

## Creighton University School of Medicine-Phoenix Policies

POLICY:	Non-ACGME Programs
GOVERNING BODY:	Graduate Medical Education Committee – Creighton University School of Medicine-Phoenix
GMEC APPROVAL DATE:	August 5, 2024; August 7, 2023; February 6, 2023
REVISED DATE:	August 5, 2024
ACGME ACCREDITATION STANDARD REFERENCE:	Institutional Requirement: Not Applicable

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### PURPOSE

The purpose of this policy is to establish the Graduate Medical Education Committee (GMEC) approval process and the type of oversight that the GMEC has over any program for which there is no Accreditation Council for Graduate Medical Education (ACGME) accreditation or American Board of Medical Specialties (ABMS) member board certification.

### SCOPE

The policy applies to all Creighton University School of Medicine-Phoenix (CUSOM-PHX) House Staff Physicians (HSP) and their respective training programs, that are ACGME accredited or meet the criteria in the Non-ACGME Accredited Program Policy.

### DEFINITIONS

**Non-ACGME Programs:** Post-graduate training programs for physicians that are not recognized by the ACGME.

**Non-Standard Training Program:** Programs in which there is no ACGME accreditation or American Board of Medical Specialties member board certification that qualify to take Foreign National Physicians with J-1 visas as sponsored by the ECFMG.

### POLICY

Clinical departments may offer training to HSP in a specialty area that is not accredited by the ACGME. These programs fall into two types:

1. Those that are accredited or overseen by a non-ACGME and non-ABMS recognized specialty board, society, or other accrediting body that provides standards for the curriculum and training experiences.
2. Training program is one where there is not an accreditation process or set of standards that do not currently exist.

GME requirements for both situation types are outlined below.

### Required Documents for Submission and Approval to GMEC

All programs, regardless of accreditation bodies, must follow basic principles of education for their HSP. The following documentation is required for the program to apply to the GMEC for approval.

1. Departmental Supervision policy
  - a. Must include criteria for trainee to move to indirect supervision.
2. A curriculum that includes the following:
  - a. Pre-requisite training to enter the program.

- b. Goals and objectives that learners are evaluated on.
  - c. Delineation of trainee responsibilities for patient care, patient management, and supervision
  - d. Description of required educational experiences, didactic sessions, assessment methods, and procedural experience requirements.
3. Assessment
  - a. Must use most closely related accredited programs ACGME milestones.
4. Departmental Work Hour Policy
5. Departmental Moonlighting Policy
6. Block Schedule
7. PLA's
8. Program director nomination
9. Description of required educational experiences, didactic sessions, assessment methods, and procedural experience requirements.

### **Accredited Graduate Medical Education programs not accredited by the ACGME**

The School of Medicine will sponsor selected GME programs that are accredited or overseen by a recognized specialty board, professional association, or accrediting body that provides standards for a structured curriculum and set of training experiences. All such programs must be approved by GMEC. Each program is expected to follow all GME policies and procedures of the School of Medicine including, but not limited to, CUSOM-PHX GME Selection and Eligibility Requirements, policy supervision, and moonlighting. Each program must maintain an appropriately credentialed program director, stable funding, an explicit and well-defined curriculum, and fully developed supervisory and administrative policies consistent with all other CUSOM-PHX GME programs. Evaluation and promotion of HSP must also follow standards consistent with all other CUSOM-PHX GME programs. All participants are required to have formal Resident Agreements that outline the responsibilities of both the HSP and the School.

**Note:** To maintain sponsorship by the CUSOM-PHX, these programs must remain in good standing with GMEC. Programs must also provide an up-to-date letter from the recognized specialty board, professional association, or accrediting body that shows the program to be in good standing with meeting the requirements of accreditation. **This letter must be provided to the Office of 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.**

### **Non-Accredited Graduate Medical Education Training**

To sponsor graduate medical education programs where there is no formal oversight body, a clinical department has two choices. First, the department may elect to formally request that a residency program be approved by the CUSOM-PHX GMEC and function as an approved but non-accredited residency training program under GMEC. Secondly, the department may offer a course of additional faculty training without developing a formal program. The following outlines the arrangements:

#### **1. CUSOM-PHX Sponsored Non-Accredited Residency Program**

This type of program is considered a formal residency program under the GMEC. It is expected to meet all standards of accredited GME programs including a designated program director, stable funding that is guaranteed under a contract and approved by University Office of

General Counsel, an explicit and well-defined curriculum, and fully developed supervisory and administrative policies consistent with all other CUSOM-PHX GME programs. Evaluation and promotion of HSP must also follow standards consistent with all other CUSOM-PHX GME programs.

