Participation on University Committees

Policy Number: GME - 010 Version: 01
Effective Date: July 1, 2001 Updated: July 1, 2010

Description:
House Officer participation in UCSD committees is considered essential for the benefit of patient care as well as the personal and professional development of the House Officer.

Purpose:
This policy describes how House Officers will actively participate in the UCSD Medical Center and UCSD School of Medicine committee structure.

Scope:
All House Officers in UCSD GME Training Programs

POLICY:
A. House Officers shall contribute to University policy through their voting membership on University committees as follows:

- School of Medicine - Committees of the Faculty
  
  **Standing Committee on Educational Policy:** Represents the Faculty in its role in educational matters. A housestaff representative of the UCSD Graduate Medical Education Committee shall be selected by the GMEC to serve on the CEP.

  **Graduate Medical Education Committee - A sub-committee of the Committee on Educational Policy:** Ensures that graduate medical education training programs offered by the departments of the School of Medicine meet institutional and national (including ACGME) performance standards. Housestaff nominated by their peers shall serve on the Graduate Medical Education Committee.

- UCSD Medical Center - Medical Staff Executive Committee (MSEC)
  
  **Medical Staff Executive Committee (MSEC):** Establishes Medical Center medical policies; coordinates the activities of the various departments; represents and acts for the medical staff as a whole; establishes a Quality Assurance Program. Two resident physician members of the Resident Physician Council (RPC) shall be nominated by the members of the RPC to serve for one year on the MSEC to represent the RPC on that
committee. One resident will represent the surgical and operating room specialties, and one resident will represent the medical specialties.

- UCSD Medical Center - Subcommittees of the Medical Staff Executive Committee as follows:

  **Cancer Committee**: Monitors and makes recommendations to maintain compliance with ACoS standards for a comprehensive Cancer Center; performs patient care evaluations and makes recommendations for cancer care management; evaluates individual cancer cases at Tumor Board.

  **Clinical Resource Management Committee**: Responsible for oversight of the utilization of resources related to patient care.

  **Critical Care Committee**: Provides a multidisciplinary forum for oversight and coordination of all critical care areas including patient management, equipment and other resources; evaluates response to Code Blue; develops and reviews policies associated with activities in critical care areas. Membership includes Medical Directors and Nurse Managers of critical care areas and Medical Chief Resident.

  **Infection Control Committee**: Develops and evaluates infection control programs throughout the Medical Center; reviews infection surveillance reports and analyzes infections within the Medical Center for epidemic potential and takes actions to minimize such occurrences; establishes infection control policies.

  **Medical Ethics Committee**: Develops policies and educational programs to assist in reaching sound decisions about biomedical ethical issues; responds to and assists with questions regarding Medical Center ethical issues; works in conjunction with 24-hr Consultation Team; routinely discusses ethics consultation cases.

  **Medical Risk Management Committee**: Reviews the clinical management of patients involved in serious incidents or lawsuits; Recommends action to improve performance and prevent/minimize reoccurrence, including developing policies and procedures.

  **Performance Improvement and Patient Safety Committee**: Responsible for medical errors, and risk reduction activities in the organization.

  **Patient Satisfaction Committee**: Establishes patient satisfaction goals; reviews/assesses related data; monitors corrective actions.

  **Patient Care and Peer Review Committee**: Provides oversight and coordination of Medical Center quality improvement activities; Actively initiates and evaluates activities related to improving quality of patient care.

  **Perinatal Practices Committee**: Establishes and enforces policies and procedures for patient care in the Labor and Delivery Suites and in postpartum areas; Makes recommendations regarding prenatal, obstetrical delivery and postpartum management and services.
Pharmacy and Therapeutics Committee: Develops and reviews policies regarding drug usage and storage; Determines content of the Formulary; Reviews standing orders and contents of emergency cart medication/supplies.

Physician Well-Being Committee: Serves as the identified group for referring physicians with mental, emotional, or physical impairment that interferes, even potentially, with the ability to practice medicine with reasonable skill and safety; Monitors practitioners for compliance with terms of agreements and assists with return to work issues; Provides resources for treatment and education.

Quality Council: Provides strategic direction, leadership and oversight of service quality at UCSD Medical Center.

Resident Physician Council: The Resident Physician Council is an advisory council to the Medical Director, UCSD Medical Center and the Associate Dean, GME. The Council is also advisory to the Medical Staff Executive Committee (MSEC) by having two of the Council’s members represent housestaff on the MSEC (Medical Staff Executive Committee) as well as the GMEC.

References:
NA

Attachments:
NA

Approval Dates:
GMEC July 1, 2001; updated July 2010

Contact Information:
Office of Graduate Medical Education; http://meded.ucsd.edu/gme/