

**Rush University Medical Center
Graduate Medical Education
GME PROGRAM CLOSURES AND CHANGES IN SIZE POLICY**

1. Closure of an entire training program is the last step in a process that has resulted in a decision that the program cannot be maintained for academic or financial reasons. Such decisions are made jointly by the Department Chairman, Program Director, and Associate Dean for GME. Decision-making will follow commonly accepted practices in the GME community, and will adhere to the various applicable ACGME and other regulations in effect. Trainees must be notified as soon as a final decision has been made. In the event of a decision to close a training program, all trainees who have already enrolled or have been formally accepted into the program will be allowed to complete their training unless other arrangements acceptable to the trainees can be made. Ordinarily, the program will phase out over the normal length of the training period. Decisions to close programs must be communicated to the applicable RRC and to the IRC of the ACGME.
2. Alterations in program complements occur from time to time because of the regular fluctuations in the applicant pool, and from attrition of trainees from programs. These are not considered reductions for purposes of this policy. Such fluctuations, however, must fall within acceptable guidelines of the RRC, and are to be communicated to the Associate Dean for GME.
3. Planned expansions or reductions in trainee complements are those in which a permanent change in the size of a program results from the analysis of the academic and/or financial circumstances of the training experience. This will usually be decided in consultations between the Dean's office, the Graduate Medical Education Office, and the involved program directors. Communication and coordination with affiliated, integrated or other partner institutions is essential. Trainees must be notified as soon as a final decision has been made. In the event of a reduction, all trainees who have already enrolled or have been formally accepted into the program will be allowed to complete their training unless other arrangements acceptable to the trainees can be made. Decisions to permanently change the size of a program must fall within guidelines of the applicable RRC.
4. The ACGME has a formal process for requesting and obtaining a change in the resident complement currently approved by the ACGME. Program directors complete a request (either for a permanent or temporary change) electronically in the ACGME WebADS system. The request is then sent to the DIO for review and approval. The DIO will then either approve the request or send it back to the program director if more information is needed. Once the DIO approves the request, it is sent to the appropriate RRC for their review and approval. **The program cannot change its complement until formal, written approval is granted by the RRC.** Often this takes a number of months, and if the next site visit is occurring shortly, the RRC may defer its decision until after the site visit. DIO approval is a step in the process but the final decision regarding a change in complement is that made and communicated by the RRC.

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