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Together, Drs. Peel and Nolan have conducted several hundred program reviews and mock site visits over the past dozen years. They have been invited to present on GME issues, specifically institutional oversight, in a variety of national venues. Both have served as consultants to other sponsoring institutions.
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Introduction

Like most institutions, we at the University of Texas Health Science Center at San Antonio felt like we had an effective and efficient system (process and tools) of program oversight that was manageable with our current manpower. Then, in the spring of 2012, the ACGME introduced the Next Accreditation System (NAS), which promised to “decrease the burden of accreditation.” Whose burden? The NAS has placed an increased oversight onus on the Graduate Medical Education Committee (GMEC). According to the ACGME, the GMEC must:

- Assess the quality of the working environment in all ACGME-accredited programs
- Assess the quality of the educational experience in all ACGME-accredited programs
- Review the annual program evaluation for all ACGME-accredited programs
- Conduct special reviews for underperforming ACGME-accredited programs
- Implement a process for continuous improvement for all ACGME-accredited programs

Piece of cake! And, on top of the new responsibilities of the GMEC, programs now have, in addition to annual updates in the ADS, biennial Milestones reporting. Also, two new program committees are required: the Clinical Competency Committee and the Program Evaluation Committee. And, there are the new unknowns in the self-study and 10-year site visit with accreditation implications in place of the old knowns—the PIF and site visit. The photograph below from west Texas captures how most of the GME community feels!
This book is our attempt to share (and commiserate). We have spent the past few years developing, implementing, and refining our oversight system. In July 2014, all programs were placed under the NAS, and “next” became “now.” Because we have had some triumphs at identifying and rehabilitating some programs with our new oversight process, we consider the system a success. And, although we introduced several new program reviews and tools to our program leaders, we have had numerous accolades from them about the ease of use of the tools and transparency in our processes.

You will notice that this book has two parts: the narrative about our system and a large section of figures and appendixes with our tools. We would be flattered to have you borrow or modify any of the resources.
CHAPTER 1
GMEC Oversight of ACGME-Accredited Residency Programs
CHAPTER 1

GMEC Oversight of ACGME-Accredited Residency Programs

ACGME Requirements

According to the Accreditation Council for Graduate Medical Education (ACGME), it is the responsibility of the Graduate Medical Education Committee (GMEC) to oversee the quality of graduate medical education (GME) and to ensure the quality of educational experiences in each program by examining quantifiable metrics and educational outcomes. This oversight process is designed to facilitate a culture of continuous quality improvement.1 (ACGME Institutional Requirements 1.B.4. Responsibilities of the GMEC.) While there are required components to oversight (i.e., the annual program evaluation and special program review), GMECs have been allowed the flexibility to innovate in designing, implementing, and evaluating an oversight structure that is feasible, reliable, and valid for their individual programs and institution.

Program Oversight Structure

To establish an oversight structure that is both compliant with the ACGME Institutional Requirements and meets the professional development needs of program leadership (i.e., program directors and coordinators), the authors, with input from institutional and program leaders at the University of Texas Health Science Center at San Antonio, designed an oversight system that includes the following components:

- New program review—Chapter 2
- Annual program evaluation—Chapter 3
- Periodic program review—Chapter 4
- Pre self-study review—Chapter 5
- Self-study—Chapter 6
- Mock site visit—Chapter 7
Chapter 1

- 10-year accreditation site visit—Chapter 8
- Special program review—Chapter 9

GMEC Compliance and Accreditation Subcommittee

The University of Texas Health Science Center at San Antonio has 54 ACGME-accredited residency programs and almost 800 trainees. Although the program oversight process is the responsibility of the GMEC, the institution found that having a GMEC Compliance and Accreditation Subcommittee facilitates the oversight process due to the volume of reports that must be reviewed in a timely manner. The subcommittee examines the summary reports and action plans of all of the steps in the oversight process and presents them to the GMEC Executive Committee and the GMEC. The GME Executive Committee is comprised of the chairs of the GMEC subcommittees and the designated institutional official (DIO). The full GMEC has 71 members (all program directors, subcommittee chairs, peer-selected residents, and representatives from 3 major teaching sites). The 12-member GMEC Compliance and Accreditation Subcommittee consists of an associate dean for GME (chair), an assistant dean for GME (co-chair), representative program directors, representative program faculty members, representative residents, and representative program coordinators. The subcommittee meets monthly and, if necessary, conducts business between meetings via email communications with e-voting.

