

IDENT	GME1
Type of Document	Policy
Applicability Type	Department-Level
Title of Owner	Dir GME
Title of Approving Official	Dir GME
Date Effective	7/16/2020
Date of Next Review	7/16/2023



TITLE: Graduate Medical Education Committee (GMEC)

POLICY STATEMENT: GMEC is responsible for oversight and governance of all ACGME (Accreditation Council for Graduate Medical Education) and CODA (Commission on Dental Accreditation) accredited programs at UVM Medical Center. The GMEC monitors all aspects of residencies/fellowships to ensure substantial compliance with the institutional, common program and specialty/subspecialty requirements of the ACGME and CODA.

PROCEDURE:

- Committee members include
 - Committee chair person - GME Designated Institutional Official (DIO);
 - At least 2 GME Program Directors;
 - A minimum of 2 peer selected residents/fellows;
 - Vice President of Quality and Operational Effectiveness or his/her designee;
 - Two peer selected GME Program Administrators; and
 - GME Director
- GMEC normally meets monthly but must meet at a minimum once a quarter. The GME office is responsible for keeping the meeting minutes that document the execution of all required GMEC functions and responsibilities. GMEC meetings must be attended by at least one resident/fellow voting member. When necessary, electronic voting may be utilized.
- GMEC subcommittees may be formed as needed.
 - Subcommittees that address required GMEC responsibilities must include a peer-selected resident/fellow.
 - Subcommittee actions that address required GMEC responsibilities must be reviewed and approved by the GMEC.
- GMEC responsibilities include oversight of:
 - ACGME accreditation status of UVM Medical Center and our ACGME accredited GME training programs;
 - Quality of the GME learning and working environment;
 - Quality of the educational experiences that lead to measurable achievement of educational outcomes as identified in the ACGME Common and specialty/subspecialty-specific Program Requirements;
 - UVM Medical Center's institutional annual review;
 - GME training programs' annual evaluations and self-studies;
 - All processes related to reductions and closures of GME training programs, major participating sites, and the sponsoring institution,; and
 - Verification that programs are provided summary information of patient safety reports
- GMEC must review and approve:
 - Institutional GME policies and procedures;
 - Annual recommendations to the UVM Medical Center administration regarding resident/fellow stipends and benefits;
 - Application for ACGME accreditation of new programs;
 - Requests for permanent changes in resident/fellow complement;
 - Major changes in GME training structure or duration of education;
 - Additions and deletions of participating sites
 - Appointment of new program directors;
 - Progress reports requested by an ACGME Review Committee;
 - Responses to Clinical Learning Environment Review (CLER) reports;
 - Requests for exceptions to clinical and educational work hour requirements;

Documents Status: **Approved**

- Voluntary withdrawal of ACGME program accreditation;
- Requests for appeal of an adverse action by an ACGME Review Committee; and
- Appeal presentations to an ACGME Appeals Panel.
- Oversight of the Sponsoring Institution accreditation status for the UVM Medical Center through an Annual Institutional Review (AIR)
 - The AIR must identify instructional performance indicators which must include:
 - Most recent ACGME institutional letter of notification;
 - Results of the most recent institutional self-study visit;
 - Results of ACGME surveys of residents/fellows and core faculty members; and
 - Notification of each of its GME programs' ACGME accreditation statuses and citations and self-study visits.
 - The AIR must include monitoring procedures for action plans resulting from the review.
 - The DIO must submit a written annual executive summary of the AIR to the UVM Medical Center Board of Trustees. The summary must include:
 - Summary of institutional performance on indicators for the AIR; and,
 - Action plan(s) and performance monitoring procedures resulting from the AIR.
- GMEC must demonstrate effective oversight of underperforming program(s) through the Special Review process (GME 10). The Special Review process must include a protocol that:
 - Establishes criteria for identifying underperformance; and
 - Results in a report that describes the quality improvement goals, the corrective actions, and the process for GMEC monitoring of outcomes.

DEFINITIONS: None

REFERENCES: Accreditation Council for Graduate Medical Education, Institutional Requirements

REVIEWERS: Melissa Davidson MD, Associate Dean for GME, DIO

OWNER: Karen Miller, Dir GME

APPROVING OFFICIAL: Dir GME

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