

**GRADUATE MEDICAL EDUCATION COMMITTEE**

Minutes

January 13, 2004

Approved by: \_\_\_\_\_  
**Lois L. Bready, M.D., Chair**

<b>Voting Members Present</b>	Lois Bready, MD, Chair Rosemary Hickey, MD Debra Hunt, MD Carlos Rosende, MD	Daniel Carlisle, MD Larry Fowler, MD Robert Nolan, MD Kenneth Matthews, MD	<b>David Huang, MD</b> Ray Chung, MD Ray Afaisen John Roscelli, MD	Betty Flowers Merrill Carolin, MD George Crawford, MD Stanley Fisch, MD	James Hanley, MD Judy Paukert, PhD Juan Trevino, MD John Erickson, MD
<b>Non-Voting &amp; Others Present</b>	D Baruch-Bienen, MD Jay Peters, MD Richard Boggs	Wendy Bretón Karin Brewer	Tricia Cantu Robert Castro, MD	Lisa Marquise LeRoy Jones, MD Thomas Peters	Cindy Spears Claudio Zeballos, MD
<b>Voting Members Absent</b>	Miguel Ramirez, MD Elly Xenakis, MD Melanie Richards, MD <b>Peter Learn, MD</b> <b>Monal Shah, MD</b> Ron Grimwood, MD	<b>Brett Anderson, MD</b> <b>Michael Johnson, MD</b> <b>Jessica Kammerl, MD</b> <b>Kevin Hudenko, MD</b> <b>Melanie Sulistio, MD</b> Tony Eng, MD	<b>S Khandhar, MD</b> <b>Aaron Miller, MD</b> <b>Joe Johnston, MD</b> <b>Michael Davis, MD</b>	Randal Otto, MD Ewell Clarke, MD <b>Sandeep Khandhar, MD</b> <b>Jennifer Brody, MD</b> Irma Pye	<b>Juan Sanchez, MD</b> <b>Frederic Wile, MD</b> <b>Melissa Deuter, MD</b> <b>Victoria Trickett, MD</b> Bill Adams

	GMEC DUTY <sup>1</sup>	DISCUSSION/CONCLUSION	RECOMMENDATIONS	FOLLOW-UP (BY WHOM)
<b>1. Opening</b>		The Graduate Medical Education Committee of The University of Texas Health Science Center met as scheduled on Tuesday, January 13, 2004, at in Room		

<sup>1</sup>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 Report 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.

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		J114, VA Hospital. Dr. Bready called the meeting to order at 4:03 p.m.		
<b>2. Approval of Minutes</b>		The minutes of December 2003 were reviewed.	Approved as written.	Closed
<b>3. New Business</b>	3	Dr. Tod Sloan, Professor, Department of Anesthesiology, discussed the Mission Aligned Project (MAP). This year's survey is a little different. The goal of this year's survey is to get the individual Program Directors to report a reasonable estimate that can be aligned with department goals for promotion. Program Directors should try to be accurate so that meaningful information is obtained. Last year's survey results were combined with other information to determine re-allocation of budget cuts. He also stressed that the Dean's Office only sees departmental report, not individual faculty reports. However, the department chairs and administrators do have access to the individual responses.	For informational purposes only.	Closed
<b>4. Ongoing Business</b>		<b>1. Standing Reports:</b>		
		<b>a. DIO—Dr. Lois Bready</b>		
	8	Dr. Bready announced that the Institutional Site Visit letter is posted on the GME website. The GMEC commended Dr. Bready and the GME staff for a job well done.	For informational purposes only.	Closed
	1,3	Dr. Bready reported that medical records suspensions at Methodist Hospital are not reported to the TSBME. Methodist Hospital considers these to be administrative suspensions.	Obtain additional information	Open (Dr. Bready)
	3	Best Practice - Dr. Bready introduced Dr. Daniel Carlisle, who demonstrated a CD that the Orthopaedic Surgery Program produced to recruit residents.	For informational purposes only.	Closed
	3	Dr. Bready reminded the GMEC that a Resident Survey is now available on the ACGME website. The residents will complete them before their program's site visit.	Program Directors to review the survey	Open (Dr. Bready)
	1,3	Dr. Bready discussed the memorandum from Michael Swetman regarding Physician Assistant Training and willingness to provide advanced training to physician assistants.	Programs interested in providing training to contact PA Swetman	Open (Dr. Bready)
	8,9	<u>Urology Action Plan:</u> Dr. LeRoy Jones answered questions from the committee regarding his program's action plan.	Action plan approved; follow up recommended concerning General Competencies	Open (Dr. Bready)
	8,9	Dr. Bready reviewed the updated Institutional Oversight document with the Committee. She stated that the Institutional Action Plan will be discussed next month.	For informational purposes only.	Open (Dr. Bready)
		<b>b. Internal Review Subcommittee – Dr. Nolan</b>		
	11	Dr. Nolan discussed the <b>Internal Medicine-RAHC Internal Review</b> summary with responses from Drs. Hanley, Crawford, and Baruch-Bienen	Internal Review approved	Action Plan (Dr. Hanley)
	11	Dr. Crawford discussed the <b>Neonatal/Perinatal Medicine Internal Review</b>	Internal Review	Action Plan

