

Annual Program Evaluation Policy and Procedures

Scope: All ACGME-accredited residency and fellowship programs sponsored by the UW School of Medicine.

Policy: All ACGME-accredited programs must appoint a Program Evaluation Committee (PEC), which must perform and document formal, systematic evaluation of the curriculum at least annually, and render a written, Annual Program Evaluation (APE) annually [CPR V.C.2.]. Two documents shall result from this process, the (1) Meeting Summary and (2) Action Plan and Follow-up.

Process: The program, through the PEC, must perform an Annual Program Evaluation (APE), including monitoring and tracking metrics on (1) resident/fellow performance, (2) faculty development, (3) graduate performance, including performance of program graduates on the certification examination¹, (4) program quality, including confidential program evaluations by trainees and faculty¹ [CPR V.C.2.].

The **Meeting Summary**, completed in lieu of meeting minutes, provides a brief description and key findings of the program's review process.

The **Action Plan & Follow-up** documents initiatives to improve program performance in one or more areas of the four areas listed above, as well as progress on the previous year's Action Plan(s) [CPR V.C.2.e.]. In addition, each year, the GME Office may identify unique strategic initiatives (e.g., increasing program diversity) to include in the program's improvement efforts for the following year. Finally, the Action Plan should address any feedback provided by the GME Office on the program's previous APE. The Action Plan must be reviewed and approved by the teaching faculty and documented in the meeting summary [CPR V.C.3.a)].

Programs undergoing an ACGME Self-Study do not need to complete an APE in the same academic year.

Membership: Members of the PEC must include at least two faculty members and one trainee [CPR V.C.1.a).(1)]. Other members of the committee should include the program director, associate program director(s), program administrator(s), and representative teaching faculty from each major participating institution (i.e., site directors).

Charge: The PEC must have a written description of its responsibilities [CPR V.C.1.a).(2)]. The charge should address the PEC's responsibilities for: (1) planning, developing, implementing, and evaluating educational activities of the program; (2) reviewing and making recommendations for revision of competency-based curriculum goals and objectives; (3) addressing areas of non-compliance with ACGME standards; and, (4) reviewing the program annually using evaluations of faculty, trainees, and others [CPR V.C.2.d)].

Compliance: Annually, Program Directors must submit the Meeting Summary and Action Plans & Follow-up documentation by September 30. Programs should also share the results of the APE with their Department Chair/Division Chief. APE documentation will be reviewed by the GME Office, with feedback provided to programs when indicated. Further action may also be required according to the terms of the Special Review Policy.

Attachments: Meeting Summary Template
Action Plan and Follow-up Template

¹ One-year fellowship programs are exempt from this requirement.

Annual Program Evaluation: Meeting Summary

Academic Year (AY) _____

Please document your Annual Program Evaluation (APE) using the form below and attach your APE Action Plan and Follow Up.

(Note: This form should NOT be shared with the Review Committee or with ACGME site visitors during accreditation site visits).

1. Membership, Program Evaluation Committee [CPR (PR V.C.1.a)]

Program Name:		Date(s) of review:	
Program Director:		Program Administrator:	
PEC Faculty:		PEC Trainee(s):	

2. Resident/Fellow Complement:

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
Positions approved							
Current trainees							

3. Number/Types of Other Learners: (e.g., residents, fellows, medical students, other health professions)

4. Program Aims: (Required element of ACGME Self Study; review this [brief slide presentation](#) on how to set and validate Program Aims)

5. Program Changes in the Past Year:

6. Upcoming Changes Planned:

7. Description of Program's Annual Evaluation Process:

8. APE Domains and Analysis

Review a list of [high-value data](#) suggested for use in the Annual Program Evaluation.

