

# EVALUATIONS

## I. Introduction

1. Evaluation is a key component of any residency program. All programs must comply with the ACGME's Common Program Requirements and their specialty specific program requirements.
2. Each program must possess a written statement that outlines its overall educational goals. In addition, each program must have competency based written goals and learning objectives for each major assignment and for each level training of the program. This statement as well as the goals and objectives must be distributed to residents and faculty at least annually, and goals/objectives must be reviewed with residents prior to their assignments. These educational goals and goals/objectives must be reviewed annually by the program and must include a resident in the process.

## II. Standards and Procedures for Evaluation

1. The standards by which UNLV-SOM programs evaluate each resident shall include:
  - a. The goals and objectives of the residency training program in which the resident is enrolled.
  - b. The qualifications, knowledge and skills needed by the residents to pass the requirements for board certification in the specialty.
  - c. The procedural and quality standards, which UNLV SOM must meet in order to maintain accreditation and our affiliate hospitals must meet to maintain licensure.
  - d. The ACGME competencies of medical knowledge, patient care, system-based practice, practice-based learning and improvement, communication and interpersonal skills, and professionalism must be the framework in which the goals and objectives are written.
2. Resident Evaluation by Faculty
  - a. The form of the evaluation will be at the discretion of the program director.
  - b. While the content of specific performance evaluations will be discussed, the program director may choose not to reveal the identity of the individual faculty evaluator.
  - c. Except in those programs where the program director chooses not to reveal the identity of the individual faculty evaluator, residents have ready access to view and/or print electronic copies of their evaluations via the electronic residency management system.

- d. Each program director (or designee) will provide a resident with a formal evaluation semi-annually.
- e. During the meeting the program director (or designee) will review individual or summary evaluation data. The resident and program director (or designee) will acknowledge review of the evaluations or summary via signature.
- f. The resident will be allowed to submit written comments, which will be included in the resident's program file.
- g. Each program will have a clinical competency committee as outlined by the common program requirements' section on evaluation.
  - i. That committee will meet at least twice a year to review every resident and determine the resident's milestones achievement. Residents not achieving milestones at the appropriate level of training, will be assigned remediation activities.
  - ii. The committee must be structured as described in the ACGME-CPR.
  - iii. Each program must have a written policy describing its specific CCC including membership.
- h. The program director must provide a final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of education and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently (and ethically for residents in psychiatry). The final evaluation shall be part of the resident's permanent record maintained by the institution.

### 3. Faculty Evaluation by Residents

- a. Programs are required to provide residents opportunity to evaluate faculty at least annually, however, more frequent evaluation opportunities, preferably at the end of each rotation, are encouraged.
- b. All evaluations of faculty will be collected and reported in a manner that protects resident confidentiality as required by the institutional Graduate Medical Education Committee.
- c. The annual GME program evaluation includes assessment of program directors and other faculty; however, this does not replace individual departments' providing the opportunity for residents to evaluate their faculty.

### 4. Evaluations of Program/Rotations by Residents

- a. Programs are required to provide residents opportunity to evaluate the program at least annually, however, more frequent evaluation opportunities, preferably at the end of each rotation, are encouraged.

- b. All evaluations of the program will be collected and reported in a manner that protects residents' confidentiality as required by the institutional Graduate Medical Education Committee.
  - c. Programs must perform an annual program review/evaluation that is turned into the GME office (APE). APE is due to the GME Office by September 15 for the DIO to assemble the Annual Institutional Review (AIR) to the necessary governing bodies.
5. Responsibility of the Training Program for Maintaining Resident Evaluation Records
- a. Each residency training program office must keep all resident semiannual review evaluations in the resident's permanent files.
  - b. A resident may have his or her own file reviewed with the program director or designated staff member by appointment.
  - c. Resident files will be made available to the Graduate Medical Education Office upon request, consistent with UNLV-SOM policy on record access.

Approved by GMEC April 2017