

**Subject**  
**ANNUAL PROGRAM**  
**EVALUATION (APE)**



**Policy**  
**Number**

**GME 019**

**Effective**  
**Date**

**January 2014**

## **ANNUAL PROGRAM EVALUATION (APE), GME 019**

### **1. Purpose**

This policy provides a process through which University of Maryland Medical Center Midtown Campus, through its Graduate Medical Education Committee, ensures that all residency programs are in substantial compliance with ACGME Institutional, Common Program and Program-specific Requirements; and are otherwise providing quality, adequately resourced clinical training.

### **2. Scope**

This policy applies to all ACGME-accredited residency educational programs sponsored by University of Maryland Medical Center Midtown Campus (UMMC Midtown Campus).

### **3. Responsibility**

It is the responsibility of all residency program directors, residents, and UMMC Midtown Campus officials to comply with this policy.

### **4. Procedure**

An Annual Program Evaluation shall be conducted by each residency training program's Program Evaluation Committee (PEC). The PEC shall consist of at least three program faculty members one of whom will be the Associate Program Director (if one is appointed), the Chief Resident (if appointed) and one or more additional residents peer selected, plus the Program Director, who will serve as the PEC Chair. The Department Chair will serve on the committee ex-officio.

The program through its PEC annually perform and document a formal, systematic evaluation of the curriculum and will be responsible for rendering a written Annual Program Evaluation (APE).

The program, through the PEC, will monitor and track;

- Resident performance
- Faculty development
- Graduate performance, including performance of graduates on the Board certification examination
- Program quality; and ensure that;
  - Residents and faculty have the opportunity to evaluate the program confidentially and in writing at least annually.

- The program uses the results of residents' and faculty members' assessment of the program together with other program evaluation results to improve the program.
- The progress on the previous year's action plan

The PEC will prepare a written plan of action to document the initiatives to improve performance in one or more of the areas listed above and delineate how the performance initiatives will be measured and monitored.

- This action plan will be reviewed and approved by the teaching faculty and documented in the minutes.

Materials and information used in a review should include the following:

- ACGME Common, specialty/subspecialty-specific Program and Institutional Requirements:
  - Letters of accreditation from previous ACGME reviews
  - RRC communications; requests, approvals, progress reports, etc.
  - Reports from previous internal reviews
  - Internal review progress reports (not available)
  - Previous annual program evaluations
  - Competency Based Goals and Objectives
  - Lecture syllabus
  - Rotation/clinical schedule
  - Affiliation agreements
  - ACGME or Other resident/fellow surveys and responses
  - Evaluation Tools:
    - 360 evaluation tools
    - Competency based semi-annual evaluation tool used by program director to evaluate resident
    - Competency based evaluation tool used by faculty to evaluate resident (after each rotation/assignment)
    - Copy of evaluation tool used by residents to evaluate the faculty at least annually and confidentially
    - Copy of the evaluation tool used by residents to evaluate the program at least annually and confidentially
    - Competency based transfer evaluation for any resident/fellow transferring into the program or out of the program (prior to completion) during the past 3 years
    - Competency based final (summative) evaluation for most recent program graduates documenting resident has achieved skills to practice independently
  - Program Policies:
    - Selection, Evaluation, Promotion & Dismissal Policy
    - Resident/Fellow Supervision Policy
    - Duty Hours Policy
  - Institutional Policies:
    - Extracurricular Employment/Moonlighting
    - Due Process Hearing Procedure (Grievance)
    - Industry Partnership Guidelines (vendor policy)
  - Faculty Development Documentation:
    - Sleep Education Training
    - Faculty Development related to Evaluation of Competencies

## **5. Annual Program Evaluation Report**

A written report of each evaluation shall be presented to the GMEC in the approved format and include the faculty approved action plan, if any, for review by the GMEC.

## **6. Progress Reports**

As appropriate, the GME Committee shall monitor the response by and progress of the program in implementing any action recommendations for improvements.