



Policy Number:	26-08
Policy Name:	Graduate Medical Education: Special Review Process
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PURPOSE

The Accreditation Council of Graduate Medical Education (ACGME) Institutional Requirements require that the Graduate Medical Education Committee (GMEC) have a Special Review Process to provide oversight for underperforming programs. Per ACGME Institutional Requirements, the process, establishes a variety of criteria for identifying underperformance that includes, at a minimum, program accreditation statuses of Initial Accreditation with Warning, Continued Accreditation with Warning, and adverse accreditation statuses as described by ACGME policies; and, results in a timely report that describes the quality improvement goals, the corrective actions, and the process for GMEC monitoring of outcomes, including timelines.

POLICY

I. Criteria of Underperformance

- A. Serious concerns about patient or trainee safety.
- B. Repeated work hour violations.
- C. Deviations from expected results in standard performance indicators:
 - 1. Program accreditation statuses of Initial Accreditation with Warning, Continued Accreditation with Warning, and adverse accreditation statuses as described by ACGME policies.
 - 2. Program attrition:
 - a. Changes in program director more often than every 24 months;
 - b. Greater than one resident/fellow per year trainee attrition (withdrawal, transfer or dismissal over a two-year period).



3. Loss of major education necessities:
 - a. Loss of a major participating site without an adequate replacement.
4. Recruitment underperformance:
 - a. Any program that fails to fill all positions for two consecutive years.
5. Scholarly activity (excluding typical and expected departmental presentations):
 - a. GMEC identifies inadequate scholarly activity for faculty or trainees.
6. Board passage rates
 - a. Board pass rate (USMLE or ABPN) falls below 50% averaged over 2 years.
7. Clinical experience data:
 - a. Any significant changes in adequacy of clinical or didactic experience within the residency/fellowship.
8. ACGME resident survey:
 - a. Scores in the categories of duty hours, faculty, evaluation, educational content, resources, patient safety and teamwork that are significantly below historical scores and/or significantly below the national or specialty mean listed on the evaluation.
9. ACGME faculty survey:
 - a. Scores in the categories of faculty supervision and teaching, educational content, resources, patient safety and teamwork that are significantly below historical scores and/or significantly below the national or specialty mean listed on the evaluation.
10. Milestones ACGME or narrative:
 - a. Non-compliance with the milestones project as reported to the ACGME.

II. Process

- A. Annual review by GMEC:
 1. Annually, coinciding with the Program Directors' presentation of the Annual Program Evaluation to GMEC, the GMEC will determine whether, based on the above criteria, any program meets the requirements for a special review process.
- B. Reporting
 1. At any point, a resident, fellow, or faculty member can report concerns for a possible underperforming program using confidential reporting processes as outlined in other policies.
 - a. The DIO will investigate to determine if a special review process should be brought to the attention of GMEC.



C. Investigation

1. If GMEC determines that a special review process must be initiated, the DIO or the DIO's designee will investigate the program and complete a report within 30 days of the initial date the concern was reported.
 - a. The report will include quality improvement goals, corrective actions, and the process for GMEC to monitor the outcomes.
 - b. The report may include a recommendation of whether the program should be placed in the underperforming program category, but the final determination will be made by the GMEC.
 - c. The GMEC will review the report at the next GMEC meeting and vote on whether the program should be placed in the underperforming program category.
 - d. If the GMEC determines that the program is not underperforming then this will be noted in the GMEC minutes.
 - e. The GMEC can determine whether to re-investigate the program at a later date.

III. Remediation of Underperforming Programs

- A. If a program is identified as an underperforming program then:
 1. The GMEC will determine if the underperforming program needs to be reported to the ACGME.
 2. The DIO will recommend and the GMEC will confirm an "Improvement Coordinator," a faculty or staff member to oversee a corrective action plan.
 3. The Improvement Coordinator will provide updates on the status of remediation plan at every GMEC meeting.
 4. If a program does not show improvement within 12 months then the GMEC will determine next actions, which could include:
 - a. Removal or replacement of the program director
 - b. Voluntary program closure
 - c. Requests to the ACGME for guidance and support
 5. If the corrective action plan is successful then the underperforming program will be placed on a probationary status for 6 months and must make reports of continued progress at every GMEC meeting.
 - a. The program will continue to make strong efforts to address the concerns over the next six months to prevent any return to underperformance.
 - b. If all concerns are adequately addressed at the end of the probationary period then GMEC may elect to remove the program from the underperforming program status.



SIGNATURES

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REVISION HISTORY

Date of Revision	Type of Revision	Revision Description