

Responsibilities of the Graduate Medical Education Committee

1.0 Purpose:

To describe the Texas Health Resources (“Hospital”) or (“Sponsoring Institution”) Graduate Medical Education Committee (“GMEC”), its membership and responsibilities.

2.0 Policy Statement:

- 2.1 An organized administrative system, led by a Designated Institutional Official (DIO) in collaboration with a GMEC, must oversee all American Council of Graduate Medical Education (“ACGME”) accredited programs of the Hospital as the Sponsoring Institution (ACGME accredited programs are hereafter referred to as “Programs”).
- 2.2 The GMEC is a standing committee of the Hospital.
- 2.3 The GMEC shall meet at least quarterly.

3.0 Procedure:

3.1 Membership

A Sponsoring Institution with multiple Programs must have a GMEC that includes at least the following voting members:

- 3.1.1 the DIO
- 3.1.2 a representative sample of program directors (minimum of two) from its Programs
- 3.1.3 a minimum of two peer-selected residents/fellows from among its Programs; and,
- 3.1.4 a quality improvement or patient safety officer or designee.

3.2 The GMEC is responsible for oversight of:

- 3.2.1 the ACGME accreditation status of the Sponsoring Institution and each of its Programs;
- 3.2.2 the quality of the GME learning and working environment within the Sponsoring Institution, each Program and its participating sites;
- 3.2.3 the quality of educational experiences in each Program that lead to measurable achievement of educational outcomes as identified in the

- ACGME Common and specialty/subspecialty-specific Program Requirements;
- 3.2.4 each Program's annual program evaluation and self-studies; and
 - 3.2.5 all processes related to reductions and closures of any Program, major participating sites, and the Sponsoring Institution.
 - 3.2.6 the provision of summary information of patient safety reports to residents, fellows, faculty members, and other clinical staff members. At a minimum, this oversight must include verification that such summary information is being provided.
- 3.3 The GMEC is responsible for review and approval of:
- 3.3.1 institutional GME policies and procedures;
 - 3.3.2 annual recommendations to the Sponsoring Institution's administration regarding resident/fellow stipends and benefits;
 - 3.3.3 applications for ACGME accreditation of new Programs;
 - 3.3.4 requests for permanent changes in resident/fellow complement;
 - 3.3.5 major changes in each Program's structure or duration of education;
 - 3.3.6 additions and deletions of each of Program's participating sites;
 - 3.3.7 appointment of new Program Directors;
 - 3.3.8 progress reports requested by the Review Committee;
 - 3.3.9 responses to Clinical Learning Environment Review (CLER) reports;
 - 3.3.10 requests for exceptions to clinical and educational work hour requirements;
 - 3.3.11 voluntary withdrawal of Program accreditation;
 - 3.3.12 requests for appeal of an adverse action by the Review Committee;
 - 3.3.13 appeal presentations to an ACGME Appeals Panel; and
- 3.4 Annual Institutional Review (AIR)
- 3.4.1 The GMEC must demonstrate effective oversight of the Sponsoring Institution's accreditation through an Annual Institutional Review (AIR).
 - 3.4.2 The GMEC must identify institutional performance indicators for the AIR, which include at a minimum:
 - a. the most recent ACGME institutional letter of notification
 - b. results of ACGME surveys of residents/fellows and core faculty members; and,
 - c. notification of each of its Programs' ACGME accreditation information, including accreditation statuses and citations.
 - 3.4.3 The AIR must include monitoring procedures for action plans resulting from the review.
- 3.5 The DIO is responsible for the annual submission of a written executive summary of the AIR to the Sponsoring Institution's Governing Body. The written executive summary must include:

3.5.1 summary of institutional performance on indicators for the AIR; and,

3.52 action plans and performance monitoring procedures resulting from the AIR.

3.6 The GMEC must demonstrate effective oversight of underperforming Program(s) through a Special Review process. For more information, review the *Special Review* policy.

4.0 Related Documentation and/or Attachments:

4.1 Graduate Medical Education *Special Review* policy.