



Graduate Medical Education

Semi-Annual Evaluation & Clinical Competency Committee (CCC): *Requirements, Responsibilities, Recommendations & Resources*

Semi-Annual Evaluation: Required Elements

Program Directors must provide each Resident with a documented performance evaluation summary at least semi-annually, which should include:*

- Input from the Clinical Competency Committee (CCC)
- Evaluative input from multiple sources, as appropriate/available for the specialty or service:
 - Faculty
 - Peers
 - Patients/families
 - Self-assessment
 - Other medical professionals
 - Administrative and support staff
 - Students
- Review of progress on the specialty-specific milestones
- Review of case logs for any program that uses them
- Individualized learning plan to capitalize on the Resident's strengths and identify areas of growth

Clinical Competency Committee (CCC): Requirements & Responsibilities

Requirements:

- CCC members are appointed by the PD
- At minimum, must be composed of three members of the program Faculty (at least one core Faculty member)
- Written description of CCC responsibilities must be provided to the CCC members

Responsibilities:

- Review Resident performance semi-annually
- Prepare and ensure the reporting of Milestones evaluation of each Resident semi-annually to ACGME (via ADS)
- Advise PD regarding Resident progress, including promotion, remediation, and dismissal
- At least annually, conduct a summative evaluation of each resident that includes their **readiness to progress** to the next year of the program, if applicable

**For specialty-specific CCC requirements, review section V.A of program-specific ACGME requirements*

Clinical Competency Committee (CCC):

Step #1: Identify CCC Members (PD)

Additional members must be faculty members from the same program or other programs, or other health professionals who have extensive contact and experience with the program's residents. This can include:

- Physician faculty members
- Other non-physician health professionals who have extensive contact and experience with the program's residents in patient care and other health care settings (e.g. nurses, NPs, PAs, social workers, etc.)
- PD – determines level of participation; has final decision on milestones and promotion/graduation but must not dominate CCC meetings
- Advisors/Mentors – PD should consider risks/benefits before appointing

What about Chief residents?

- Residents/fellows are not permitted to be members of the CCC. However, in some programs “chief residents” are faculty members, and not considered trainees. In this case it may be appropriate to include them (see *ACGME Clinical Competency Guidebook* for more details regarding Chief resident involvement)

Clinical Competency Committee (CCC):

CCC Characteristics

- “Right Size” – large enough for diverse perspectives, small enough to be manageable
- “Right People” – committed, able to attend all meetings, honesty
- Term Limits – if ongoing, add new members periodically; if termed, stagger appts
- Large Programs – Consider multiple CCCs

Clinical Competency Committee (CCC): *Program Coordinator Role*

Program Coordinators cannot be official CCC members but serve an important role, which includes the following responsibilities:

- Administratively attend CCC meetings, at PD discretion (take minutes, record key aspects of discussion, etc.)
- Maintain list of current CCC members in the Program Handbook and ADS, and a description of their responsibilities
- Assist in collection, preparation, organization, and distribution of assessment data
- Communicate results to PD (if PD not in attendance)
- After CCC meets, schedule meetings with individual residents/fellows and PD or designated faculty member to review the decisions (semi-annual evaluations), including Milestone status
- Assist PD in electronically submitting Milestones results to ACGME via ADS

Clinical Competency Committee (CCC):

Step #2: Schedule CCC Meetings (PC)

Requirements:

- Must occur prior to semi-annual evaluation with PD
- Must allow time to meet ACGME deadline for entering Resident milestones into ADS

Considerations:

- Ensure enough time at first meeting to discuss purpose, structure, ground rules, interpretation of milestones.
- Frequency:
 - Monthly/quarterly/semi-annually?
 - Is CCC reviewing entire program or just one class (e.g. all PGY1s) in single meeting?
- Schedule semi-annual evaluation meetings when planning CCC meeting dates
 - Semi-annual evaluation meetings take place after CCC meetings

Clinical Competency Committee (CCC):

Step #3: Prepare for CCC Meeting(s)

Collect/Distribute Resident Performance Data to the CCC:

- Follow up on any incomplete evaluations and compile additional performance data
- Generate aggregate evaluation reports in MedHub
- Provide MedHub report(s) and additional performance data to CCC members and PD to review/reference before and during the meeting
- Together with PD/CCC members determine timeframe, format and distribution method for getting resident performance data to the CCC (e.g. email electronic versions of data, upload to shared drive, upload to MedHub, print out hard copies, etc.)

Clinical Competency Committee (CCC):

Step #3: Prepare for CCC Meetings (continued)

Considerations:

- Assessment of resident should not only consist of milestone data and/or end-of-rotation evaluations data. Other core methods of assessment include:
 - Direct observation, Multi-source feedback, In-service exams, Audit of clinical performance, Simulation
- Use graphs, visual plots, dashboards when possible
- Don't rely on simple averages without reviewing individual comments (to identify outliers)
- Ensure CCC members are trained on how to interpret aggregated performance data
- For larger CCCs, consider assigning CCC members a subset of residents; have them review data before meeting and prepare preliminary report to review

Clinical Competency Committee (CCC):

Step #4: Conduct CCC Meetings

CCC reviews/discusses all available performance data for each resident and determines milestone progress/scores

Considerations:

- CCC should have adequate time for discussion
- Helpful to project data and/or have summaries available at meetings
- Ensure discussion about each resident is captured and documented (for record-keeping purposes and use during semi-annual meeting with resident)

Clinical Competency Committee (CCC):

Step #5: Post-Meeting Follow-Up

- Provide CCC results to the PD for use during semi-annual evaluation
- Enter milestone evaluation scores into ADS
 - Milestone scores must be approved by PD before entered into ADS
 - Milestone reporting window: **October 31, 2022-January 13, 2023**

Semi-Annual Review Meetings

PD conducts semi-annual review meeting with resident:

- The PD or their designee MUST meet with each resident to review their documented semi-annual performance evaluation, including progress along the specialty-specific Milestones, and assist residents in developing individualized learning plans to capitalize on their strengths and identify areas for growth
- PD and resident sign copy of semi-annual evaluation discussed in meeting (keep copy in resident file with date of meeting)

Clinical Competency Committee Resources

ACGME Milestone Resources (e.g. Clinical Competency Committee Guidebook, Milestones FAQs, etc.)

<https://www.acgme.org/What-We-Do/Accreditation/Milestones/Resources>

ACGME Common Program Requirements (Section V)

<https://www.acgme.org/What-We-Do/Accreditation/Common-Program-Requirements>

ACGME Specialty-specific Program Requirements (Section V.A)

<https://www.acgme.org/Specialties>

GME Evaluation and Promotion Policy

https://www.ucdenver.edu/docs/librariesprovider101/gme-document-librar/gme-policies-procedures/evaluation-and-promotion-policy.pdf?sfvrsn=c01e4cb9_2