

INSTITUTIONAL GME GUIDELINES –Program Committee Guidelines
Approved by GMEC – May 24, 2013

CLINICAL COMPETENCY COMMITTEES (CCC)

General Guidelines:

- Each residency/fellowship program will have a CCC.
- The Program Director must appoint the CCC.
- CCC should have at least 3 faculty members and not more than 10. For programs with less than 3 faculty members, the CCC should include faculty from the core residency program.
- CCC should include faculty who are active in the evaluation of the residents and are representative of the curriculum.
- Residents may be appointed, if in their final year of training (preferably post-graduate chiefs).
- Programs will set term limits for committee members.
- Preferably the Program Director will not chair this committee.
- CCC will review each resident's progress in each competency and enter assessments in the milestones reporting form for each resident twice a year.
- The program will provide feedback to each resident regarding their progress in each milestone at least semi-annually.
- Residents do not need to achieve level 4 in every milestone to graduate but should substantially demonstrate the milestones targeted for this level as it is designed as the graduation target.
- Residents do not need to achieve competency at level 2 in each milestone to advance to their second year of training but should achieve that level in the majority of milestones.
- Residents are not expected to achieve competency at level 5 during residency.
- Residents may achieve a level of competency in specific milestones sooner than expected.

Requirements for training faculty who will be members of the CCC:

- Training in the evaluation process, including how to aggregate and interpret data
- Discuss the milestone narratives and reach a common agreement of their meaning

Responsibility of CCC:

- Review and discuss resident evaluation, including how many assessments are needed for any given milestone, data quality and the application of quality improvement principles to the evaluation process
- Semi-annual resident assessments
- Make recommendations to the program director for resident progress, including promotion, remediation and dismissal
- Identify residents who are not progressing with their peers in one or more areas
 - Recommend interventions including but not limited to
 - Assign mentor with expertise in a given area of deficiency
 - Additional required readings

- Sessions in a skills lab
- Added rotations in a given area
- If resident fails to advance sufficiently in one or more milestones, CCC may recommend extending education or counseling the resident to consider another specialty or profession

PROGRAM EVALUATION COMMITTEE (PEC)

General Guidelines:

- Each residency will have a Program Evaluation Committee
- The Program Director must appoint the PEC
- PEC should have at least 3 faculty members and include representation from the residents

Responsibility of PEC:

- Plan, develop, implement and evaluate all significant activities of the residency program.
- Develop competency-based curriculum goals and objectives
- Formally review the program at least annually using evaluations of faculty, resident and others; document the process in the Annual Program Review and Evaluation template and develop an action plan.
- Regularly review the Action Plan and assess progress.
- Assure that areas of non-compliance with ACGME standards are corrected.