

GRADUATE MEDICAL EDUCATION COMMITTEE

Minutes

October 14, 2008

Approved by: _____

Lois L. Bready, M.D., Chair

Voting Members Present	Lois Bready, MD, Chair Mark Nadeau, MD Daniel Carlisle, MD Larry Fowler, MD Howard Wang, MD John Erikson, MD	Kenneth Matthews, MD Rajeev Suri, MD Tracy Johnson, MD Daniel Dent, MD Jennifer Peel, PhD Ann Franklin George Crawford, MD Lena Vasquez, MD	Dr. K.C. McMains Ms. Karin Brewer John Littlefield, PhD Ms. Teri Hill Melissa Cady, DO Rosemary Hickey, MD Jon Courand, MD Scott Bale, MD	<u>SAUSHEC Representatives</u> Ken Torrington, MD Richard Boggs <u>UHS Representatives</u> Ms. Betty Flowers Mr. Tom Peters <u>VAH Representative</u> <u>CSR Representative</u>	(Teleconference) <u>VBMC Representative</u> Adela Valdez, MD, Chris Hansen, MD James Castillo, MD			
Advisory Members – Non-Voting	Joseph Basler, MD							
Others in Attendance	Kit Smart Edward Norwood Ross Willis, PhD	Leslie Swasey Janis Strong Beth Payne	Cynthia Parrish Yvette Foster	Brent Wagner, MD Stephanie Levine, MD				
Voting Members Absent	Robert Nolan, MD, Vice-Chair-excused Constance Fry, MD (excused) Merrill Carolin, MD Elly M-J Xenakis, MD	James Myatt, MD Darlene Metter, MD Thomas Matthews, MD Robert Castro, MD James Hanley, MD Jane Lynch, MD	Lillian Liao, MD C. Dave Fuller, MD John R. Brenner, MD Shane Anderson, MD	Dustin Kiker, MD Craig Robson, MD				
Guests on Agenda: none								
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; vertical-align: top;"> 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: 1) Stipends and position allocation; </td> <td style="width: 33%; vertical-align: top;"> 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; </td> <td style="width: 33%; vertical-align: top;"> 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. </td> </tr> </table>						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: 1) Stipends and position allocation;	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;	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.
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	GMEC DUTY ¹	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, October 14, 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 4:00 p.m.		
2. Approval of Minutes		The minutes of September 9, 2008 were reviewed.	Approved as written.	Closed
3. Consent Agenda		Quality and Accreditation Subcommittee Minutes	Approved as written.	
4. Ongoing Business		1. Standing Reports:		
		a. DIO—Dr. Lois Bready		
	2,5,10	<ul style="list-style-type: none"> Letter re response from General Travis regarding Foreign National Resident access to IT at WHMC. Dr. Torrington explained security concerns, and improvements anticipated with the upcoming integration of BAMC and WHMC. Announcement of General Surgery chairman's resignation. Dr. Jesus Naranjo's acceptance letter as Family & Community Medicine Program Director. 	For informational purposes only.	
	1,2,3,4,7,8	<ul style="list-style-type: none"> UTMB resident and fellow status. Discussion of time tables for returning to Galveston. 	For informational purposes only.	
	2,5	<ul style="list-style-type: none"> Discussion regarding TMB physician in training permit issues and areas of vulnerability. The GME office will provide oversight and process to assure timely notifications of PIT expirations. 	For informational purposes only.	
	2,5	<ul style="list-style-type: none"> Continued discussion regarding residents/fellows who hold state licensure. Dr. Crawford confirmed that Texas license holders are required to obtain individual DPS permits. 	For informational purposes only.	
	2,5,8,9	<ul style="list-style-type: none"> Continued discussion regarding recruiters who want to contact residents during business hours and provide lunch. The Working Environment Subcommittee provided suggestions delineated under subheading (e). 	For informational purposes only.	
		b. Patient Care Quality and Safety		
	2,5,6	<ul style="list-style-type: none"> Report from Mr. Peters (UHS) regarding patient safety/quality of care initiatives within UHS. UHS staff, UT and VA are encouraged to collaborate in this initiative. Mr. Peters addressed the question of whether residents were permitted to write scripts for patient restraints. It was determined that CMS does not allow PIT holders to write restraining orders. 	For informational purposes only.	

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		<ul style="list-style-type: none"> • Dr. Castillo (RAHC) announced RAHC's new patient care initiatives including a new software package and physician performance feedback process. 		
		<p>c. Quality and Accreditation Subcommittee – Dr. Nolan</p>		
	2,8	<p>Dr. Peel presented the following information to the Committee on Dr. Nolan's behalf:</p> <ul style="list-style-type: none"> • September 29, 2008 Subcommittee Minutes <ul style="list-style-type: none"> ○ Internal Review Reports: Surgical Critical Care Fellowship ○ Pending Internal Review Action Plan Responses: <ul style="list-style-type: none"> • Gastroenterology (10/10/2008) • Pediatric Critical Care (1/15/2009) ○ Review of Internal Review Action Plan Responses: Infectious Disease follow up ○ Internal Review Action Plan Responses: <ul style="list-style-type: none"> • Pediatric Nephrology • Surgery • Thoracic Surgery ○ Site Visit Action Plans—None ○ Quality Oversight <ul style="list-style-type: none"> ▪ Pending Internal Reviews—None ▪ Scheduled site Visits: <ul style="list-style-type: none"> • OB/GYN (11/19/2008) • Nuclear Medicine (11/20/2008) 	For informational purposes only.	Open (Dr. Nolan)
	2,8,10,12	<p>d. ACGME RRC Correspondence:</p> <ul style="list-style-type: none"> • ACGME announcement of the 2008 Parker J. Palmer Courage to Lead Award. • UTMB Displaced Residents – Special Edition – Hurricane Ike Disaster Update. • RRC Acknowledgement of Psychosomatic Medicine's application for accreditation. • Continued accreditation of Thoracic Surgery dated September 16, 2009 (3 year cycle) dated September 16, 2008. • Email correspondence of continued accreditation for Dermatology (3 year cycle) dated September 17, 2008. • Temporary increase approved for Radiology (3 positions) dated September 19, 2008. • Temporary increase approved for Anesthesiology (4 positions) dated September 19, 2009. • Temporary increase approved for Cardiology (1 position) dated September 23, 2008. • Temporary increase approved for Surgery (9 positions) dated September 23, 		