The program oversight architecture is outlined in oversight policies that are approved by the GMEC. Detailed descriptions of the process, required materials, required participants, reports, action plans, and GMEC monitoring are included in protocols for each oversight component. The protocol for each component is shared in the appendix.

The NOW Oversight Process

The Next Accreditation System (NAS) was introduced at the spring 2012 ACGME Annual Educational Conference. Since then, full implementation of the NAS has occurred, so, it is no longer the “next” accreditation system, but the “now” accreditation system. Because the NAS is currently in use, everyone involved in your institution must be fully aware of the NAS and their role in it.

To clarify the oversight process for program leadership (i.e., academic department chairs, administrators, faculty development leaders and quality champions, program directors, and program coordinators), you may want to share the diagram in Figure 1.1.
Figure 1.1 | The GMEC Program Oversight Process*

*Based on a self-study assignment of 2025 by the ACGME Residency Review Committee. APE = annual program evaluation
This figure illustrates the oversight steps for a program with an ACGME-assigned self-study date of 2025 (Chapter 6). As required by the ACGME, the program will conduct an annual program evaluation (Chapter 3) and have a 10-year accreditation site visit (Chapter 8) in 2026. Before that, the GMEC will conduct a periodic program review (Chapter 4) in 2018 and 2021, and a pre self-study review (Chapter 5) in 2023 (two years prior to the self-study).

It is essential that the academic department chairs and administrators be aware of the increasing oversight by the institution so that appropriate resources can be allocated to the programs. Essential program resources include an appropriate complement of qualified supervisory faculty, program coordinators, quality champions, clinical space, access to required patient populations, etc.

**GMEC Program Oversight in the NAS Calendar**

To facilitate timely feedback to programs at each stage of the oversight process and to spread the workload of the GMEC Compliance and Accreditation Subcommittee across the year, a calendar was created assigning each program to a month. This is the month the program will complete any oversight processes in the year they are due. A sample calendar is found in Figure 1.2.

Using this system, a program assigned to April will always have its annual program evaluation due in April. Also, in the years the program has a periodic program review, its periodic program review will be conducted in April. The same applies for pre self-study review. Programs have reported that the predictability of this calendar is comforting and facilitates the efficient temporal allocation of resources.

A simple method is to schedule programs alphabetically. For example, the core anesthesiology program and the subspecialty fellowships connected to the core program are scheduled in January. Readers will notice that there are no assignments to June, September, and December in the calendar. Slack was intentionally built in so that there would be scheduled periods of catch up for the associate and assistant deans and their GME office staff.
### Figure 1.2 | GMEC Program Oversight in the Next Accreditation System Calendar

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### Figure 1.2 | GMEC Program Oversight in the Next Accreditation System Calendar (cont.)

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**Figure Key:**
- **APE**: Annual program evaluation
- **PPR**: Periodic program review
- **SS**: Self-study
- **PSSR**: Pre-self-study review
- **SV**: 10-year accreditation site visit

Each row represents a training program.
Reference

Beyond ACGME Compliance
Successful Development, Oversight, and Enhancement of Residency Programs

JENNIFER L. PEEL, PHD
ROBERT J. NOLAN, MD

The graduate medical education committee (GMEC) is responsible for overseeing the quality of graduate medical education and the learning and working environment for ACGME-accredited programs. While there are required components to oversight (i.e., the annual program evaluation and special program review), GMECs have been allowed the flexibility to innovate an oversight structure that is appropriate for their individual training programs and institution. This leaves some GMECs struggling to come up with a solid oversight process.

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Authors Jennifer L. Peel, PhD, and Robert J. Nolan, MD, are responsible for the design and implementation of program oversight for 54 programs of various sizes and specialties at the University of Texas Health Science Center at San Antonio. They have developed an oversight and review process that can be replicated at training programs of all types and sizes.