



OMECE

Graduate Medical Education Policy

Approved by the GMEC (Graduate Medical Education Committee) on May 23, 2023

Effective Date: July 1, 2023

Review Date: May 2023 (New)

Next Review Date: May 2024

Policy Title: Program and Faculty Evaluation Policy

Policy Type: Sponsoring Institution/Sponsored Program Policy

Procedure:

Trainees' ability to evaluate the program and faculty: Trainees must be given the opportunity to evaluate their program and teaching faculty at least once a year. This evaluation must be anonymous, confidential, and in writing. Online evaluations using New Innovations can provide anonymity and confidentiality for the Trainee. The results of Trainee assessments must be included in the Annual Program Evaluation. This should be a distinct and separate process from the Annual ACGME (Accreditation Council for Graduate Medical Education) survey.

Program Director Evaluation of Faculty: Sponsored Programs must have a process to evaluate each faculty member's performance as it relates to the education program at least annually. This evaluation must include a review of the faculty member's clinical teaching abilities, engagement with the educational program, participation in faculty development related to their skills as an educator, clinical performance, professionalism, and scholarly activities. The program director must provide feedback to the faculty based on evaluation data and approve continued participation of faculty in the educational program.

Faculty Evaluation of Program: Faculty must have the opportunity to annually evaluate the program confidentially and in writing. The results must be included in the Annual Program Evaluation. This should be a distinct and separate process from the Annual ACGME survey.

Annual Program Evaluation: Each Sponsored Program will establish a Program Evaluation Committee (PEC) to participate in the development of the program's curriculum and related learning activities, and to annually evaluate the program to assess the effectiveness of that curriculum, and to identify actions needed to foster continued program improvement and correction of areas of non-compliance with ACGME standards. The following are recommended requirements:

1. The Program Director will appoint the Program Evaluation Committee (PEC) to conduct and document the Annual Program Evaluation as part of the program's continuous improvement process.
2. The PEC will be composed of at least 2 members of the residency program's faculty, at least one of whom is a core faculty member, and include at least one Trainee. It is recommended for programs that span across multiple years with multiple Trainees per class, that there is staggered representation of the training program.
3. The PEC's responsibilities include:
 - a. Acting as an advisor to the Program Director, through program oversight.
 - b. Review of the program's self-determined goals and progress toward meeting them.
 - c. Guiding ongoing program improvement, including development of new goals, based upon outcomes.
 - d. Review of the current operating environment to identify strengths, challenges, opportunities, and threats as related to the program's mission and aims.
 - e. Monitoring resolution of ACGME related citations.
4. The PEC should consider the following elements in its assessment of the program:
 - a. Curriculum;
 - b. Outcomes from prior Annual Program Evaluations;
 - c. ACGME letters of notification, including citations, areas for improvement, and comments;
 - d. Quality and safety of patient care;
 - e. Aggregate resident and faculty:
 - i. Well-being;
 - ii. Recruitment and retention;
 - iii. Workforce diversity;
 - iv. Engagement in quality improvement and patient safety;
 - v. Scholarly activity;
 - vi. ACGME Resident/Fellow and Faculty Surveys; and,
 - vii. Written evaluations of the program.
 - f. Aggregate resident:
 - i. Achievement of the Milestones;
 - ii. In-training examinations (where applicable);
 - iii. Board pass and certification rates; and,
 - iv. Graduate performance.
 - g. Aggregate faculty:
 - i. Evaluation; and,
 - ii. Professional development
5. The PEC must evaluate the program's mission and aims, strengths, areas for improvement, and threats. A copy of the annual program evaluation must be sent to the DIO (Designated Institutional Official). If deficiencies are identified, the written plan for improvement should be distributed and discussed with teaching faculty and Trainees.
6. The PEC will work with the Program Director to develop the finalized APE for submission to the DIO

- a. The APE and PEC recommendations should be discussed with all teaching faculty as well as resident trainees at least annually
7. APE documents are due to the DIO's office no later than July 31st.

If there are discrepancies between Sponsored Program and Sponsoring Institution policies, in general the stricter of the two policies will apply; however, the Sponsoring Institution and the Sponsored Programs will work collaboratively to come to consensus in areas of debate.

References

ACGME Sponsoring Institution Requirements

0 I.B.4. Responsibilities: GMEC responsibilities must include:

I.B.4.a). (4) the ACGME-accredited program(s)' annual program evaluation(s) and Self-Study(ies); (Core)

Common Program Requirements as listed above in the policy.