



Departmental Policy Title	Evaluation Policy - GME	Policy ID	11305
Keywords	evaluation, formative, summative, clinical, competency, committee		
Department	Graduate Medical Education (GME)		

I. Purpose of Policy

The purpose of this policy is to define the evaluation standards for Residents in Accreditation Council for Graduate Medical Education (ACGME)-accredited programs at Dartmouth-Hitchcock (D-H).

II. Policy Scope

This policy applies to Residents, Program Directors, faculty, and staff in ACGME-accredited residency and fellowship programs at Dartmouth-Hitchcock (D-H).

III. Definitions

Clinical Competency Committee (CCC): A required body comprising three (3) or more members of the active teaching faculty that is advisory to the Program Director and reviews the progress of all Residents in the program.

Resident: Any physician in an ACGME-accredited graduate medical education program including Residents and Fellows.

Residency Management System (RMS): A software system designed to manage academic and administrative records for physicians in graduate medical education programs. GME exclusively uses MedHub as the RMS at Dartmouth-Hitchcock (D-H).

IV. Policy Statement

All training programs must manage evaluations through the Residency Management System (RMS).

A. Evaluations of Residents

- In order to maximize learning development for Residents; regular, timely, and meaningful verbal and written feedback is required.
- All programs are responsible for the regular evaluation of each trainee's progress. The evaluation system must consist of both formative and summative evaluations.
- Evaluations of Resident performance must be readily accessible for review by the Resident.

1. Formative Evaluation of Residents

The faculty must directly observe, evaluate, and frequently provide feedback on Resident performance, via the RMS, in a timely manner, during each rotation or similar educational assignment.

- Programs with block/rotation schedules: Evaluations must be documented at the completion of each block/rotation.
 - For block rotations of greater than three (3) months in duration, evaluations must be documented at least every three (3) months and at completion of rotation.
- Programs with longitudinal schedules (such as continuity clinic in the context of other clinical responsibilities): Evaluations must be completed at least every three (3) months and at completion of assignment.

Programs must:

- Provide objective performance evaluation based on the Competencies and the specialty-specific milestones.
- Use multiple evaluators (e.g. faculty, peers, patients, self, and other professional staff).
- Document progressive Resident performance improvement appropriate to educational level.
- Provide that information to the Clinical Competency Committee for its synthesis of progressive resident performance and improvement toward unsupervised practice.

The Program Director, or designee, with input from the CCC must:

- Meet with and review with each Resident's documented semi-annual evaluation of performance, including progress along the specialty-specific milestones.
- Assist Residents in developing individual learning plans to capitalize on strengths and identify areas for growth.
- Develop plans for Residents failing to progress, following institutional policies and procedures.

2. Summative Evaluation of Residents

- During Training: At least annually, there must be a summative evaluation of each Resident that includes his/her readiness to progress to the next year of the program, if applicable.
- End of Training: The Program Director must provide a final summative evaluation for each Resident upon completion of the program. The specialty-specific Milestones, and when applicable the specialty-specific Case Logs, must be used as tools to ensure Residents are able to engage in autonomous practice upon completion of the program.

This final evaluation must:

- Become part of the Resident's permanent record maintained by the institution and must be accessible for review by the Resident in accordance with institutional policy.
- Verify that the Resident has demonstrated the knowledge, skills, and behaviors necessary to enter autonomous practice.
- Consider recommendations from the Clinical Competency Committee.
- Be shared with the Resident upon completion of the program.

B. Evaluations of Faculty

1. At least annually, teaching faculty must be provided with a written evaluation.
 - The evaluation will 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.
 - This evaluation must include a synopsis of written, anonymous, and confidential evaluations received by the program from Residents.
 - Written, confidential evaluations must be administered through the RMS.
 - Results of the faculty educational evaluations should be incorporated into program-wide faculty development plans.

C. Evaluations of the Program

1. **Resident Evaluation of Program:** At least annually, residents must have the opportunity to evaluate the program confidentially and in writing.
 - Evaluations must be submitted and managed electronically through the RMS.
 - Training programs must use these resident assessments to evaluate the educational effectiveness of the training program as part of the mandatory Annual Program Evaluation (APE) process.
2. **Faculty Evaluation of Program:** At least annually, faculty must have the opportunity to evaluate the program confidentially and in writing.
 - Evaluations must be submitted and managed electronically through the RMS.
 - Training programs must use these faculty assessments to evaluate the educational effectiveness of the training program as part of the mandatory APE process.

V. References

ACGME Institutional Requirements. (2021). Retrieved from ACGME.org: [Institutional Requirements \(acgme.org\)](https://www.acgme.org/Portals/0/PDFFiles/InstitutionalRequirements.pdf)

Common Program Requirements. (2020). Retrieved from ACGME.org: [Common Program Requirements \(acgme.org\)](https://www.acgme.org/Portals/0/PDFFiles/CommonProgramRequirements.pdf)

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