

GRADUATE MEDICAL EDUCATION COMMITTEE

Minutes

May 10, 2005

Approved by: _____

Lois L. Bready, M.D., Chair

Voting Members Present	L Bready, MD, Chair Constance Barone, MD Kathy Bowers Karin Brewer <i>Ted Dubrawsky for</i> Merrill Carolin, MD Robert Castro, MD Ewell Clarke, MD George Crawford, MD	<i>Gary Campbell, MD for</i> Daniel Dumitru, MD Larry Fowler, MD Rosemary Hickey, MD Matt Hopkins, MD Peter Learn, MD John Littlefield, PhD Kenneth Matthews, MD	Rosemay Michel, DPM Robert Nolan, MD Jennifer Peel, PhD Melanie Richards, MD Carlos Rosende, MD Cynthia Spears <i>Karin Brewer for</i> Elly Xenakis, MD	<u>SAUSHEC Representatives</u> John Roscelli, MD Ted Parsons, MD <u>UHS Representatives</u> Alt-Betty Flowers <u>VAH Representatives</u> Ray Chung, MD	(Teleconference) <u>VBMC Representatives</u> Adela Valdez, MD <u>RAHC Representative</u> James Hanley, MD
Non-Voting & Others Present	D. Baruch-Bienen, MD Hilda Cheatum Beverly Combs	Michael Fischbach, MD Julieanne Flynn, MD Eileen Kleffner	Lisa Marquise Tom Matthews, MD Darlene Metter, MD	James Tysinger, PhD Claudio Zeballos, MD	
Voting Members Absent	Brett Anderson, MD Greg Bowling, MD Daniel Carlisle, MD Daniel Dent, MD	John Erickson, MD Debra Hunt, MD Joe Johnston, MD Miguel Ramirez, MD	Blake Simpson, MD Kit Smart Melissa Watson, MD	<u>CSR Representative</u> Ray Afaisen	<u>McAllen Representative</u> Juan Trevino, MD

	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, May 10 , 2005, at 4:00 p.m. in Room J 114, VA Hospital. Dr. Bready called the meeting to order at 4:01 p.m.		

¹ **Regarding GME Committee Responsibilities** (ACGME Institutional Requirements IV.B), the GMEC must: **(1)** establish and implement policies and procedures regarding the quality of education and the work environment for the residents in all ACGME-accredited programs **(2)** review annually and make recommendations to the Sponsoring Institution on resident stipends, benefits, and funding for resident positions to assure that these are reasonable and fair; **(3)** establish and maintain appropriate oversight of and liaison with program directors and assure that program directors establish and maintain proper oversight of and liaison with appropriate personnel of other institutions participating in the ACGME-accredited programs of the Sponsoring Institution; **(4)** establish and implement formal written policies and procedures governing resident duty hours in compliance with the Institutional and Program Requirements; **(5)** assure that ACGME-accredited programs provide appropriate supervision for all residents that is consistent with proper patient care, the educational needs of residents, and the applicable Program Requirements; **(6)** assure that each program provides a curriculum and an evaluation system to ensure that residents demonstrate achievement of the six general competencies listed in Section III.E and as defined in each set of Program Requirements; **(7)** establish and implement formal written institutional policies for the selection, evaluation, promotion, and dismissal of residents in compliance with the Institutional and Program Requirements; **(8)** regularly review all ACGME program accreditation letters and monitor action plans for the correction of concerns and areas of noncompliance; **(9)** regularly review the Sponsoring Institution's Letter of R¹eport from the IRC and develop and monitor action plans for the correction of concerns and areas of noncompliance; **(10)** review and approve prior to submission to the ACGME program changes, revisions, correspondence, etc.; **(11)** conduct internal reviews of all ACGME-accredited programs including subspecialty programs to assess their compliance with the Institutional Requirements and the Program Requirements of the ACGME Residency Review Committees in accordance with the guidelines in Section V.

