

Title: GME Graduate Medical Education Committee	*Applicable to: Beaumont Health	Effective Date: 08/10/2018
		Last Periodic Review Date: 08/10/2018
Policy Owner: Graduate Medical Education Committee	Document Type: Policy	Functional Area: GMEC Oversight

***For This Document, Beaumont Health Includes:**

- Beaumont Corporate Shared Services
- Beaumont Hospital, Dearborn
- Beaumont Hospital, Farmington Hills
- Beaumont Hospital, Grosse Pointe
- Beaumont Hospital, Royal Oak
- Beaumont Hospital, Taylor
- Beaumont Hospital, Trenton
- Beaumont Hospital, Troy
- Beaumont Hospital, Wayne
- Beaumont Medical Group

I. PURPOSE

The purpose of this policy is to establish guidelines under which the Beaumont Health Beaumont Graduate Medical Education Committee (GMEC) operates.

II. RESPONSIBILITIES

- A. The Beaumont Health GMEC is responsible for oversight of all graduate medical education (GME) programs in accordance with the Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirements, American Osteopathic Association (AOA) accreditation requirements and Council for Podiatric Medical Education (CPME) accreditation requirements, as applicable.

- B. The GMEC establishes and implements policies regarding the quality of education and the work environment of residents/fellows in all Beaumont GME programs.

- C. The GMEC is responsible for 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 that lead to measurable achievement of educational outcomes as identified in the ACGME common and specialty/subspecialty-specific Program Requirements;

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4. the ACGME-accredited programs’ annual evaluation and improvement activities; and, reductions and closures of individual ACGME-accredited programs, major participating sites, and the Sponsoring Institution.
- D. The GMEC is responsible for establishing and implementing policies and procedures regarding the quality of education and the work environment for resident/fellows, including, oversight and approval of:
1. Institutional GME policies and procedures;
 2. annual recommendations to the Sponsoring Institution’s administration regarding resident/fellow stipends and benefits. The GMEC annually reviews and make recommendations to the Beaumont Medical Education Steering and Operations Committee regarding resident/fellow stipends and benefits, including allocation of professional development funds;
 3. additions and deletions of programs’ participating sites;
 4. appointment of new program directors;
 5. recommendations related to requests for permanent changes in resident/fellow complement;
 6. recommendations related to major changes in programs’ structure or duration of education;
 7. recommendations related to applications for ACGME accreditation of new programs;
 8. recommendations related to voluntary withdrawal of ACGME program accreditation;
 9. progress reports requested by a Review Committee;
 10. responses to Clinical Learning Environment Review (CLER) reports;
 11. requests for exceptions to duty hour requirements;
 12. requests for appeal of an adverse action by a Review Committee; and
 13. appeal presentations to an ACGME Appeals panel.
- E. The GMEC must demonstrate effective oversight of the Sponsoring Institution’s accreditation through a [GME Annual Institutional Review](#), including review of [GME Annual Program Evaluations & Improvement Plans](#) and Performance Indicators, and establishing criteria for underperforming programs and conducting [GME Special Reviews](#) .

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III. MEMBERSHIP

- A. The voting membership includes (34):
1. Designated Institutional Official (DIO), chair (1) – only votes in a tie
 2. Associate Designated Institutional Officials, vice chairs (3)
 3. GME Wellness Director (1)
 4. GME Quality/Safety & Health Care Disparities Director (1)
 5. GME Research Director (1)
 6. *Residency program directors or associate program directors (12), elected by Regional GME Councils (former GMECs) in proportion to number of residency programs and representing multiple medical, surgical and hospital-based specialties: Dearborn, Taylor Wayne (3); Farmington Hills (3), Trenton (1), Royal Oak, Troy, Grosse Pointe (5)
 7. *Fellowship program directors or associate program directors (4), elected by Regional GME Councils (former GMECs) in proportion to number of fellowship programs and representing multiple medical, surgical and hospital-based specialties: Farmington Hills (1), Royal Oak (3)
 8. *Residents/fellows elected by elected by their peers from representative of resident/fellow populations in the eight hospitals and Regional GME Councils (former GMECs) (10): Dearborn, Taylor Wayne (2); Farmington Hills (2), Trenton (1), Royal Oak, Troy, Grosse Pointe (5)
 9. Public Member – Patient/Family Advisor (1)
- B. *Each Regional GME Council and the GME Committees will designate alternates to participate and vote in the absence of voting members.
- C. Ex-Officio Members:
1. Director of GME Administration (1)
 2. Director of GME Finance (1)

IV. MEETING AND ATTENDANCE

- A. The Beaumont GMEC meets at least quarterly. Written minutes are maintained and distributed to hospital and system leadership.
- B. Voting members are required to attend a minimum of 75 percent of the scheduled meetings annually, to ensure continuity of discussions. Alternates participate and vote in their absence to ensure 100 percent representation.

