

## **GMEC Composition and Responsibilities Policy #0.01**

- I. **Policy Statement:** The purpose of this policy is to define the committee structure and responsibilities of the Graduate Medical Education Committee (GMEC) for the KCU-GME Consortium.
- II. **Reason for Policy:** This policy is in accordance with the institutional and common program requirements set by the Accreditation Council for Graduate Medical Education (ACGME).
- III. **Frequency of Meetings:** The GMEC is a standing committee that meets a minimum of once every quarter during each academic year.
- IV. **Structure:** The GMEC is the governing body of the consortium and serves to monitor and oversee the accreditation of the sponsoring institution and its ACGME-accredited residency programs. The work of the GMEC is operationalized by a team of subcommittees, each of which addresses specific GMEC responsibilities. The GMEC and its subcommittees conduct business in person and virtually with e-vote if warranted. Refer to the KCU-GME Consortium Committee Handbook, located in the KCU GME Department, for detailed information regarding GMEC and subcommittee responsibilities.

**Membership:** Membership of the GMEC includes at least the DIO; a minimum of two (2) residency program directors from ACGME-accredited programs; a minimum of two (2) peer-selected residents from the ACGME-accredited programs; and a quality improvement or patient safety officer or designee.

**Quorum:** Greater than 50% of voting members and at least one resident member are needed to achieve quorum.

**Peer-Selected Residents:** Annually, all current and incoming residents are emailed a *call for nominations* for the Resident Forum, GMEC, and GMEC subcommittees. After nominations close, a ballot goes out to all residents to vote on whom they select to be the resident forum chair, resident forum vice-chair, and members of the GMEC and each subcommittee. Residents anonymously cast their votes by completing the ballot. The KCU GME Department tallies the votes and presents the results at the next GMEC meeting. Each selected resident is emailed a congratulatory notice with a committee handbook including responsibilities and dates of meetings. Program directors are responsible for providing protected time for peer-selected residents to participate in committee meetings.

**Meeting Minutes:** The GMEC maintains meeting minutes that document execution of all required GMEC functions and responsibilities.

## V. **Responsibilities**

### **Oversight of:**

- ACGME accreditation and recognition statuses of the KCU-GME Consortium and each accredited program through Annual Institutional Review (AIR). This includes identification of institutional performance indicators for the AIR that includes ACGME letters of notification, results of ACGME surveys, and accreditation and recognition statuses and citations;
- The quality of the GME learning and working environment within the KCU-GME Consortium, each program, and participating sites;
- The quality of educational experiences in each program that lead to measurable achievement of educational outcomes as identified in the ACGME Common and specialty or subspecialty-specific Program Requirements;
- The ACGME-accredited programs' annual program evaluations and 10-year self-studies that must be submitted to the DIO;
- ACGME-accredited programs' implementation of institutional policies for vacation and leaves of absence, including medical, parental, and caregiver leaves of absence, at least annually;
- All processes related to reductions and closures of ACGME-accredited programs, major participating sites, and the KCU-GME Consortium;
- The provision and summary of information of patient safety reports to residents, faculty, and other clinical staff members. This includes verification that summary information is being provided;
- Resident performance on the Milestones;
- Underperforming program(s) through a Special Review process; and
- Subcommittee items that require GMEC review and approval.

### **Review and approval of:**

- KCU-GME Consortium GME policies and procedures;
- Annual recommendations to administration regarding resident stipends and benefits;
- Applications for ACGME accreditation of new programs and osteopathic recognition;
- Requests for changes in residency program complements;
- Major changes in each ACGME-accredited program's structure or duration of education, including any change in the designation of a program's primary clinical site;
- Additions and deletions of each ACGME-accredited program's participating sites;
- Appointment of new program directors;
- Progress reports requested by ACGME RC;
- Responses to Clinical Learning Environment Review (CLER) reports;
- Requests for exceptions to clinical and educational work hour requirements;
- Voluntary withdrawal of program accreditation or recognition;
- Requests for appeal of an adverse action by an ACGME RC;
- Appeal presentations to an ACGME Appeals Panel; and

- Exceptionally qualified candidates for resident appointments who do not satisfy the Institution's resident eligibility policy and/or resident eligibility requirements in the ACGME Common Program Requirements.

**Approval by GMEC:** *06.02.2023; 05.11.2022; 06.04.2021; 06.05.2020; 05.03.201; 01.11.2019; 06.18.2018; 03.08.2018; 06.02.2017; 05.27.2016; 07.01.2015*