

# University of Wisconsin Hospital and Clinics (UWHC) Graduate Medical Education Oversight Committee

## Charge

***The Graduate Medical Education Oversight Committee (GMEOC) of the University of Wisconsin Hospital and Clinics, a standing committee of the Medical Board, is responsible for overseeing and ensuring the quality of the institution's GME programs. The GMEOC establishes and implements policies that govern individual GME programs regarding the quality of education and the training environment for the resident.***

For the purpose of this document the term "Resident" refers to residents and fellows in accredited UWHC GME training programs.

### I. Composition

- A. As a standing committee of the medical staff, the membership is appointed by the President of the Medical Staff, Senior Vice President for Medical Affairs and Hospital CEO and approved by the Medical Board.
- B. The GME Oversight Committee includes GME program directors (representative of UWHC's core and subcore programs), the DIO, other interested medical faculty, a representative of hospital administration, the Associate Dean for Hospital Affairs or his/her representative (ex-officio), educators and residents as described below (C, D). Representatives from major participating institutions are invited to participate to facilitate communication and oversight at all major sites.
- C. Three program-selected residents shall serve as members of the GME Oversight Committee. The residency programs shall be grouped as follows:
  - 1. Medicine, Pediatrics, Neurology, Dermatology and Psychiatry
  - 2. Neurosurgery, OB/Gyn, Ophthalmology, Orthopedic Surgery, Otolaryngology, Plastic Surgery, Surgery and Urology
  - 3. Anesthesiology, Pathology, Radiology, Radiation Oncology and Rehab Medicine

The residents of the programs in each group shall rotate their membership annually. *(For example, in year one, Medicine, Neurosurgery and Anesthesiology shall select resident members and in year two, Pediatrics, OB/Gyn and Pathology shall select resident members.)*

- D. President of the House Staff Organization or his/her delegate.
- E. Other interested members of the house staff may be appointed.

## **II. Meeting Schedules and Rules of Order**

- A. The committee will meet at least quarterly and maintain written minutes in the Office of Graduate Medical Education which are submitted monthly to the Medical Board.
- B. Committee members may submit agenda items up to two weeks prior to scheduled meetings.
- C. The committee chair will be responsible for setting meeting agendas, obtaining committee consensus by majority vote and directing the GME Oversight Committee support staff to carry out the actions of the committee.

## **III. Duties**

- A. Annual review of the appropriate funding for house staff positions and infrastructure, including salaries, benefits, support services, educational facilities, and information systems.
- B. Establish and implement institutional guidelines and policies for the selection, evaluation, supervision, promotion, transfer and dismissal of residents in compliance with the ACGME Institutional and Common Program Requirements.
- C. Assure that each program has written policies and procedures consistent with ACGME Institutional and Program Requirements for duty hours, and that monitoring of duty hours is performed with sufficient frequency to assure an appropriate balance between education and service. Programs are subject to an ACGME limit of 80 duty hours/week/resident, which can be increased up to 10% (88 hours) with GMEOC and RRC approval. The GMEOC will review all requests for an increase that originate from the program director or chair of the requesting department. Approval will be based on an adequate justification for the increase, department plan for monitoring duty hours and resident fatigue, and majority vote of the GMEOC.
- D. Ensure that communication mechanisms exist between the GMEOC and all program directors within the institution.
- E. Review all GME programs to assess, in writing, their compliance with ACGME and UWHC program requirements. This includes responsibilities

for:

1. Establishing and updating protocols for program reviews.
  2. Evaluating the educational objectives of each program and its effectiveness in achieving them.
  3. Assuring that each program's curriculum and evaluation system enables residents to demonstrate achievement of the ACGME general competencies as defined in the Common and Specialty/Subspecialty specific Program Requirements.
  4. Evaluating the adequacy of resources available for the program to meet its objectives.
  5. Ensuring programs adequately address ACGME and GME Oversight Committee citations.
- F. Monitor for appropriate training environments, support services and house staff assignment to departmental committees.
- G. Oversee all phases of educational experiments and innovations that deviate from Institutional, Common and Specialty/Subspecialty specific Program Requirements.
- H. Assure that program directors maintain proper oversight of resident experiences at other institutions participating in UWHC GME programs.
- I. Assure that the resident curriculum includes professionalism, medical knowledge, patient care, practice-based learning and improvement, systems-based practice, communication and interpersonal skills.
- J. Review and approve any of the following prior to submission to ACGME:
1. All applications for ACGME accreditation of new programs;
  2. Changes in resident complement;
  3. Major changes in program structure or length of training;
  4. Additions and deletions of participating institutions used in a program;
  5. Appointments of new program directors;
  6. Progress reports requested by any Review Committee;
  7. Responses to all proposed adverse actions;
  8. Requests for increases or any change in resident duty hours;
  9. Requests for "inactive status" or to reactivate a program;
  10. Voluntary withdrawals of ACGME-accredited programs;
  11. Requests for an appeal of adverse actions, and, written appeal presentations to the ACGME.

- K. Prepare an Annual Report to the Medical Board including a description of resident participation in patient safety and quality of care education and the accreditation status of programs, including any citations regarding patient care issues.
- L. Monitor the implementation of institutional policies and procedures for the adjudication of resident complaints and grievances regarding the GME programs. (Hearings shall be performed by the GME (Appeal) Committee in accordance with institutional policies. *See Section II.C.1*)
- M. Manage institutional accreditation through development and monitoring of action plans for corrections of citations and areas of noncompliance.
- N. Provision of institutional policy that addresses interactions between vendor representatives/corporations and residents/GME programs.
- O. Oversight of procedures related to reductions and/or closures of the Sponsoring Institution.

#### **IV. Reporting Relationships**

- A. The Senior Vice President for Medical Affairs has overall responsibility for the administration of the institution's GME program(s). He will work in conjunction with the chair of the GME Oversight Committee to ensure program quality and appropriate institutional support of the programs.
- B. **UWHC Medical Board:** The GME Oversight Committee is a standing committee of the medical staff. As such, the Committee's minutes are submitted to the UWHC Medical Board for review and approval of recommended action items.
- C. The **GME (Appeals) Committee**, a standing committee of the medical staff, conducts hearings on grievances and appeals of nonrenewal decisions filed by residents. The GME Oversight Committee shall receive reports of hearings by the GME (Appeals) Committee and reports of all final actions concerning resident grievances and appeals so that it can monitor them and recommend changes in procedures as necessary.

#### **V. Staffing and Resource Support**

Staffing support to the committee will be provided by the Office of House Staff Administration. This includes oversight of the implementation and follow-up of all actions directed by the committee; preparing meeting agendas and minutes; and maintenance of an accreditation database to track citation compliance.

**Approval:**

**UWHC GME Oversight Committee**

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**Chair**

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**Date**

**UWHC Senior Vice President for Medical Affairs  
Designated Institutional Official**

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**Signature**

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**Date**

**UWHC Medical Board**

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**President**

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**Date**

**UWHC Authority Board of Directors**

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**Chair**

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**Date**

**UWHC President and CEO**

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**Signature**

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**Date**