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V. SUBCOMMITTEES

- A. Subcommittees are used to ensure that our clinical learning environments are characterized by a single standard of excellence in care, patient safety, and professionalism throughout Beaumont and to assist the GMEC in execution of its responsibilities. All Subcommittees include peer-selected residents/fellows and meet bimonthly. Subcommittees make recommendations to the GMEC for approval. The GMEC has established the following Subcommittees:
1. **Regional GME Councils**, chaired by the Associate DIOs. Responsibilities include, but are not limited to, providing oversight and making recommendations to the GMEC regarding: the quality of the learning and working environment within each hospital (as reported in ACGME Resident and Faculty surveys); Letters of Notification; work hours; program changes; additions and deletions of each program’s participating sites; all Annual Program Evaluations and Improvement Plans, including monitoring progress; and appointment of new program directors.
 - a. Dearborn, Taylor & Wayne Regional GME Council
 - b. Farmington Hills Regional GME Council
 - c. Royal Oak, Troy & Grosse Pointe Regional GME Council
 - d. Trenton Regional GME Council
 2. **GME Wellness Committee**, co-chaired by the GME Wellness Director and a resident. Responsibilities include, but are not limited to, providing oversight and making recommendations to the GMEC regarding wellness education, assessment, preventative programming and interventions.
 3. **GME Quality/Safety & Disparities Committee**, chaired by the GME Quality/Safety & Health Care Disparities Director. Responsibilities include, but are not limited to, providing oversight and making recommendations to the GMEC regarding initiatives to provide residents/fellows experiences that they need to deliver the safest and highest quality patient care and opportunities to become learn the science and practice of patient safety to lead quality improvements throughout their professional career, including those aimed at eliminating disparities in health care outcomes.
 4. **Resident & Fellows Research Committee**, chaired by the GME Research Director and including research liaisons for all sites, as well as the Beaumont Research Institute. Responsibilities include, but are not limited to, providing oversight and making recommendations to the GMEC regarding promotion research activities in all programs.
 5. **Global Health Committee**, chaired by an Associate DIO. Responsibilities include, but are not limited to providing oversight and making recommendations

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to the GMEC regarding policies and requests for international rotations, Medical Missions, etc.

6. **Fellowship Committee**, chaired by the DIO. Responsibilities include, but are not limited to, providing oversight and making recommendations to the GMEC regarding fellowship programs, including the non-accredited fellowship programs.

VI. COMMUNICATION

A. The GMEC ensures communication by:

1. Distributing GMEC meeting minutes to all members, Beaumont Program Directors, system leadership (e.g., Chief Academic Officer) and Hospital leadership (i.e., president, chief medical officer, chief of staff).
2. Requiring resident members to actively participate in Regional Resident Forums and make reports from the GMEC.
3. Requiring all Beaumont Program Directors to communicate with all participating program site directors.
4. Requiring all Beaumont Program Directors to maintain oversight of all program clinical sites.
5. Requiring core residency program directors to meet regularly with their respective fellowship program directors.

VII. REFERENCES

Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirements, Section I.B

Approved by the Beaumont Health Graduate Medical Education Committee (GMEC), June 20, 2017

Revisions approved by the GMEC: July 24, 2018

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CORPORATE AUTHORITY:

Beaumont Health (“BH”) as the corporate parent to William Beaumont Hospital, Botsford General Hospital, and Oakwood Healthcare Inc., (“Subsidiary Hospitals”) establishes the standards for all policies related to the clinical, administrative and financial operations of the Subsidiary Hospitals. The Subsidiary Hospitals, which hold all health facility and agency licenses according to Michigan law, are the covered entities and the providers of health care services under the corporate direction of BH. The Subsidiary Hospitals’ workforces are collectively designated as BH workforce throughout BH policies.