

Policy on Evaluation
(Trainee, Faculty, and Program Evaluation)

Effective 07/08/2016

Reaffirmed by GMEC 03/10/2023

McGaw's Graduate Medical Education Committee (GMEC) has mandated the use of New Innovations as the electronic evaluation system to be utilized by all McGaw training programs for distribution and collection of formative evaluations of trainees, faculty, and programs.

Anonymity of Evaluations [ACGME Req. V.B.1.b]

Faculty members must complete all trainee evaluations in a timely fashion. Faculty evaluators must be identifiable, and evaluations must be accessible to the trainee.

All evaluations completed by trainees must be confidential from program leadership and faculty.

Formative Evaluations of Trainee [ACGME Req. V.A.1.a]

The faculty must evaluate trainee performance during each rotation or similar educational assignment and document this evaluation upon completion of the assignment.

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; and
- document progressive trainee performance improvement appropriate to educational level at least every three months.

360 Evaluations [ACGME Req. V.A.1.c).(1)]

The program must provide an objective performance evaluation based on the competencies and the specialty-specific milestones, and must:

- use multiple evaluators (e.g., faculty, peers, patients, self, and other professional staff) and
- multiple assessment tools (e.g., global evaluations and self-evaluation).

Semi-Annual Evaluations of Trainee [ACGME Req. V.A.1.d).(1)]

The Program Director or their designee, with input from the CCC, must:

- provide trainees with semi-annual evaluation of performance with feedback (including progress along specialty-specific milestones); and
- document semi-annual face-to-face meeting.

Milestones [ACGME Req. V.A.3.b)]

The Clinical Competency Committee (CCC) must:

- review all trainee evaluations at least semi-annually;
- determine each trainee's progress on achievement of the specialty-specific milestones; and
- meet prior to the trainees' semi-annual evaluations and advise the Program Director regarding

each trainee's progress.

Summative Evaluations of Trainee [ACGME Req. V.A.1.e]

At least annually, there must be a summative evaluation of each trainee. Summative evaluations describe whether a trainee is ready to progress to the next year of the program.

Final Evaluations [ACGME Req. V.A.2.]

The Program Director must provide a written final evaluation for each trainee upon completion of the program. This evaluation is to ensure that trainees can practice core professional activities without supervision upon completion of the program. The evaluation must become part of the trainee's permanent record maintained by the institution.

The Program Director must:

- document trainee performance during the final period of education;
- document a final evaluation including the approved ACGME verbiage; and
- include dates and signatures on the evaluation by both the Program Director and trainee.

Evaluation of Faculty [ACGME Req. V.B.]

The evaluation must:

- include an annual evaluation by the program of faculty performance as it relates to the educational program and the faculty's clinical teaching abilities, commitment to the educational program, clinical knowledge, professionalism, and scholarly activities; and
- include at least an annual written confidential evaluation by the trainee.

Program Evaluations and Improvement [ACGME Req. V.C.]

The program, through its Program Evaluation Committee (PEC) must document formal, systematic evaluation of the curriculum at least annually and is responsible for rendering a written Annual Program Evaluation (APE) using the standard institutional PEC template. The program must monitor and track each of the following areas:

- trainee performance;
- faculty development;
- graduate performance, including performance of program graduates on the certification exam;
- program quality; and
- progress on the previous year's action plan(s).

Trainees and faculty must evaluate the program confidentially and in writing at least annually.

The program must use the results of trainees' and faculty members' assessments of the program together with other program evaluation results to improve the program.

The PEC must prepare a written plan of action to document initiatives to improve performance in one or more areas listed above, as well as delineate how they will be measured and monitored.

The action plan and meeting minutes should:

- be reviewed and approved by the teaching faculty; and
- include the date of the meeting and a list of those in attendance, identifying trainees and faculty.

Training Files

The Program Director shall maintain a training file for each trainee. The evaluations of trainee performance should be included in this file and be accessible for review by the trainee and other authorized personnel, including the Designated Institutional Official and Director of Accreditation for McGaw, in accordance with this policy. A trainee may review (but not print, copy, or photograph) the training file by contacting the Program Director. The program may require a faculty or staff member to be present during a trainee's review of their file.