



Stony Brook Medicine Graduate Medical Education

Subject: GME0013 Annual Program Evaluation	Published Date: 04/27/2026
Graduate Medical Education	Next Review Date: 04/27/2029
Scope: SBM Stony Brook Campus	Original Creation Date: 11/21/2003

Printed copies are for reference only. Please refer to the electronic copy for the latest version.

Responsible Department/Division/Committee:

Graduate Medical Education Committee

Policy:

Stony Brook Medicine has an established institutional policy on the annual program review of graduate medical education (GME) programs, faculty and residents/fellows.

Definitions:

None

Procedures:

The educational effectiveness of all GME programs sponsored by Stony Brook Medicine (SBM) must be evaluated annually in a systematic manner by each program, and reported back to the Graduate Medical Education Committee (GMEC) and the Designated Institutional Official (DIO).

Each program director must appoint a Program Evaluation Committee (PEC). Each PEC must have a minimum of two faculty members, one of whom is a core faculty member and at least one resident or fellow. The PEC must:

- Act as an advisor to the program director, through program oversight.
- Review the program's self-determined goals and progress toward meeting them
- Guide ongoing program improvement, including development of new goals, based upon outcomes.

- Review the current operating environment to identify strengths, challenges, opportunities, and threats as related to the program's mission and aims.

Participate actively in:

- Planning, developing, implementing, and evaluating educational activities of the program
- Reviewing and making recommendations for revision of competency-based curriculum goals and objectives
- Addressing areas of non-compliance with rules, regulations, and requirements of accrediting agencies
- Annual review of the program utilizing evaluations of faculty, residents, and others
 - Residents and faculty must have the opportunity to evaluate the program confidentially and in writing, at least annually.

Each program must engage in, through the PEC, a formal, systematic evaluation no less frequently than annually. It must document in writing this annual evaluation through the New Innovations system. The evaluation must include monitoring and tracking of:

- Resident performance
- Faculty performance and development
- Graduate performance, including performance of program graduates on the certification examination
- Program quality
- Progress on the prior year's action plan (see below).

A written plan of action must be prepared by the PEC annually to document initiatives to improve performance in one or more of the areas listed above, and include a delineation of how these areas will be measured and monitored. Approval of the action plan should be reviewed and approved by the teaching faculty and documented in the meeting minutes.

The overall program evaluation must address the following:

Curriculum:

- Overall goals and objectives of the program
- Relevance, suitability, and currency of competency-based curriculum
- Overall program structure and quality
- Effectiveness of conferences, journal clubs, and didactics
- Educational experience in each required rotation
- Availability, adequacy of opportunity, and resident learning and credentialing of required and recommended procedures (as applicable)

- Outcomes from prior Annual Program Evaluation(s)
- ACGME letters of notification, including citations, areas for improvement, and comments.
- Quality and safety of patient care.
- Aggregate resident/fellow and faculty:
 - Well-being
 - Recruitment and retention
 - Workforce diversity
 - Engagement in quality improvement and patient safety
 - Scholarly activity
 - ACGME resident/fellow and faculty surveys
 - Written evaluations of the program
- Aggregate resident/fellow:
 - Achievement of the Milestones
 - In-training examinations (where applicable)
 - Board pass and certification rates;
 - Graduate Performance
 - Compliance with work hours
 - Supervision
- Aggregate faculty
 - Evaluation
 - Professional development
- Evaluate program's mission and aims, strengths, areas for improvement, and threats
- Learning Environment:
 - Overall learning and work environment including participating sites
 - Availability and adequacy of resident support services
 - Adequacy of resources/space/information technology (including medical records)
- Transitions of care education, expectations, practices, and performance

The annual review, including the action plan, must:

- Be distributed to and discussed with the members of the teaching faculty and the residents/fellows
- Be submitted to the DIO through New Innovations

Forms: (Ctrl-Click form name to view)

None

Policy Cross Reference: (Ctrl-Click policy name to view)

None

Relevant Standards/Codes/Rules/Regulations/Statutes:

None

References and Resources:

None