

Statement of Commitment to Graduate Medical Education

Yale-New Haven Medical Center (hence known as the Sponsoring Institution or the Center), a joint enterprise consisting of Yale-New Haven Hospital and Yale University School of Medicine, has a long tradition of commitment to medical education at both undergraduate and graduate levels. Yale-New Haven Hospital, the primary hospital site for Graduate Medical Education (GME) and the Yale School of Medicine sponsor training programs, consistent with their common mission of exemplary medical education programs to educate physicians for medical leadership in clinical practice, teaching and research. The Yale New Haven Medical Center sponsors and supports a total of 97 ACGME approved training programs, many among the most competitive in the Nation. Furthermore, the breadth of patient population, expertise of the faculty, and abundance of both clinical and research resources, creates an excellent training environment for over 1300 residents and subspecialty residents enrolled in graduate medical education at Yale-New Haven Medical Center.

Yale-New Haven Medical Center is committed to the creation and preservation of GME programs that offer young physicians the opportunity to develop clinical and professional competence under careful supervision and guidance of faculty. The Medical Center, through its governing authority, administrative staff, GME leadership and faculty, is also committed to providing a scholarly environment essential to the development of future leaders in the art and science of medicine, and providing the necessary educational, financial and human resources to support Graduate Medical Education. When appropriate, the Medical Center will take advantage of opportunities to cooperate with other institutions to achieve these goals. Chairs of the Clinical Department of the Yale School of Medicine hold a joint title as "Service Chief" of the respective clinical services at Yale-New Haven Hospital and receive funding support from both Yale School of Medicine and Yale-New Haven Hospital.

The institutional administration of Graduate Medical Education takes place under the auspices of the Office of Graduate Medical Education (OGME). The Director, Associate Dean of Graduate Medical Education, serves as the Designated Institutional Official (DIO) and is jointly funded by Yale-New Haven Hospital and Yale School of Medicine. The DIO has the authority and responsibility for the oversight and administration of the Sponsoring Institution's GME programs and is responsible for assuring compliance with the ACGME Institutional Requirements. The DIO reports to the Chief Medical Officer of Yale-New Haven Hospital and to the Deputy Dean for Education of the Yale School of Medicine. The Graduate Medical Education Committee (GMEC) and the DIO develop institutional policies regarding GME and oversee the implementation of ACGME policies by each program.

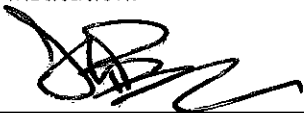
The DIO has the following responsibilities:

1. Reviews, approves and co-signs (or designates a representative to co-sign) all correspondence, applications, compliment changes with the ACGME or individual RRC's from the Sponsoring Institution or its GME programs.
2. Serves as chair of the GMEC.
3. Presents an annual report to the Yale-New Haven Hospital Medical Board (which includes Yale School of Medicine Department Chairs and full-time faculty as well as community part-time faculty) and representatives of all the major participating institutions reviewing the activities of the GMEC during the past year with regard to resident supervision, responsibilities, evaluation and work hours; RC accreditation letters from the past year; and evaluation of the educational and financial resources available for programs; and the effectiveness of the programs as related to the mission and goals of the Sponsoring Institution.
4. Presents an annual report to the Medical Committee of the Yale-New Haven Hospital Board of Trustees, which includes Yale-New Haven Hospital and Yale University School of Medicine representation.
5. Provides timely advice to the Sponsoring Institution regarding regional and national events potentially affecting graduate medical education.

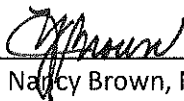
The specific charge to the GMEC is outlined below:

1. Meets monthly to monitor and advise the DIO and the Sponsoring Institution on all aspects of resident education. Voting membership includes residents nominated by their peers, appropriate program directors, the quality safety officer or designee, administrators and other members of the faculty as outlined by the Policies and Procedures of the OGME. Attendance of meetings must include at least one resident/fellow member. Minutes will be kept of all meetings.
2. GMEC responsibilities include oversight of the ACGME accreditation status of the Sponsoring Institution and each of its ACGME-accredited programs, the quality of the GME learning and working environment within the Sponsoring institution, each of its ACGME accredited programs and participating sites; the quality of educational experiences in each ACGME-accredited program that lead to measurable achievement of educational outcomes as identified by program requirements.
3. GMEC also has oversight of the ACGME-accredited programs' annual program evaluations and self-studies.
4. Oversees all processes related to reductions and closures of individual ACGME-accredited programs, major participating sites, and of the Sponsoring Institution.
5. Oversees the provision of summary information of patient safety reports to residents, fellows, faculty members, and other clinical staff members.
6. Establishes and implements institutional policies and procedures regarding the quality of education and the work environment for the residents.
7. Reviews annually resident compensation, benefits and funding for resident positions to assure that these are reasonable and fair and makes recommendations to the Sponsoring Institution based on this review.
8. Reviews and approves requests for permanent changes in resident/fellow complement, any major changes in any of the ACGME-accredited programs' participating sites, approves new program director appointments.
9. Reviews and approves progress report requests by a Review Committee, responses to Clinical Learning Environment Review (CLER) reports, requests for work hour exceptions, voluntary withdrawal of ACGME program accreditation, requests for appeal of an adverse action by a Review Committee, and appeal presentation to an ACGME Appeals Panel.
10. GMEC must demonstrate effective oversight of the Sponsoring Institution's accreditation through an Annual Institutional Review (AIR). The GMEC must identify institutional indicators such as most recent ACGME letter of notification, ACGME surveys of residents/fellows and core faculty members, and each ACGME-accredited program's accreditation status.
11. The DIO must annually submit a written executive summary of the AIR to the Sponsoring Institution's Governing Body.
12. The GMEC must demonstrate effective oversight of underperforming program's through a Special Review Process that follows an approved protocol. Results, including a quality improvement plan and corrective actions, must be submitted to the GMEC for monitoring.

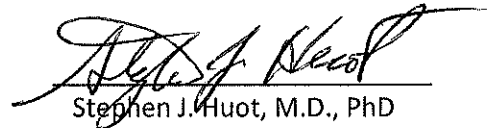
13. Establishes and maintains a liaison with the program directors and administrators of institutions participating in the residency training programs to assure an appropriate collaboration with the personnel of other participating institutions.
14. Establishes and implements institutional policies regarding residency selection, supervision, evaluation, promotion and dismissal.
15. Establishes and implements formal written institutional policies governing resident duty hours including assurance that individual programs establish written policies consistent with institutional policies and develop a procedure to monitor duty hours for compliance.
16. Assures that GME programs provide appropriate supervision for all residents.
17. Assures that each program provides a curriculum and evaluation system to ensure that residents demonstrate competency in the six general areas.
18. Regularly review all ACGME program accreditation letters and the Sponsoring Institution's Letter of Report and monitors action plans for correction of concerns or areas of noncompliance.
19. Establishes and implements institutional policies for discipline, and the adjudication of complaints and grievances by the residents.
20. Assures the completion of established program letters of agreement with its participating institutions.
21. Provides a format for the discussion of issues of mutual interest to the training programs at the Sponsoring Institution.



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