



Policy Title:	<b>Selection, Evaluation, Graded Responsibility, Promotion/Non-Promotion and Dismissal of Residents Policy</b>
Owner:	
Department:	Graduate Medical Education
Origination Date:	October 16, 1998
Last approved date:	February 17, 2023
Approved By:	Graduate Medical Education Committee

**I. Scope**

This policy was developed for SIU Medicine. SIU Medicine collectively applies to the SIU School of Medicine (SIU SOM), including the Federally Qualified Health Center (FQHC), and SIU HealthCare (SIU HC). These entities are collectively referred to as SIU in this document.

This document applies to SIU staff, faculty, trainees, agents, officers, directors, interns, volunteers, contractors, and any other individual or entity engaged in providing teaching, research and health care items and services at SIU. These individuals are collectively referred to as SIU personnel in this document.

**II. Definitions**

The term “resident” is inclusive of all trainees at SIU SOM, whether training in a residency or fellowship program. The term “program” is inclusive of all SIU residency or fellowship programs, whether accredited or non-accredited.

**III. Purpose**

The purpose of this document is to outline expectations regarding resident recruitment practices, evaluation of resident performance, and promotional consideration.

**IV. Procedure**

RECRUITMENT, ELIGIBILITY AND SELECTION

Programs must engage in recruitment practices that focus on mission-driven, ongoing, systematic recruitment and retention of a diverse and inclusive workforce of residents, faculty, and other members of their academic community. The School of Medicine will participate in the National Resident Matching Program as an Institution.

The selection of residents in each program shall be carried out by the Residency Program Director with the assistance of the teaching staff. Programs will select applicants who are eligible for appointment to accredited residency programs. (See *Policy on Resident Eligibility and Employment Authorization*)

Programs will select applicants on the basis of their preparedness, ability, aptitude, academic credentials, communication skills, and personal qualities such as motivation, integrity and coachability. Programs will not discriminate with regard to race, religion, national origin, citizenship, sex, age, disability, sexual orientation or other factors prohibited by law.

EVALUATION

Each residency program must demonstrate that it has an effective plan for assessing resident performance throughout the program and for utilizing the results to improve resident performance.

This plan should include:

1. The use of assessment methods that produce an accurate assessment of residents' competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice.
2. Input and guidance from the Clinical Competency Committee (CCC).
3. Assessment of residents' achievement of specialty-specific Milestones.
4. Mechanisms for providing regular and timely performance feedback to residents that includes at least:
  - Regular verbal and written Feedback;
  - Written semiannual evaluation that is communicated to each resident in a timely manner;
  - Maintenance of a record of evaluation for each resident that is accessible to the resident;
  - A process that uses the results of multiple assessment instruments and evaluators to achieve progressive improvements in residents' competence and performance, and to appropriately allow for the assumption of graded responsibility and authority. Appropriate sources of evaluation include faculty, patients, peers, self, and other professional staff.

With input from the CCC, the program director must provide a final evaluation for each resident who exits the training program early or completes the program. The evaluation must, for graduating residents, verify that the resident has demonstrated the knowledge, skills, and behaviors necessary to enter autonomous practice. The final evaluation must be shared with the resident on completion of the program and become part of the resident's permanent record maintained by the institution.

#### GRADED RESPONSIBILITY

The responsibility given to residents in patient care should depend upon each resident's knowledge, problem-solving ability, manual skills, experience, and the severity and complexity of each patient's needs. The privilege of progressive authority and responsibility, conditional autonomy, and a supervisory role in patient care delegated to each resident must be assigned by the program director and faculty members. The program director must evaluate each resident's abilities based on specific criteria. When available, evaluation should be guided by specific national standards.

#### PROMOTION / NON-PROMOTION

Each program must establish written policies describing the program requirements for promotion to the next level of training. The program director, with input from the program's CCC, will determine at least annually whether each resident has progressed satisfactorily to advance to the next level of training and/or demonstrated the skills necessary to supervise junior residents.

For all programs, the criteria for advancement is based upon the following broad parameters, all of which need to be judged as competent for each level of advancement. More detailed program-specific criteria and requirements for promotion will be delineated by individual programs.

PGY 1 to PGY 2:

1. Acceptable progress in specialty specific competencies and Milestones
2. Acceptable progress in the program goals and objectives and other program-specific criteria and requirements for promotion
3. Ability to meet the Work Hours and Additional Physical Requirements as outlined in *Appendix A of the Agreement with Physician*, with or without reasonable accommodations
4. Ability to fulfill essential role functions and competency requirements as outlined in *Attachment 1: Resident Essential Role Functions*, appropriate to level of training, with or without reasonable accommodations
5. Compliance with all contractual requirements
6. Ability to supervise/teach appropriate learners
7. Ability to act with limited autonomy

PGY 2 to PGY X:

1. Items 1-5 above
2. Ability to act with increasing autonomy

PGY X to Graduation:

1. Items 1-5 above
2. Ability to act autonomously

Program policies with respect to promotion/non-promotion to the subsequent year of training shall comply with all ACGME Institutional, Common and Program Requirements, and be in accordance with the *Academic Deficiency Policy*. The decision for promotion or non-promotion shall be made by the Residency Program Director with consultation from the CCC. A decision to withhold advancement or deny reappointment shall be taken only after documented counseling of the resident apprising them of the reason for such potential action, and documentation that the deficiencies have not been sufficiently corrected within a reasonable time. If a resident believes that they have been dealt with unfairly in the above process, redress may be sought through the *Due Process and Resident Complaint Policy*.

