MISSION: Physician and dentist graduate education (GME) is a critical mission of the University of Iowa Hospitals and Clinics (UIHC) and the Carver College of Medicine (CCOM). GME is conducted and aligned with UI Health Care’s other core missions of patient care and research. UI Health Care achieves excellence in education for both medical and dental house staff members by providing expert clinical and research supervision in the midst of a diverse patient population and state-of-the-art facilities including cutting-edge technology.

UI Health Care serves as Iowa’s only comprehensive quaternary health care center, the principal clinical training base for the University of Iowa’s health science education programs and Iowa’s primary base for the development of technological advances in patient care. The organization of UIHC supports both patients and payers in the utilization of health care services. Faculty members appointed by the CCOM and the University of Iowa College of Dentistry (UI COD) comprise the teaching faculty at UIHC.

The overarching goals of UI Health Care’s graduate medical and dental education programs are to:
- Educate the physicians and dentists needed by Iowa and beyond;
- Improve the level of medical and dental services which citizens expect; and
- Groom the academic medical and dental leaders of the future.

Using its educational, financial, and human resources, UIHC achieves its educational goals by developing appropriate curricula and evaluation methods and by ensuring resident supervision in a safe and supportive patient care arena. UIHC and the CCOM are thus committed to facilitating the professional, ethical and personal development of our resident and fellow physicians.

The UIHC sponsors graduate medical and dental education programs in ACGME-accredited residencies and fellowships as well as in ADA-accredited programs and non-ACGME specialty fellowships.

ORGANIZED ADMINISTRATIVE SYSTEM AND INSTITUTIONAL RESOURCES: Delegated by the Iowa Board of Regents, the responsibility for the organization and distribution of institutional resources for the educational mission at UI Health Care rests with UIHC’s Chief Executive Office (CEO). The CEO is obligated to maintain the financial integrity and optimal utilization of physical resources of the hospital. In consultation with and after endorsement by the University Hospital Advisory Committee (UHAC) which serves as UIHC’s governing board, the Iowa Board of Regents annually approves financial resources proposed by the CEO to support GME, as part of the UIHC budget process. GME administration, operations and resident stipends are funded in this way, including provision of dedicated and funded time for the Designated Institutional Official (DIO). Additionally, UIHC distributes GME monies to Clinical Departments in the CCOM to support Program Director, Program Coordinator and other administrative costs. Stipends for fellow physicians come from a combination of financial resources from the UIHC, CCOM and funded grants.

The DIO holds formal roles in UIHC (Director of GME) and in the CCOM (Associate Dean for GME) consistent with the important bridging role of GME across these integrated organizations. The DIO has a dual reporting structure: to the CEO for financial accountability and quality/safety of patient care delivered by resident and fellow physicians; and to the Dean of the CCOM for educational stewardship, including meaningful integration of GME with the continuum of medical education. Since the DIO’s responsibilities frequently span activities and issues important to both the CEO and the Dean, these three institutional leaders
work collaboratively and hold joint meetings. The CEO and Dean of the CCOM ultimately report to the Vice President for Medical Affairs.

The DIO has full authority and responsibility for the oversight and administration of UI Health Care’s medical and dental residency and fellowship programs. He assures compliance with ACGME Institutional Requirements, the Common Requirements, each program’s specialty- or sub-specialty-specific Program Requirements as specified by their respective Residency Review Committee (RRC), and with the ACGME Policies and Procedures. The DIO is responsible to anticipate changes in resource needs to support our GME programs and then works with the CEO and Dean to secure them. He also works to ensure that review, appropriate supervisory practices and continuous innovation are well established across all programs.

The Associate Director of GME works in tandem with the DIO to establish a centralized base for GME administration. Responsibilities include but are not limited to administering the Graduate Medical Education Committee (GMEC) and overseeing that GME programming complies with accreditation standards. In the absence of the DIO, the GME Associate Director may review and sign on his behalf program information forms (PIFs) and other documents or correspondence submitted by a Program Director to the ACGME or other GME documents for institutional purposes.

The Graduate Medical Education Committee (GMEC) oversees the training sponsored by UI Health Care. The GMEC reports as a Subcommittee to UIHC’s governing board, UHAC. The GMEC is authorized by UHAC via the UIHC Bylaws to be responsible for monitoring, evaluating and advising on all aspects of residency education. GMEC membership is comprised of voting members who are recommended by the DIO and GMEC and then officially appointed by the UIHC CEO. Membership is made up of elected representatives of residents and fellows, all core Program Directors, representatives of fellowship Program Directors and select UIHC and CCOM administrators. The DIO is a member of GMEC, as are the Associate Director of GME and other professional staff members of the GME Office. To select a Chair, the GMEC members and DIO recommend a member to the CEO of UIHC, who has the capacity to officially appoint the Chairs of all UHAC Subcommittees, including the GMEC. The GMEC meets monthly; minutes are taken, later reviewed and approved by the GMEC, and filed in the GME Office as well as on-line for viewing by any GMEC member.

