Evaluation, Promotion and Dismissal Policy

Department of Anesthesia, Critical Care and Pain Medicine
(See also GME Policy-3 on Evaluation and Promotion)

Evaluation

A. Trainee

1. In the Department of Anesthesia the primary responsibility for summative evaluation and remedial academic actions relating to trainees resides with the Vice Chair for Education, Program Director (PD), Assistant Program Directors (APD), and the Clinical Competency Committee (CCC).

2. Trainees receive formative feedback via daily electronic feedback during operating room rotations, and weekly feedback in the ICU and on the pain service. Monthly milestone based evaluations, which include the ACGME core competencies, are solicited from each rotation director. Nursing or patient evaluations may also be utilized.

3. Rotations accomplished outside of the BIDMC will have evaluations forwarded to be included in the trainee’s file.

4. The electronic evaluations are confidential and available for viewing online by the trainees at any time. The trainee may view their evaluations that are maintained electronically in their individual training file on request during normal business hours.

5. Supervising faculty are encouraged to give immediate feedback to the trainee throughout the working day and during call in order to facilitate the learning process.

6. The PD and/or APD meet with each trainee at least twice a year to review evaluations and other data such as ACGME core competencies, milestones and examination reports. The goal of this meeting is to help analyze and synthesize the individual faculty evaluations of the trainee, highlighting trends, identifying any areas of weakness or insufficient progress and design specific plans of actions as needed. Career development and counseling are provided as needed during these meetings. In addition each trainee meets with their mentor to review their milestone evaluations and formulate action plans for as needed for educational enhancement.

7. Documentation of evaluations and semi-annual meetings are maintained in each trainee’s electronic file. The documents are electronically time/date stamped. Hard copies are available to trainees at their request; all content is reviewed with the trainee at the time of the meeting.
B. Programs and Faculty

1. Trainees evaluate relevant supervising faculty on a semiannual basis using an online survey tool. They can also provide feedback on staff at any time using the online departmental feedback system.

2. Trainee evaluations of faculty are strictly anonymous and confidential and may only be viewed and printed by the education administrative staff.

3. Aggregate, blinded evaluations are reviewed with each faculty member during their annual meeting with the Chair of the department.

4. Rotation evaluations are completed via New Innovations along with the daily feedback reports that are generated from the operating room schedule. These are reviewed by the program director and/or associate program directors at least semi-annually. The Curriculum Committee, which is composed of faculty members and representatives from each resident CA level, reviews the aggregate evaluations yearly as part of an overall curriculum and program review.

Promotion

A. Process and Criteria

1. The trainee is appointed to the Department of Anesthesia, Critical Care and Pain Medicine for a twelve (12) month academic training period. The trainee appointment is normally renewed annually if training level performance standards are met.

2. Residents currently enrolled in the anesthesia residency program are currently enrolled in the American Board of Anesthesia (ABA) Staged Examination process for board certification. To remain an active member of the residency training program, trainees must successfully pass the ABA Basic Examination that is scheduled in June of their PGY2/CA1 training year. The BASIC Examination focuses on the scientific basis of clinical anesthetic practice and concentrates on content areas such as pharmacology, physiology, anatomy, anesthesia equipment and monitoring. The ABA has transitioned to a new assessment program that complements the Accreditation Council of Graduate Medical Education (ACGME) competency-based training and promotion.

3. In order to be promotion to successively higher levels within the anesthesia program trainees must at a minimum pass the ABA stage one (1) examination (BASIC Exam) an have completed their USMLE steps 1,2CL, CS and 3 per GME-19 USMLE policy. Promotion to the next training lever also shall be based on decisions by the program director, program faculty, as represented by the CCC, and are based on the trainee’s satisfactory completion of outlined curriculum and mastery of clinical activities appropriate to the trainee’s level. Goal and objectives for each PGY level of training and
subspecialty rotations are available via the department’s intranet in ADEL (Anesthesia Department Educational Library).

4. The trainee’s progress will be documented during semi-annual evaluation meetings (described above) and if warranted more frequently.

B. Notification

1. As delineated above, the program director must provide each trainee with a written evaluation at least twice a year. The trainees should be evaluated by the end of the sixth month of the appointment term.

2. If, prior to the end of seven months, but not later than February 28th of the calendar year, the program director concludes along with the recommendation of the clinical competency committee, that the trainee’s appointment should not be renewed for the following academic training year, the program director will notify the trainee in person and in writing that their appointment will not be renewed for the following academic year.

3. However, if the primary reasons(s) for non-renewal occurs within four months prior to the end of the academic contact, the program will provide as much written notice of the intent not to renew as the circumstance will reasonably allow. Such written notice must specify the reason(s) for non-renewal, and include whether any action or recommended action, if adopted will be reported to the Massachusetts Board of Registration in Medicine. The trainee who has received notice of non-renewal will be permitted to conclude the remainder of the academic year except in the event that that trainee performance warrants further action by the program. For further information, please see GME Policy-3 Evaluation and Promotion.

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Trainee\(^1\) = Intern/Resident