

**Medical College of Georgia Graduate Medical Education Committee Special
Review Subcommittee Charter**

1. Purpose

Under the direction of the Medical College of Georgia (MCG) Graduate Medical Education Committee (GMEC), the Special Review Subcommittee (SRS) is responsible for the development, implementation, and oversight of a process for Special Program Review (SPR) for all Accreditation Council for Graduate Medical Education (ACGME) and non-ACGME-sponsored programs. In fulfillment of the ACGME institutional accreditation requirement mandating oversight of the SPR process, the GMEC establishes a SRS to perform SPRs for underperforming programs and monitor program improvement work plans generated through these SPRs.

2. Membership

- a. Program Directors (PD) and/or Associate Program Directors (APD). At least four PD and/or APD will be assigned to the SRS by the Designated Institutional Official (DIO) and SRS Chair. PDs and/or APDs should represent the diversity of training programs sponsored by MCG. These individuals will all be voting members of the subcommittee.
- b. Residents and Fellows. At least 2 residents and/or fellows will be assigned to the SRS via a peer-selected process. The residents and fellows should represent the diversity of training programs sponsored by MCG. The residents and fellows will all be voting members of the committee.
- c. Administrative Staff. At least 1 GME administrative staff or program coordinator (PC) will be assigned by the DIO or SRS Chair. They will be a voting member.
- d. Ad Hoc members. Additional individuals may be assigned to the committee on a temporary basis by either the DIO or the SRS Chair. These members may be assigned because they are subject matter experts related to a specific program or practice area. Ad hoc members will not be voting members of the committee.

3. Chair

- a. The Chair of the SRS may be the Senior Associate Dean for Graduate Medical Education (GME), the Associate or Assistant Dean for GME, or a PD.
- b. The Chair is appointed by the DIO.
- c. The Chair will be a voting member only in the instance of a tie among the rest of the committee members.
- d. The Chair will make periodic and timely reports of the SRS reviews, deliberations, and actions to the GMEC.

4. Responsibilities

Execute SPR as requested based on established criteria.

5. Initiating a SPR

- a. Internal Criteria
 - i. At the request of hospital, department, or program administration after DIO approval,

- ii. Concerns identified by the Program and Accreditation Subcommittee (PEAS),
 - iii. Concerns identified and communicated to the GME office by residents or faculty in a particular program after approval of the DIO,
 - iv. Failure to submit GMEC and or Resident Review Committee (RRC) required data on or before identified deadlines, and/or
 - v. Program-specific issues identified by the GMEC or its subcommittees after DIO approval.
- b. External Criteria
- i. Program accreditation statuses of Initial Accreditation with Warning, Continued Accreditation with Warning, and adverse accreditation statuses as described by ACGME policies,
 - ii. Concerns identified on Annual Program Evaluation (APE),
 - iii. Board pass rate below minimum required by Common Program Requirements (CPR) for ACGME (CPR stipulates that a program's aggregate pass rate for first time takers in the preceding 3 years must be higher than the bottom fifth percentile of programs in the specialty, or at least 80% (V.C.3.a) July 1,2019),
 - iv. An unusual pattern of resident and/or faculty attrition,
 - v. Case log data from the ACGME of recent graduates indicating that minimum requirements are not being met, and/or
 - vi. Concerns identified on ACGME resident/faculty surveys
 - 1. Three questions with 50% or lower compliance with any of the survey categories,
 - 2. A pattern of significant downward trends since the last survey,
 - 3. Survey completion rate below 70% (resident) or 60% (faculty),
 - 4. Overall evaluation less than 3.5, and/or
 - 5. ACGME request for progress report related to concerns identified on the survey.
- c. Programs meeting any isolated criterion listed above may not require a full SPR if all other metrics are satisfactory. In this case, the program leadership will be asked to submit an action plan for improvement of the isolated metric including details of the program's method for tracking progress. This document and the tracking method will be reviewed and approved by the SRS and GMEC at their regularly scheduled meetings.
6. Procedures
- a. Meetings
 - i. Scheduled meetings will be conducted at least quarterly.
 - ii. Quorum for in-person meetings will be 50% of voting members and at least one resident or fellow present.
 - iii. Additional discussion and dissemination of information may be conducted on an ad hoc basis via electronic communication.
 - b. Special Review Process
 - i. The SRP will be completed in accordance with AU House Staff Policies and Procedures (Policy HS 29.0 GMEC Special Program Review Policy and Protocol).
 - ii. The Chair will assign subcommittee members to the SPR according to policy.
 - c. Voting

- i. Votes will be determined by a simple majority.
 - ii. The Chair will cast a vote marked "Chair"; this vote will only be counted in the event of a tie among the rest of the members of the subcommittee.
 - iii. Votes may be conducted electronically in an ad hoc manner as long as 50% of voting members cast ballots.
- d. Referral of Items to Other Subcommittees or Committees
The subcommittee may determine that a current or recommended review item would be more appropriately handled by another GMEC Subcommittee, the GMEC itself, or another institutional committee altogether. In this instance, the Chair will work directly with the Chair of the subcommittee or committee in question to refer the item.
- e. Minutes
Minutes will be kept and submitted to the GMEC.