

Project Vida Healthcare  
Center Graduate Medical  
Education Policies and  
Procedures

**Graduate Medical Education Committee (GMEC)  
Policy**

APPROVED: /7/26/2023

EFFECTIVE DATE: 7/26/2023

REVISED:

PURPOSE: An organized administrative system of Project Vida Health Center led by a Designated Institutional Official (DIO), shall maintain a Graduate Medical Education Committee (GMEC) to oversee, support, administer to ensure compliance with the ACGME-accredited residency program(s) of the Sponsoring Institution.

**POLICY**

**Membership:**

A Sponsoring Institution with one program must have a GMEC that includes at least the following voting members:

- The DIO;
- one program director when the program director is not the DIO;
- one of the programs core faculty members other than the program director, if the program includes core faculty members other than the program director;
- a minimum of two peer-selected residents/fellows from among its ACGME-accredited program or the only resident/fellow if the program includes only one resident/fellow;
- the individual or designee responsible for monitoring quality improvement or patient safety if this individual is the DIO or program director; and
- one or more individuals who are actively involved in GME, are outside the program, and are not the DIO or the quality improvement or patient safety member,

Additional GMEC members and subcommittees; In order to carry out portions of the GMEC 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

## **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.

The DIO, Program Directors or one designee, resident representative, and quality improvement/patient safety officer or one designee are considered GMEC voting members. A quorum is considered when 50 % of voting members are in attendance and necessary for the validation of a vote.

- Majority of votes are needed for a motion to be passed.
- If and when a quorum cannot be formed and or an item needs to be approved before the next GMEC meeting a form of electronic communication will be used with a time limit. Non-responses by deadline will count as a no objection to approve the motion.

## **GMEC Responsibilities**

Oversight of:

- ACGME institutional accreditation for all ACGME accredited residency programs
- the learning and working environment that will facilitate patient safety and health care quality within the Sponsoring Institution 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 program(s)' annual evaluation and improvement activities; and,
- All processes related to reductions and closures of individual ACGME-accredited programs, major participating sites, and the Sponsoring Institution.

Review and approval of:

- 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; and,

- appeal presentations to an ACGME Appeals Panel.

The GMEC must 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:
  - results of the most recent institutional notification letter;
  - results of ACGME surveys of residents/fellows and core faculty members; and,
  - notification of each of its ACGME-accredited programs' accreditation statuses, citations and self-study visits.
- The DIO must submit annually a written executive summary of the AIR to the Governing Body
  - a summary of institutional performance on indicators for the AIR; and,
  - action plans and performance monitoring procedures resulting from the AIR.

The GMEC must demonstrate effective oversight of underperforming program(s) through a Special Review process (Refer to GMEC Special Review Process Policy for detailed procedure).

A handwritten signature in black ink, appearing to read "C. Gage".

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Designated Institutional Official