

GRADUATE MEDICAL EDUCATION COMMITTEE

Minutes
May 13, 2008

Approved by: _____

Lois L. Bready, M.D., Chair

Voting Members Present	Lois Bready, MD, Chair Robert Nolan, MD, Vice-Chair Scott Bale, MD Karin Brewer Robert Castro, MD	Jon Courand, MD George Crawford, MD Daniel Dent, MD John Erikson, MD Larry Fowler, MD Constance Fry, MD Rosemary Hickey, MD	Teri Hill Kenneth Matthews, MD Mark Nadeau, MD Jennifer Peel, PhD Craig Robson, MD Kit Smart Melissa Sneed, MD Howard Wang, MD	<u>SAUSHEC Representatives</u> Ken Torrington, MD Richard Boggs <u>UHS Representatives</u> Thomas Peters Betty Flowers <u>VAH Representative</u> David Dooley, MD	(Teleconference) <u>VBMC Representative</u> Chris Hansen, MD
Advisory Members – Non-Voting	Darlene Metter, MD James Tysinger, PhD				
Others in Attendance	Wendy Breton Yvette Foster Eileen Kleffner	Stephanie Levine, MD Cynthia Parrish Janis Strong	Brenda Talley, MD Sonya Tennant Brent Wagner, MD		
Voting Members Absent	Shane Anderson, MD Merrill Carolin, MD Daniel Carlisle, MD Ann Franklin	G. Richard Holt, MD Tracy Johnson, MD Dustin Kiker, MD Javier LaFontaine, DPM Lillian Liao, MD	John Littlefield, PhD James Myatt, MD Rajeev Suri, MD Lena Vasquez, MD Elly M-J Xenakis, MD	<u>CSR Representative</u> Ray Afaisen	
<p>GME Committee Responsibilities: (ACGME Institutional Requirements III.B), the GMEC must establish and implement policies and procedures regarding the quality of education and the work environment:</p> <p>1) Stipends and position allocation;</p> <p>2) Communication with program directors and site directors; 3) Resident duty hours; 4) Resident supervision; 5) Communication with Medical Staff; 6) Curriculum and evaluation; 7) Resident status: Selection, evaluation, promotion, transfer, discipline, and/or dismissal of residents;</p> <p>8) Oversight of program accreditation; 9) Management of institutional accreditation; 10) Oversight of program changes; 11) Experimentation and innovation; 12) Oversight of reductions and closures; 13) Vendor interactions.</p>					

	GMEC DUTY¹	DISCUSSION/CONCLUSION	RECOMMENDATIONS	FOLLOW-UP (BY WHOM)
1. Opening		The Graduate Medical Education Committee of The University of Texas Health Science Center met for a scheduled meeting on Tuesday, May 13, 2008, at 4:00 p.m. in the School of Medicine Conference Room, room 373-L, in the Medical School. Dr. Bready called the meeting to order at 4:02 p.m.		
2. Approval		The minutes of April 8, 2008 were reviewed.	Approved as written.	Closed

All proceedings and records of the Graduate Medical Education Committee are confidential and all professional review actions and communications made to the Graduate Medical Education Committee are privileged under Texas and federal law. TEX. OCC. CODE ANN. CHPS. 151 & 160; TEX HEALTH AND SAFETY CODE ' 161.032; and 42 U.S.C. 11101 ' et seq.

