

## **Section 6: - Evaluations and Promotions**

- Resident and Faculty Evaluation
- Resident Reappointment and Promotion
- GME Certificates of Training
- Resident Records

## **RESIDENT AND FACULTY EVALUATIONS**

### **MANDATORY PARTICIPATION REQUIREMENT**

The ACGME Institutional Requirements state: “The Sponsoring Institution must ensure that residents submit to the Program Director...at least annually confidential written evaluations of the faculty and of the educational experience.” No resident will be allowed to advance to the next PGY level until the required evaluations have been completed.

### **RESIDENT EVALUATION OF FACULTY**

Residents must be given the opportunity to evaluate their teaching faculty at least once a year, which will be forwarded to the Department Head or designee and Program Director. Online evaluations using New Innovations can provide confidentiality for the resident. In the case of small or one person fellowships, the evaluations may be collated with the core program to ensure confidentiality.

- The evaluation must be confidential and in writing.
- Each Program Director will establish a policy and a form for evaluation of faculty members by residents.
- Evaluations should include a review of the faculty’s clinical teaching abilities, commitment to the educational program, clinical knowledge, professionalism and scholarly activities.
- A sample copy of the faculty evaluation will be provided to the Office of GME.
- The results of resident’s assessments will be included in the annual program evaluation.

### **PROGRAM DIRECTOR EVALUATION OF FACULTY**

Each Program Director must evaluate the teaching faculty on an annual basis. The Program Director must provide feedback to the faculty based on evaluation data and approve continued participation of faculty in the educational program.

### **FACULTY EVALUATION OF RESIDENTS**

Each Program Director will provide a resident/fellow with a written evaluation no less than every six (6) months, and ideally after each rotation is completed. The program must provide objective assessments of competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice: use multiple evaluators (e.g., faculty, peers, patients, self and other professional staff); document progressive resident performance improvement appropriate to the educational level; and provide each resident/fellow with documented semiannual evaluation of performance with feedback.

- The evaluations of resident performance must be accessible for review by the resident, in accordance with institutional policy.
- Form of the evaluation will be at the discretion of the Program Director.
- The evaluation procedure will include a discussion between the Program Director or current supervisor and the resident.
- Residents will be allowed to submit written addenda to the evaluations, which will be included in the resident’s program file.

- The Program Director must provide a summative evaluation for each resident upon completion of the program.
- This 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.
- This evaluation must document the resident's performance during the final period of education, and verify that the resident has demonstrated sufficient competence to enter practice without direct supervision.

#### RESIDENT EVALUATION OF CLINICAL ROTATIONS

Each Program Director will establish a policy for evaluation of each clinical rotation by residents.

Programs will be expected to use the form provided by the GME Office unless formal GMEC approval for an alternative form has been given.

- The resident will complete an evaluation following each rotation, which will be forwarded to the Department Head or designee and Program Director.
- Institutional monitoring reports will be provided by the GME Office to the programs on a schedule as approved by the GMEC to maintain the anonymity of the respondents. Programs using approved alternative evaluation forms will submit reports to the GME Office on the same schedule.

#### FACULTY EVALUATION OF PROGRAM

Faculty must have the opportunity to annually evaluate the program.

- Evaluations are to be in writing and confidential.
- Form of the evaluation will be at the discretion of the Program Director.
- The results will be included in the annual program evaluation and submitted to the office of GME.

#### ANNUAL PROGRAM EVALUATION AND IMPROVEMENT

Each Program Director is responsible for implementing a review process for the annual evaluation of the training program. The review must include evaluations from residents, faculty and other stakeholders as the program deems useful to have evaluations done. In accordance with the ACGME Program

Requirements, the program must monitor and track each of the following areas:

- Resident performance
- Faculty development
- Graduate performance, including performance of program graduates on the certification examination
- Program quality

The resident must complete a confidential evaluation of the program at least annually which will be turned in for review by the program director, department head and education committee where one exists. The program must use the results of resident's assessments of the program together with other evaluation results to improve the program.

If deficiencies are found, the program should prepare a written plan of action to document initiatives to improve performance in the areas listed above. The action plan should be reviewed and approved by the teaching faculty and documented in meeting minutes.

The results from the program evaluation meeting will be sent to the GME Office as part of the GME annual program report.

PROGRAM RESPONSIBILITY FOR MAINTAINING EVALUATION RECORDS

The Program Director office will keep all resident evaluations in the residents' permanent files. Resident files will be made available to the GME Office and Associate Dean/Director GME upon request, consistent with University policy on record access.

Approved: 4/3/2017

## **RESIDENT REAPPOINTMENT AND PROMOTION**

Appointments are made on a yearly basis with the expectation of continuation within the one-year appointment and of reappointment yearly throughout the duration of the residency period.

