Policy 1.300 Graduate Medical Education Committee
Section Educational Administration
Subject Evaluation and Promotion
Policy Requirements: ACGME Institutional: 4.2., 4.3., 4.3.a. (1-4); 4.4. ACGME Common Program Requirements: 5.1., 5.1.a. (1-2); 5.1.b. (1-2), 5.1.c. – 5.1.g.; 5.2., 5.2.a. – d.; 5.3.
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Purpose

To describe the policy and processes pertaining to evaluation and promotion of residents/fellows, evaluation of faculty and program evaluation and improvement as outlined by Accreditation Council for Graduate Medical Education (ACGME) requirements.

Policy

This UAMS Regional Centers Graduate Medical Education policy requires that each Regional Centers ACGME-accredited program develop a policy that outlines a program-specific plan to meet ACGME Common Program Requirements (CPR) and program-specific ACGME requirements related to evaluation. This policy requires that each Regional Centers ACGME-accredited program determine the criteria for promotion and/or renewal of a resident's/fellow's appointment as part of their program-specific evaluation and promotion policy.

Process

Each Regional Centers ACGME-accredited program must develop and implement an evaluation policy that details the process of frequent and timely feedback to residents/fellows and faculty as outlined by ACGME requirements. Programs are required to use the residency management program, New Innovations, for regular distribution and management of formative evaluations. Programs that wish to use a method of evaluation other than New Innovations must obtain approval from the Designated Institutional Official (DIO) for Regional Centers. The program-specific evaluation policy must also outline a program's process for program evaluation and implementation.

Types of evaluations required by the ACGME are summarized as follows:

Formative Evaluations: Resident/fellow evaluations must be documented at the completion of an assessment and meet requirements outlined in CPR V.A.1.

Summative Evaluations: Annually, programs must complete a summative evaluation of each resident/fellow to include their readiness to progress to the next level of the program, if applicable. Summative evaluations must be available for review by the resident/fellow.

Final Evaluations: Program Directors must provide a final evaluation for each resident/fellow upon completion of the program. Final Evaluations must meet requirements outlined in CPR V.A.2.

Clinical Competency Committee: Program Directors must appoint a Clinical Competency Committee to review all resident/fellow evaluations at least semi-annually, determine each resident's/fellow's semi-annual evaluations and advise the program director regarding each resident's/fellow's progress.

Semi-annual Evaluations: Program Director or designee must meet semi-annually with each resident/fellow to review their documented semi-annual evaluation of performance, including progress along their specialty-specific Milestones. Additional support must follow requirements outlined in CPR V.A.1. d).

Faculty Evaluations: Programs must have a process to evaluate each faculty member's performance as it relates to the educational program at least annually. Faculty evaluations must meet requirements as outlined in CPR V.B.

Program Evaluation and Improvement: Program Directors must appoint the Program Evaluation Committee to conduct and document the Annual Program Evaluation as part of the program's continuous improvement process and to meet requirements as outlined in CPR V.C.

Non-renewal/Non-promotion

Program Directors of ACGME-accredited programs must immediately notify the Designated Institutional Official (DIO) if he/she intends to non-renew or non-promote a resident or fellow. The program director must notify the resident/fellow of the decision to non-promote or non-renew by a written notice at least four months prior (usually March 1) to the expiration of the current period of appointment, regardless of Post Graduate Year (PGY) level of the resident or fellow. However, if the primary reason(s) for the non-renewal or non-promotion occur(s) within the four months prior to the end of the current appointment, the resident/fellow 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. Residents/fellows have the right to due process relating to any actions such as suspension, non-renewal, non-promotion, or dismissal. A resident or fellow involved in non-renewal or non-promotion has a right to appeal according to the GMEC Policy, 1.410, Adjudication of Resident/Fellow Grievances.