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| Tufts Medical Center -(GME) | Subject: Evaluation, Advancement and Remediation of House Officers | File Under: Policy # GME 101 |
| Issuing Department: Graduate Medical Education | | Latest Revision Date: June 29, 2009 Latest Review Date: January, 2016 |
| Original Procedure Date: April 2, 2001 | Page 1 of 4 | Approved By: Designated Institutional Official Chair, GMEC Manager, GME |

INTRODUCTION:

It is the responsibility of each Program Director to evaluate, promote and provide remediation to House Officers in accordance with the procedures described below, and in accordance with relevant procedures set forth in the Accreditation Council for Graduate Medical Education’s (“ACGME”) Essentials of Accredited Residencies in Graduate Medical Education: Institutional and Program Requirements. These procedures are applicable to all House Officers enrolled in the Hospital’s Graduate Medical Education (“GME”) programs.

The term “House Officers” shall include physicians, or other graduates of a doctoral program who are enrolled in a Hospital-sponsored training program as interns, residents or fellows (hereinafter “Trainees”).

Each Program is required to establish its own written criteria and processes for the evaluation, advancement and remediation of Trainees which should include the criteria and terms set out in this Policy. The GME Committee will survey each Program periodically and assist programs in implementing these requirements. Each Program’s criteria and any changes made to the criteria must be on file with the Hospital’s GME Office.

EVALUATION:

- A. Evaluation Standards. The Trainee's evaluation must be based on written program and rotation specific objectives. These objectives are reviewed annually and revised as needed by the Program, are made known to the faculty, and must be provided to the GME Committee upon its review of the Program.

These objectives must be provided to the Trainee at the beginning of each year of training and are based on the following:

1. Fund of medical knowledge and application of that knowledge
2. Clinical and technical skills
3. Ability to assume increased responsibility for patient care
4. Judgment
5. Personal character traits displayed and interpersonal skills
6. Ethical and professional conduct

- B. Rotation Evaluations. Within two (2) weeks of completing each scheduled rotation, faculty members should provide the Program Director with written review of the Trainee's achievement of the goals for his/her educational and professional development for that rotation and any other relevant information about the Trainee's performance. All reviews by faculty members and information that provide the basis, in whole or in part, of the Trainee's evaluation shall be maintained in the Trainee's program file.
- C. Summary Evaluations. The Program Director and/or designee ("Program Director") should evaluate each Trainee at least semiannually, unless required more frequently by specific program requirements, for evidence of satisfactory progressive scholarship, professional growth and progress, and professional competence including demonstrated ability to assume increasing responsibility for patient care. The evaluations will be based in part on written reviews provided by faculty members at the end of each rotation. The evaluations must be accurately documented, dated and signed by both the evaluator and the Trainee and maintained in the Trainee's program file.
- D. Trainee Review of Evaluations. The evaluations are reviewed with the Trainee at least twice per year, unless required more frequently by specific program requirements. The Trainee must review and sign the evaluation prior to being placed in the Trainee's program file. The Trainee has the right to place in his/her file a written response or written comments to his/her evaluations.

- E. Counseling; Remediation. Program Directors are encouraged to provide ongoing counseling to Trainees regarding their performance in the program. Any Trainee whose performance is assessed to be less than satisfactory by the Program Director may be placed on a remedial training status for a specified period of time. The Program Director shall inform the Trainee of the deficiencies noted in academic, clinical and/or professional performance, and shall outline a program of remediation, including criteria for successful completion. Documentation of the remedial training program and outcome shall be maintained in the Trainee's program file.

ADVANCEMENT:

- A. Basis of Advancement.
 - 1. Trainees will be advanced to the next level of the program on the basis of documented evidence of satisfactory progressive scholarship, professional development, and achievement of the Program's criteria, goals, and objectives. The Trainee should be notified at the earliest opportunity of any decision to restrict his/her advancement to the next level.
 - 2. In the event a Trainee is in a remedial training program at the time of the appointment renewal, the Program Director may choose to (i) extend the existing appointment for the length of time necessary to complete the remediation process as a conditional reappointment as set out below; (ii) promote the Trainee to the next level; or (iii) not renew the appointment as set out below.
- B. Conditional Reappointment. If the Program determines that the Trainee needs additional time to establish his/her eligibility for advancement, the Program may offer a written conditional reappointment that shall include a written remediation plan for advancement.
- C. Reappointment Procedures. Reappointment is contingent upon maintaining the qualifications and documentation of qualifications required under the appointment procedures. See Policy on Selection and Appointment of House Officers.
- D. No Appeal. The decision to not advance the Trainee to the next level, to provide remediation, or to not certify successful completion of a training program does not constitute a disciplinary action, and the Trainee shall have no right to appeal such actions.

NON-RENEWAL OF APPOINTMENT:

- A. The Trainee’s failure to progress or delay in progressing academically or professionally or failure to complete the remediation plan may be cause for the Program Director to choose to not renew a Trainee’s appointment. If the Program Director chooses not to renew the Trainee’s appointment, the Trainee should be notified in writing as early as possible but no later than four (4) months (usually March 1st) prior to the reappointment date.

- B. If the Program Director determines that non-renewal of the Trainee’s appointment is appropriate, then the Procedures for Discipline and Dismissal of House Officers and Appeal Process must be followed. The Trainee has the right to appeal the Program’s decision to not renew his/her appointment.

TRAINEE ACCESS TO PROGRAM FILE:

At the Trainee’s request, the Program Director, within five (5) business days, shall provide the Trainee with access to, or a copy of, his/her Program File. Note, however, that documents subject to the peer review privilege or documents upon which the Program did not rely in evaluating the Trainee shall not be considered part of the Program File and shall not be available for the Trainee’s review.

RESPONSIBILITY OF:

Graduate Medical Education

Author:

Members of the Graduate
Medical Education Committee

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Approval:

Designated Institutional Official
Chair, Graduate Medical Education Committee
Manager, Graduate Medical Education

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