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		<p>2008.</p> <ul style="list-style-type: none"> • Corrected Temporary increase for Cardiology (2 positions) dated September 24, 2008. • Temporary increase approved for Orthopaedic Surgery (1 position) dated September 24, 2008. • Email correspondence of continued accreditation of Family Medicine McAllen (3 year cycle) dated September 29, 2008. • Temporary increase approved for Otolaryngology (1 position) dated October 1, 2008. • Corrected Letter regarding continued accreditation for Pain Management Fellowship Program dated October 1, 2008. • Email notification of continued accreditation of Pathology (5 year cycle) dated October 5, 2008. 		
	4,8,13	<p>e. Working Environment Subcommittee:</p> <ul style="list-style-type: none"> • Dr. Bready introduced Kirk Robinson from Spectrum Fitness – he gave a brief presentation regarding membership options for the fitness center currently under construction. • Subcommittee announced that physician recruiters would be allowed to interact with the department as long as it was outside the scope of a normal work day and received prior approval from program directors or coordinators. Another avenue would be for the recruiters to become involved with the Housestaff Council. • Dr. Courand presented a handout depicting resident allocation differences between other hospitals. • Mr. Peters discussed UHS budget and possible Housestaff salary increase effective January 1, 2009. • Announcement of a refrigerator being installed at the VAH to provide 24x7 food availability. 	For informational purposes only.	Open
		f. Education and Evaluation Subcommittee – Dr. Peel		
	2,5,6,7	<p>Dr. Peel presented the following:</p> <ul style="list-style-type: none"> - The Educational Faculty Development Series next meeting will be held at noon on October 15, 2008 in room 209L at noon and available on the web. - The Program Leadership Series will be held November 13, 2008 in room AAB 110-112 at noon. 	For informational purposes only.	Open
		g. Resident Allocation Subcommittee – Dr. Erikson		

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	1,2	The following items were presented: - Resident complement change request from Ophthalmology, Neurology and Otolaryngology.	For informational purposes only.	Open (Dr. Erikson)
	3	h. Resident Duty Hours Subcommittee – Dr. Crawford <ul style="list-style-type: none"> Discussed implementing a more uniform policy regarding violations. Dr. Bready reminded the committee of the ramifications of duty hour violations, in light of new directive from ACGME. Dr. Bready suggested departments could utilize the ACGME Resident Survey within their departments as frequently as they deemed necessary. It could serve as a useful process improvement tool. 	For informational purposes only.	Open
		i. Resident Supervision Subcommittee – Dr. Dooley No report.	For informational purposes only	
	2,7	j. House Staff Council – Dr. Myatt - No report.	For informational purposes only.	Open
		I. Program Coordinators Subcommittee – Ms. Hill		
	2, 8	<ul style="list-style-type: none"> Announcement of Program Coordinators' 2008 Workshop on October 24, 2008 in the UTHSCSA's Library, Room 2C beginning at 8 a.m. Discussion regarding plans for 2009 workshop. 	For informational purposes only.	Closed
		3. RAHC Report: Dr. Valdez		
	2, 5,7	- No report		Closed
		4. UHS Report: Betty Flowers		
		<ul style="list-style-type: none"> Discussion of current pager issues. Transition is almost complete. Dr. Crawford mentioned that if the old pager number was dialed, a voice recording would announce the new pager number. 		Closed
		5. VA Report: Dr. Dooley No report.	For informational purposes only.	Closed
		6. SAUSHEC Report: Dr. Torrington		
		- Announced plans for BAMC parking garage construction and the potential problems and resolutions.		
		7. CHRISTUS Santa Rosa Report – Ray Afaisen		
		No report		
		8. Announcements:		

	GMEC DUTY¹	DISCUSSION/CONCLUSION	RECOMMENDATIONS	FOLLOW-UP (BY WHOM)
	2	<ul style="list-style-type: none"> - Program Leadership Development Series on "Teaching Methodologies" - Educational Faculty Development Series on "Impairment". - TMB Physician Licensure Credential Seminar in Austin on September 29, 2008 at 11:00 in Room 100. - The next GMEC meeting will be at 4:00 p.m. in the School of Medicine Conference Room, Room 373-L, in the Medical Dean's Office on October 14, 2008. 	For informational purposes only.	Closed
5. Adjournment		The meeting was adjourned at 5:20 p.m.		