



University Hospital of Brooklyn

College of Medicine

School of Graduate Studies

College of Nursing

School of Health Related Professions

School of Public Health

Office of Graduate Medical Education

SUBJECT: POLICY ON RESIDENT RECRUITMENT, ELIGIBILITY AND SELECTION

Originating Department: Graduate Medical Education Date

Approved by **GMEC**: 12/11/2019

Original Date: 07/26/2012

Revisions: 9/16/2015, 12/11/2019, 7/15/2025

In accordance with Section 4.1, 4.2, 4.2a, 4.2a.1, 2, 3 (2025 Format)

Old Designation: IV.A, IV.A.1., IV.A.2, IV.A.2.a-c), IV.A.2.c).(1-3) and IV.A.3 of the ACGME Institutional Requirements


Purpose:

To comply with ACGME Common Program and Institutional Requirements, National Residency Matching Program policies, institutional processes and procedures and to assure fair, legal and appropriate recruitment, selection and hiring practices. This Resident Recruitment, Eligibility and Selection Policy is established to provide procedures for resident eligibility, selection criteria and selection processes in support of safe and high-quality patient care, educational excellence, scholarship and professional and institutional integrity.

Scope

This Policy applies to all Programs, Program Directors, Program coordinators, administrators, applicants to Programs, and residents and fellows of GME Programs sponsored by SUNY Downstate University Health Sciences University, irrespective of salary source or site assignment.

Definitions:

Designated Institutional Official (DIO): the individual in the Sponsoring Institution (SUNY Downstate Medical Center) with the authority and responsibility for all of the Institution's ACGME  accredited GME Programs.

GME Program or Program: refers to a structured educational experience in graduate medical education designed to conform to the ACGME Program Requirements of a particular specialty/subspecialty.

GMEC: Graduate Medical Education Committee of SUNY Downstate Medical Center.

NRMP: the National Residency Matching Program.

Program Director: the one faculty member appointed as program director with authority and accountability for the overall program, including compliance with all applicable program requirements.

Policy:

All Programs must have Program-specific procedures and standards for recruitment, selection and

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appointment of residents. All procedures and standards shall comply with this Policy and with ACGME requirements, including requirements governing resident and fellow appointments. In fulfilling institutional oversight responsibilities, the GMEC through the GME Office, will monitor Program compliance with this Policy and program and institutional policies and procedures for resident recruitment, selection and appointment.

Each Program must have a set of written standards, appropriate to the specialty, to guide resident selection and the retention of a diverse and inclusive workforce of residents. Written standards must address resident eligibility and process for resident selection.

Programs must select from among eligible applicants based on residency program-related criteria indicating

- (i) capability of participating in safe, effective, professional patient care with increasing responsibility and progressive autonomy, and
- (ii) the likelihood of successful training through to program completion; such criteria including, without limitation: an applicant's preparedness, history and prior experiences, ability, aptitude, academic credentials, scholarly activities, communication skills, professional attributes and personal qualities such as motivation, integrity and interpersonal skills.

Programs must not discriminate with regard to gender, sexual orientation, race, age, religion, color, national origin, marital status, disability, veteran status, or any other applicable legally protected status.

Candidates for Programs (applicants who are invited for interview) must be informed, in writing or by electronic means, of the terms, conditions and benefits of their appointment, including: financial support; vacations; parental, sick and other leaves of absence; professional liability, hospitalization, health, disability and other insurance provided for the residents and their families and dependents; and the conditions under which the program, institution and participating sites provide call rooms, meals, laundry services, or their equivalents. The Program Director shall provide each candidate with information related to the candidate's eligibility for the relevant specialty board examination.

Applicants must have one of the following qualifications to be eligible for appointment to residency and fellowship programs at SUNY-Downstate:

1. Graduates of medical school in the United States and Canada accredited by the Liaison Committee on Medical Education (LCME);
2. Graduates of colleges of osteopathic medicine in the United States accredited by the American Osteopathic Association (AOA) Commission on Osteopathic College Accreditation.
3. Graduate of medical schools outside the United States and Canada who meet one of the following qualifications:
 - a. Have a currently valid certificate from the Educational Commission for Foreign Medical Graduates prior to appointment, or
 - b. Have a full and unrestricted license to practice medicine in New York.

Candidates must satisfy all credential verification requirements in order to be appointed to SUNY Downstate programs (including presentation of original medical school diploma, original school transcript, signed Deans Letter (MSPE), signed letters of reference, proof of citizenship or legal employment status as well as proof of a valid social security number, ECFMG certification (if applicable),

USMLE or COMLEX transcript, etc.) as well as satisfactory clearance of Employee Health Service requirements and mandatory background checks. (See GME Handbook for additional information and Checklist for Resident/Fellow Credentialing.) Successful completion of USMLE steps or COMLEX parts may be required for appointment in programs at certain levels of training. (See Policy on Completion of USMLE or COMLEX Licensing Examinations.) All credentialing documents must be received and verified before an applicant may be officially appointed or allowed to participate in any clinical activity.

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Subject to ACGME Review Committee specific exceptions adopted by the Program or ACGME conditions applicable to specific fellowship programs, all prerequisite post-graduate clinical education required for initial entry, transfer or application to a Program (for fellows) must be completed in (i) ACGME-accredited residency programs, (ii) AOA-approved residency programs, (iii) Royal College of Physicians and Surgeons of Canada (RCPSC)-accredited or College of Family Physicians of Canada (CFPC)-accredited residency programs located in Canada, or (iv) in residency programs with ACGME International (ACGME-I) Advanced Specialty Accreditation. Programs must obtain verification of each resident's level of competency in the required field upon matriculation using ACGME, CanMEDS or ACGME-I Milestone evaluations from the prior training program (for residents) or core residency program (for fellows).

