

EVALUATION POLICY FOR THE PULMONARY AND CRITICAL CARE MEDICINE SECTION FELLOWS

Part A Evaluation of Fellows

1. MONTHLY CLINICAL EVALUATIONS:

Each fellow will be evaluated by all supervising faculty who interact with the fellow at least one half day per week for each week of the rotation. The supervising physician should discuss the fellow's performance at the mid point of the attendings rotation and complete a written evaluation at the end of that rotation. This written evaluation should be discussed with the fellow and the fellow should sign it, acknowledging that the feedback has been received. This feedback may occur in person or by phone but it should be signed by the fellow and recorded in the fellow database by the Fellowship program coordinator.

2. ASSOCIATE RATINGS:

Other members of the health care team, which may include students, residents, nurses or physician assistants, will evaluate each fellow anonymously. Fellows will be evaluated on the following competencies: patient care, interpersonal skills and communication, professionalism, practice-based learning and improvement, and systems-based practice. These will be evaluation using a 5-pt Likert scale. These evaluations will be entered into New Innovations.

3. LONGITUDINAL CLINIC EVALUATION

The faculty supervisor for each fellow clinic will complete a quarterly evaluation similar to the monthly evaluation described above for each of the fellows in the fellow clinic supervised by them. This evaluation will cover a three month time period and should be reviewed with the fellow prior to submitting the evaluation to the program coordinator.

4. RESEARCH EVALUATION:

The research supervisor should fill out an evaluation on fellows involved in research at least semi-annually. This evaluation form may be written or electronic but the Program Coordinator should record it. Unsatisfactory progress should be discussed directly with the fellow and noted on the evaluation. It is expected that each fellow involved in research should have at least one abstract by the completion of his or her research experience and one peer reviewed paper by the completion of their fellowship.

5. CLINICAL EVALUATION EXERCISE (CEX)

Each fellow will have at least one clinical evaluation exercise performed annually by a supervising physician. The subject of the evaluation exercise should be a "new" patient to the fellow and the supervising physician should complete the evaluation form and provide feedback to the fellow shortly after completion. This clinical evaluation exercise should be reviewed with the fellow and acknowledged by signature and recorded by the Fellowship program coordinator. These may occur during any rotation where the fellow provides patient care.

6. SEMI-ANNUAL EVALUATIONS

A semi-annual evaluation will be completed on each matriculated fellow with at least 6-months experience in the program. This evaluation will be performed by the Program Director and will be based upon the clinical monthly evaluations, the clinical evaluation exercise (CEX), and/or any research evaluations that are available for the time frame covered by the semi-annual evaluation. Any fellow with an unsatisfactory performance or marks suggesting need for improvement will have a plan instituted to achieve improvement, designed by the Program Director in consultation with the fellow. Performance reviews will be established and failure to improve or to comply with the improvement program will result in a review by the Pulmonary and Critical Care Medicine Faculty. A vote of the faculty will be taken to determine if the fellow should be placed on probation at that time. Failure to improve by the end of the subsequent 6-month period will subject the fellow to a faculty vote for dismissal from the program.

7. REVIEW OF EVALUATIONS

All evaluations of the fellows will remain in their file and may be accessed on request to the fellowship program coordinator. The fellow may not remove their file from the program coordinator's office.

8. SUMMATIVE EVALUATION

The program director must provide a final evaluation for each fellow who completes the program. The evaluation must include a review of the fellow's performance during the final period of education and should verify that the fellow has demonstrated sufficient professional ability to practice competently and independently. The final evaluation must be part of the fellow's permanent record maintained by the institution.

Part B

Fellow Evaluation of Faculty and Rotation

1. ROTATIONS:

Each fellow will complete an evaluation at the completion of each rotation and should submit this evaluation to the Fellowship program coordinator. These should be completed in a timely manner i.e., within 1-month of the completion of the rotation.

2. EVALUATION OF SUPERVISING PHYSICIANS:

The fellow's will complete an evaluation of their supervising physician for each rotation and will submit this directly to the Graduate Medical Education office. The GME office will forward a transcript of these evaluations to the Section Chief or designee.

3. TRAINEE'S RESEARCH SELF ASSESSMENT

This series of forms is part of self-assessment module designed to be useful to the fellow in gauging their research competency and measuring progress. These include:

A. INITIAL SELF-ASSESSMENT

This evaluation helps the fellow formulate a brief description of their research and outline responsibilities and goals for the up-coming research year.

B. SEMI-ANNUAL TRAINEE'S SELF ASSESSMENT OF RESEARCH TRAINING AND ENVIRONMENT

This semi-annual evaluation of their research experience is due at the mid-point of the research year. An assessment and feedback on their research training and environment are essential and should be provided to the fellowship program director.

C. FINAL TRAINEE'S SELF ASSESSMENT OF RESEARCH TRAINING AND ENVIRONMENT

This final evaluation of their research experience is due at the completion of their research year. A final assessment and feedback on their research training and environment are essential and should be provided to the fellowship program director.

4. INCOMPLETE EVALUATIONS

No leave will be approved for any fellow who has incomplete evaluations at the time a request is made. All rotation and supervising physician evaluations should be completed before leave is approved by the Program Director.