

## RESIDENT EVALUATIONS

---

Each accredited program is responsible for utilizing appropriate methods of performance evaluation of residents consistent with ACGME common program requirements and the requirements of its Residency Review Committee. Competency-based goals and objectives based on performance criteria for each rotation and training level will be distributed annually to residents and faculty either in writing or electronically and reviewed by the resident at the start of each rotation. Each residency program's evaluation policies and procedures must be in writing.

Residents will be evaluated on their competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism and systems-based practice. Additionally, all residents are expected to be in compliance with GMDEC and University of Tennessee Medical Center policies.

### **Performance Review of Residents**

Following the recommendations of the program's Clinical Competency Committee the program director (or designee) will meet face-to-face with the resident at least semi-annually for a performance review to discuss the resident's strengths and recommendations for improvement. The performance review will likely be based on a multisource compilation of evaluations of faculty, peers, nursing staff, other health professionals and students. All semi-annual evaluations should be signed by the resident and the program director (or designee).

At the end of the year, an annual summative evaluation will be completed. This evaluation will include a recommendation for promotion, remediation, or non-renewal. Non-renewal notice should be given four months prior to the end of the year if possible. Residents must have access to all evaluations in their folders.

### **Final Summative Evaluation**

The program director must provide a written final summative evaluation for each resident who completes the program fulfilling requirements for specialty certification. The evaluation must include a review of the resident's performance including the six general competencies, during the final period of training and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. This final evaluation will be part of the resident's permanent record maintained by the institution.

For residents who transfer before completing a program, the program director or (designee) will provide a summative evaluation of the resident to the new program director.

## RESIDENT EVALUATIONS

---

**Resident Evaluations of Faculty and Programs:** Program directors should assure that residents complete confidential, written evaluations of the faculty at least annually. A link has been established on the Graduate School of Medicine website which residents may use to further insure anonymity for these evaluations. Resident evaluations of faculty should include, but is not limited to, a review of their teaching abilities, commitment to the educational program, clinical knowledge, and scholarly activities.

Program directors should also assure that residents complete confidential, written evaluations of the program and rotations at least annually, preferably electronically in New Innovations. This evaluation should include quality of the curriculum and the extent to which the residents are able to meet educational goals and objectives. The residency program administrator or designee will maintain confidentiality and compile the program evaluations by residents. The information in summary form will be submitted to the program director to be used for considering changes in rotations or the overall program and for the Annual Program Evaluation (APE).

Effective January 2006

Revised 02/12/2015