



INDIANA UNIVERSITY

SCHOOL OF MEDICINE

Purpose and Duties of the Graduate Medical Education Committee

gme-adm-0036

About This Policy

Effective Dates:

07-01-2014

Last Updated:

10-12-2021

Responsible University Administrator:

Senior Associate Dean for GME

Policy Contact:

GME Assistant Director Emilie Leveque

eleveque@iu.edu

Scope

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

Policy Statement

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

A. 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;
- d. hospital administrative representatives;
- e. a quality improvement/safety officer or his or her designee;
- f. Non-ACGME program director member; and
- g. program coordinator representatives.

B. The GMEC's responsibilities include:

- a. 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 program(s)' annual program evaluations and self-studies);
 - e. all processes related to reductions and closures of individual ACGME-accredited programs, major participating sites, and Indiana University School of Medicine; and,
 - f. 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:
- 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 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 clinical and educational work 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.

C. 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.

D. 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 member. The GMEC must maintain meeting minutes that document execution of all required GMEC functions and responsibilities.

E. 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 the most recent ACGME institutional letter of notification, results of ACGME surveys of residents and core faculty, and, each of its ACGME-accredited programs' ACGME accreditation information, including accreditation statuses and citations.

The DIO must submit a written annual executive summary of the AIR to the Governing Body. The written executive summary must include a summary of institutional performance on indicators for the AIR, and action plans and performance monitoring procedures resulting from the AIR.

F. 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.

G. 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. Subcommittee actions that address required GMEC responsibilities must be reviewed and approved by the GMEC.

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.

Procedure

- 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 and Diversity. 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. A condensed version of the minutes will also be emailed to all program directors.
 - a. Materials for all meetings will be posted online via MedHub. Members will be notified via e-mail when materials are available.
 - b. Voting: A quorum must be present for voting to take place. At least one resident member must be present to form a quorum.
- C. **Consent Agenda**
 - a. A consent agenda will be used to vote for routine business items that do not require discussion by the assembled committee. Voting committee members will receive all pertinent support materials via email, and an electronic ballot for voting.
 - b. Any member may request to have an item pulled from the consent agenda for further discussion at the following GMEC meeting.
 - c. A quorum must be reached before the item passes. The quorum for a consent agenda ballot is a simple majority (including at least one resident).
 - d. All consent agendas will be open for a minimum of one week.

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.

History

1. Policy gme-adm-0036 approved by GMEC and published on 01 July 2014.
2. Policy reviewed, updated, and approved by GMEC on 22 August 2014.
3. Policy updated for formatting 05 March 2018.
4. Policy updated for formatting 27 June 2018.
5. Policy reviewed by Policies & Procedures Subcommittee 2 October 2019.
6. Policy updated 2 May 2021.
7. Policy reviewed and updated 12 October 2021.
8. Policy approved by GMEC 20 October 2021.