

*Updated July 2010*

## **DESCRIPTION OF THE MANNER IN WHICH RESIDENTS AND THE PROGRAM ARE VALUATED AND HOW SUCH EVALUATIONS ARE USED**

### **Residency Program Evaluation**

#### **Competency-based evaluation of residents:**

Resident competency-based evaluations for all Shands surgical pathology, Shands autopsy, Shands CP, VA anatomic pathology, VA CP and Medical Examiner rotations are to be completed *after each 4 week rotation block* by the attending faculty via the web on New Innovations. Log on information and orientation to the New Innovations program will be provided.

<http://www.new-innov.com/pub/>

Evaluations will be reviewed by the Program Director, who determines what, if any, immediate communication is required with the resident. In cases where the resident has performed below expectation for their level of training or failed a rotation, the PD immediately contacts the resident to make plans for remediation. Besides being evaluated on each of the 6 ACGME competencies, residents receive an overall rotation evaluation. Performance expectations are as described in each rotation description and within the core curriculum.

Residents are scored as follows: 4. Exceeds performance expectations for level of training; 3. Meets performance expectations for level of training; 2. Does not meet performance expectations for level of training, or 1. Performance sufficiently below expectations for level of training that the rotation is considered a failure. When an overall score of 2 (Does not meet performance expectations for level of training) is given, the rotation director and/or his or her designated faculty must place in writing a description of why the resident did not meet performance expectations for level of training. At the discretion of the rotation director and/or his or her designated faculty, performance below expectations in any one of the six ACGME competencies is a basis for grading the resident as "performance below the expected level of training." Remediation is required for the subject matter relevant to the rotation when this mark is given. The resident is required to develop a written plan of remediation in collaboration with their advisor and the rotation director or his/her designee and the plan will be presented to the Program Director and Chair for approval. The rotation will not count towards the resident's requirements for boards until the rotation director confirms that the resident has been acceptably remediated and the rotation director must submit a letter to the Program Director stating that remediation was successful which will be kept in the resident's file.

When an overall score of 1 (Performance sufficiently below expectations for level of training that the rotation is considered a failure) is given, the rotation director and/or his or her designated faculty must place in writing a description of why the resident failed the rotation. At the discretion of the rotation director and/or his or her designated faculty, failure in any one of the six ACGME competencies is a basis for grading the overall rotation as a failure. Upon review by the RTC, a rotation failure may place the resident on probation. Remediation requires that the rotation be repeated. The resident is required to develop a written plan of remediation in collaboration with their advisor and the rotation director or his/her designee and the plan will be presented to the Program Director and Chair for approval. The rotation will not count towards the resident's requirements for boards until the rotation director assesses that the resident has remediated the rotation. The rotation director must submit a letter to the Program Director stating that remediation was successful after the rotation is repeated.

The Program Director will monitor compliance and timeliness of the evaluations. A copy of the evaluation will be placed in the resident's file for review. Residents are strongly encouraged to read their evaluations after every rotation. A written summary of the resident's performance is prepared every 6 months and is distributed to the resident. The Program Director

or his or her designate will meet with each resident every 6 months in person to review their program and progress. Satisfactory performance is required for promotion to succeeding years of training. Following completion of the residency program, there is a final written evaluation of the residents overall performance that is addressed to the Dean of the College of Medicine.

**Evaluation of faculty and rotations:**

Rotation and faculty evaluations will be filled out by each resident at the end of each rotation. These evaluations are done on line (e.g., via New Innovations) **and are anonymous**. At six to twelve month intervals, the Program Director will compile a composite evaluation for each rotation and each faculty member which will be provided to the Division Director and Chair as a part of the faculty member's annual review. Copies of these composite evaluations will be sent to the department chairman, rotation directors and faculty; and these evaluations are available 24 hours a day on the New Innovation website.

**Yearly evaluation of the Training Program:**

An overall program evaluation will be performed yearly. During the month of July, a request for on-line evaluation (via New Innovations) will be sent out. The results of this anonymous evaluation will be reviewed by the Program Director and Chief Residents and specific areas in need of improvement will be used to choose the main topic of the annual residency program retreat in August. During the retreat, the topic chosen will be presented and discussed in depth with the developing of a plan of action. Additionally during this meeting the results and/or resolutions from the ACGME Resident Survey are discussed. These reviews form the basis, in part, for revisions in the training program. The minutes of these meetings are located in the Anatomic Pathology Suite (RM 3109)