

UNIVERSITY OF MARYLAND MEDICAL CENTER GRADUATE MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL	PAGE: 1 of 5	PROCEDURE NO: GMS - Y
	EFFECTIVE DATE: 7/1/2015	REVISION NO: amended
SUBJECT: Special, Focused, and Periodic Program Reviews	FUNCTION:	
APPROVALS: Graduate Medical Education Committee Approval: DIO/Chair of GMEC _____ Senior Vice President and Chief Medical Officer _____		

1. Purpose

The Graduate Medical Education Committee (GMEC) must demonstrate effective oversight of programs by monitoring programs performance, establishing criteria for identifying underperformance, and documentation of the monitoring processes that include the quality improvement goals, corrective actions and the process for GMEC monitoring of outcomes. The GMEC will accomplish this through the following Processes a) Special Review Process, b) Focused Review Process, or c) Periodic Review Process.

2. Scope

This policy applies to all ACGME-accredited graduate medical education programs that UMMC sponsors.

3. Responsibility

It is the responsibility of all ACGME-accredited program directors, residents, fellows, UMMC management and School of Medicine officials to comply with this policy.

4. Criteria for Reviews

Type of Review	Criteria & Trigger(s) for Review
Special Program Review	<ul style="list-style-type: none"> • Unfavorable Review Committee (RC) accreditation decision of Continued Accreditation with Warning, Probationary Accreditation, Initial Accreditation with Warning, Non-voluntary Reduction in Resident Complement • Request for Appeal of an Adverse Action • Review Committee Notification for a Focused or Interim Site Visit
Focused Program Review	The GME office, the DIO and the GMEC will use its discretion to determine if a focused review is required for: <ul style="list-style-type: none"> • Failure to comply with ACGME or GME Office/GMEC requests • Duty Hours Concerns identified by RC, periodic GMEC reports or Trainee concerns • Review Committee requests for Information, i.e. Clarifying Report or Progress Report • Significant specialty/subspecialty resident/fellow complaint received by the ACGME Office of Resident Services or the GME Office
Periodic Program Review	<ul style="list-style-type: none"> • Annual Institutional Review (AIR) • New citations and/or Areas for Improvement and/or Concerning Trends identified in review committee annual accreditation letters

UNIVERSITY OF MARYLAND MEDICAL CENTER GRADUATE MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL	PAGE: 2 of 5	PROCEDURE NO: GMS - Y
	EFFECTIVE DATE: 7/1/2015	REVISION NO: amended
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5. Special and Focused Review Documentation, Participants, Reports and GMEC Presentation

Documents:

Prior to the Meeting the GME Office will provide:

- RC Common, Specialty/Subspecialty Requirements
- Most recent RC accreditation letter(s) of notification
- Other ACGME or RC communications, as indicated

The Program Director will provide the documents (see attachment A) to the GME Office in an electronic format, at least 14 calendar days prior to the Program Review.

NOTE: Failure to provide these documents at least 14 calendar days in advance in electronic format to the GME Office will result in the need to cancel and reschedule the Special Review, and will be reported to the GMEC.

Participants (Special and Focused Program Reviews)

The GMEC and DIO, will determine the composition of the Review Panel for the Special and Focused Program Reviews, and the program representatives that must be interviewed as part of the Special or Focused Reviews based on the type and nature of the criteria as defined in Section 4 of this policy. The review panel may be comprised of the DIO, Associate DIO, faculty, residents or fellows, and other personnel (e.g. departmental administrator, program academic coordinator) from institutionally sponsored programs that are other than the program under review. Interviews will be conducted by the Review Panel with the sponsored program's Program Director, other faculty, residents and fellows, institutional or other personnel based on the type and nature of the criteria

UNIVERSITY OF MARYLAND MEDICAL CENTER GRADUATE MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL	PAGE: 3 of 5	PROCEDURE NO: GMS - Y
	EFFECTIVE DATE: 7/1/2015	REVISION NO: amended
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Reports (Special and Focused Program Reviews):

A written report of the Review in a format approved by the GMEC shall be presented to, reviewed and approved by the GMEC. The Report will permit the GMEC to determine the success of the program in addressing prior citations, areas for improvement and other identified concerns. The Report will be used by the GMEC to effectively monitor those areas of non-compliance and recommend additional actions that are required including, ongoing oversight and monitoring or the need for additional Reviews as described in Section (4) of this policy based on the Report that is presented.

