



NOTHING CONTAINED IN THIS POLICY OR IN ANY OTHER POLICY CREATES A CONTRACT RIGHT. CONSISTENT WITH SOUTH CAROLINA LAW, ALL TEAM MEMBERS ARE EMPLOYED "AT WILL," WHICH MEANS THAT THE TEAM MEMBER HAS THE RIGHT TO TERMINATE HIS OR HER EMPLOYMENT AT ANY TIME, WITH OR WITHOUT NOTICE OR CAUSE, AND THAT PRISMA HEALTH AND/OR ITS AFFILIATED ENTITIES RETAIN THE SAME RIGHT.

EVALUATION OF RESIDENTS/FELLOWS

Approved Date: 05/24/2021	Effective Date: 07/01/2021	Review Date: 07/01/2030
----------------------------------	-----------------------------------	--------------------------------

Scope: (Check which locations apply to this policy)

Prisma Health-Midlands		Prisma Health-Upstate	
X	Prisma Health Baptist Hospital	X	Prisma Health Greenville Memorial Hospital
X	Prisma Health Baptist Parkridge Hospital	X	Prisma Health Greer Memorial Hospital
X	Prisma Health Richland Hospital	X	Prisma Health Hillcrest Hospital
X	Prisma Health Tuomey Hospital	X	Prisma Health Laurens County Hospital
X	Prisma Health Children’s Hospital-Midlands	X	Prisma Health Oconee Memorial Hospital
X	Prisma Health Heart Hospital	X	Prisma Health North Greenville Hospital
X	PH USC Medical Group	X	Prisma Health Patewood Hospital
x	Provider based facilities associated with Prisma Health-Midlands hospitals	X	Prisma Health Surgery Center - Spartanburg
		X	Prisma Health Marshall I. Pickens Hospital
		X	Prisma Health Children's Hospital-Upstate
		X	Prisma Health Roger C. Peace Hospital
		X	Prisma Health Baptist Easley Hospital
		X	University Medical Group UMG/PIH
		x	Provider based facilities associated with Prisma Health-Upstate hospitals

Policy Statement:

Each resident/fellow’s performance is evaluated on a regular basis as determined by their residency/fellowship Program Director and no less frequently than at the end of each rotation. These evaluations become part of the resident/fellow’s Graduate Medical Education record and are used as a reference for promotion, counseling, academic improvement/remediation, disciplinary action, contract renewal, board certifications, and/or hospital staff appointment.

Associated Policies and Procedures:

- Academic and Professional Improvement of Residents
- Grievance and Due Process
- Promotion and Reappointment

Definition(s):

Evaluation: process/form by which a resident/fellow is reviewed based on his/her work in a clinical or professional setting.

Procedural Steps:

1. Evaluation criteria and forms are used by each program for resident/fellow evaluations and reviewed as needed by the Graduate Medical Education (GME) Office and/or program representatives.
2. These evaluation forms are completed by multiple evaluators (e.g., faculty, peers, patients, self, and other professional staff) based upon a compilation of clinical evaluations and other criteria, to include the ACGME general competencies.
3. The Program Director appoints the Clinical Competency Committee to assist in reviewing evaluations and resident progress. The committee:
 - a. reviews all resident evaluations semi-annually;
 - b. prepares and assures the reporting of the Milestone evaluations of each resident semi-annually to ACGME; and,
 - c. advises the Program Director regarding resident progress, including promotion, remediation, and dismissal.
4. The Program Director and/or designated attending faculty meets with each resident/fellow at least semi-annually to discuss his/her evaluation forms.
5. Completed evaluations are signed by the Program Director and/or designated attending faculty and the resident/fellow. These evaluations are accessible for review by the resident/fellow. Evaluations including performance monitoring, become part of each resident's/fellow's permanent record.
6. Copies of unsatisfactory evaluations are sent to the GME Office for review by the Designated Institutional Official (DIO).
7. At the discretion of the DIO or the Program Director, an unsatisfactory evaluation may be referred to the GME Committee (GMEC) for review. The GMEC may advise, propose, or approve specific corrective actions.
8. A final summative evaluation of each resident/fellow is completed and sent to the GME Office prior to the end date of the residency training. If this summative evaluation is not in the GME Office at the stated deadline, the certificate of residency is held until the evaluation is received by the GME Office. This evaluation documents the resident/fellow's performance during the final period of education and verifies that the resident/fellow has demonstrated sufficient competence to enter practice without direct supervision. The final summative evaluation is signed by both the resident/fellow and the Program Director and is kept in the resident/fellow's permanent record.
9. A final summative evaluation of each resident/fellow who departs prior to end of training is also completed. The final summative evaluation is signed by both the resident/fellow and the Program Director and is placed in the resident/fellow's permanent record in the resident management software system (i.e., New Innovations).

References:

ACGME Common Program Requirements: **V.A.**

Appendices/Form(s): (Insert as links)

None