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.