting body, the Sponsoring Institution shall inform the GMEC, the PDs, and the affected residents/fellows. Every effort will be made to work with the accrediting agency to address the deficiencies. If such efforts are not feasible or practical, the SI in conjunction with the guidance of the accrediting body, shall attempt to phase out

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	<p>the Program over a period of time to allow the trainees currently in the Program to finish their training. The Sponsoring Institution will make an effort to assist the affected residents/fellows in transitioning to another training program.</p> <p>3. The Executive leadership of MHS, GMEC, CAO, and individual PD's are responsible for monitoring and overseeing all processes related to the reduction or closure of any MHS-sponsored training program.</p> <p>PROGRAM REDUCTION</p> <p>1. Every effort will be made to address a need to reduce the number of residents in the training program by decreasing the number of new residents entering the program.</p> <p>2. For more significant and/or immediate reductions, particularly those that may impact residents currently in the training program, the PD, program faculty, Senior Director for Graduate Medical Education and CAO/DIO will be responsible for assisting residents who wish to transfer to another ACGME-accredited program so that they may continue their training.</p> <p>3. The PD is responsible for notifying the relevant RRC for the affected specialty as soon as possible, but no later than 5 business days after notification of the planned reduction has been made to the GMEC, PD, and affected residents.</p> <p>PROGRAM CLOSURE</p> <p>1. Every effort will be made to allow residents in the program to complete their training at MHS, with primary consideration given to those in the final year(s) of training.</p> <p>2. For more significant and/or immediate reductions, particularly those that may impact residents currently in the training program, the PD, program faculty, Administrative Director for Graduate Medical Education and CAO/DIO will be responsible for assisting residents who wish to transfer to another ACGME-accredited program so that they may continue their training.</p> <p>3. The PD is responsible for notifying the relevant RRC for the affected specialty as soon as possible, but no later than 5 business days after notification of the planned closure has been made to the GMEC, DIO, and affected residents.</p>
REFERENCES	ACGME Institutional Requirements, effective July 2022 ACGME Common Program Requirement, effective July 2023 ACGME Program Specific Requirements – most recent as per RRC specialty
ORIGINAL ISSUE DATE	May 5, 2017
REVIEW/REVISION DATES	July 2020; July 2024
POLICY OWNER	Office of Academic Affairs

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**POLICY OWNER
CONT.**

If any of the statements contained in this policy conflict with any verbal statements or agreements made by any representatives of MHS, then the statements contained in this policy shall control the outcome of any such conflict.

Memorial reserves the right to modify this policy in whole or in part, at any time, at the discretion of the Healthcare System or as required by applicable law, regulation, or governing/accrediting body.

Employees who have questions regarding information contained in this policy should contact the Office of Academic Affairs.

This policy is intended to supplement standard MHS Human Resources (“HR”) policies. To the extent that this policy conflicts with any MHS HR policy, the standard HR policy shall govern and control.