Policy

The resident’s performance includes satisfactory clinical performance as determined by the department’s teaching faculty on regular written evaluations, attendance records at mandatory conferences, satisfactory performance on In-Service examinations and/or approval of the training Program Director of a plan of remediation submitted by the departmental Residency Evaluation and Promotion Committee (REPC).

Teaching faculty must evaluate residents in writing at the end of each academic rotation. These written evaluations will form the basis for the formal biannual Resident Performance Evaluation. Additional evaluations of junior residents by the Chief Residents and/or other supervisory residents may also be used in the formal evaluation process.

Each department must provide written summary Performance Evaluations to residents at least every six (6) months. The biannual evaluation should occur in a formal setting in which the Program Director, or his/her designee, and the resident trainee review all pertinent evaluations. It is recommended that a review of the resident’s prior experience and competence in performing clinical procedures be included in these summaries when appropriate. Residents must sign an acknowledgement statement indicating that the pertinent evaluations have been reviewed and a copy of the summary performance evaluation has been received. A copy of the biannual summary evaluation must be kept on file in the department for each trainee.
Procedure

The evaluation process must include the following:

1. Evaluation of the knowledge, skill level and professional growth of the resident using training level appropriate criteria and procedures. It is strongly suggested that an evaluation form be developed that is consistent for all residents and rotations/educational experiences.
2. Prompt notification of the resident if an evaluation indicates unsatisfactory performance. The Program Director, REPC and resident must agree to a remedial program that includes actions critical for successful performance and a time-line to achieve this goal.
3. Advancement of the Resident to a position of higher responsibility will be made only on the basis of an evaluation of their readiness for advancement.
4. Departmental personnel records that include all evaluations of each Resident shall be maintained as confidential. Consent of the individual is required before access is allowed to such records except where permitted or required by law, or where directly or routinely required in the administration of the training program.
5. Residents must have unlimited access to their own departmental personnel files.

All new residents must be evaluated with direct feedback to the trainee within the first six months of beginning their training program to identify deficiencies that may require remediation before allowing them to continue in the training program. This initial evaluation should monitor the following:

- Knowledge of Training Program
- Professional Growth
- Medical Knowledge-base
- Technical Skills
- Satisfactory Clinical Performance
- Attendance at Mandatory Conferences

Thereafter, evaluation and feedback must occur at least twice annually, more frequently in periods of remediation.

The Program Director, or his/her designee, is required to provide a written final evaluation for each resident trainee who satisfactorily completes the training program. This evaluation will be based on a review of the resident’s performance during the final period of training and must verify that the resident has demonstrated sufficient professional ability to practice independently, effectively, and responsibly. This final written evaluation should be part of the resident’s permanent record maintained by the institution.

The resident has the right to challenge the accuracy of the written report of his/her performance. The resident may discuss the report with the Program Director and/or, if the problem is not satisfactorily
resolved, may choose to meet with the REPC to present rebuttal evidence. Please see *Resident Due Process and Fair Hearing Policy* for more information.