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*SAMPLE HOSPITAL*  
Graduate Medical Education Committee

**I. PURPOSE:**

To establish and maintain a Graduate Medical Education Committee (GMEC) that is in compliance with ACGME Institutional Requirements. The GMEC must:

- In collaboration with the Designated Institutional Official (DIO), have authority and responsibility for the oversight and administration of [ Name of Hospital]'s ACGME-accredited programs including those sponsored by [ Name of Hospital] as well as those in which [ Name of Hospital] is a participating institution.
- Ensure that [ Name of Hospital] programs are in compliance with ACGME Institutional, Common and specialty-specific Program Requirements and other accrediting organizations.

The Committee shall not be responsible for the administrative management of individual residency programs but shall expect that the Committee's and [ Name of Hospital]'s policies be implemented by each residency's Program Director and administrative staff.

**II. POLICY:**

**A. Organization**

The Graduate Medical Education Committee is an administrative committee chaired by the Designated Institutional Official (DIO) or other member appointed to be Chair by the CMO, CEO and/or DIO.

**B. Membership**

The Graduate Medical Education Committee shall be composed of, at a minimum:

- [ Name of Hospital]'s Designated Institutional Official (DIO), with vote, who shall chair the Committee; [If another member is chair, use this sentence by that persons entry]
- The Program Director for each program sponsored by [Name of Hospital], with vote;
- A quality improvement or patient safety officer or designee, with vote;
- A minimum of two peer-selected residents from [Name of Hospital]'s ACGME-accredited programs, with vote, at least one of whom shall be present at each meeting;
- Other identified individuals, with or without vote, as determined by the GMEC.

The Chair may invite other individuals to advise the Committee, without vote, as needed.

**Membership Terms: [if applicable]**

Members shall serve for the durations of their terms in office. Resident members shall serve for 1-year terms and may be reappointed. Other appointed members shall serve for 2-year terms and may be reappointed.

**C. Meetings:**

1. The Committee shall meet a minimum of once a month [or what you do] during each academic year and at the call of the Chair.

2. Each meeting must include attendance by at least one peer-selected resident or fellow.
3. GMEC will maintain meeting minutes which document execution of all required GMEC responsibilities and functions.

**D. Responsibilities of the Graduate Medical Education Committee include:**

1. Oversight of:

- a. ACGME accreditation status of the Institution and the ACGME- accredited programs.
- b. The quality of the GME learning and working environment within [Name of Hospital] ACGME-accredited programs and other participating sites
- c. The quality of the educational experiences in each ACGME-accredited program that leads 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 the Sponsoring Institution.
- 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.

2. Review and Approval of:

- a. Institutional GME policies and procedures
- b. Annual recommendations to [ Name of Hospital] administration regarding resident/fellow stipends and benefits
- c. Applications for ACGME accreditation for new programs;
- d. Requests for permanent changes in resident complement;
- e. Major changes in program structure or length of training;
- f. Additions and deletions of 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 appeal presentations to an ACGME Appeals Panel.

3. Annual Institutional Review:

- The GMEC must demonstrate effective oversight of [Name of Hospital]'s accreditation through an Annual Institutional Review (AIR).
- The GMEC must identify institutional performance indicators for the AIR which must include, at a minimum:
  - a. The most recent ACGME institutional letter of notification;
  - b. Results of ACGME surveys of residents/fellows and core faculty members;
  - c. Each of its ACGME-accredited program's ACGME accreditation information, including statuses and citations.

- The DIO must annually submit a written executive summary of the AIR to the Sponsoring Institution’s Governing Body. The written executive summary must include:
  - A summary of the institutional performance on indicators for the AIR
  - Action plans and performance monitoring procedures resulting from the AIR.

4. Oversight of underperforming programs:

- The GMEC must demonstrate effective oversight of underperforming program(s) through a Special Review process
- The Special Review process must include a protocol that establishes criteria for identifying underperformance.
- The Special Review process must result in a report that describes the quality improvement goals, corrective actions and the process for GMEC monitoring of outcomes.

The Committee shall also consider any other issues related to the quality of residency training submitted by residents, faculty, or staff of [Name of Hospital]. Reference: Special Review Policy.

5. Peer-Selected Resident Responsibilities:

- Present “Resident Report at GMEC meetings
  - Should be determined ahead time in consultation with all representatives (if possible) and resident colleagues
  - Respond to comments and clarifying questions
  - Be prepared to present possible solutions to issues discussed
  - If questions about appropriateness for forum, you can discuss with (DIO/Director of Medical Education)
- Elicit feedback for Resident Report from resident colleagues
- Report back to resident colleagues at house staff meeting about most recent GMEC
- Serve as the conduit for resident issues to be brought to the GMEC

### III. PROCEDURES:

1. The Committee will meet [add meeting frequency].
2. Forty percent [or what you determine] of voting members shall be considered a quorum.
3. Personnel who wish to refer issues for Committee consideration shall formulate those issues, in writing, and submit them to the Committee Chair.
4. Minutes will be maintained which document execution of all required GMEC responsibilities.
5. The Chair may appoint such subcommittees as are necessary to address GMEC responsibilities. Subcommittees must include a peer-selected resident
6. Subcommittee actions that address required GMEC responsibilities must be reviewed and approved by the GMEC.
7. The Chair shall establish such procedures as are necessary to pursue its work efficiently.

Reviewed/approved by GMEC: [add date]