

**Supplemental Material**

**TABLE**  
Rural Residency Development Stages, Goals, and Objectives

<b>STAGE 1: EXPLORATION</b>	
<b>Goal 1.1</b>	<p><b>Complete community asset and capacity inventory.</b></p> <ul style="list-style-type: none"> <li>- Assess community assets and resources, as well as capacity for health professions education and training.</li> <li>- Outline community needs and desired outcomes that could be met by program.</li> </ul>
<b>Goal 1.2</b>	<p><b>Assemble a local leadership team.</b></p> <ul style="list-style-type: none"> <li>- Assemble a team that includes representatives of key stakeholders <u>and</u> local individuals with expertise around GME development.</li> <li>- Explore options for residency development and acquire knowledge about specialty training requirements and potential program models, including engaging a consultant knowledgeable in GME requirements or attending relevant national meeting (see toolbox for suggestions).</li> <li>- Define mission for the program.</li> </ul>
<b>Goal 1.3</b>	<p><b>Engage potential financial stakeholders and identify a preliminary governance structure.</b></p> <ul style="list-style-type: none"> <li>- Identify Sponsoring Institution (SI) for the program.</li> <li>- Identify other stakeholders and interested parties.</li> <li>- Complete a high-level draft or preliminary financial pro forma.</li> </ul>
<b>Goal 1.4</b>	<p><b>Make an organizational decision to proceed with investing significant resources in program development.</b></p> <ul style="list-style-type: none"> <li>- Engage adequate support from local community and within planned SI and other participating institutions with both administrative and physician champions.</li> <li>- Decide among the leadership team how the decision to invest further resources will be made and who will decide, explicitly defining the composition of the leadership team.</li> </ul>
<b>STAGE 2: DESIGN</b>	
<b>Goal 2.1</b>	<p><b>Appoint a Program Director (PD) or a PD in development.</b></p> <ul style="list-style-type: none"> <li>- Appoint an acting PD with sufficient time to participate meaningfully in the initial design and development of the program.</li> </ul>
<b>Goals 2.2</b>	<p><b>Complete initial program design.</b></p> <ul style="list-style-type: none"> <li>- Consult with peers and, if needed, experts in program design.</li> <li>- Determine residency clinical home and physical placement, including consideration of an FQHC or RHC site application if needed.</li> <li>- Initiate planning using the specialty-specific ACGME Program Requirements, using the Program Information Form (PIF) for eventual application in this stage as a guide.</li> <li>- Construct a curriculum based upon the teaching resources available within the community and participating institutions.</li> <li>- Draft a map of resident rotation locations during the course of their training.</li> </ul>
<b>Goal 2.3</b>	<p><b>Develop Sponsoring Institutional (SI) Application (if the SI is not already accredited).</b></p> <ul style="list-style-type: none"> <li>- Develop a preliminary plan with hospital(s) administration and needed ambulatory training site(s) to assure adequate resources to meet requirements for residency training.</li> <li>- If SI is not yet accredited, hire or designate a Designated Institutional Official.</li> </ul>

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	<ul style="list-style-type: none"> <li>- File "Intent to Apply for Institutional Accreditation" on ACGME website.</li> <li>- Establish Graduate Medical Education Committee (GMEC) and begin at least quarterly meetings.</li> </ul>
<b>Goal 2.4</b>	<p><b>Using initial program design, complete a detailed pro forma for all phases of program development and sustainability with revenues and expenses.</b></p> <ul style="list-style-type: none"> <li>- Identify available sources of revenue sufficient for start-up and long-term sustainability of the program.</li> <li>- Generate draft "start-up" budget based upon initial program design and curricular mapping.</li> <li>- Generate draft budget/business plan for mature program, with external consultation as needed.</li> <li>- Confirm funding for "start-up"/program development.</li> <li>- Obtain approval for the initial financial model from all needed institutional partners supporting the program.</li> </ul>
<b>Goal 2.5</b>	<p><b>In light of the detailed pro forma, refine program design to include final curriculum outline and site mapping.</b></p> <ul style="list-style-type: none"> <li>- Develop timelines for accreditation and program start-up.</li> <li>- Start writing draft ACGME PIF including finalized curriculum structure/outline.</li> <li>- Get commitments from core partners.</li> <li>- Continue or initiate discussions with other potential partners.</li> </ul>
<b>Goal 2.6</b>	<p><b>Submit SI application (if the SI is not already accredited).</b></p> <ul style="list-style-type: none"> <li>- Complete and submit the SI Application on the ACGME WebADS site.</li> <li>- Receive Initial Accreditation as a SI.</li> </ul>
<b>STAGE 3: DEVELOPMENT</b>	
<b>Goal 3.1</b>	<p><b>Identify key staff support and core faculty members.</b></p> <ul style="list-style-type: none"> <li>- Appoint and pay a residency program coordinator and/or manager.</li> <li>- Identify a long-term PD, if possible, and obtain PD training and/or experience if needed to meet accreditation requirements. This should include, at a minimum, attendance at annual meetings of the ACGME or relevant specialty PD association.</li> <li>- Identify key additional program support staff.</li> <li>- Identify specific core faculty members who will be phased in as functioning faculty members as the program develops.</li> <li>- Create core faculty and staff recruiting plan, if needed.</li> </ul>
<b>Goal 3.2</b>	<p><b>Complete specific program planning.</b></p> <ul style="list-style-type: none"> <li>- Identify ACGME standards that currently can and cannot be met (gap analysis).</li> <li>- Create plan to address ACGME standards currently not able to meet.</li> <li>- Identify specific additional faculty (as required for accreditation application) including specialty teachers.</li> <li>- Participate in ongoing GMEC meetings of the SI.</li> <li>- Complete draft of detailed written curriculum, including goals &amp; objectives.</li> <li>- Finalize locations for resident rotations needed to meet program requirements.</li> <li>- Finalize plans for the resident continuity practice location and logistics.</li> <li>- Identify a Resident Training Management system plan, including tracking and evaluation tools required for program accreditation.</li> </ul>
<b>Goal 3.3</b>	<p><b>Submit ACGME Application.</b></p> <ul style="list-style-type: none"> <li>- Once SI is accredited, or if SI is already accredited, obtain letter from SI about supporting program; open program application for this specific SI program, providing program director and program administrator access to Accreditation Data System (ADS) and program application.</li> <li>- Execute Program Letters of Agreement (PLAs) for rotations with every participating site.</li> </ul>

