PROGRAM EVALUATION AND FACULTY EVALUATION

Faculty and Program Evaluations

1. At least annually, the program must evaluate faculty performance as it relates to the educational program.
2. These evaluations should include a review of the faculty’s clinical teaching abilities, commitment to the educational program, clinical knowledge, professionalism and scholarly activities.
3. This evaluation must include at least annual written confidential evaluations by the fellows.

Procedure:

1. Fellows and faculty will have the opportunity to evaluate the program confidentially and in writing at least annually including clinical rotations, clinical supervision, clinical teaching and didactics.
2. Fellow evaluations are kept confidential and entered into New Innovations www.new-innov.com by the fellow.
   a. The CAP Faculty Annual Program Evaluation and the CAP Fellow Annual Program Evaluation is distributed to faculty and fellows annually at the end of the academic year prior to the annual PEC meeting.
   b. Seminar and lecture evaluations are sent out electronically at the end of the didactic day throughout the year to provide timely feedback on teaching and content.
   c. Peer evaluations of residents are completed annually each May.
   d. Self-evaluations are completed twice each year prior to the CCC meetings.
   e. Faculty supervision evaluations are sent out at the end of the academic year.
3. With the PEC, the program will use the results of fellows’ and faculty member’s assessments of the program together with other program evaluation results to improve the program.

Program Evaluation and Improvement

A. PROGRAM EVALUATION COMMITTEE

1. The program director must appoint the PEC.
2. The PEC must be composed of at least two program faculty members and at least one fellow.
3. The PEC must have a written description of its responsibilities.
4. The CAP program, through the PEC, must document formal, systematic evaluation of the curriculum at least annually, and is responsible for rendering a written, annual program evaluation.
5. The committee should participate actively in:
   a. Planning, developing, implementing, and evaluating educational activities of the program.
   b. Reviewing and making recommendations for revision of competency-based curriculum goals and objectives.
   c. Addressing areas of non-compliance with ACGME standards.
   d. Reviewing the program annually using evaluations of faculty, fellows, and others.
6. The program must monitor and track:
   a. Fellow performance.
   b. Faculty development.
c. Graduate performance, including performance of program graduates on the certification exam
   i. At least 70% of program graduates from the preceding five years should have taken the certifying examination
   ii. At least 50% of the program’s graduates from the preceding five years who take the ABPN certifying examination must pass on the first attempt
d. Program quality
e. Progress on the previous year’s action plan(s)

7. The PEC must prepare a written plan of action to document initiatives to improve performance in one or more of the areas in #5 above, and will delineate how they will be measured and monitored.

8. The action plan from the PEC will be reviewed and approved by the teaching faculty and documented in meeting minutes.

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