A physician who has completed a residency program that was not accredited by ACGME, AOA, RCPSC, CFPC, or ACGME-I (with Advanced Specialty Accreditation) may enter into a Program in the same specialty at the PGY-1 level and, at the discretion of the Program Director and, if approved by the GMEC, may be advanced to the PGY-2 level based on the Program's ACGME Milestones. This section of the Policy applies only to entry into a Program for which an initial clinical year is not required for entry. At the election of the Program, the Program may accept an exceptionally qualified international medical graduate (IMG) not satisfying standard eligibility requirements, in accordance with ACGME requirements.

No individuals identified on the U.S. Department of Health and Human Services Office of Inspector General Exclusions List can be appointed to any SUNY Downstate program.

For each Program, the selection of residents should be the responsibility of a committee of the faculty which has the opportunity to review application materials, evaluate candidates against the Program's written selection standards, and agree as a group on those residents to be selected, with final review and approval by the Program Director. Such decisions should ordinarily not be those of an individual Program leader.

In selecting from among qualified applicants, all Programs shall participate in an organized matching program where available, such as the National Residency Matching Program (NRMP), and abide by all Matching Program policies and procedures. Any exceptions to use of a Matching Program or to adherence to the policies and procedures of the Matching Program must be approved by the GME Office and/or GMEC in writing. Any deviations from standard Matching Program procedures and practices may necessitate receiving a waiver, which can only be granted by the NRMP or matching program.

Any Program participating in the NRMP Main Residency Match must abide by the NRMP "All-In" Policy. The Program must register and attempt to fill all its positions through the Match or another national matching program. A "program" for purposes of the NRMP is defined by its ACGME number and not by any separate tracks within the Program. {Note that the NRMP R3 System does allow for creation of distinct or unique program tracks to accommodate special circumstances such as IMGs with funding from their home countries, clinical-research pathways, unexpected openings in advanced specialties where PGY-2 positions can be filled in the year of the Match, religious observance slots, etc.)

The All-In Policy applies to positions for which the NRMP offers matching services, including PGY-1 preliminary and categorical positions and PGY-2 positions in advanced programs. However, PGY-2 (program level) or higher positions in categorical programs and PGY-3 or higher positions in advanced programs are not subject to the Policy because the NRMP does not match for those positions. This policy does not apply to fellowship positions. The results of the Match are delivered to Program Directors on the date specified by the NRMP. Programs are not allowed contact with successful applicants until the national announcement of the Match has taken place.

The only exceptions to the All-In Policy include: post-SOAP positions where preliminary positions are created by programs at the conclusion of the SOAP for partially matched applicants who failed to obtain the PGY-1 position required to fulfill their binding PGY-2 match commitment; Off-cycle appointments if training would begin prior to February 1 in the year of the Match (positions in which training would begin after Feb. 1 must be filled through the Match). Note that if a Program offers a position outside the Match prior to the Program Director registration and program activation, the Program is no longer eligible to enroll in the Match unless the offered position falls into one of the exception categories.

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Any observed or suspected violations of NRMP policies, including improper communication or recruitment practices, must be reported to the GME Office. The Office will evaluate the issue and determine if it must be escalated to the NRMP for resolution.

Programs that do not successfully fill all their positions in the main residency match must abide by NRMP policies regarding unfilled positions. Programs are strongly encouraged to participate in the Supplemental Offer and Acceptance Program (SOAP) of the NRMP to fill all remaining positions. SOAP provides an equitable, transparent, and orderly process for applying to, offering, and accepting positions in programs that did not fill in the algorithm phase of the Main Residency Match. Programs not participating in the SOAP must not attempt to recruit or fill any unfilled positions until all SOAP cycles have completed after the conclusion of Match Week.

When or if programs do not fill through the Match or NRMP SOAP, residents may subsequently be appointed to unfilled positions from the pool of unmatched students, or other sources, if they meet Program, institutional and, if applicable, ACGME standards. Programs may fill open positions with residents transferring from other programs. In both instances, the Program must obtain verification of previous educational experiences, and a summative competency-based performance evaluation prior to acceptance of the transferring resident and ACGME Milestones evaluations upon matriculation. This documentation must be reviewed to determine appropriate training level and readiness for the intended position

Program Directors must not appoint more residents or fellows than approved by the ACGME Review Committee. All complement increases must be approved by the applicable ACGME Review Committee. Program fiscal and educational resources must be adequate to support the number of trainees appointed to the Program. Appointment of or the presence of other learners and other care providers (such as residents in other programs, subspecialty fellows, and advanced practice providers, PhD students, nurse practitioners, etc) must enrich with the appointed resident's education. Fellows should contribute to the education of residents in core programs. The Program must report circumstances when the presence of other learners has interfered with the residents' education to the GMEC and DIO.

Sponsoring and participating sites must assure that all residents are provided with appropriate financial support and benefits to ensure that they are able to fulfill the responsibilities of their educational programs

Failure to comply with recruitment and selection policies or the enrollment of non-eligible residents may be a cause for adverse action by SUNY and/or withdrawal of accreditation by the ACGME or another accrediting agency.

Determination of eligibility for appointment as a resident or fellow to a SUNY Downstate program and the title of Clinical Assistant Instructor is made by the final authority of the SUNY Downstate Health Sciences University GME/Housestaff office and the Department of Human Resources.

Approved by the GMEC and DIO Effective 7/1/2025

Signed by:


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Chairman of the GMEC



DIO

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