



GMEC Special Review Process/Guidelines

The Graduate Medical Education Committee (GMEC) maintains oversight of the programs' annual program evaluations (APE) and self-studies. For programs which warrant intervention beyond the APE, the GMEC will provide a special review process.

The DIO or DIO designee will attend all annual program evaluations and will assess each program in the areas outlined below. Compliance will be rated as:

1. Exceeds compliance/demonstrates innovation
2. Substantial compliance
3. Minimum compliance
4. Non-compliance

A GMEC Special Review will be initiated if the overall rating for the program is “non-compliance,” if the program has an adverse accreditation status including Accreditation with Warning, or if there is a significant or persistent concern that could impact accreditation, including preparation for self-study documentation or visit.

To determine compliance, the following will be taken into consideration.

1. Accreditation status
 - a. Citations and areas for improvement (AFIs)
 - b. Actions and response to citations and AFIs
2. Resident / fellow performance
 - a. In-training exam scores
 - b. Case/procedures logs
 - c. Clinical evaluations
3. Program quality
 - a. Confidential evaluations of program by residents
 - b. Confidential evaluation of program by faculty
 - c. ACGME resident survey trends
 - d. ACGME faculty survey trends
 - e. Program resources
 - f. New or persistent citations/concerns without a clear, measurable action plan for improvement OR without objective evidence of improvement or remedy
 - g. Any formal concern raised by the ACGME Office of Ombudsperson or Office of Complaints
4. Graduate performance
 - a. Board take rates
 - b. Board pass rates
5. Faculty performance and development
 - a. Educational/teaching activities
 - b. Research activities
6. Quality improvement (QI) and patient safety (PS)

- a. QI/PS activities
 - b. Provision of summary information of PS reports to residents/fellows, faculty, and other clinical staff members
7. Well-being and Diversity
- a. Well-being initiatives
 - b. Measures to promote diversity and mitigate bias
8. Scholarship
- a. Resident scholarly activity (presentations/publications)
 - b. Faculty scholarly activity
 - c. QI projects

Members on the GMEC Special Review Committee will be from other programs within the Sponsoring Institution, appointed by the Office of the DIO, and will include the following roles and backgrounds:

- Chair – Program Director
- Faculty member
- Resident
- Internal / external reviewer or administrator (may include ODIO)

The GMEC Special Review Committee will interview at least the following individuals from the program under review:

- Program Director
- Two core faculty members
- One peer-selected resident/fellow from each PGY-level

The GMEC Special Review Committee Chair must submit a report to the DIO within two weeks, which includes written recommendations and procedures for follow-up to improve ACGME-accredited program performance in specified areas. The report shall follow the template provided. After DIO review, the report will be sent to the Program Director for review and response. The Program's response to the GMEC Special Review recommendations should describe quality improvement goals, corrective actions and process for monitoring of outcomes and must be received by the DIO within two weeks. Both the GMEC Special Review Committee report and the Program's response will be presented at the following GMEC. The GMEC will monitor the Program's action plan through completion or resolution of issue. The flowchart below illustrates the timeline described above.

