

**ATRIUM HEALTH CABARRUS  
GRADUATE MEDICAL EDUCATION**

**POLICY FOR GRADUATE MEDICAL EDUCATION COMMITTEE**

**Effective 12/2013**

**Revised: 4/2017**

**Reviewed: 4/2017**

- I. GMEC Composition and Meetings  
The sponsoring Institution must have a GMEC.

Voting membership on the committee must include the DIO (Designated Institutional Official).

Additional Memberships will consist of:

- 2 Peer-selected resident or fellow members
- Minimum of 2 Program Directors of ACGME Accredited Programs
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- President, Cabarrus Family Medicine
- Facility Executive, Atrium Health Cabarrus
- Vice President / Chief Medical Officer of Atrium Health Cabarrus
- Vice President / Chief Nursing Officer of Atrium Health Cabarrus
- Quality Improvement / Safety Officer or his / her designee
- Representation from Atrium Health GME Administration
- Representation from Atrium Health Cabarrus (Non-Family Medicine) Faculty

The GMEC must meet at least quarterly and maintain written minutes.

**II. GMEC Responsibilities**

The GMEC must establish and implement institutional policies and procedures regarding the quality of education and the work environment for the residents in all programs. There policies and procedures must include:

- **Ensure quality of the GME learning and working environment within the Institution.**
- **Annual program evaluation and improvement activities.**
- **Stipends and position allocation:** Annual review and recommendations to the Sponsoring Institution regarding resident stipends, benefits and funding for resident positions.
- **Communications with program directors:** The GMEC must:
  - a. Ensure that communication mechanisms exist between the GMEC and all program directors with the institution.
  - b. Ensure that program directors maintain effective communication mechanisms with the site director at each participating site for their respective program to maintain proper oversight at all clinical sites.
- **Resident duty hours:** The GMEC must:

- a. Develop and implement written policies and procedures regarding resident duty hours to ensure compliance with the Institutional, Common and Specialty / Subspecialty-specific Program Requirements.
  - b. Consider for approval request from program directors prior to submission to an RRC for exceptions in the weekly limit on duty hours up to 10 percent or up to a maximum of 88 hours in compliance with ACGME Policies and Procedures for duty hour exceptions.
- **Resident Supervision:** Monitor programs' supervision of residents and ensure the supervision is consistent with:
  - a. Provision of safe and effective patient care.
  - b. Educational needs.
  - c. Progressive responsibility appropriate to residents' level of education, competence and experience; and
  - d. Other applicable Common and Specialty / Subspecialty-specific Program requirements.
- **Communication with Medical Staff:** Communication between leadership of the medical staff regarding the safety and quality of patient care that includes:
  - a. The annual report to the OMS (Organized Medical Staff); description of resident participation in patient safety and quality of care education, and
  - b. The accreditation status of programs and any citations regarding patient care issues.
- **Curriculum and Evaluation:** Assurance that each program provides a curriculum and an evaluation system such that residents demonstrate achievement of the ACGME general competencies as defined in the Common and Specialty / Subspecialty-specific Program Requirements.
- **Resident Status:** Selection, evaluation, promotion, transfer, discipline, and or dismissal of residents in compliance with the Institutional and Common Program Requirements.
- **Oversight of program changes:** Review of all ACGME program accreditation letters of notification and monitoring of action plans for correction of citations and areas of noncompliance.
- **Management of Institutional Accreditation:** Review of the Sponsoring Institution's ACGME letter of notification from the IRC and monitoring of action plans for correction of citations and areas of noncompliance.
  - a. Conduct an annual institutional review and include monitoring procedures for action plans resulting from the review.
- **Oversight of program changes:** Review of the following for approval, prior to submission to the ACGME by Program Directors.
  - a. Applicants for ACGME accreditation of new programs
  - b. Changes in resident complement
  - c. Major changes in program structure or length of training
  - d. Additions and deletions of participation sites
  - e. Appointments of new Program directors
  - f. Progress reports requested by any Review Committee
  - g. Responses to all Clinical Learning Environment (CLER) reports
  - h. Responses to all proposed adverse actions
  - i. Request for exceptions of resident duty hours
  - j. Voluntary withdrawal of program accreditation
  - k. Requests for an appeal of an adverse action by a review committee
  - l. Appeal presentations to a Board of Appeal or the ACGME

- **Experimentation and innovation:** Oversight of all phases of educational experiments and innovations that may deviate from Institutional, Common and Specialty / subspecialty-specific Program Requirements, including:
  - a. Approval prior to submission to the ACGME and/or respective Review committee
  - b. Adherence to Procedures for “ Approving Proposals for Experimentation or Innovation Projects” in ACGME Policies and Procedures; and
  - c. Monitoring quality of education provided to residents for the duration of such a project.
- **Oversight of reductions and closures:** Oversight of all processes related to reductions and or closures of
  - a. Individual programs
  - b. Major participating sites and
  - c. The Sponsoring Institution
- **Vendor interactions:** Provision of a statement or institutional policy (not necessarily GME specific) that addresses interactions between vendor representatives, corporations and residents GME programs.

*Erika Steinbacher, MD*

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Erika Steinbacher, MD  
Designated Institutional Official  
Atrium Health Cabarrus

12/22/2021 | 08:31:39 EST

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Date

*Asha Rodriguez*

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Asha Rodriguez  
Facility Executive  
Atrium Health Cabarrus

12/21/2021 | 15:16:25 EST

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Date