Vascular Surgery Residency Program
Resident Evaluation and Promotion Policy

Purpose

Graduates of the Vascular Surgery Residency Program and Loma Linda University Medical Center must demonstrate competence in the knowledge, skills, and core competencies necessary to practice independently in a manner that is consistent with the American Board of Surgery. The program curriculum is laid out in a manner to provide residents with a graduated training experience. Evaluation of residents is necessary and key in order to determine whether a resident has met the criteria for advancement. All evaluations (except for comprehensive evaluation, in-training exam, operative experience log, and self-assessment) will be completed utilizing the New Innovations System. The purpose of this policy is to provide specific guidelines for the evaluation, promotion, or remediation of residents.

Components of the Formative Evaluation System

Each resident will be evaluated as detailed below. All resident evaluation methods with the exception of the Comprehensive Evaluation, In-Training Examination, and Operative Experience Log will be competency based.

1. Quarterly Evaluations

At the completion of each quarter, the attending physicians will evaluate each resident’s performance. The resident performance will be evaluated across each of the six ACGME Core Competencies and technical skills. Attendings are expected to provide comments regarding the resident’s performance and suggestions for improvement if necessary. To be promoted to the next scheduled rotation, the resident must achieve a satisfactory rating in all areas. Residents who do not receive a satisfactory rating in all areas will be placed on a remediation plan as determined by the Program Director and attendings. If the resident fails to follow the remediation plan or fails to show improvement, the duration of training may be extended, the resident may not be promoted, or the resident may not be allowed to continue in or complete the training program.
2. **In-Training Examination**

The In-Training Examination is given in February of each year of the residency. Satisfactory performance is expected. Satisfactory performance is defined as a score that places the resident above the 25th percentile of their year of training as compared to national data. Residents who fall into the bottom quartile of performance will be required to follow an individualized plan of remediation as determined by the Program Director with input from the attendings. The resident’s knowledge vs. test taking abilities will be assessed and taken into account when formulating a remediation plan. If the resident fails to follow the remediation plan or fails to show improvement on the next In-Training Exam (i.e. failure to achieve score >25th percentile), the duration of training may be extended, the resident may not be promoted, or the resident may not be allowed to continue in or complete the training program.

3. **Operative Experience Logs**

Each resident is expected to maintain an accurate operative experience log. The Program Director and Program Coordinator will review each resident’s log on a weekly basis to monitor accuracy and resident progression in meeting the index case requirements for the Vascular Surgery Residency. Residents who fail to maintain an accurate and current operative log will be suspended from clinical activity until the operative log has been updated accordingly. The operative experience log will be one of the evaluation factors during the resident semi-annual evaluation. The Program Director will counsel residents who show difficulty in meeting the necessary experience requirements and develop a remediation plan as necessary. If the resident fails to follow the remediation plan or fails to obtain the required operative experience, the duration of training may be extended, the resident may not be promoted, or the resident may not be allowed to continue in or complete the training program.

4. **Semi-Annual Comprehensive Evaluation**

The resident will be evaluated on a semi-annual basis primarily in the areas of professionalism and interpersonal and communication skills utilizing a multi-rater system comprised of staff from the following areas: nursing, perfusion, patients, respiratory, and other ancillary support staff. The resident is expected to receive an overall average satisfactory rating in all areas. Residents who do not receive a satisfactory rating in all areas will be placed on a remediation plan as determined by the Program Director and attendings. If the resident fails to follow the remediation plan or fails to show improvement, the duration of training may be extended, the resident may not be promoted, or the resident may not be allowed to continue in or complete the training program.

5. **Procedural Evaluation**

Attendings will evaluate residents at the end of a procedure regarding their preoperative, intraoperative, and postoperative performance. Residents will then be given immediate
feedback and suggestions for improvement. The resident is expected to show improvement in performance for procedures performed and receive overall satisfactory scores by the end of each rotation. If the resident fails to exhibit appropriate progression in skill and performance, he/she may be placed on a remediation plan as specified by the Program Director and attendings. If the resident fails to follow the remediation plan or fails to show improvement, the duration of training may be extended, the resident may not be promoted, or the resident may not be allowed to continue in or complete the training program.

6. **Self-Assessment**

On a semi-annual basis, residents are expected to complete a written self-assessment on their performance over the past six months in the following areas: the ACGME core competencies, identification of strengths, identification of areas for improvement, identification of learning objectives, and overall comments. The completed self-assessment will be reviewed with the Program Director.

7. **Semi-Annual Evaluation**

Attendings will evaluate each resident on a semi-annual basis. Residents are expected to receive satisfactory scores in all areas. The resident is expected to receive an overall average satisfactory rating in all areas. Residents who do not receive a satisfactory rating in all areas will be placed on a remediation plan as determined by the Program Director and attendings. If the resident fails to follow the remediation plan or fails to show improvement, the duration of training may be extended, the resident may not be promoted, or the resident may not be allowed to continue in or complete the training program.

**Formal Review of Resident Performance and Promotion**

The Program Director will formally meet with each resident every six months to review and discuss performance and progress. The results of all evaluations completed in within the past six months plus the resident’s operative experience log, comprehensive evaluation, resident self-assessment will be reviewed. The resident is expected to receive an overall average satisfactory rating in all areas. Residents who do not receive a satisfactory rating in all areas will be placed on a remediation plan as determined by the Program Director and attendings. If the resident fails to follow the remediation plan or fails to show improvement, the duration of training may be extended, the resident may not be promoted, or the resident may not be allowed to continue in or complete the training program. In addition, on an annual basis, the GME office will provide each resident with a written evaluation.

At the conclusion of the first year of training the resident will be advanced to the second year if all evaluations are satisfactory and the resident has no deficits which require remediation. At the completion of the residency training program, the Program Director will provide each graduating resident with a summative evaluation. Resident who have completed all requirements of training including satisfactorily passing all evaluations, and rotations will be recommended to the Board.
Disciplinary Action

If the Program Director in conjunction with the attendings decides that a resident’s performance is unsatisfactory and corrective action must be taken. The following institutional Operating Policies will be followed:

1. GMEC – 04 Corrective Action
2. GMEC – 09 Resident Promotion, Dismissal, and Graduation
3. GMEC – 20 House Staff Grievance Policy and Procedure
4. GMEC – 29 Remediation Policy