Purpose and Duties of the Graduate Medical Education Committee
IUSM-GME-PO-0036

Scope
This policy applies to the Graduate Medical Education Committee (GMEC) and each of its members.

Reason for Policy
The charge of the Indiana University School of Medicine (IUSM) GMEC is to establish and implement policies and procedures regarding the quality of education and the learning environment for residents in training programs sponsored by IU School of Medicine. To achieve this purpose, the GMEC provides oversight and assurance of compliance for ACGME standards with the goal to produce excellent future physicians.

Policy Statement
The existence of this committee is an Institutional Requirement of the Accreditation Council for Graduate Medical Education (ACGME).

A. The GMEC’s responsibilities include:
1. Oversight of:
   a) the ACGME accreditation status of Indiana University School of Medicine and its ACGME-accredited programs;
   b) the quality of the GME learning and working environment within Indiana University School of Medicine, its ACGME-accredited programs, and its participating sites;
   c) 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;
   d) the ACGME-accredited programs’ annual evaluation (APE) and improvement activities, including special reviews (when necessary);
   e) all processes related to reductions and closures of individual ACGME-accredited programs, major participating sites, and Indiana University School of Medicine; and,
   f) Oversight of the Annual Institutional Review (AIR) report and institution’s response.

2. Review and Approval of:
   a) institutional GME policies and procedures;
   b) annual recommendations to the Indiana University School of Medicine administration regarding resident stipends and benefits;
   c) applications for ACGME accreditation of new programs;
   d) requests for permanent or temporary changes in resident/fellow complement;
   e) major changes in ACGME-accredited programs’ structure or duration of education;
   f) additions and deletions of ACGME-accredited programs’ participating sites;
   g) appointment of new program directors;
   h) progress reports requested by a Review Committee;
   i) responses to Clinical Learning Environment Review (CLER) reports;
   j) requests for exceptions to duty hour requirements;
   k) voluntary withdrawal of ACGME program accreditation;
   l) requests for appeal of an adverse action by a Review Committee; and,
   m) appeal presentations to an ACGME Appeals Panel.

B. Individual Responsibility of GMEC Members:
   Members chosen to participate in the GMEC are expected to:
   a) Attend regularly scheduled meetings of the GMEC. Attendance is a factor in reappointment to the GMEC;
   b) Participate on GMEC subcommittees and working groups;
   c) Be aware of all recent issues discussed by the GMEC and their recommendations;
   d) Actively participate in the required decision making related to graduate medical education concerns both locally and nationally;
e) Disseminate information from meeting to key faculty, trainees, staff, and all other members of the educational program;
f) If unable to attend a meeting, assign a delegate to attend GMEC who will participate in your absence.

C. Annual Institutional Review (AIR):
The GMEC must demonstrate effective oversight of Indiana University School of Medicine’s accreditation through an AIR. The GMEC must identify institutional performance indicators for the AIR which include results of the most recent institutional self-study visit, results of ACGME surveys of residents/fellows and core faculty, and, notification of ACGME-accredited programs’ accreditation statuses 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 Governing Body.

D. Special Reviews:
The GMEC must demonstrate effective oversight of underperforming programs through a Special Review process. 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.

E. Membership:
The GMEC will include the following voting members:
   a) the DIO;
   b) a representative sample of program directors from its ACGME-accredited programs:
   c) a minimum of two peer-selected residents/fellows; and,
   d) a quality improvement/safety officer or his or her designee.
   e) Program coordinator representatives

F. Subcommittees:
In order to carry out portions of the GMEC’s responsibilities, additional GMEC membership may include others as determined by the GMEC. 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.

G. Meetings and Attendance:
The GMEC must meet a minimum of once every quarter during each academic year. Each meeting of the GMEC must include attendance by at least one resident/fellow member. The GMEC must maintain meeting minutes that document execution of all required GMEC functions and responsibilities.
Procedures

A. Selection and Appointment of Members: The GMEC roster will be reviewed annually by the GMEC Chair and DIO. Proposed changes will be sent to the Executive Associate Dean of Faculty Affairs and Professional Development. Experience in residency program leadership and diversity will be considered as part of the appointment process. Each GMEC member will be encouraged to name an alternate to attend meetings in his/her place as necessary.

B. Business Procedure: The simplified version of Robert’s Rules of Order will be used as a template for the conduct of GMEC meetings. Minutes will be generated as a result of each meeting, and distributed to committee members.

1. Materials for all meetings will be posted online. Members will be notified via e-mail when materials are available.
2. Voting: A quorum must be present for voting to take place. At least one resident member must be present to form a quorum.

Definitions

ACGME is the Accreditation Council for Graduate Medical Education.

A resident is an IUSM resident or fellow, or a non-IUSM resident or fellow electively rotating through IUSM and provides clinical care as part of a GME program.

Implementation

The Designated Institutional Official (DIO) for Graduate Medical Education is responsible for implementation of this policy.

Oversight

Policy authority for this document resides with the GMEC. The DIO and the GMEC are responsible for oversight. This policy will be reviewed every three years or more often if deemed necessary.

Related Information

ACGME Institutional Requirements: http://www.acgme.org/Portals/0/PDFs/FAQ/InstitutionalRequirements_07012015.pdf

ACGME Common Program Requirements http://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRs_2017-07-01.pdf

History
1. Policy IUSM-GME-PO-0036 approved by GMEC and published on 01 July 2014.
2. Policy reviewed, updated, and approved by GMEC on 22 August 2014.