

**CONEMAUGH MEMORIAL MEDICAL CENTER
GRADUATE MEDICAL EDUCATION POLICY**

**GRADUATE MEDICAL EDUCATION COMMITTEE
OVERSIGHT, REVIEW AND APPROVAL POLICY**

Purpose

The purpose of this policy is to ensure that the Graduate Medical Education Committee (GMEC) and the Designated Institutional Official (DIO) have appropriate oversight for reviewing and approving all documents and correspondence sent to the Accreditation Council for Graduate Medical Education (ACGME) per the Institutional Requirements.

Applies

To all Conemaugh Memorial Medical Center residency/fellowship programs.

Policy

A. GMEC is responsible for the oversight of:

1. The ACGME accreditation status of the Sponsoring Institution and each of its ACGME-accredited programs;
2. The quality of the GME learning and working environment within the Sponsoring Institution, each of its ACGME accredited programs, and its participating sites;
3. The quality of educational experiences in each ACGME accredited program;
4. The ACGME-accredited program(s)' annual evaluation and improvement activities; and,
5. All processes related to reductions and closures of individual ACGME-accredited programs, major participating sites, and the Sponsoring Institution

B. GMEC is responsible for the review and approval of:

1. Institutional GME policies and procedures;
2. Annual recommendations to the Sponsoring Institution's administration regarding resident/fellow stipends and benefits;
3. Applications for ACGME accreditation of new programs;
4. Requests for permanent changes in resident/fellow complement;
5. Major changes in each of its ACGME-accredited programs' structure or duration of education;
6. Additions and deletions of each of its ACGME-accredited programs' participating sites;
7. Appointment of new program directors;
8. Progress reports requested by a Review Committee;
9. Responses to Clinical Learning Environment Review (CLER) reports;

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10. Requests for exceptions to duty hour requirements;
 11. Voluntary withdrawal of ACGME program accreditation;
 12. Requests for appeal of an adverse action by a Review Committee; and,
 13. Appeal presentations to an ACGME Appeals Panel.
- C. The GMEC must demonstrate effective oversight of the Sponsoring Institution's accreditation through an Annual Institutional Review (AIR).
- D. The GMEC must identify institutional performance indicators for the AIR, which include:
1. Results of the most recent institutional self-study visit;
 2. Results of ACGME surveys of residents/fellows and core faculty members; and,
 3. Notification of each of its ACGME-accredited programs' accreditation statuses and self-study visits.
- E. The AIR must include monitoring procedures for action plans resulting from the review
1. Any item listed above that is found to be out of compliance will be monitored at every Graduate Medical Education Committee (GMEC) meeting for progress toward completion.
- F. The DIO must submit a written annual executive summary of the AIR to the Governing Body.

References

IR: I.B (GMEC Responsibilities)

GMEC Revised: 1/2016, 3/2018

Reviewed by GMEC: 11/03, 8/2004, 10/2005, 12/2006

Approved by GMEC: 11/03