

DEPARTMENT OF MEDICAL EDUCATION

Responsibilities of the Graduate Medical Education Committee (GMEC)

(Adapted from the ACGME Institutional Requirements)

The GMEC along with the Designated Institutional Official (DIO) have the authority and responsibility for the **oversight** and **administration** of the Sponsoring Institution's ACGME-accredited programs, as well as responsibility for **ensuring compliance** with the ACGME Institutional, Common, and Specialty/Subspecialty-Specific Program Requirements, and the Sponsoring Institution's Governing Body. The GMEC responsibilities must include:

A- Oversight of:

- The ACGME accreditation status of the Sponsoring Institution and its ACGME-accredited programs
- The quality of the GME learning and working environment within the Sponsoring Institution, its ACGME accredited programs, and its participating sites
- The quality of educational experiences in each ACGME-accredited program that lead to measurable achievement of educational outcomes as identified in the ACGME Common and specialty/subspecialty-specific Program Requirements
- The ACGME-accredited programs' annual evaluation and self-studies
- All processes related to reductions and closures of individual ACGMEaccredited programs, major participating sites, and the Sponsoring Institution.
- 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

B- Review and approval of:

- The institutional GME policies and procedures
- Annual recommendations to the Sponsoring Institution's administration regarding resident/fellow stipends and benefits

- Applications for ACGME accreditation of new programs
- Requests for permanent changes in resident/fellow complement
- Major changes in each of its ACGME-accredited programs' structure or duration of education
- Additions and deletions of each of its ACGME-accredited programs' participating sites
- Appointment of new program directors
- Progress reports requested by a Review Committee
- Responses to Clinical Learning Environment Review (CLER) reports
- Requests for exceptions to duty hour requirements
- Voluntary withdrawal of ACGME program accreditation
- Requests for appeal of an adverse action by a Review Committee
- Appeal presentations to an ACGME Appeals Panel.

C- Demonstrate effective oversight of the Sponsoring Institution's accreditation through an Annual Institutional Review (AIR)

- The GMEC must identify **institutional performance indicators** for the AIR which include:
 - \circ $\,$ The most recent ACGME institutional letter of notification
 - Results of ACGME surveys of residents/fellows and core faculty members
 - Each of its ACGME-accredited program's ACGME accreditation information, including accreditation statuses and citations.
- The DIO must submit a written annual executive summary of the AIR to the Sponsoring Institution's Governing Body. The written summary must include:
 - $\circ~$ A summary of institutional performance indicators for the AIR
 - Action plans and performance monitoring procedures resulting from the review.

D- Demonstrate effective oversight of underperforming programs through a Special Review process.

- The Special Review process must include a protocol that:
 - $\circ~$ Establishes criteria for identifying underperformance
 - Results in a report that describes the quality improvement goals, the corrective actions, and the process for GMEC monitoring of outcomes.

As of August 2018