Evaluation of Residents/Fellows

Effective: July 1, 2018
Reviewed by GMEC: April 10, 2018
Initial Approval by GMEC: August 4, 1993

Statement
Residents are evaluated at the end of each clinical rotation by their attending faculty. In addition, they are evaluated at least every six months by their own program to ensure progressive resident/fellow performance improvement appropriate to educational level. The program provides objective assessments of competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice, based on the specialty-specific milestones. These evaluations become part of each Resident's/ Fellow’s permanent record.

Associated Policy(ies)
None

Responsible Positions (Title)
Residents & Fellows
Program Director
Program Coordinator
GME Office

Equipment Needed
None

Procedure Steps, Guidelines, Rules, or Reference
1. Evaluation criteria and forms, are used by each program for resident/fellow evaluations, and reviewed as needed by GME and/or program representatives.

2. These evaluation forms are completed by multiple evaluators (e.g., faculty, peers, patients, self, and other professional staff) based upon a compilation of clinical evaluations and other criteria, to include the ACGME general competencies.

3. The program director appoints the Clinical Competency Committee. The committee:
   a. reviews all resident evaluations semi-annually;
   b. prepares and assures the reporting of the Milestone evaluations of each resident semi-annually to ACGME; and,
   c. advises the program director regarding resident progress, including promotion, remediation, and dismissal.

4. The Program Director and/or designated attending faculty meets with each resident/fellow at least semi-annually to discuss the residents evaluation forms.

5. Completed evaluations are signed by the program director and/or designated attending faculty and the resident/fellow. These evaluations are accessible for review by the resident/fellow.
including performance monitoring, become part of each resident's/fellow's permanent record.

6. Copies of unsatisfactory evaluations are sent to the Department of Medical Education for review by the Designated Institutional Official,(DIO).

7. At the discretion of the DIO or the Program Director, unsatisfactory evaluation may be referred to the GMEC for review. The GMEC may advise, propose, or approve specific corrective actions.

8. A final summative evaluation of each resident/fellow (see template) is completed and sent to the GME office prior to end date of the residency training. If this summative evaluation is not in the GME office at the stated deadline, then the certificate of residency is held until the evaluation is received by the GME office. This evaluation documents the resident/fellow’s performance during the final period of education, and verifies that the resident/fellow has demonstrated sufficient competence to enter practice without direct supervision. The final summative evaluation is signed by both the resident/fellow and the Program Director; and is kept in the resident/fellow’s permanent record.

9. A final summative evaluation of each resident/fellow who departs prior to end of training is also completed. The final summative evaluation is signed by both the resident/fellow and the Program Director; and is kept in the resident/fellow’s permanent record. A copy of the final evaluation is sent to the Department of Medical Education.

References
None