

Baystate Medical Center General Surgery Residency program is committed to conduct meaningful assessments of their trainees based on multiple sources including formative and summative evaluations, milestones-based assessments based on direct observation, simulation, rating scale, evaluation of scholarly work, and 360 degrees evaluation in compliance with the ACGME requirements. These assessments are meant to provide meaningful performance evaluation and feedback to allow to the program director to design an individualized learning plan aimed at strengthening areas of weakness.

In accordance with the ACGME requirements, each training program is expected to form a Clinical Competency Committee (CCC). The program director appoints the CCC. The CCC must have at least three program core faculty (excluding the program director) who have the opportunity to observe and evaluate the residents. CCC members may also include non-physician members of the health care team, non-MD educators, assessment specialists, or residents in their final year. For example, a small fellowship program may include faculty from the core program or from required rotations in other specialties.

#### Description of CCC meetings at Baystate Medical Center:

- The CCC meets at least 5-6 times semi-annually to review and discuss each individual residents' performance data. The program coordinator or the program director will prepare Milestones data summary on each resident through reports generated from various sources e.g. 360-degree evaluations, rotation evaluations, Simulations, etc...
- In some situations the residents' data will be divided among CCC members to review before the meeting and report on during the meeting
- The role of the CCC is to make a **consensus decision** on the progress of **each** resident by applying assessment data to the milestones.
- The CCC serves as an **early warning system/early identification** if a resident fails to progress in the educational program and make recommendations to the program director for resident progress including promotion, remediation, and dismissal.
- The CCC will generate a report/recommendation letter to the PD on each resident. The PD will meet with each resident and communicate the recommendation, design an improvement plan, etc. During their six month review session
- Thresholds will be set by the CCC. Interventions a program might consider include assigning a mentor with expertise in a given area of deficiency, additional required readings, sessions in a skills lab, and/or added rotations in a given area. If, after remediation, a resident still fails to advance sufficiently on one or more milestones, a CCC might consider extending education, or counseling the resident to consider another specialty or profession.
- While the PD is part of the CCC meeting, the PD must not chair the meeting and can be available for clarification
- The program director has final responsibility for the program and trainees' evaluation and promotion.
- The program director and/or program coordinator reports the aggregate information for all residents in the program to the ACGME in the ADS system.