Duties of the GMEC include, but are not limited to:

- Establishment and implementation of policies and procedures regarding the quality of education and the work environment for the house staff in all programs, including
  - Recommendations through the DIO to the CEO of UIHC about house staff stipends, benefits and funding, including the selection of fellow recipients for Patient Care Enrichment Funds and to provide the necessary support for curricular requirements as well as for scholarly activities, the general competencies and the assessment of outcomes;
  - Facilitation of processes for effective communication between the GMEC and Program Directors and with site directors at all clinical sites;
  - The development and implementation of written policies and procedures regarding resident duty hours to ensure compliance with mandates, including review and approval of requests to extend duty hours by 10%;
  - Monitoring of programs’ supervision of all house staff to ensure that patient care is safe and effective, that the educational needs of the house staff are met, to afford progressive responsibility appropriate to the resident’s or fellow’s level of education, competence and experience and to ensure compliance with all Common and Program Requirements;
  - Communication between the leadership of the medical staff regarding the safety and quality of patient care that includes an annual report to UHAC and to any major participating institutions (i.e., the VA Medical Center), a description of house staff participation in patient safety and quality of care education, and the accreditation of programs and addressing any citations regarding patient care issues;
  - Assurance that each program provides a curriculum and an evaluation system that enables house staff to demonstrate achievement of the ACGME general competencies, as appropriate;
— Assurance that house staff members have ready access to specialty-specific and other appropriate reference material in print or electronic format, including the availability of databases with search capabilities;
— Policies about the eligibility, selection, evaluation, promotion, transfer, discipline or dismissal of house staff;
— Oversight of each program’s accreditation, including review of letters of notification and monitoring of internal review recommendations and follow-ups, including action plans of any areas of concern or non-compliance;
— Oversight of UIHC’s institutional accreditation by the ACGME, including review of all correspondence, accreditation letters, letters of notification and monitoring of action plans for correction of citations or concerns of any non-compliance;
— Oversight of program changes including review and approval of new Program Directors prior to submission to the ACGME, applications for new programs, modifications in program complement, major changes in program structure or length of training, additions and deletions of participating sites, reports of progress or responses to adverse action made by an RRC, voluntary withdrawal of any program, review of any appeal to the ACGME at any level, and oversight of program or site reductions, closures, interruptions or the effect of disasters, and
— Review of any experimental or innovative projects and submission, as appropriate, to the ACGME, and monitoring of such projects.

• Establishment of an internal review policy and protocol and oversight of the process, including documentation of the review (at midpoint of the accreditation cycle) and program status in a written and timely report, the appointment of internal review committee members as defined by the ACGME, the assessment of compliance with program-specific and institutional requirements, program goals/objectives, financial, faculty, staff and other resources, responses to ACGME concerns/letters, educational outcomes, and program improvement efforts;
• Oversight of each program’s development and operations, as they recruit, orient, and schedule house staff members;
• Oversight of and liaison with the Program Directors and assurance that they maintain oversight of and liaison with the appropriate personnel who are involved in the supervision and training of house staff members in external rotations;
• Function as a forum for house staff member concerns, through peer-elected GMEC house staff members who also serve as officers of the Residents’ Council and to ensure broad house staff representation, as appropriate on other governing Subcommittees;
• Ensure that quality assurance programs and performance improvement standards apply across programs with respect to quality of care, treatment and services provided by house staff members;
• Ensure that administrative support continues for GME programs and house staff members in the event of a disaster or interruption in patient care, including assistance in the continuation of house staff assignments and/or placement of any affected house staff member; and
• Provision of an ethical, professional and educational environment free from harassment, intimidation or retaliation.

Overseen by the DIO and the GME Associate Director are additional full-time GME Office professional and clerical staff members funded by UIHC. These employees are dedicated to the fulfillment of GMEC policies and to the support of house staff concerns. The GME Office is located within UIHC and fully equipped with appropriate technical, filing and communication systems to permit its effective operation. Activities include but are not limited to the appointment and contract process, the administration of stipends and benefits information (e.g., health, disability) information, the communication of liability coverage, visa support, budget, communications resources, technological support, internal reviews and compliance, competencies and outcomes assessment, GMEC support, special projects, Program Director support, information technology, supporting data systems, accreditation standards review, accreditation PIF reviews, facility and work environment planning (call rooms, resident work space, conference space, new facilities, on-call dining, residents’ lounge and parking), National Residency Match Program (NRMP), recruitment, conference/symposia/orientation
coordination, duty hour support, sleep impairment education, security/safety, lab coats, Residents' Council support, moonlighting, support for agreements at external sites, documentation, file maintenance, counseling/rehabilitation arrangements, renewals/non-renewals, leaves/terminations, grievances/due process administration, annual and other report drafting, and verifications for graduates. Compliance with duty hour and supervision rules occurs at both the institutional and the program level. Fellows and residents benefit from a coordinated effort provided by a physician Director of GME Health and Wellness Initiatives. Additional educational support is derived from the Office of Consultation and Research in the UI CCOM.

UI Health Care is keenly focused on ensuring the quality of GME at UIHC and at external sites. Stewardship of our learners' experience in both the accredited and non-accredited programs, while providing highest quality and safe patient care, is the primary goal of our educational mission, wherever the training occurs. Agreements ensuring the quality of external experiences are required between institutions for non/UIHC sites, including affiliation agreements, memoranda of understanding and/or program letters of agreement, with stated goals/objectives and other required contract terms. When accreditation is possible, ACGME accreditation is sought and maintained according to RRC standards. Joint Commission accreditation of UIHC is also central to that aim. Development of our Program Directors and other faculty members' teaching, supervision and evaluation skills is an ongoing and serious endeavor at our institution.

In accordance with its educational mission, UI Health Care is dedicated to pursuing and achieving the highest quality graduate medical and dental education possible for our physician learners. We commit the required resources, personnel, facilities, technology, supplies and finances toward that end.

Signatures:

[Signature]
Designated Institutional Official
Director of GME, UIHC
Associate Dean for GME, CCOM

[Signature]
GMEC Chair

[Signature]
Dean, UI Carver College of Medicine

[Signature]
CEO, UIHC

[Signature]
VP Medical Affairs