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		summary. The program appears to be in substantial compliance.	approved	(Dr. Castro)
	11	Dr. Paukert discussed the <b>Pediatric Sports Medicine Internal Review</b> summary. The program is generally in compliance.	Internal Review approved.	Action Plan (Dr. Gomez)
	11	Dr. Crawford discussed the <b>Pediatrics Internal Review</b> summary, which notes three main challenges in meeting new program requirements.	Internal Review approved.	Action Plan (Dr. Nolan)
		<b>c. Working Environment Subcommittee – Dr. Carlisle</b>		
	1	Dr. Carlisle announced that the Podiatry Call Room problem has been resolved with the assistance of Betty Flowers' office at UHS. He is looking into the UHS medical records suspension vis-à-vis reporting to TSBME.	Update next month.	Open (Dr. Carlisle)
		<b>d. General Competencies Subcommittee – Dr. Paukert</b>		
	6	Dr. Paukert announced that a 360° Professional Assessment of Ethics Knowledge tool will be available on NewInnovations within the week. This can be used by residents, faculty, and staff. The survey can be copied to any program for administration. A validated assessment of residents' learning environment, an area that the ACGME recommends for assessment of professionalism, will be available soon on New Innovations. With the help of ERD, additional modules are available in Practice-Based Learning and Improvement on research. Some of these will be available on the Web.	Interested programs to contact Dr. Paukert for copy of 360° tool	Open (Dr. Paukert)
		<b>e. Resident Duty Hours Subcommittee – Dr. Crawford</b>		
	1,4,5	Dr. Crawford reviewed the Pediatric Sports Medicine and the Orthopaedic Sports Medicine moonlighting policies.	Both moonlighting policies approved	Open (Dr. Crawford)
	1,4	Dr. Crawford announced the next duty hours survey will be conducted the week of February 8-14, 2004.	For informational purposes only.	Open (Dr. Crawford)
		<b>f. Resident Supervision Subcommittee – Dr. Chung</b>		
	1,5	Dr. Chung announced that the Subcommittee is beginning to conduct its annual review of program Supervision Policies.		Open (Dr. Chung)
		<b>g. Resident Tracking Software Subcommittee – Dr. Erikson &amp; Ms. Wendy Bretón</b>		
	2,3	Dr. Erikson reported that 100% of the residents are now in the New Innovations system. Ms. Bretón reported that work continues on entering all military rotators into the system.	For informational purposes only.	Open (Dr. Erikson)
		<b>h. Resident Allocation Subcommittee – Dr. Rosende</b>		
	2	No report due to Dr. Rosende's absence.		Open (Dr. Rosende)
		<b>i. House Staff Council – Dr. Wile (Dr. Huang)</b>		
	1,2	Dr. Huang stated that was nothing to report, except that UHS has not answered the questions about medical insurance.		Open (Dr. Huang)
		<b>j. Autopsies Tracking – Dr. Fowler</b>		
	8,9	Dr. Fowler reported that, for the first time in 10 years, autopsies increased in 2003. 20% of deaths at UH were autopsied in December 2003.	For informational purposes only.	Open (Dr. Fowler)
		<b>2. ACGME RRC Correspondence</b>		

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	8	Dr. Bready informed the Committee that Nuclear Medicine was granted Continued Full Accreditation with a 5-year cycle.		Open (Dr. Bready)
	8	Dr. Bready announced that all of the Internal Medicine Programs will be site visited during the month of April, 2003 (see detailed list in packet).		Open (Dr. Bready)
	2,3	<b>3. UHS Report:</b> Mr. Tom Peters mentioned that he needs specific cases from the residents so that he can begin to investigate the medical insurance questions. UHS is aware of the residents' concerns about the insurance.	For informational purposes only.	Ongoing (UHS rep)
	2,3	Mr. Tom Peters announced that the House Staff were included in the end-of-year bonus program.	For informational purposes only.	Ongoing (UHS rep)
	3	<b>4. VA Report:</b> Dr. Chung announced that construction will begin soon on six new call rooms on the fifth floor of the VAH.	For informational purposes only.	Ongoing ((VA rep)
	3	<b>5. SAUSHEC Report:</b> Dr. Roscelli reported that their institutional review will occur on April 27, 2004.	For informational purposes only.	Ongoing (SAUSHEC rep)
	3	Dr. Roscelli reported that BAMC scored a 97% with no Type 1 infractions on their JHACO visit last month.	For informational purposes only.	Ongoing (SAUSHEC rep)
	3	<b>6. CHRISTUS Santa Rosa Report:</b> Ray Afaisen reported that Christus Santa Rosa Hospital scored a 97% with no Type 1 infractions on their JHACO visit last month as well.	For informational purposes only.	Ongoing (CHRISTUS rep)
		<b>7. Announcements:</b>		
	3	GMEC meetings will be at 4:00 p.m. in Room J-114 at the VA Hospital on:  Feb. 10, 2004      March 9, 2004      April 13, 2004      May 11, 2004	For informational purposes only.	
<b>5. Adjournment</b>		The meeting was adjourned at 5:25 p.m.		