

Policy of the Graduate Medical Education Committee
Section: Educational Administration
Subject: Evaluation and Promotion
Number: 1.300
Date Developed: 1/89
Last Review/Revision: 12/05, 2008, 10/2013, 5/2014
Replaces: previous policy of same name, dated 11/02
ACGME Requirement: Institutional IV.C.; Common V

Purpose

To describe the policy and procedures pertaining to evaluation and promotion of residents (includes fellows).

Definitions

Promotion is advancement based on merit to a higher rank or title. Failure to perform at an acceptable level in the period of current appointment means that an individual will not be promoted.

Non-promotion means that the resident fails to perform at an acceptable level in the period of current appointment or cannot reasonably function satisfactorily at the next level and is not advanced to a higher rank or title. A non-promotion does not necessarily mean either non-reappointment or dismissal, but merely that the resident will not be advanced to the next level of appointment at the completion of the contract period.

Non-reappointment means that a resident is not offered a next successive contract for appointment at the end of the current appointment period (usually June 30). Non-reappointment is not a dismissal as governed by GME Committee Policy 1.420 and, therefore, does not require cause.

Clinical Competency Committee is appointed by the Program Director. The committee must have a written description of its responsibilities. At a minimum the committee should review all resident evaluations semi-annually; prepare and assure the reporting of Milestones evaluations of each resident semi-annually to ACGME; and, advise the program director regarding resident progress, including promotion, remediation, and dismissal.

Policy:

The faculty must evaluate resident performance in a timely manner during each rotation or similar educational assignment, and document this evaluation at completion of the assignment. Faculty supervision assignments should be of sufficient duration to assess the knowledge and skills of each resident and delegate to him/her the appropriate level of patient care authority and responsibility. When available, evaluation should be guided by specific national standards-based criteria. Other professional health care staff, peers, patients or their families and medical students may also evaluate residents.

The Program Director must notify the Associate Dean for GME if he/she intends to non-reappoint or non-promote a resident. The Program Director must notify the resident of the decision to non-promote or non-reappoint by a written notice at least **four** months prior (usually March 1) to the expiration of the current period of appointment, regardless of PGY level of the resident. However, if the primary reason(s) for the non-reappointment occur(s) within the **four** months prior to the end of the current appointment, the resident will be provided with as much written notice of the intent not to renew as the circumstances will reasonably allow, prior to the expiration of the current period of appointment. A resident involved in non-reappointment or non-promotion has a right to appeal according to the GMEC Policy, 1.410, Adjudication of Resident Grievances.

Evaluation Plan

1. Each residency program (includes fellowships) must have an effective plan for assessing resident performance throughout the program and for utilizing the results to improve resident performance. This plan should include: The use of methods that produce an accurate, objective assessment of residents' competence in the 6 ACGME competencies based on the specialty-specific Milestones; patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice,
2. Mechanisms for providing regular and timely performance feedback to residents that includes at least written semiannual evaluation that is communicated to each resident in a timely manner,
3. A process involving use of assessment results which document progressive performance improvement appropriate to educational level. The maintenance of a record of evaluation for each resident that is accessible to the resident.

Procedure

The Program Director, with participation of members of the teaching staff and Department Chair shall:

1. Communicate the written criteria and processes for evaluation and promotion to each resident;
2. Participate in training to use evaluation tools for fairer and more consistent evaluations.
3. Evaluate the knowledge, skills and professional growth of the residents, using appropriate written criteria and processes to determine advancement in the program. ;
4. Prepare a written semiannual evaluation, or more often as dictated by the residency review requirements;
5. Through the Clinical Competence Committee review all resident evaluations, prepare and assure reporting of Milestones evaluation semi-annually to the ACGME.
6. Communicate each evaluation to the resident in a timely manner;
7. Advance the resident to a position of higher responsibility on the basis of satisfactory progressive scholarship and professional growth appropriate to the educational level;
6. Maintain a permanent record of evaluation for each resident and have it accessible to the resident and other authorized personnel including the internal review panel;
7. Provide a written, summative evaluation for each resident who completes the program as part of the resident's permanent record maintained by the department. The final evaluation must include a review of the resident's performance during the final period of education, verify that the resident has "demonstrated sufficient competence to enter practice without direct supervision" and be signed by the program director.
8. Notify the Associate Dean for GME if he/she intends to non-promote or non-reappoint a resident.
9. Notify the resident of the decision to non-promote or non-reappoint by a written notice at least four months prior to the expiration of the current period of appointment unless the primary basis for such action occurs within the final four months of the current appointment.