INSTITUTIONAL GME POLICY - Evaluation of Residents/Fellows  
Approved by GMEC – March 27, 2015

To fulfill the educational mission of the Sponsoring Institution, each trainee’s performance must be evaluated in a timely manner, at regular intervals, and by multiple evaluators. The assessments must be based on the specialty-specific milestones, and must objectively address performance in the following areas: patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism and systems-based practice. In addition, documentation must address progressive resident/fellow performance improvement appropriate to the trainee’s educational level and consistent with their specialty-specific RRC requirements. The trainee must have ready access to the evaluations for review.

The evaluation process is described as follows:

- Trainee will receive timely verbal feedback from their supervisor during the course of the educational assignment.
- Evaluations are reviewed by the Program Director and/or designee. Semi-annually, the Program Director, and/or designee, collates competency-based performance evaluations from the prior six months, documents the summary in a semi-annual evaluation and reviews this with each trainee. This is considered formative evaluation. The Clinical Competency Committee (CCC) will incorporate evaluations into recommendations for progression along Milestones. Persistent concerns will be discussed with the Program Director or designee and documented in writing as part of formative evaluation.
- The Program Director or designee will discuss recommendations or concerns with the trainee and will document the discussion.
- For any significant concerns the DIO will be informed at the outset in order to provide guidance to the Program Director as needed.
- For any sanctions as listed in 1-3 below, the DIO will be informed at start and end of the academic sanction with documentation of result.
- During regularly scheduled or urgently scheduled (should there be academic performance issues) meetings, the CCC will review the evaluations.
- The CCC will decide upon or recommend one or more of the following:
  A. Trainee is meeting expectations for level of training. Continue standard curriculum.
  B. No formal academic sanctions required but close observation and enhanced formative feedback will be provided and documented.
  C. The following academic sanctions are reportable and, for items 1-3, are listed in order of severity:
     1. Academic Notice. Performance is unsatisfactory; correction of deficiency is required; remediation is required and failure to improve or correct deficiencies may result in an academic warning or academic probation if there is no significant improvement in the time prescribed.
     2. Academic Warning. Performance is unsatisfactory; correction of deficiency is required; remediation is required and failure to improve or correct deficiencies may result in an academic probation if there is no significant improvement in the time prescribed.
     3. Academic Probation. Correction of deficiency is required; remediation is required and failure to improve or correct deficiencies may result in dismissal from program or failure to renew contract, if there is no significant improvement in the time prescribed.
     4. Suspension with or without pay.
     5. Probation and suspension.
     6. Non-renewal of a trainee’s agreement.
     7. Non-promotion of a trainee to the next level of training.
     8. Dismissal.
     9. Conditions on any of the above recommendations.

A trainee with an academic sanction as listed in items 1-9 above will be considered not in good academic standing.
• When there are concerns, the CCC shall recommend a written plan of remediation, correction and/or other action to address identified deficiencies following the template that is attached (Remediation Plan Worksheet, Figure 1.)

• The Program Director shall then consider the recommendation of the CCC and make the final decision regarding the trainee’s status and action plan (if applicable) after discussion with the Designated Institutional Official (DIO) or her designee.

• The Program Director and/or designee shall then meet with the trainee per the evaluation process timeline in order to provide both verbal and written notice of change in status (and action plan, if applicable) to the trainee.

• The recommended timeline is approximately 6 weeks under most circumstances. The Program Director has discretion to expand the timeline if unusual circumstances occur.

  (Figure 2 is intended to help illustrate the process)

• During semi-annual meetings, the resident and PD will review the status of the academic sanction (e.g. continuation, closure, etc.) and this will be documented.

