



Department
Radiation

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Evaluation and Promotion

Training Program Policies ? Evaluation and Promotion

The Department of Radiation Oncology has procedures in writing that provide for regular, timely, and confidential evaluation of residents, clinical fellows, teaching faculty, rotations, and the Radiation Oncology educational program.

Residency Related Evaluations

Residents are involved in a number of evaluations throughout the year; not all of which are regarding their skill level. Evaluations of attending physicians, residents, and the program are required by the residency program's governing board, the American Board of Radiology (ABR), and its accrediting body, the Accreditation Council for Graduate Medical Education (ACGME). The purpose of these evaluations is to gauge the teaching abilities of attending physicians, the fitness of the program, and the progress & performance of the residents

Evaluation of the Teaching Staff

Residents will receive an evaluation form via E*Value for each attending physician they work with. This evaluation is to be completed at the end of each rotation. All data collected in E*Value is only provided in aggregated form in which a minimum of 6 evaluations must be completed about a teaching faculty before a report may be accessed. Each trainee evaluation of faculty has a field for confidential comments that is provided only to the program director.

Since the program director is also a teaching faculty in the program, the program director cannot see the un-aggregated evaluations completed about her by the trainees. The department chair reviews these evaluations of the program director in a timely manner and ensures the program director only sees her evaluations in aggregate to protect trainee confidentiality.

The Program Evaluation and Improvement Committee evaluates faculty performance annually as it relates to the educational program. These evaluations include a review of the faculty's clinical teaching abilities, commitment to the educational program, clinical knowledge,

professionalism, and scholarly activities. These evaluations include composite written confidential evaluations by the residents.

Evaluation of Training Program and Improvement

Residents will receive an evaluation via E*Value to evaluate the Residency Training Program biannually. It is important for residents to be extremely forthright with their opinions of the residency program so the program director can detect any problematic patterns. The Program Evaluation and Improvement Committee meets biannually to review the feedback from the program evaluations. The Program Evaluation and Improvement Committee also evaluates the curriculum annually and monitors and tracks resident performance, faculty development, graduate performance, including performance of program graduates on the certification examination and program quality.

Faculty will receive an evaluation via E*Value to evaluate the Residency Training Program annually. It is important for faculty to be extremely forthright with their opinions of the residency program so the program director and the Program Evaluation and Improvement Committee can detect any problematic patterns. The Program Evaluation and Improvement Committee meets biannually to review the feedback from the program evaluations.

The program uses the results of trainee evaluations to improve the program. If deficiencies are found, the program prepares a written plan of action to document initiatives to improve performance of the program. The action plan is then reviewed and approved by the teaching faculty and documented in meeting minutes.

The program director and Program Evaluation and Improvement Committee monitor and track trainee performance, faculty development, graduate performance, including performance of program graduates on the certification examination, and program quality. These are documented in the Program Evaluation and Improvement Committee meeting minutes biannually.

Evaluation of Residents

Residents are evaluated by attending physicians after each rotation via E*Value. Attending physicians are asked to complete these evaluations in a timely manner. Evaluations are accessible to trainees at all times by logging into the E*Value system. Faculty members are named in their evaluations of trainees. If a resident or clinical fellow disagrees with statements in a written evaluation, the trainee has a right to submit a written response. Multiple evaluators evaluate each the residents including dosimetry staff, peers, nurses and other health care and professional staff. Evaluations of residents and clinical fellows provide objective assessments of competence in the 6 ACGME competencies: patient care; medical knowledge; professionalism; interpersonal and communication skills; practice-based learning and improvement; and systems-based practice.

The program director reviews all evaluations of trainees on a regular basis. During the training program, evaluation results are personally presented to each trainee by the program director at minimum once every six months, during her biannual individual meetings with each resident, in compliance with ACGME program requirements.

The program documents progressive resident and clinical fellow performance improvement appropriate to educational level. For each rotation, the attending documents achievement of the Goals and Objectives for the appropriate training level of that particular resident.

Semiannual Evaluations of Residents

The program director meets with residents twice a year to evaluate their performance and provide feedback.

Summative Evaluation of Residents and Clinical Fellows

Upon completion of each trainees residency, the program director uses E*Value to provide a summative evaluation for each resident. This becomes part of the resident?s permanent record maintained by the institution, and is accessible for review by the resident in accordance with institutional policy. The evaluation documents the resident?s performance during the final period of education, and verifies that the resident has demonstrated sufficient competence to enter practice without direct supervision.

Promotion

Resident appointments are for a one-year period. These appointments are normally renewed annually. Due to the increasing level of responsibilities and increasing complexity of clinical care over the course of the Residents? training, satisfactory completion of prior academic year(s) or rotation(s) does not ensure satisfactory proficiency in subsequent years or rotations. A resident may have his/her appointment not renewed at any time there is a demonstrated failure to meet programmatic standards.

Yearly advancement within the training program is contingent on evidence of satisfactory professional growth, including the demonstrated ability to assume increasing responsibility for patient care. The program director will discuss evaluations with each resident on an individual at least twice a year. Residents will receive a composite report of their evaluations for any given 6-month period. Residents are also evaluated by the American College of Radiology (ACR) once per year in the form of a written test called the Annual In-Service Exam. The same test goes out to all three levels of residents sitting for it. Studying is not necessary as the purpose of this test is designed to determine the level at which each resident stands in relation to other residents across the country as well as assist the program director in assessing the training program's standing. Residents have access to their evaluations at any time.

If, prior to the end of seven months, but not later than February 28 of the calendar year, the chair concludes that the trainee?s appointment should not be renewed for the following year, the chair will notify the trainee that his/her appointment will not be renewed for the following academic year. The trainee will be permitted to conclude the remainder of the academic year unless additional academic action is taken.

Anonymity and Confidentiality

The UCSF Radiation Oncology training program uses E*Value to distribute and analyze evaluation data. The program director and program coordinator are responsible for the set-up, monitoring, and maintenance of our evaluations. The Office of Graduate Medical Education (OGME) provides assistance to the Radiation Oncology program in its use of E*Value to ensure compliance with this policy and maintenance of confidentiality of evaluations.

E*Value, in addition to automation of the evaluation process, data collection, and advanced reporting, provides anonymity tools to guarantee confidentiality. The anonymity settings for a program may only be adjusted by OGME. All changes to anonymity are carefully considered and documented.

Ability to view completed evaluations in E*Value is determined by role assignment in the system. The Radiation Oncology program only allows the program director and a program

administrator to view all evaluations. The Radiation Oncology program strictly limits who has access to evaluation data. The Radiation Oncology program director does not have this level of access to evaluations completed by trainees about her as a teaching faculty. This access to program director evaluations should only be granted to the department chair and the program coordinator.

To ensure trainee confidentiality and encourage honest feedback, all evaluations by trainees are suppressed until a minimum of 6 evaluations, regardless of which evaluation system is used, are completed and submitted about an individual faculty, rotation, program, etc. Therefore, residents and clinical fellows must complete evaluations in a timely manner to ensure adequate feedback for program improvement.

To provide trainees and teaching faculty the opportunity to give instant feedback, the Radiation Oncology program in E*Value is set-up to allow ?on the fly? evaluations through praise and concern cards. These comments are forwarded to the program director only.

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