Graduate Medical Education Committee

I. Introduction

Each sponsoring institution must have a Graduate Medical Education Committee (GMEC). The GMEC establishes and implements policies and procedures regarding the quality of education and the work environment for the residents in all programs. These policies and procedures will be described below.

II. Policy

a. GMEC at UNSOM is comprised of all program directors of accredited and representative unaccredited programs, residency coordinators from all programs, peer selected residents from all programs, hospital administrators, the DIO and the institutional GME coordinator. Administrative support is supported by the GME office.

b. The GMEC meets monthly:
   - Las Vegas: second Thursday of the odd months (January, March, May, etc.)
   - Reno: second Wednesday of the even months (February, April, June, etc.)
   - A joint meeting is held in July to discuss institutional issues, update citations, review institutional citations and reaffirm the institution’s support of GME.

c. Specific GMEC responsibilities:
   - Annually review and make recommendations to the sponsoring institution regarding resident stipends, benefits, and funding for resident positions.
   - Ensure that communication mechanisms exist between the GMEC and all program directors within the institution.
   - Ensure that program directors maintain effective communication mechanisms with the site directors at each participating site for their respective programs to maintain proper oversight at all clinical sites.
   - Develop and implement written policies and procedures regarding resident duty hours to ensure compliance with the institutional, common and specialty/subspecialty-specific program requirements.
   - Consider for approval requests from program directors prior to submission to an RRC for exceptions in the weekly limit on duty hours.
   - Monitor programs’ supervision of residents and ensure that supervision is consistent with provision of safe and effective patient care, educational needs of residents, progressive responsibility appropriate to residents’ level of education, competence, and experience and other program requirements.
   - Communicate with medical staff – between leadership of the medical staff regarding the safety and quality of patient care including an annual report to the organized medical staff, description of resident participation in patient safety
and quality of care education, and the accreditation status of programs and any citations regarding patient care issues.

- Assure that each program provides a curriculum and an evaluation system that enables residents to demonstrate achievement of the ACGME general competencies as defined in the common and specialty/subspecialty specific requirements.
- Works to ensure appropriate policies on selection, evaluation, promotion, transfer, discipline and/or dismissal of residents in compliance with the institutional and common program requirements.
- Reviews all ACGME program accreditation letters of notification and monitors action plans for correction of citations and areas of noncompliance.
- Manages institutional accreditation but reviewing the sponsoring institution’s ACGME letter of notification from the IRC and monitors plans for correction of citations and areas of non compliance.
- Provides oversight to program changes including the review of documents that need to be sent to the ACGME by program directors including:
  i. Applications for ACGME accreditation of new programs
  ii. Changes in resident complement
  iii. Major changes in program structure or length of training
  iv. Additions and deletions of participating sites
  v. Appointments of new program directors
  vi. Progress reports requested by any review committee
  vii. Responses to all proposed adverse actions
  viii. Requests for exceptions of resident duty hours
  ix. Voluntary withdrawal of program accreditation
  x. Requests for an appeal of an adverse action
  xi. Appeal presentations to a board of appeal or the ACGME
- Provides oversight of all phases of educational experiments and innovations that may deviate from the institutional, common and specialty/subspecialty specific program requirements.
- Provides oversight of reductions and closures related to individual programs, major participating sites and the sponsoring institution.
- Provides a statement or institutional policy that addresses interactions between vendor representatives/corporations and residents/GME programs.