Trainees may submit a grievance in accordance with the institution’s grievance policy which may be accessed on the GME Webpage: http://jabsom.hawaii.edu/ed-programs/gme/gme-policies/

**Summative Evaluations:**

• The Program Director must complete a summative evaluation for each trainee upon completion of the Program. The evaluation must document the trainee’s performance during the final period of education and verify that the trainee has demonstrated sufficient competence to enter practice without direct supervision. For preliminary and transitional year residents, the summative evaluation must verify that the resident has demonstrated sufficient competence and has successfully completed the preliminary or transitional year program requirements. This evaluation, like all intermediate formative evaluations, is part of the trainee’s permanent record. This summative evaluation should be completed prior to the trainee’s departure from the Program and should be reviewed in person with the trainee when possible. Providing copies of the summative evaluation to the trainee is prohibited. This summative evaluation may only be released directly to another program which the trainee is transferring to or to outside parties upon receipt of permission by the trainee to do so. This final summative evaluation will be the primary basis for the initial response to any other program or third party requester such as credentialing or licensing authorities.

  o The trainee may submit a grievance to the contents of the summative evaluation. The grievance is not sent with the summative evaluation. The institution’s grievance policy may be accessed on the GME Webpage: http://jabsom.hawaii.edu/ed-programs/gme/gme-policies/
# Figure 1. Remediation Plan Worksheet

(fillable worksheet may be obtained by the Program Administrator)

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Plan</th>
<th>Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Characterization of the lapse or performance improvement needed</td>
<td>Use Competencies to characterize:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal(s)</td>
<td>Describe in terms of specific competency(ies)</td>
<td></td>
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</tr>
<tr>
<td>Strength(s)</td>
<td>Describe areas of strength which will aid the resident in achieving the goals of this plan.</td>
<td></td>
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<tr>
<td>Requirements: Educate</td>
<td>If needed, activity(ies) for learner to study about expected behavior change, why it is important, what behaviors define success</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Requirements: Behavior/Performance Change</td>
<td>SMART objectives</td>
<td></td>
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<tr>
<td></td>
<td>1. Specific – Objectives should specify what they want to achieve.</td>
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<tr>
<td></td>
<td>2. Measurable – You should be able to measure whether you are meeting the objectives or not.</td>
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<tr>
<td></td>
<td>3. Achievable - Are the objectives you set, achievable and attainable?</td>
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<td></td>
<td>4. Realistic – Can you realistically achieve the objectives with the resources you have?</td>
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<td></td>
<td>5. Time – When do you want to achieve the set objectives?</td>
<td></td>
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<tr>
<td>Requirements: Monitoring</td>
<td>Who, frequency, expectations for follow-up meetings:</td>
<td></td>
<td></td>
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<tr>
<td>Consequences for incomplete success:</td>
<td>Failure to meet these requirements may result in further academic sanctions which includes but is not limited to further probation, extension of training, contract non-renewal, suspension or dismissal.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consequences for relapse</td>
<td>Failure to meet these requirements may result in further academic sanctions which includes but is not limited to further probation, extension of training, contract non-renewal, suspension or dismissal.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Remediation actions and formal academic sanctions are all reportable to licensure or credentialing agencies upon request.

Signed: ___________________________  Date: ________________  Signed: ___________________________  Date: ________________

Resident, (Type in name, title, level)  Program Director, and/or Designee (Type in name and title)
Figure 2. Timeline of evaluation process.

- Residents receive timely verbal feedback from supervisor during educational assignment
- Evaluations reviewed by PD/designee and summarized in semi-annual evaluation and reviewed by PD/Designee with the resident and possible strategies for improvement are identified.
- Persistent Concerns are reviewed by the PD/Designee and discussed with the resident and documented in writing.
- Academic Performance Issues will be reviewed in regularly or urgently scheduled CCC meetings.
- If concerns are noted, the CCC reviews concerns and evaluations and makes recommendations per the evaluation policy.
- CCC recommends a written plan of remediation, correct and/or other action.
- Approximately 6 weeks under most circumstances.
- PD considers recommendations and makes final decision, incorporating DIO.
- PD meets with resident regarding final recommendations.