CLINICAL COMPETENCY COMMITTEES (CCC)
ACGME Common Program Requirements V.A.1
More detailed information found on ACGME (link may be subject to change):
http://www.acgme.org/Program-Directors-and-Coordinators/Resources-for-New-Program-Directors

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/fellows and are representative of the curriculum.
- Residents/Fellows may provide input to the CCC Chair or PD, but may not serve as CCC members or attend CCC meetings. This does not apply to post-graduate year chief residents.
- 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 ACGME milestones reporting form for each resident twice a year.
- The program will provide feedback to each resident/fellow regarding their progress in each milestone at least semi-annually.
- Residents/Fellows 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/Fellows 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/Fellows are not expected to achieve competency at level 5 during residency.
- Residents/Fellows 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 processes within the Program
- Discuss the milestone narratives and reach a common agreement of their meaning

Responsibility of CCC:
- Review and discuss resident/fellow 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/fellow assessments
• Make recommendations to the program director for resident/fellow progress, including promotion, remediation and dismissal
• Identify residents/fellows who are not progressing with their peers in one or more areas
  o 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
  o If Resident/Fellow 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)
ACGME Common Program Requirements V.C.

General Guidelines:
• Each residency will have a Program Evaluation Committee
• The Program Director must appoint the PEC
• PEC should have at least 2 faculty members and include representation from the residents
• PEC should have a written description of responsibilities

Responsibility of PEC:
• Plan, develop, implement and evaluate all educational activities of the residency program.
• Review and make recommendations for 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. Annual Program Review will address the following categories and other elements as defined in the Common Program Requirements:
  o Resident Performance
  o Faculty Development
  o Graduate Performance
  o Program Quality
  o Progress on previous year’s action plan
• Assure that areas of non-compliance with ACGME standards are corrected.