Purpose
An organized administrative system, led by a Designated Institutional Official (DIO) in collaboration with a Graduate Medical Education Committee (GMEC), must oversee all ACGME-accredited programs of a Sponsoring Institution. The GMEC exercises similar oversight for all non-ACGME-accredited graduate medical education programs at UT Southwestern. This policy outlines the responsibilities of the GMEC.

Procedure
1. The GMEC is responsible for oversight of:
   a. the ACGME accreditation status of the Sponsoring Institution and each of its ACGME-accredited programs;
   b. the quality of the GME learning and working environment within the Sponsoring Institution, each of its ACGME-accredited programs, and its participating sites;
   c. 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;
   d. the ACGME-accredited program(s)’ annual evaluation and improvement activities; and,
   e. all processes related to reductions and closures of individual ACGME-accredited programs, major participating sites, and the Sponsoring Institution.

2. The GMEC is responsible for review and approval of:
   a. institutional GME policies and procedures;
   b. annual recommendations to the Sponsoring Institution’s administration regarding resident/fellow stipends and benefits;
   c. applications for ACGME accreditation of new programs;
   d. requests for permanent changes in resident/fellow complement;
   e. major changes in each of its ACGME-accredited programs’ structure or duration of education;
   f. additions and deletions of each of its ACGME-accredited programs’ participating sites;
   g. appointment of new program directors;
   h. progress reports requested by a Review Committee;
   i. responses to Clinical Learning Environment Review (CLER) reports;
   j. requests for exceptions to duty hour requirements;
   k. voluntary withdrawal of ACGME program accreditation;
   l. requests for appeal of an adverse action by a Review Committee; and,
   m. appeal presentations to an ACGME Appeals Panel.

3. The GMEC must demonstrate effective oversight of the Sponsoring Institution’s accreditation through an Annual Institutional Review (AIR).
   a. The GMEC must identify institutional performance indicators for the AIR, which include:
i. results of the most recent institutional self-study visit;
ii. results of ACGME surveys of residents/fellows and core faculty members; and,
iii. notification of each of its ACGME-accredited programs’ accreditation statuses and self-study visits.

b. The AIR must include monitoring procedures for action plans resulting from the review.

4. The GMEC must demonstrate effective oversight of underperforming program(s) through a Special Review process.
   a. The Special Review process must include a protocol that:
      i. establishes criteria for identifying underperformance; and,
      ii. results in a report that describes the quality improvement goals, the corrective actions, and the process for GMEC monitoring of outcomes.