

<b>GME Policy #: II-L</b>	<b>Graduate Medical Education Policy &amp; Procedures Pennsylvania Hospital</b>	<b>Page 1 of 5</b> Effective: 06-18-08
	<b>Subject: House Staff Evaluation and Promotion</b>	

**POLICY**

This policy establishes the procedures for evaluation and promotion of Pennsylvania Hospital of the University of Pennsylvania Health System (PAH) house staff in accordance with Accreditation Council for Graduate Medical Education (ACGME) Institutional, Common, specialty/subspecialty-specific program requirements.

**PURPOSE**

To establish general guidelines under which each program shall provide house staff with periodic evaluations and make decisions with respect to promotion, final evaluation, and graduation.

**SCOPE**

This policy applies to all house staff in PAH sponsored ACGME accredited training programs. This policy pertains to evaluations of house staff performance as well as decisions regarding promotion and graduation. (Decisions regarding non-renewal of appointment are covered by Graduate Medical Education (GME) Policy #II-I House Staff Discipline, Non-renewal and Dispute Resolution).


**IMPLEMENTATION**

The implementation of this policy is the responsibility of the Department Chairs, Program Directors, Designated Institutional Official (DIO), Graduate Medical Education Committee (GMEC) and the Office of GME. As explained below, the program director is responsible for establishing and communicating criteria and processes pertaining to evaluation and promotion.

**PROCEDURE**

**A. PERIODIC EVALUATIONS**

Evaluations serve to enhance the education process and keep trainees apprised of their progress. Each program must have in place an evaluation system to assess house staff

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academic performance on a continuing basis. This system must be followed uniformly for all house staff in the program.


The program director is responsible for establishing the mechanism and timing of performance evaluations in compliance with the ACGME essentials for the specific program. Programs must use multiple evaluators, document progressive performance improvement appropriate to educational level, and provide timely feedback to house staff, particularly with regard to any deficiencies noted. House staff shall be provided with such feedback twice annually. The program director will inform house staff annually of the departmental procedure and schedule regarding evaluations and feedback. This is monitored through the GME Internal Review process.

The faculty must evaluate house staff performance in a timely manner during each rotation or similar educational assignment, and document this evaluation at completion of the assignment. Documentation of performance evaluations must be maintained in the house staff's academic record. Evaluations must be accessible for review by the house staff within a reasonable time upon the house staff's request.

All academic matters, including in-training exams, should be considered in evaluating house staff's performance. Academic matters include acquisition of knowledge related to the discipline as well as development of clinical and professional skills necessary for effective functioning as a health care professional. Of particular importance are areas such as professional development, professional ethics and maintaining professional relationships with patients and with other health care professionals, including subordinates, colleagues and superiors. Items considered in the evaluation process include satisfactory academic, clinical, technical, professional performance and interpersonal skills.

Programs must assess house staff on ACGME competencies as defined in the Common and specialty/subspecialty-specific Program Requirements, including the general competencies:

- a. Patient Care** that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health;

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- b. Medical Knowledge** about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care;
- c. Practice-Based Learning and Improvement** that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care;
- d. Interpersonal and Communication Skills** that result in effective information exchange and teaming with patients, their families, and other health professionals;
- e. Professionalism**, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population; and
- f. Systems-Based Practice**, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

**B. PERFORMANCE DEFICIENCIES**

In addition to providing feedback in connection with evaluations, a program may address deficiencies through corrective action or discipline, if warranted, under GME Policy #II-I. Serious deficiencies identified in connection with evaluation may warrant probation under GME Policy #II-I.

**C. PROMOTION**

Promotion to the next training year depends upon demonstration of satisfactory academic, clinical, technical, professional performance and interpersonal skills, and the ability to maintain a medical training license commensurate with his/her experience. Performance insufficient to warrant promotion, or failure to obtain or maintain required licensure, may also subject house staff to corrective action or discipline (including probation), if warranted, under GME Policy #II-I. Agreement non-renewal is also covered by GME Policy #II-I.

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In general, postgraduate level promotions are determined by the program director and the department chair on the basis of previous training, experience and performance.

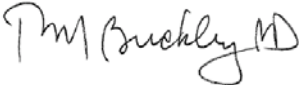
In addition to fulfilling the requirement of satisfactory academic progress, the house staff must satisfy the following specific requirements:

1. For promotion to PGY2 through PGY5, the house staff must obtain and maintain a training license issued by the State Board of Medicine; house staff who do not obtain or make application for such a training license may be terminated at the conclusion of PGY1; house staff who fails to maintain such training licenses may be terminated upon the loss of the training license.
2. For promotion to PGY3, the house staff must have passed USMLE Step 3, NBOME Part III or COMLEX Level III; house staff who has not passed USMLE Step 3 may be terminated at the conclusion of PGY2.

The decision to offer a promotion to house staff will be conveyed to the house staff by the program director after a review of any faculty evaluations and in-training exam performance, as well as personal observations of the program director. A decision not to promote house staff should be confirmed in writing to the house staff no later than four months prior to the end of the house staff's current agreement, unless the primary reason for non-promotion occurs within the four months prior to the end of the current agreement, in which case as much notice as circumstances reasonably allow must be given. Written notice of the decision not to promote should be accompanied by a statement advising the house staff that within 30 days of the date of such notice, the house staff may appeal the written decision not to promote by addressing a written statement to the GMEC chair in accordance with GME Policy #II-I's dispute resolution procedures.

#### **D. GRADUATION**

The program may defer house staff's graduation and extend his or her education for a number of reasons, including remediation, leave of absence, or the need for additional experience (in a particular rotation or otherwise). Performance insufficient to warrant graduation may also subject house staff to corrective action or discipline (including probation), if warranted, under GME Policy #II-I.

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A decision not to graduate house staff should be confirmed in writing to the house staff no later than four months prior to the end of the current academic year, unless the primary reason for the decision occurs within that four-month period, in which case as much notice as circumstances reasonably allow must be given. Written notice of the decision should be accompanied by a statement advising the house staff that within 30 days of the date of such notice, the house staff may appeal the decision by addressing a written statement to the GMEC chair in accordance with policy GME Policy #II-I's dispute resolution procedures.

**E. SUMMATIVE EVALUATION**

The program director must provide a final evaluation for each house staff upon completion of the program. This evaluation must become part of the house staff's permanent record and must be accessible for review by the house staff. The evaluation must document the house staff's performance during the final period of education and verify whether the house staff has demonstrated sufficient competence to enter the field without direct supervision.

While the final evaluation may be based on the house staff's entire training, and may take into account previous periodic evaluations, it remains an independent assessment of the totality of the house staff's experience and competence at the time of the final evaluation.

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