2. Approval of Minutes		The minutes of April 12, 2005 were reviewed.	Approved as written.	Closed
3. New Business		None to report	For informational purposes only	
4. Ongoing Business		1. Standing Reports:		
		a. DIO—Dr. Lois Bready		
	10	Dr. Bready asked the Committee to review requests for a resident complement change from PM&R and participating institution changes from Dermatology and Pathology-Anatomic & Clinical. These requests were sent to Dr. Bready electronically from ACGME representatives.	Changes approved by the GMEC.	Open (Dr. Bready)
	10	Dr. Bready asked the Committee to review the letter of support she sent to the Fellowship Council in Los Angeles, CA in support of the new minimally invasive surgery fellowship program.	For informational purposes only	Open (Dr. Bready)
	8, 9, 11	Dr. Bready asked the Committee to review the Program Oversight Table.	For informational purposes only	Open (Dr. Bready)
		b. Internal Review Subcommittee – Dr. Nolan		
	11	Dr. Nolan discussed the Rheumatology Internal Review report.	For informational purposes only	Open (Dr. Nolan)
	11	Dr. Nolan announced the pending Internal Reviews for May and June.	For informational purposes only	Open (Dr. Nolan)
	9, 11	RRC Action Plans were discussed for the following programs: Child & Adolescent Psychiatry, Pulmonary Disease/Critical Care Medicine, and Nephrology	Action Plan Reports approved by GMEC.	Open (Dr. Nolan)
		c. Working Environment Subcommittee – Dr. Carlisle		
		Dr. Hopkins reported that the House Staff Council and the Working Environment Subcommittee are continuing to work towards a solution for the resident parking problems at UHS.		Open (Dr. Carlisle)
		d. General Competencies Subcommittee – Dr. Peel		
	6	Dr. Peel reported that during their last meeting the Subcommittee identified three areas of focus: 1. serve as a clearinghouse for educational tools/resources; 2. use Ophthalmology/Ortho. Surgery programs to develop a model curricula and a movement toward competency-based training; and 3. gather information from programs about the education and evaluation of the general competencies.	For informational purposes only	Open (Dr. Peel)
		e. Resident Duty Hours Subcommittee – Dr. Crawford		
	4	Dr. Crawford thanked Dr. Peel for meeting with the residents in focus groups that discussed the questions on the ACGME resident survey. Dr. Peel says she will continue to meet with residents, to explain both the wording and the importance of the ACGME Resident Survey questions. Dr. Crawford also announced that the next institutional duty hours survey will occur in late May.	For informational purposes only	Open (Dr. Crawford)
		f. Resident Supervision Committee – Dr. Chung		
	5	Dr. Chung asked for approval of the following policies with no changes:	Resident Supervision	Open

		Pathology, Blood Banking Transfusion, Cytopathology, Hematology, Psychiatry, Addiction Psychiatry, Geriatric Psychiatry, Child & Adolescent Psychiatry, Ophthalmology, Orthopaedic Sports Medicine.	policies approved by the GMEC.	(Dr. Chung)
		g. Resident Tracking Software Subcommittee – Dr. Erikson & Ms. Wendy Breton		
		No report given.	For informational purposes only	Open (Dr. Erikson)
		h. Resident Allocation Subcommittee (ad hoc) – Dr. Rosende		
		No report given.	For informational purposes only	Open (Dr. Rosende)
		i. Housestaff Council – Dr. Hopkins		
	1	Dr. Hopkins reported that the Council and the Resident Working Environment Subcommittee are continuing to work towards a solution for the resident parking problems at UHS. He also announced the next Housestaff Council meeting will be on Monday, May13th from 11:30am-1pm in the cafeteria at UHS.	For informational purposes only	Open (Dr. Hopkins)
		j. Autopsies Tracking (quarterly) – Dr. Fowler		
	3	Dr. Fowler reported UHS total autopsies: 4 in January, 2 in February and 5 in March. Rate of eligible deaths without autopsy request: 87.1% in January, 93% in February, and 81.5% in March. % of non-Medical Examiner cases at UH autopsied: 12.5% in January, 7% in February and 18.5% in March. Dr. Fowler also asked the committee to read an article included in the agenda packet titled, “Buried Answers” that was published in the New York Times on 4/24/05.	For informational purposes only	Open (Dr. Fowler)
		2. ACGME RRC Correspondence		
	10	Dr. Bready reviewed the following correspondence with the Committee: o Radiology RRC response letter to the Neuroradiology rebuttal letter o Rheumatology temporary resident increase - awaiting decision	For informational purposes only	Open (Dr. Bready)
		3. UHS Report: No report given.		
	3	4. VA Report: Dr. Chung announced the VAH is conducting its annual Learner’s Perception Survey to be completed by the residents. The website has been distributed to all Program Coordinators and Program Directors.		
	3	5. SAUSHEC Report: Dr. Roscelli reminded the Committee that the SAUSHEC graduation ceremony will be on Friday, 6/3 at 9:00 am. The SAUSHEC office is also organizing an offsite training for Program Directors that will be held on August 18th . All Program Directors at UTHSCSA programs are invited – box lunch and CME are available for a very reasonable cost. Dr. Roscelli announced that there will be no SAUSHEC GMEC meeting in May.		
		6. CHRISTUS Santa Rosa Report – No report given.		
		7. Announcements: Dr. Bready asked the Committee to review the memo from Dr. Lawrence detailing the requirements and nomination process for the induction of medical students into the Gold Humanism Honor Society.		

		<p>Dr. Fowler announced that the NRMP has decided not to pursue a second match.</p> <p>Dr. Bready announced Dr. Doris Quinn and Mr. John Bingham from Vanderbilt will be at UTHSCSA Aug. 8-9. They will present the Healthcare Matrix at a Lunch-n-Learn on August 9 at noon and Case Studies using the Healthcare Matrix at the 4:00 pm GMEC meeting.</p>		
		<p>GMEC meetings will be at 4:00 p.m. in Room J-114 at the VA Hospital on: June 14, 2005 July 12, 2005 August 9, 2005 Sept. 13, 2005</p>		
5. Adjournment		<p>The meeting was adjourned at 4:47 p.m.</p>		