Reappointment and promotion of a resident to the subsequent year of training requires satisfactory cumulative evaluations by faculty that indicates satisfactory progress in scholarship and professional growth. Individual programs must establish criteria for promotion and completion of the program.

This includes demonstrated proficiency in:

- Each of the ACGME competencies:
  - Patient Care
  - Medical Knowledge
  - Practice-Based Learning and Improvement
  - Interpersonal and Communication Skills
  - Professionalism
  - Systems-Based Practices;
- Ability to teach others;
- Attendance, punctuality, and availability;
- Adherence to rules and regulations in effect at the University of Illinois College of Medicine Rockford and each health care entity to which assigned;
- Other examples include satisfactory scores on examinations if designated for that purpose by specialty, research participation, etc.

### USMLE Step 3 Requirement

All new residents entering University of Illinois College of Medicine Rockford Graduate Medical Education Programs at the PGY-1 or PGY-3 level on or after July 1, 2017 will be required to pass USMLE Step 3 (or equivalent examination) prior to being promoted to the PGY-3 level. Failure to pass Step 3 prior to March 1 of the PGY-2 year will result in non-renewal of the resident's appointment. Any entering resident who has already passed Step 3 or holds a current, unrestricted medical license meets this requirement.

Those residents deemed to have completed satisfactorily the requirements for a specific level of training will be promoted to the next higher level of responsibility. No resident may remain at the same level of training for more than 24 months, exclusive of leave. A resident whose performance is deemed to be satisfactory will advance until the completion of the program.

When a resident will not be promoted to the next level of training, the program will provide the resident with a written notice of intent no later than four months prior to the end of the resident's current contract. If the primary reason for non-promotion occurs within the last four months of the contract period, the program will give as much written notice as circumstances reasonably allow.

A resident can be dismissed without prior written notification at any time during the contract year due to the occurrence of a serious act as described in GME Policy on Disciplinary Action.

## **GME CERTIFICATES OF TRAINING**

A resident who successfully completes all requirements of their training program will receive a certificate of completion. A certificate will be issued at the completion of a full residency/fellowship training program.

Certificate forms will be designed by the Office of GME to conform with University Identification policy. Certificates for residents who complete a program will indicate such on the certificate.

### **VERIFICATION LETTERS**

An official verification of training letter will be issued when a resident or fellow does not complete the full training program. The GME Office will issue a letter certifying completion of rotations. The content of the letter will be restricted to confirming dates of training and that the resident performed in a satisfactory manner. The letter will be signed by the Residency Program Director.

Requests received by the GME Office for additional information regarding resident performance, or verification requests for residents who have experienced disciplinary problems, will be referred to the appropriate Program Director for completion.

### **CLEARANCE**

Certificates and letters will be issued to residents only if and when they complete all College of Medicine Rockford and affiliated hospital clearance requirements.

### **SIGN OUT SHEET**

Each resident must submit a completed GME Clearance Form to the GME Office at the time they are finishing their program or are leaving. The GME Office will not release a training certificate or verify a residency until the resident turns in the completed Clearance Form.

The GME Clearance Form will be approved by the GMEC.

### **REPRINTING OF CERTIFICATE**

- Should a trainee lose his/her certificate, another can be reissued at no charge.
- The current format for certificates must be used.
- The correct training dates must be printed but the witness date on the certificate must match the current date and not the original date on the certificate.
- The above procedure will be followed for reprints.

# The University of Illinois

## College of Medicine at Rockford

This certificate is awarded to

**First Last Name, MD**

in recognition of satisfactory completion of a  
graduate medical educational experience as a

**Resident in Family Medicine**

from July 1, 2015 to June 30, 2016

Given at Rockford, Illinois, this twenty-fourth day of June 2016.



\_\_\_\_\_  
Dean

\_\_\_\_\_  
Department Chairperson

\_\_\_\_\_  
Program Director

\_\_\_\_\_  
Swedish American Hospital, CEO



# The University of Illinois

## College of Medicine at Rockford

This certificate is awarded to

**First Last Name, MD**

in recognition of satisfactory completion of a  
graduate medical educational experience as a

**Chief Resident in Family Medicine**

from July 1, 2015 to June 30, 2016

Given at Rockford, Illinois, this twenty-fourth day of June 2016.



\_\_\_\_\_  
Dean

\_\_\_\_\_  
Department Chairperson

\_\_\_\_\_  
Program Director

\_\_\_\_\_  
SwedishAmerican Hospital, CEO





# The University of Illinois

## College of Medicine at Rockford

### Dixon Rural Training Track

This certificate is awarded to

**First Last Name, MD**

in recognition of satisfactory completion of a  
graduate medical educational experience as a

**Resident in Family Medicine**

from July 1, 2013 to June 30, 2016

Given at Rockford, Illinois, this twenty-fourth day of June 2016.