	GMEC DUTY¹	DISCUSSION/CONCLUSION	RECOMMENDATIONS	FOLLOW-UP (BY WHOM)
of Minutes				
3. Consent Agenda	2, 8	The following information was presented to the GMEC via prior posting on GME secure site: <ul style="list-style-type: none"> - Response to IR Action Plan: Palliative Care - Quality and Accreditation Subcommittee Minutes – April 28, 2008 	GMEC approved all information submitted on the consent agenda.	Closed
4. Ongoing Business		1. Standing Reports:		
		a. DIO—Dr. Lois Bready		
	3, 4, 8	ACGME Resident Survey – Definition of Non-Compliance- Dr. Bready discussed the definition of “non-compliant responses” to the ACGME resident survey. She queried the members about their experiences with their RRC’s interpretation of the threshold of the number of negative resident responses to warrant attention.	For informational purposes only.	Closes
	9	Dr. Bready asked the Committee to review the following policies in their agenda packets: <ul style="list-style-type: none"> - First Reading, GME Policy Revision: 8.2. HIPAA Violation Disciplinary Guidelines for Residents 	Because this was a simple correction of a prior typographical error, Dr. Bready requested a waiver of a second reading. The waiver was accepted, and the policy was approved by the Committee.	Closed
	9	Dr. Bready asked the Committee to approve the following policies in their agenda packets: <ul style="list-style-type: none"> - Second Notice, GME New Policy: 1.4. Responsibilities of the Designated Institutional Official - Second Notice, GME Policy Revision: 2.1.8 Resident Promotion - Second Notice, GME New Policy: 2.1.21. Experimentation and Innovation - Second Notice, GME Policy Revision: 4.1. Responsibilities of the Residency Program Director - Second Notice, GME Policy Revision: 4.3. Resident Selection and Appointment - Second Notice, GME Policy Revision: 8.1. Completion of Medical Records. In discussion of Policy 8.1, Craig Robson, resident member of the Committee, observed that there is a deficiency in the process of Medical Records’ reporting of delinquent records in that some residents are notified even after they have completed their records. The issue will be explored with Dr. Legler and with UHS Medical Records. 	All policies were approved by Committee. The medical records issue will be explored with Dr. Legler and with UHS Medical Records.	Open (Dr. Bready)

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		b. Patient Care Quality and Safety		
	11	<ul style="list-style-type: none"> - Dr. Carlisle, Chair of UHS Quality/Risk Management Committee – no report - Dr. Bready, DIO – examples from Annual Program Reviews. Dr. Bready shared Nuclear Medicine’s patient satisfaction survey with the committee. There was a discussion about the methodology of the survey, i.e. how collecting patient responses before treatment could affect the veracity of the data received. 	For informational purposes only.	Closed
		c. Innovative Project Tracking		
	11	<ul style="list-style-type: none"> - Nuclear Medicine – ACGME Portfolio Project <p>Dr. Metter reported that the project is still in the beta-testing stage. In addition, she will not have any trainees during the next year.</p>	For informational purposes only.	Closed
		d. Quality and Accreditation Subcommittee – Dr. Nolan		
	2, 8, 9	<ul style="list-style-type: none"> - Internal Review Completed, Report Pending <ul style="list-style-type: none"> • Surgery, April 30, 2008 - Internal Review Completed, Report Completed <ul style="list-style-type: none"> • None - Pending Internal Reviews of ACGME-accredited programs: <ul style="list-style-type: none"> • Psychosomatic Medicine – May 27, 2008 • Urology – July 16, 2008 • Surgery Critical Care – July 22, 2008 - Non-ACGME Accredited Programs <ul style="list-style-type: none"> • Neurological Surgery Critical Care - TBD - Scheduled Site Visits: <ul style="list-style-type: none"> • Pathology – June 18, 2008 • Dermatology – June 19, 2008 • Institutional – August 19, 2008 • Ophthalmology – August 20, 2008 • Cytopathology – August 21, 2008 - TMB Approval: <ul style="list-style-type: none"> • Body Imaging and Interventional Fellowship Program 	For informational purposes only.	Open (Dr. Nolan)
	8, 10	<ul style="list-style-type: none"> - ACGME RRC Correspondence: <ul style="list-style-type: none"> • Approval of new program: Pediatric Hematology/Oncology • Cytopathology site visit scheduled • Ophthalmology site visit scheduled • Institutional site visit scheduled 	For informational purposes only.	Closed

