

LOYOLA MEDICINE
RESIDENT HANDBOOK
III. POLICIES AND PROCEDURES

III. G. EVALUATIONS and PROMOTION

G.1. Introduction

Evaluation is a key component of any residency program. All programs must comply with the ACGME's Common Program Requirements and their specific residency review committee program requirements.

Each program must possess a written statement that outlines its educational goals with respect to the knowledge, skills, and other attributes of residents for each major assignment and for each level of the program. This statement must be distributed to residents and faculty, and must be reviewed with residents prior to their assignments.

G. 2. Standards and Procedures for Evaluation

The standards by which Loyola evaluates each resident shall include:

1. The goals and objectives of the residency training program in which the resident is enrolled.
2. The qualifications, knowledge and skills needed by the residents to pass the requirements for board certification in the specialty.
3. The procedural and quality standards, which Loyola must meet in, order to maintain licensure and accreditation.
4. The ACGME competencies of medical knowledge, patient care, system-based practice, practice-based learning and improvement, communication and professionalism.

G.3. Resident Evaluation by Faculty

1. The form of the evaluation will be at the discretion of the program director.
2. While the content of specific performance evaluations will be discussed, the program director may choose not to reveal the identity of the individual faculty evaluator.
3. Except in those programs where the program director chooses not to reveal the identity of the individual faculty evaluator, residents have ready access to view and/or print electronic copies of their evaluations via the electronic residency management system.

4. Each program director (or designate) will provide a resident with a formal evaluation semi-annually.
5. During the meeting the program director (or designate) will review individual or summary evaluation data. The resident and program director (or designate) will acknowledge review of the evaluations or summary via signature.
6. The resident will be allowed to submit written comments, which will be included in the resident's program file.
7. The program director must provide a final summative evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of education and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. The final evaluation shall be part of the resident's permanent record maintained by the institution.

G.4. Faculty Evaluation by Residents

1. Programs are required to provide residents opportunity to evaluate faculty at least annually, however, more frequent evaluation opportunities, preferably at the end of each rotation, are encouraged.
2. All evaluations of faculty will be collected and reported in a manner that protects resident confidentiality as required by the institutional Graduate Medical Education Committee.
3. All evaluations of faculty will include, at a minimum, the standard questions as required by the institutional Graduate Medical Education Committee.

G.5. Evaluations of Program/Rotations by Residents

1. Programs are required to provide residents opportunity to evaluate the program at least annually, however, more frequent evaluation opportunities, preferably at the end of each rotation, are encouraged.
2. All evaluations of the program will be collected and reported in a manner that protects resident confidentiality as required by the institutional Graduate Medical Education Committee.
3. All evaluations of the program will include, at a minimum, the standard questions as required by the institutional Graduate Medical Education Committee.

G.6. Responsibility of the Training Program for Maintaining Resident Evaluation Records

1. Each residency training program office will keep all resident semiannual review evaluations in the resident's permanent files. Maintenance of individual evaluations is not required.

2. A resident may review his or her own file with the program director or designated staff member by appointment.
3. Resident files will be made available to the Graduate Medical Education Office (GME) upon request, consistent with Loyola policy on record access.

G.7. Promotion and Advancement

1. Advancement to the following PGY-level is not automatic, but must be recommended by the program director. The program director may withdraw an offer based on a resident's performance at any time prior to the new agreement date. Residents on probation must fulfill the requirements specified in the conditions for probation before they will be advanced.
2. The conclusions of the program director based on recommendation of the CCC (Clinical Competency Committee), which includes; semi-annual progress reports and all other available information will provide the basis for determining whether a resident is ready for advancement to the subsequent year of the program or for graduation from the program.
3. The specific criteria for resident evaluation and promotion must be consistent with the guidelines of the Clinical Competency Committee, the Specialty Board, or other agencies that promulgate educational standards for certification in that discipline.

G.8. Non-renewal

1. It is expected that programs provide the resident(s) with a written notice of intent not to renew a resident's Agreement no later than four months prior to the end of the resident's current Agreement. However, if the primary reason(s) for the non-renewal occurs within the four months prior to the end of the Agreement, the Sponsoring Institution must ensure that its ACGME-accredited programs provide the residents with as much written notice of the intent not to renew as the circumstances will reasonably allow, prior to the end of the Agreement
2. All such notification will be in writing and copied to the Office of Graduate Medical Education.

G.9. Declining to Sign the Graduate Medical Education Agreement

1. A resident may choose to decline to renew an offered agreement for the following year by not signing and returning the agreement.
2. The resident will remain in good standing during the remainder of the current agreement without prejudice and will perform the usual resident functions until the end of the term of the agreement.

G.10. Due Process

Any resident enrolled in a multi-year program who, under normal circumstances would receive an agreement for the following academic year, and is denied due to the action of the program director as described in the sections listed above, is entitled to due process, including all grievances, as described in the Grievance Procedure.

G.11. Resident Resignation

1. Any resident wishing to resign must submit a written request for release from the remaining term of their agreement to their program director.
2. A copy must be forwarded to the Office of Graduate Medical Education. Because the Agreement is a legal document, the program director has the right to delay or specify the actual termination date to ensure coverage of services.
3. The resident will be terminated on the date agreed to by the program director. The stipend will be issued at the next regular payday, provided the resident has completed the proper checkout process.

GMEC Approved: September 23, 1993; June 23, 1994, October 23, 1996: November 25, 2020 via vote
Reviewed: October 23, 1996, November 24, 2020
Revised: June 2003, Feb, 2006, March 2007, November 2020