Domain 1: Resident/Fellow Performance [CPR V.C.2.a)]

Potential data sources: *milestone evaluations, duty hour compliance, in-service exam, case logs, scholarly activity, etc.*

Data Reviewed:

Analysis and Action Items:

Domain 2: Faculty Development [CPR V.C.2.b)]

Potential data sources: *Resident evaluations, evaluation compliance, program participation, scholarly activity.*

Data Reviewed:

Analysis and Action Items:

Domain 3: Graduate Performance [CPR V.C.2.c)]

Potential data sources: *board examination performance, graduate placement, surveys of graduates and/or their employers or clinical settings.*

List Board certification statistics for the past 5 years:

AY	# Eligible	# 1st Takers	#Passed 1st time	% Passed
2017-2018				
2016-2017				
2015-2016				
2014-2015				
2013-2014				

Data Reviewed:

Analysis and Action Items:

Domain 4: Program Quality [CPR V.C.2.d) (Core)]

Potential data sources: *assessments by residents/fellows and faculty members, recruitment, ACGME accreditation status and citations, institutional data on performance.*

Data Reviewed:

Analysis and Action Items:

9. Reflections/Comments on Aggregated Results of AY18 Evaluations of Rotations by Trainees (if applicable):

10. Reflections/Comments on Aggregated Results of AY18 Evaluations of Program by Trainees [CPR V.C.2.d).(2)]:

11. Reflections/Comments on Aggregated Results of AY18 Evaluations of Program by Faculty [CPR V.C.2.d).(2)]:

12. Reflections/Comments on Areas of Concern (<85% Compliant) from 2018 ACGME Resident/Fellow and Faculty Survey Results (if applicable):

13. Key Findings: (Review [this resource](#) for how to conduct a SWOT analysis)

a. Strengths:

b. Weaknesses/ Areas for Improvement:

c. Opportunities:

d. Threats:

14. Action Plan & Follow-up [CRP V.C.3]: **ATTACHED**

a. Review of previous year's Action Plan and updated status

b. Summary of link between Program Aims and Areas for Improvement/Action Plans

15. Date of Teaching Faculty Review and Approval of Action Plan: *(must be documented in faculty meeting minutes [CPR V.C.3.a])*

16. Program Director Attestation

I certify that I have reviewed all data represented above with the PEC and have been directly involved in the preparation of this APE.

Program Director Signature

Date

Annual Program Evaluation: Action Plan and Follow-up

Use this template for tracking areas for improvement from the Annual Program Evaluations across multiple years. The intent is to create a summary of improvements achieved, and a working list of areas that are still in need of attention. The template is suggested and you may adapt in any way you find useful to facilitate program improvement. You also may use attachments or appendices if additional detail is relevant to tracking a given issue. *(Note: This form should NOT be shared with the Review Committee or with ACGME site visitors during accreditation site visits).*

	Areas for Improvement identified in AY18	Intervention/Action Plan	Date instituted/ Individual responsible	Link to Program Aims and/or Context (Opportunities, Threats)	Expected Resolution (outcome measures and date)	Status (resolved, partially resolved, not resolved)
1	GME Strategic Initiative: Improve Program Diversity	Identify one program-level intervention				
2						
3						
....						
	Areas for Improvement identified in AY17	Intervention/Action Plan	Date instituted/ Individual responsible	Link to Program Aims and/or Context (Opportunities, Threats)	Expected Resolution (outcome measures and date)	Status (resolved, partially resolved, not resolved)
1						
2						
3						
....						

	Areas for Improvement identified in AY16	Intervention/Action Plan	Date instituted/ Individual responsible	Link to Program Aims and/or Context (Opportunities, Threats)	Expected Resolution (outcome measures and date)	Status (resolved, partially resolved, not resolved)
1						
2						
3						
....						
	Areas for Improvement identified in AY15	Intervention/Action Plan	Date instituted/ Individual responsible	Link to Program Aims and/or Context (Opportunities, Threats)	Expected Resolution (outcome measures and date)	Status (resolved, partially resolved, not resolved)
1						
2						
3						
....						