

Requests for Changes in Resident Complement Review Committee for Radiation Oncology

Temporary Increase in Complement for Up to One Month

A temporary increase in resident complement for up to one month does not require Review Committee approval.

Temporary Increase in Complement for More than One Month

The program director may prospectively request a temporary increase in the number of residents when unforeseen circumstances result in a short-term excess in the total number of residents in the program.

In general, temporary increases should not exceed one resident beyond the approved number and should not continue for more than two years. Temporary increases *do not* change the permanent ACGME-approved complement, and once the period of the temporary increase ends, programs will be expected to return to the approved permanent complement. Similarly, if the program decides not to use the approved temporary complement increase, it cannot accept another resident or use that position for any purposes other than outlined in the original request.

Rarely, selected residents are permitted to alter the typical educational program to increase their laboratory experience (and accordingly, have decreased clinical education requirements) under the Holman Pathway. Programs with residents who have been accepted for the Holman Pathway may request a temporary increase in resident complement.

To formally request a temporary increase in complement, the program director must log into the Accreditation Data System (ADS), select “Complement Change” from the menu under the Program tab, and provide the following required information:

1. Educational rationale – examples of acceptable rationales for temporary complement increases include:
 - a resident delaying completion of residency, causing an overlap with incoming residents
 - a resident transferring from a program that has closed, causing a short-term excess in the program that accepts the transfer
 - there are residents within the Holman Pathway
2. Resident Case Log reports for the most recent program graduates (four years of experience must be included)
3. Major changes in the program since its last review
4. Responses to any previous citations identified in the ACGME Letter of Notification following the most recent review by the Committee

5. Clinical data for all sites for the most recent 12-month period – the Clinical Data Form to complete with this information and upload into ADS for submission is found under “Clinical Data Upload” on the complement increase page in ADS.

Once completed, the request will be electronically sent to the designated institutional official (DIO) for approval. The DIO may approve the request, reject and delete the request, or reject and return the request for modifications. If the DIO approves the request, the information is submitted in ADS and forwarded to the Review Committee for consideration. The Chair and Vice Chair of the Review Committee may grant a temporary increase in the resident complement without a full Committee review. The program director should allow at least two weeks for a response from the Review Committee staff to a temporary complement change request.

Permanent Increase in Complement

Programs must hold a status of Continued Accreditation to be considered for a permanent complement increase. Programs with a status of Continued Accreditation with Warning, Initial Accreditation, Initial Accreditation with Warning, or Probationary Accreditation are not eligible for a permanent complement increase.

The Review Committee reviews permanent increase requests at its scheduled meetings. Programs should check posted meeting agenda closing dates on the [Radiation Oncology](#) section of the ACGME website and plan accordingly before submitting such a request.

A permanent increase in resident complement must first be approved by the Sponsoring Institution’s Graduate Medical Education Committee (GMEC), after which approval must be requested from the Review Committee through ADS.

To formally request a permanent increase in resident complement, the program director must log into ADS, select “Complement Change” from the menu under the Program tab, and provide the following required information:

1. Educational rationale
 - a. Most importantly, this should describe how a permanent complement increase will enhance resident education.
 - b. If applicable, this should describe any new resources (equipment, facilities, etc.) that will accommodate the complement increase (note: the resources must be currently available and operational. Do not include future plans to add resources.)
2. Resident Case Log reports for the most recent program graduates (four years of experience must be included)
3. Proposed block diagram that clearly demonstrates how the requested increase will impact the curriculum. If the program’s block diagram will not change with the increase, include a detailed explanation in the educational rationale indicating why there will be no change.
4. Major changes in the program since its last review

5. Responses to any previous citations identified in the ACGME Letter of Notification following the most recent review by the Committee
6. Clinical data for all sites for the most recent 12-month period – the Clinical Data Form to complete with this information and upload into ADS for submission is found under “Clinical Data Upload” on the complement increase webpage within ADS.

Once completed, the request will be electronically sent to the DIO for approval. The DIO may approve the request, reject and delete the request, or reject and return the request for modifications. If the DIO approves the request, the information is submitted in ADS and forwarded to the Review Committee for consideration.

Within 48 hours of the applicable Review Committee meeting, the program will receive an automated notification of the Committee’s decision. The Letter of Notification detailing the rationale for approving or denying the permanent complement increase request will be sent to the program within 60 days of the Review Committee meeting.