Summaries of these Reports shall be included in the Annual Institutional Review (AIR), ACGME Institutional Review Document, as well as other reports that may be requested or required to be provided to the ACGME. Reports will include, at a minimum:

- Name of the specialty/subspecialty program reviewed
- Date of the review for Special and Focused Program Reviews
- Names and titles of the Review Panel designated by the GMEC
- Names and titles of Program representatives interviewed by the Review Panel and as designated by the GMEC
- Brief description of the corresponding type and nature of the criteria and reason for the Review process
- Sufficient documentation of the discussion of the RC common and specialty/subspecialty requirements in the format approved by the GMEC
- Specific Items identified for improvement and corrective action; Specific Steps to be implemented by the program to address each item identified for improvement, corrective action and any interim update available at the time of the Review
- GMEC process for monitoring improvement, including timelines and outcomes
- GMEC recommendations regarding areas of improvement that have been satisfactorily addressed, and those areas that require further oversight by the GMEC to assure they are fully addressed.

UNIVERSITY OF MARYLAND MEDICAL CENTER GRADUATE MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL	PAGE: 4 of 5	PROCEDURE NO: GMS - Y
	EFFECTIVE DATE: 7/1/2015	REVISION NO: amended
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Presentation at GMEC (Special and Focused Program Reviews)

The Program Director of the program under review will be required to present the Review Panel's findings and recommendations to the GMEC. The Review Panel's findings and recommendations will be approved, amended and/or revised based on this presentation to the GMEC. The GMEC will also determine whether future reporting is required of the Program Director based on the findings and current status related to compliance.

6. Periodic Reviews, Documentation, Participants, Reports and GMEC Presentation

Documents (Periodic Program Reviews):

The GMEC is responsible for oversight of all ACGME accredited programs, including programs in good standing.

For programs that do not require special or focused review, the GMEC will review all programs in aggregate during the Annual Institutional Review (AIR). The AIR may include, but is not limited to, the following institutional performance indicators: ACGME Resident/Fellow Surveys, institution and programs' accreditation statuses, Clinical Learning Environment Review report and other accreditation data elements and performance indicators as determined by the GMEC.

For programs that receive review committee annual accreditation letters with new citations, areas for improvement and/or concerning trends, the Program Director will submit a written report in the format approved by the GMEC.

Participants (Periodic Program Reviews)

The GMEC and DIO will determine the members of the Annual Institutional Review (AIR) team. The AIR team may be comprised of the DIO, Associate DIO, GME Director, CMO, faculty, residents and/or fellows from institutionally sponsored programs and GME Office Members.

For Periodic Reviews initiated as result of new citations or areas for improvement or concerning trends, the participants will include the respective program director and the individuals the program director has identified to address the findings.

Reports (Periodic Program Reviews)

The report of the AIR and the resulting action plans will be presented to the GMEC for review and approval annually. The AIR executive summary must be presented to the institution's governing body, annually.

For Periodic Reviews initiated as result of new citations or areas for improvement or concerning trends, a written report in the format approved by the GMEC shall be presented to, reviewed and approved by the GMEC. The Report will permit the GMEC to determine the success of the program in addressing citations, areas for improvement and other identified concerns. The Report will be used by the GMEC to

UNIVERSITY OF MARYLAND MEDICAL CENTER GRADUATE MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL	PAGE: 5 of 5	PROCEDURE NO: GMS - Y
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effectively monitor those areas of potential non-compliance and recommend additional actions that are required including ongoing oversight and monitoring or the need for additional Review as described in Section (4) of this policy, based on the Report that is presented.

Summaries of the Reports related to new citations, areas for improvement, concerning trends shall be included in the Annual Institutional Review (AIR), ACGME Institutional Review Document. Reports will include, at a minimum:

- Name of the specialty/subspecialty program reviewed
- Date of the presentation to the GMEC
- Names and titles of Presenter to GMEC
- Brief description of the corresponding type and nature of the criteria and indication for the Review process
- ACGME/RRC accreditation letter
- Specific Items identified for improvement, corrective action
- Specific Steps to be implemented by the program to address each item identified for improvement, corrective action and any interim update available at the time of the Review process
- GMEC process for monitoring improvement, including timelines and outcomes
- GMEC recommendations of areas for improvement that have been satisfactorily addressed, and those that require further oversight by the GMEC to assure they are fully addressed or require additional assessment using the Special or Focused Review process.

Presentation at GMEC (Periodic Program Reviews)

The report of the AIR and the resulting action plans must be presented to the GMEC for review and approval annually. The AIR executive summary must be presented to the institution's governing body annually.

The Program Director of the program under periodic review will be required to present the report related to new citations, areas for improvement, concerning trends and the steps taken to address the areas identified in the letter of notification to the GMEC. The report and recommendations will be approved, amended and/or revised based on this presentation to the GMEC. The GMEC will also determine whether future reporting is required of the Program Director based on the findings and current status related to compliance and whether a Special or Focused Review of the program is required.

7. Other GMEC Oversight

The GMEC will maintain oversight over the institution's programs, including programs that are undertaking the following processes:

- Application for a New Program & New Program Development, after initial GMEC approval.
- Accreditation site visit, e.g., full or self-study visit, after receipt of the letter of notification
- New Program Director Faculty Development and Mentoring after GMEC and RRC approval.