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	<ul style="list-style-type: none"> <li>- Prepare ACGME application, including program materials such as evaluation system and tools, policies and procedures, faculty roster, Program Information Form, etc.</li> <li>- Complete ACGME Program Application, with final sign-off from the SI's Designated Institutional Official.</li> </ul>
<b>Goal 3.4</b>	<b>Complete ACGME site visit.</b> <ul style="list-style-type: none"> <li>- Site visit scheduled by ACGME.</li> <li>- Complete program documentation in anticipation of site visit.</li> <li>- Accomplish site visit, and provide any additional documentation that is requested in follow-up.</li> </ul>
<b>Goal 3.5</b>	<b>Finalize financial plan for the program.</b> <ul style="list-style-type: none"> <li>- Generate final budget/business plan for completing the program start-up and for the mature program, with external consultation as needed.</li> <li>- Obtain approval for the final financial and business plan from all needed institutional partners supporting the program.</li> </ul>
<b>Goal 3.6</b>	<b>Obtain ACGME accreditation.</b>
<b>STAGE 4: START-UP</b>	
<b>Goal 4.1</b>	<b>Develop plan for resident marketing and recruitment.</b> <ul style="list-style-type: none"> <li>- List new program in the Electronic Residency Application Service (ERAS).</li> <li>- Enroll in the National Resident Matching Program (NRMP).</li> <li>- Create website.</li> </ul>
<b>Goal 4.2</b>	<b>Complete program infrastructure.</b> <ul style="list-style-type: none"> <li>- Hire a long-term PD, if not already accomplished in prior stages.</li> <li>- Finalize clinical space layout and other changes.</li> <li>- Hire core faculty and additional program support staff.</li> <li>- Plan for implementation of curriculum and evaluation systems.</li> <li>- Orient faculty and staff to differences of teaching environment; faculty development.</li> <li>- Finalize electronic health record (EHR) adaptation for residency practice, e.g. Incorporate templates into EHR.</li> </ul>
<b>Goal 4.3</b>	<b>Establish annual budget (based on earlier pro forma).</b> <ul style="list-style-type: none"> <li>- Establish processes for annual budget preparation and approval, cost accounting, and reconciliation</li> </ul>
<b>Goal 4.4</b>	<b>Fill program positions through the NRMP Match.</b> <ul style="list-style-type: none"> <li>- Complete first resident interview season.</li> <li>- Complete first resident match!</li> <li>- Sign resident contracts.</li> </ul>
<b>Goal 4.5</b>	<b>Matriculate and orient initial class of residents.</b> <ul style="list-style-type: none"> <li>- Prepare orientation and onboarding plan.</li> </ul>
<b>STAGE 5: MAINTENANCE</b>	
<b>Goal 5.1</b>	<b>Annually recruit residents.</b>
<b>Goal 5.2</b>	<b>Maintain accreditation.</b>
<b>Goal 5.3</b>	<b>Maintain financial solvency; budget and reconcile budget annually.</b>
<b>Goal 5.4</b>	<b>Recruit and retain faculty.</b>
<b>Goal 5.5</b>	<b>Track program educational and clinical outcomes and ensure ongoing performance improvement, adaptability, and resilience.</b>

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<b>Goal 5.6</b>	<b>Contribute to the community of practice in rural GME through dissemination of innovations and peer consultation.</b>
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