

## Partners HealthCare System

### Institutional Policy: Evaluation and Feedback relating to ACGME Graduate Medical Education Trainees

Assessing trainee performance, providing useful and timely feedback<sup>†</sup>, and conducting and documenting meaningful evaluations<sup>‡</sup> are essential elements of graduate medical education. The faculty, program director, chair, and trainees all have responsibility for contributing to the consistent delivery of high-quality evaluation and feedback.

#### **The Program must:**

- “Provide objective assessments of competence [V.A.2.b).(1)] in patient care and procedural skills, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice based on the specialty-specific Milestones<sup>‡</sup>”; standardized national examinations should be utilized if available.
- Utilize “specialty-specific Milestones” to ensure trainees “are able to practice core professional activities without supervision upon completion of the program” [V.A.3.a]
- “Document progressive [trainee] performance improvement appropriate to educational level” [V.A.2.b).(3)].
- Have a Clinical Competency Committee that
  - “reviews all [trainee] evaluations semi-annually” [V.A.1.b).(1).(a)];
  - “prepares and ensures the reporting of Milestones evaluations of each [trainee] semi-annually to ACGME”; [V.A.1b).(1).(b)]; and
  - advises “ the program director regarding trainee progress, including promotion, remediation, and dismissal” [V.A.1.b).(1).(c)].
- Utilize multiple methods of evaluation to ensure alignment between the methods of assessment and the skill being assessed.
- “Use multiple evaluators (e.g., faculty, peers, patients, self, and other professional staff)” [V.A.2.b).(2)].
- Ensure that performance criteria are linked to competency-based goals and objectives defined for each rotation/educational experience [based on IV.A.2].
- Provide trainees and faculty with a written explanation of the performance criteria by which they will be evaluated.
- Ensure that each trainee is provided with timely verbal feedback during the course of each rotation and/or training experience.
- Provide each trainee with a written evaluation at the end of each rotation or other significant educational experience, and at least every three months where rotations/experiences exceed three months in duration [based on V.A.2.a)].
- Strive to maintain alignment between written evaluation and verbal feedback.
- Provide trainees the opportunity to discuss the content of their written evaluations. Evaluations based on faculty consensus must indicate a faculty member who is responsible for the evaluation and available to discuss its content.
- “Provide each [trainee] with documented semiannual evaluation of performance with

feedback” [V.A.2.b).(4)].

- Ensure that evaluations of trainee performance are directly accessible for review by the trainee.

**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” [V.A.3.b).(1)]. This final evaluation must: a) “document the resident’s performance during the final period of education”, and b) “verify that the resident has demonstrated sufficient competence” [V.A.3.b).(2)] in the six core competency areas “to enter practice without direct supervision” [V.A.3.b).(3)].

**Assigned supervising faculty must:**

- Provide trainees with timely, appropriate, developmental feedback during the course of each rotation or longitudinal experience.
- Complete a timely written evaluation of each trainee at the end of each rotation or assignment.
- Discuss the content of the written evaluation individually with each trainee at/near the conclusion of each rotation (or at three month intervals for longer rotations).

**Trainees are expected to:**

- Seek formative feedback from supervising faculty and other evaluators [based on IV.A.5.c)].
- Read written evaluations at least quarterly in order to incorporate formative feedback, and to develop (and periodically update) a personal performance improvement plan.
- Bring questions or concerns regarding evaluations or feedback to the Program Director (or designee).
- Perform a written self-assessment at least annually, for discussion with the Program Director (or designee).

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† **Feedback** refers to comments provided – verbally or in writing - to help the trainee improve performance. In-person verbal feedback from supervising faculty members is an essential element of clinical training.

† **Evaluation** refers to a judgment of performance that is recorded and part of an educational record. It may be used in making decisions about educational advancement and successful completion of the training program, and may inform letters of recommendation. Evaluations may include numerical scores and/or written comments.

Note: quoted text is from ACGME Common Program Requirements:

[https://www.acgme.org/acgmeweb/Portals/0/PFAssets/ProgramRequirements/CPRs\\_07012015.pdf](https://www.acgme.org/acgmeweb/Portals/0/PFAssets/ProgramRequirements/CPRs_07012015.pdf)

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