To maintain sponsorship, the program must be able to maintain a good clinical learning and working environment at all its participating sites. Oversight of program standards will be done through Annual Program Evaluations by the DIO on a cycle of once a year.

Trainees will be considered Creighton employees and will be assigned a contract through GME similar to all other HSP. They will be afforded the same rights and privileges and held to the same standards of conduct as all other HSP.

## **2. Non-Accredited Graduate Medical Education Training**

To sponsor graduate medical education programs where there is no formal oversight body, a clinical department has two choices. First, the department may elect to formally request that a residency program be approved by the Graduate Medical Education Committee (GMEC) of the School of Medicine and function as an approved but non-accredited residency training program under GMEC. Secondly, the department may offer a course of additional faculty training without developing a formal program. The following outlines the arrangements:

### **A. School of Medicine Sponsored Non-Accredited Residency Program**

This type of program is considered a formal residency program under the GMEC. It is expected to meet all standards of accredited GME programs including a designated program director, stable funding that is guaranteed under a contract and approved by the University Office of General Counsel, an explicit and well-defined curriculum, and fully developed supervisory and administrative policies consistent with all other School of Medicine GME programs. Evaluation and promotion of HSP must also follow standards consistent with all other School of Medicine GME programs.

Trainees will be considered Creighton employees and will be assigned a contract through GME similar to all other HSP. They will be afforded the same rights and privileges and held to the same standards of conduct as all other HSP.

Formal GMEC approval of a non-accredited residency program is required, and the development of such a program must follow procedures outlined by the DIO. The program director must attend GMEC meetings after the new training program begins.

Programs must also follow the standards below:

- a. **Assessment of learners:**  
Evaluations must utilize milestones of the most closely related program. Learners must receive a semi-annual evaluation utilizing the GME portfolio, and each learner will create their own learning plan as part of the semi-annual exam. A summative evaluation must be completed at the end of training.
- b. **Annual Program Evaluation:**  
Each program will fill out an annual program review and will go through the review with the DIO each year. Action plans need to be submitted for any deficiencies.
- c. **Non-standard training recognition (NST):**

Further requirements for programs that wish to train Foreign National Physicians with J-1 visas as determined by the Non-Standard Training Policy from the ACGME, in cooperation with the ECFMG, the following requirements must be met:

<https://www.acgme.org/programs-and-institutions/institutions/non-standard-training-nst-recognition/>

### **3. Additional Faculty Training**

This arrangement occurs when a clinical department elects not to pursue the development and maintenance of a formal non-accredited residency program as outlined above but still offers additional training to qualified professionals in a particular specialty or sub-specialty.

- a. Additional training should only be offered to individuals qualified to become faculty in their core specialty and should be only for a defined period.
- b. Such training cannot be offered if a formally accredited residency program is already in place for this specialty.
- c. The individual would be given an appointment as a *clinical instructor if they are also involved in teaching or supervising learners in their core specialty*, through the sponsoring department with the contractual arrangements set by the department and approved by Creighton's Office of General Counsel. This arrangement would also require credentialing by all appropriate credentialing bodies for locations where the work and training would occur.

The sponsoring department must send a letter to the GME Office providing it with the name(s) of the individual(s) receiving additional training. It needs to be approved by the GMEC to ensure it does not impact other learners. Verification of training will be completed by the sponsoring department.

All departments providing additional training opportunities must ensure that the number of learners and the work done by them does not dilute the required experience of learners in the accredited and non-accredited residency programs sponsored by the department.

### **AMENDMENTS OR TERMINATION OF THIS POLICY**

This policy supersedes all program level policies regarding this area/topic. In the event of any discrepancies between program policies and this GME policy, this GME institutional policy shall govern.

Creighton University reserves the right to modify, amend, or terminate this policy at any time.