



Stony Brook Medicine Graduate Medical Education

Subject: GME0013 Annual Program Evaluation	Published Date: 06/01/2018
Graduate Medical Education	Next Review Date: 06/01/2021
Scope: SBM Stony Brook Campus	Original Creation Date: 11/21/2003

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Responsible Department/Division/Committee:

Graduate Medical Education Committee

Policy:

SBUH 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 and at least one resident. The PEC must 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. 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 should 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)

Quality Improvement education and participation in Quality Improvement programs

Patient Safety education and participation in Patient Safety programs

Faculty and resident research and scholarly activity

Professionalism education

Learning Environment:

Overall learning and work environment

Learning and work environment at all participating sites

Availability and adequacy of residency support services

Adequacy of resources/space/information technology (including medical records)

Compliance with duty hours

Administration:

Effectiveness of program administration

Currency of Program Letters of Agreement

Supervision:

Appropriateness of resident supervision

Availability of faculty for supervision at all times/all sites

Resident outcomes:

Resident outcome performance (in-training examinations, certifying examination performance)

Overall resident performance as viewed by aggregated milestone achievement

Faculty outcomes:

Faculty performance

Faculty Development opportunities

Transitions of care:

Transition of care education, expectations, practices, and performance

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