DISMISSAL

Dismissal, non-renewal of contract or non-promotion of a resident whose performance is unsatisfactory will be communicated in writing to the resident-in accordance with GMEC policies on academic deficiencies and corrective action. Appeals of dismissal actions shall be handled through the *Due Process and Resident Complaint Policy*.

**V. References**

**VI. Attachments**

*Resident Essential Role Functions*


**VII. Periodic Review**

**VIII. Reviewed by**

Graduate Medical Education Committee

**IX. Office of Responsibility**

Graduate Medical Education

	Attachment 1: <b>Resident Essential Role Functions</b>	
	Last Approval Date: <b>February 17, 2023</b>	Effective Date: <b>February 17, 2023</b>

The term “resident” is inclusive of all trainees at SIU School of Medicine, whether training in a residency or fellowship program. The position of resident involves a combination of supervised, progressively more complex and independent patient evaluation and/or management functions, formal educational, quality or patient safety and scholarly activities. Provision of patient care and other professional services provided by the resident is commensurate with the resident’s level of advancement and competence, under the general supervision of appropriately privileged attending teaching faculty. This document outlines basic resident role functions. Individual medical or surgical specialties may have additional competency performance standards.

### **Qualifications (Eligibility Criteria)**

The resident must have graduated from a recognized allopathic or osteopathic medical school, be able to obtain ECFMG certification in advance of training start date if an international medical graduate and completed pre-requisite GME training if applicable. All residents must provide proof of the legal right to work as required by federal law.

### **Essential Role Functions**

The resident is both a learner and a member of the healthcare team. Responsibilities (essential role functions) of a resident include:

- Satisfactory progress in training program as measured by program goals and objectives and milestones as applicable
- Meeting Technical Performance Standards
- Participation in safe, effective and compassionate patient care
- Development of an understanding of the ethical, socioeconomic, population health and medical/legal issues that affect health care and of how to apply high value measures in the provision of patient care
- Participation in institutional orientation, the educational activities of the training program, and other required education programs, within the institution or at participating sites
- Assumption of responsibility for teaching and supervising other residents and students and participation in other activities involving the clinical staff, as appropriate
- Participation in program or institutional committees to which the resident is appointed or invited
- Maintenance of certification (BLS, ACLS, PALS, ATLS, etc.) as required by employing hospital and enrolled training program
- Maintenance of the appropriate licensure and work authorization
- Accurate and timely documentation of cases and procedures as directed by the enrolled training program and mandated accreditation body
- Accurate and timely documentation of clinical and educational work hours
- Performance of duties in accordance with the established practices, procedures, and policies of training programs, clinical departments, SIU SOM, the resident’s employing hospital and all participating sites to which the resident is assigned
- Recognition of personal conditions or situations which may affect patient safety or progress in training, and communication of this to program leadership

## **Competency-Based Performance Standards**

To fulfill resident role functions, residents must demonstrate the ability to meet the following performance standards. These competency requirements may be achieved with or without reasonable accommodations.

### Patient Care and Procedural Skills

- Provide safe patient care under the supervision of faculty
- Gain competence and progressive autonomy, progressing from direct supervision to more indirect and oversight supervision as training progresses
- Understand and interpret complex healthcare information
- Synthesize information acquired in person and via remote technology
- Interpret causal connections and make accurate, fact-based conclusions based on available data and information
- Formulate a hypothesis, investigate the potential answers and outcomes, and reach appropriate and accurate conclusions
- Identify emergency situations and respond in a timely manner
- Meet applicable safety standards for the environment and follow infection control and universal precaution procedures

### Medical Knowledge

- Learn through a variety of modalities, including, but not limited to, providing patient care under the supervision of faculty, didactic instruction, simulation and other laboratory instruction, physical demonstrations, team and collaborative activities, individual study, preparation and presentation of reports, and use of technology, and demonstrate appropriate medical knowledge for level of training

### Practice Based Learning & Improvement

- Demonstrate capacity for self-reflection and life-long learning
- Set learning and improvement goals
- Demonstrate progress on educational milestones
- Incorporate formative feedback into daily practice

### Interpersonal and Communication Skills

- Demonstrate effective communication and collaboration in person and in writing
- Perceive, appropriately interpret, and respond to another's emotional state, including verbal and non-verbal communication
- Communicate publicly, including teaching and group presentations

### Professionalism

- Demonstrate independent prioritization of conflicting or simultaneous demands
- Perform or direct complex, varied or multiple tasks simultaneously
- Maintain confidentiality of information
- Work effectively within multidisciplinary and inter-professional teams
- Exercise good judgment
- Complete all responsibilities in a timely manner
- Adapt to changing environments and function in the face of uncertainties inherent in healthcare
- Demonstrate compassion, integrity, and concern for others
- Demonstrate appropriate self-regulation

- Work with colleagues and provide healthcare for all individuals in a respectful and effective manner regardless of gender identity, age, race, sexual orientation, religion, disability, or any other protected status
- Understand, and function within the legal and ethical aspects of professional practice
- Display ethical and moral behaviors commensurate with the role of a professional in all interactions with patients, faculty, staff, peers, learners and the public
- Document cases and procedures in an accurate and timely manner
- Document Clinical and Educational Work hours in an accurate and timely manner
- Recognize personal conditions or situations which may affect patient safety or progress in training, and communicate this to program leadership

#### Systems-based Practice

- Learn and comprehend processes and procedures
- Recognize safety hazards in the clinical environment, e.g., infection risk, needle sticks, and follow standard processes and procedures to mitigate risk
- Recognize errors or near misses and follow standard processes and procedures to report same
- Develop an understanding of the ethical, socioeconomic, population health and medical/legal issues that affect health care and of how to apply high value measures in the provision of patient care