	GMEC DUTY¹	DISCUSSION/CONCLUSION	RECOMMENDATIONS	FOLLOW-UP (BY WHOM)
		<ul style="list-style-type: none"> • Forensic Psychiatry – email notification • Response to Dermatology request for increase • Physical Medicine & Rehabilitation – notice of continued accreditation • Pain Medicine – notice of continued accreditation • Anesthesiology – Increase in complement approved 		
		e. Working Environment Subcommittee – Dr. Carlisle		
	1, 8	Memo regarding leave carry-over. Dr. Bready observed that parenting leave may be an unresolved issue.	For informational purposes only.	Open (Dr. Carlisle)
		f. Education and Evaluation Subcommittee – Dr. Peel		
	6, 7	Dr. Bready introduced the Committee to the new impairment section on the GME website under both the PC/PD section and the section for residents and fellows. Committee members observed the inherent contradiction in resident impairment being both "confidential" and "reportable." Members and guests were encouraged to share these resources with their faculty and trainees.	For informational purposes only.	Closed
		g. Resident Allocation Subcommittee – Dr. Erikson		
	1	Dr. Erikson reported 4 requests for increases in complement received from the following programs: <ul style="list-style-type: none"> • Neurosurgery • Pulmonary • Urology • Nephrology He reported that the subcommittee recommended approval of all requests but Neurosurgery, from which clarification of the request was being sought.	For informational purposes only.	Open (Dr. Erikson)
		h. Resident Duty Hours Subcommittee – Dr. Crawford		
	3	<ul style="list-style-type: none"> - IOM Committee on Optimizing Graduate Medical Trainee (Resident) Hours and Work Schedules to Improve Patient Safety. Dr. Bready discussed the hearings that are occurring regarding decreasing resident duty hours. She specifically mentioned the 16-continuous-hours limit and 56 hours-per-week limit. Members discussed the potential impact of such changes. Dr. Bready stated that the body is neither regulatory nor legislative, and stated that it could make recommendations at most. - Dr. William Henrich, Dean of the School of Medicine. Dr. Henrich stressed the importance of adherence to duty 	For informational purposes only.	Open (Dr. Crawford)

	GMEC DUTY¹	DISCUSSION/CONCLUSION	RECOMMENDATIONS	FOLLOW-UP (BY WHOM)
		<p>hours limits and charged the GME Committee with finding the appropriate policies, procedures, and other mechanisms to ensure compliance with these limits. Dr. Henrich pledged all of the assistance that the Dean's Office could give to that end.</p> <ul style="list-style-type: none"> - Subcommittee meeting minutes from April 8, 2008. <p>Dr. Crawford presented the meeting minutes from April's subcommittee meeting.</p>		
		i. Resident Supervision Subcommittee – Dr. Dooley		
	4	Dr. Dooley stated that the suggested revisions to the institutional supervision policy are being reviewed by Risk Management Office and Legal Dept. and stated that further meetings of the subcommittee would be postponed until feedback was received.	For informational purposes only.	Open (Dr. Dooley)
		j. House Staff Council – Dr. Myatt		
	9	No report.	For informational purposes only.	Closed
		k. Program Coordinators Subcommittee – Ms. Hill		
	2, 8, 9	Ms. Hill reviewed the minutes from the meeting held on 4/21/08.	For informational purposes only.	Closed
		3. RAHC Report: Dr. Hanley		
	2, 5	Dr. Hansen, attending by video-teleconference, had no report.	For informational purposes only.	Closed
		4. UHS Report: Tom Peters		
	2, 5	Mr. Peters stressed the importance of accurate and complete data entry into Ni for IRIS reporting and residency verification purposes. Mr. Peters also announced that a <u>pay increase</u> for residents had been approved in the UHS budget. Lastly, Mr. Peters talked about the processing of incoming residents and urged anyone to report any problems encountered in the process to him.	For informational purposes only.	Closed
		5. VA Report: Dr. Dooley		
	2, 5	Dr. Dooley reiterated that flash drives and other mass media devices are prohibited at the VA. He also talked about the GME Enhancement, stating that many applications are being reviewed and/or revised. He advised programs that have not yet applied for increases through the Enhancement to do so promptly.	For informational purposes only.	Closed
		6. SAUSHEC Report: Dr. Torrington		
	2, 5	No report.	For informational purposes only.	Closed
		7. CHRISTUS Santa Rosa Report – Ray Afaisen		
	2, 5	No report.	For informational purposes only.	Closed
		8. Announcements:		

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	2	Dr. Bready announced the SMA-hosted event, "Handling the Job of Chief Resident." The next GMEC meeting will be at 4:00 p.m. in the School of Medicine Conference Room, room 373-L, in the Medical School on June 10, 2008 .	For informational purposes only.	Closed
5. Adjournment		The meeting was adjourned at 5:36 p.m.		