\_\_\_\_\_  
Dean

\_\_\_\_\_  
Department Chairperson

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Interim Program Director

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Katherine Shaw Betha Hospital, President and CEO



# The University of Illinois

## College of Medicine at Rockford

### Dixon Rural Training Track

This certificate is awarded to

**First Last Name, MD**

in recognition of satisfactory completion of a  
graduate medical educational experience as a

**Chief Resident in Family Medicine**

from July 1, 2015 to December 31, 2015

Given at Rockford, Illinois, this twenty-fourth day of June 2016.



\_\_\_\_\_  
Dean

\_\_\_\_\_  
Department Chairperson

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Interim Program Director

\_\_\_\_\_  
Katherine Shaw Betha Hospital, President and CEO



# Monroe Clinic

*and*

HEARTland Network Osteopathic Postgraduate Training  
Institute

*in association with*

Des Moines University – Osteopathic Medical Center

certifies that

**Xxxxxxxx X. Xxxxx, D.O.**

Has successfully fulfilled the  
**Family Medicine**  
program requirements during the period  
XX to XX

Monroe Clinic, approved for the training of family medicine residents by the  
American Osteopathic Association, awards this Certificate of Graduation.  
In witness thereof, we have affixed our hands and our seals on this XX day of XX.

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*Program Director*

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*Dean, College of Osteopathic Medicine  
Des Moines University*

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*President/CEO Monroe Clinic*

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*Director of Medical Education*

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*HEARTland Network OPTI Director*

## **RESIDENT RECORDS**

### **GME OFFICE RECORD**

Each GME office will maintain a permanent file for each resident who participates in a College of Medicine program. The file contains application materials including letters of reference, medical license application, routine correspondence, and payroll documents.

### **PROGRAM DIRECTOR RECORD**

The Office of the resident's Program Director will perpetually keep a permanent file for each individual in the program. Contents of the file can include any of the materials held in the GME Office record, plus copies of all evaluations completed for the resident.

### **RESIDENCY VERIFICATION**

The GME office will verify residencies to institutions who request information for purposes of credentialing. Verification letters will be restricted to dates of attendance, whether the program was accredited, and whether the resident completed the program. The GME office will forward all requests for additional information on performance or conduct to the appropriate Program Director's office.

### **RESIDENT ACCESS TO RECORDS**

Resident records may be accessed in accordance with the Illinois Personnel Record Review Act (820 ILCS 40/1, et. seq.). A resident may review or request a copy of said records in the manner described in Act. In addition, the University will only release said records in accordance with said Act.

A resident may challenge the contents of his/her records by utilizing the process set forth below:

### **PURPOSE**

A resident has the right to challenge the content of his/her record on the ground that he/she believes that it is inaccurate, misleading, or otherwise in violation of his/her privacy or other rights and to have inserted in the record his/her written explanation of its contents.

### **PROCEDURE**

To initiate a challenge to the resident record, the resident shall, within one year after cessation of his/her participation in the residency program at University of Illinois College of Medicine Rockford, file with the Department Head, a written request for correction. Within thirty (30) days following receipt of such request, the Department Head, or an authorized designee, shall review the record in question with the resident and either order the correction or deletion of such alleged inaccurate, misleading, or otherwise inappropriate data as specified in the request or notify the resident of the right to a hearing at which the resident and other persons directly involved in the establishment of the record will have an opportunity to present evidence to support or refute the contention that the data specified in the request are inaccurate, misleading, or otherwise inappropriate.

### **HEARING**

Within ten (10) days following receipt of notification that the Department Head is not ordering a correction of the record in question, the resident shall submit to the Assistant Dean for Graduate Medical Education a written request for a hearing.

The resident will be given written notice sent to his/her last known address of the time and place of such hearing not less than ten (10) days in advance. The hearing will be conducted by the Assistant Dean for Graduate Medical Education or his designee.

The residents shall have the right to attend the hearing, to be accompanied by an individual or his/her choice at his/her own expense, including an attorney, though said individual shall be present only to advise the resident, and shall not have a speaking part during said hearing. The resident shall have the right to present evidence, and to call witnesses on his/her behalf. The same rights shall be accorded the University representative defending the inclusion of disputed information in the resident's record.

The resident shall be notified in writing of the decision within ten (10) days following the hearing. Such decision is final.

The decision shall be based solely on the evidence presented at the hearing and shall include a summary of the evidence and reasons for the decision. If, as a result of the hearing, the University decides that the record is not inaccurate, misleading or otherwise in violation of his/her privacy or other rights it will inform the resident of the right to place a statement in the record commenting on the contested information or stating why he/she disagrees with the decision of the University, or both. That statement shall be attached to the disputed record and released with said record anytime a proper request is made for the resident's records.

Approved: 4/25/2017