

Special Review Process Responsibilities of the Graduate Medical Education Committee (GMEC)

The GMEC must demonstrate effective oversight of underperforming programs through a Special Review process. The GMEC vests this responsibility with the Program Director Forum (PDF), a subcommittee of the GMEC.

Criteria for a Special Review include, but are not limited to the following:

- Program accreditation status of Initial accreditation with Warning, Continued Accreditation with Warning and adverse accreditation statuses as described by ACGME and other accrediting bodies;
- ACGME Review Committee request for progress report;
- Concerns identified by ACGME Resident or Faculty Survey;
- At the request of hospital, department, section or program administration;
- Significant concerns communicated to the GME office by residents, fellows or faculty.

The Special Review team will be selected by the DIO and must include:

- A Program Director or Associate Program Director from a program not being reviewed
- One or more residents or fellows, including chief residents
- GME Office staff
- The Special Review team may also include outside members from YNHHS GME Office and Bridgeport Hospital faculty.

The Special Review team will review the concern(s) along with all documentation and interview residents and faculty as appropriate and issue a report to include Quality Improvement action items. The Program Director is responsible for developing a work plan to identify all action items. This work plan will be presented to PDF and GMEC.

The GMEC must be informed of all Special Review's and the outcome of such review, including work plan and action items. The PDF will monitor the action plan and provide regular reports to GMEC.

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