

Section:	Sponsoring Institution
Document Number:	GME0029
Title:	Assessment of Educational Effectiveness of Programs
Responsible Department:	Graduate Medical Education
Created:	12/28/2017
Revised:	4/29/2019
Superseded:	12/28/2017
GMEC Approved:	05/23/2019
<b>Board of Directors Approved:</b>	07/18/2019
Effective:	07/19/2019
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### **POLICY:**

Assessment of Educational Effectiveness of Programs (Annual Program Evaluation and Program Evaluation Committee)

### SCOPE:

The Valley Health Team Graduate Medical Education Committee (GMEC) is responsible for oversight of all Valley Health Team, Inc. sponsored graduate medical education programs in accordance with the Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirements.

#### **PURPOSE:**

Annual Program Evaluations (APEs) and Action Plan for Improvement for all ACGME-accredited programs are reviewed by GMEC or its Subcommittees which present summaries and recommendations to the GMEC each year as part of the Annual Institutional Review.

ACGME programs must have a Program Evaluation Committee (PEC) appointed by the program director. The PEC functions in compliance with both the common program and program-specific requirements. The goal of the PEC is to oversee curriculum development and program evaluations for its respective GME training program. Each ACGME-accredited residency program shall establish a program specific policy, describing the responsibilities, procedures and members of the program's PEC.

Each PEC must be composed of at least two program faculty members, at least one of whom is a core faculty member, and at least one resident/fellow from the program (unless the program does not have any enrolled residents). Faculty members may include physicians and non-physicians from the core program or required rotations in other specialties that teach and evaluate the program's residents/fellows. Each PEC must have a written description of its responsibilities. The PEC will meet at least annually even if there are no residents enrolled in the program.

The PEC's responsibilities are to:

• Plan, develop, implement and evaluate educational activities of the program



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- Review and make recommendations for revision of competency-based curriculum goals and objectives
- Address areas of non-compliance with ACGME standards
- Review the program and document on behalf of the program the formal, systematic
  evaluation of the curriculum at least annually and render a written Annual Program
  Evaluation (APE) using the standard GME template. This Annual Program Evaluation
  and written Action Plan for Improvement which delineates how initiatives will be
  measured and monitored must be submitted to the GMEC annually by the Program
  Director.
- Act as an advisor to the program director, through program oversight
- Review of the current operating environment to identify strengths, challenges, opportunities, and threats as related to the program's mission and aims
- Using the APE and Action Plan for Improvement the PEC will monitor and track each of the following:
  - Resident performance
  - Faculty development
  - o Graduate performance, including performance on certifying examination
  - Program quality
  - o Progress in achieving goals set forth in previous year's action plan
- In order to assist the PEC in their endeavors they will be provided with data by the program's administrative staff. Data that includes but it is not limited to

#### **Program Quality**

- ACGME Program Requirements
- Program Goals and Objectives
- Program Policies
- Program Block Diagram
- Most recent ACGME Letters of Notification, including citations
- ACGME and Annual GME Resident Survey
- ACGME and Annual GME Faculty Survey
- Resident evaluation of the Program, Rotations, Faculty



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- Faculty Evaluation of the Program
- Clinical Learning Environment focus areas
- Quality and safety of patient care
- Aggregate resident and faculty:
  - well-being
  - recruitment and retention
  - workforce diversity
  - engagement in quality improvement and patient safety
  - written evaluations of the program
- Aggregate faculty evaluation
- Aggregate professional development

# **Faculty Development**

- Summary of Faculty Development efforts completed during academic year
- Summary of faculty Scholarly Activity (will also be used to update ADS)

## Resident & Graduate Performance

- Summary of resident Scholarly Activity (will also be used to update ADS)
- Recommendations from the Clinical Competency Committee regarding Resident Performance
- Aggregate data from general competency assessments, including in-training examination performance
- Aggregate resident case or procedure logs
- Resident remediation or attrition
- Graduate performance, including board pass rates
- Aggregate achievement of the Milestones
- Board pass and certification rates



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## Progress on the previous year's action plan

• The Prior year's APE and Action Plan for improvement as well as data to be used to measure progress on individual initiatives, as specified in the prior year's APE.

## Other information the PEC deems appropriate.

The program director is ultimately responsible for the work of the PEC. The program director must ensure the annual Action Plan for Improvement is reviewed and approved by the program's teaching faculty. The approval must be documented in meeting minutes. The program's annual action plan and report on the program's progress on initiatives from the previous year's action plan must be sent to the GME Office annually by the specified deadline.

The annual review, including the action plan must be distributed to and discussed with the members of the teaching faculty and the residents and be submitted to the DIO.

Soyla A. Reyna-Griffin, CPA

Chief Executive Officer

Maggie Rubio

President, Board of Directors

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Date