

# RESIDENT HANDBOOK

## SECTION III: TRAINING ENVIRONMENT

### PROGRAM EVALUATION COMMITTEE POLICY

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#### INTRODUCTION

- I. All Accreditation Council for Graduate Medical Education (ACGME) programs must have a Program Evaluation Committee (PEC) appointed by the program director that functions in compliance with both the common program and program specific requirements.
- II. The goal of the PEC is to oversee curriculum development and program evaluations for its respective graduate medical education training program.
- III. The program director may serve as the chair of the PEC or he/she may appoint another faculty member to be the chair.

#### POLICY

- I. Each PEC must be composed of at least two program faculty members and one resident or clinical fellow from the program (unless the program does not have any enrolled trainees.)
- II. Faculty members may include physicians and non-physicians from the core program or required rotations in other specialties that teach and evaluate the program's trainees (residents or fellows).
- III. Each PEC must have a written description of its responsibilities; at a minimum, the PEC will meet annually even if there are no residents or clinical fellows enrolled in the program.
- IV. The committee's responsibilities include:
  - a. Plan, develop, implement, and evaluate educational activities of the program
  - b. Review and make recommendations for revision of competency-based curricular goals and objectives
  - c. Address areas of non-compliance with ACGME standards
  - d. Review the program annually, using evaluations of faculty, residents, or clinical fellows and others
  - e. Document on behalf of the program, formal, systematic evaluation of the curriculum at least annually and render a written Annual Program Evaluation (APE) which must be submitted to the Graduate Medical Education Committee (GMEC) annually by Sept. 15 of the immediately following academic year using the standardized template
  - f. Monitor and track each of the following:
    - i. Resident performance
    - ii. Faculty development
    - iii. Graduate performance (board passage rate)
    - iv. Program quality
    - v. Progress in achieving goals set forth in previous year's action plan
    - vi. Progress on preparation for 10 year self-study visit

## PROCEDURE

- I. Each program will have a written PEC policy that describes its responsibilities
- II. The PEC will be provided with confidential resident or fellow and faculty evaluation data by the program's coordinators to facilitate conduct of business
- III. The program director is ultimately responsible for the work of the committee who must assure that the annual action plan is reviewed and approved by the program's core and teaching faculty
- IV. The program's action plan for the current year along with the action plan with updates are required parts of the annual APE due to the Office of Graduate Medical Education September 15 annually

Approved by Graduate Medical Education Committee April 2017