

Attachment: Forms Used for Faculty and Program Evaluation

Faculty Evaluation Process
Departmental

Faculty: _____

Date: _____

Evaluator: _____

Please rate the program faculty member in the following areas.

Unsatisfactory = Several behaviors performed inadequately or missed (ratings 1, 2, or 3)

Satisfactory = Most behaviors performed acceptably (ratings 4, 5, or 6)

Superior = All behaviors performed very well (ratings 7, 8, or 9)

	UNSATISFACTORY			SATISFACTORY			SUPERIOR			NA
Interest in teaching	1	2	3	4	5	6	7	8	9	NA
Ability to teach surgical technique	1	2	3	4	5	6	7	8	9	NA
Ability to teach research technique	1	2	3	4	5	6	7	8	9	NA
Commitment to the educational program	1	2	3	4	5	6	7	8	9	NA
Ability to motivate	1	2	3	4	5	6	7	8	9	NA
Availability	1	2	3	4	5	6	7	8	9	NA
Approachability	1	2	3	4	5	6	7	8	9	NA
Receptiveness to questions	1	2	3	4	5	6	7	8	9	NA
Clinical knowledge	1	2	3	4	5	6	7	8	9	NA
Scholarly activities and research										

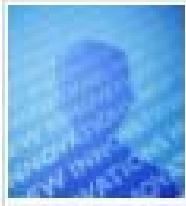
1 2 3 4 5 6 7 8 9 NA

Overall value to the residency program

1 2 3 4 5 6 7 8 9 NA

Comments:

Resident Evaluation of Faculty on Rotation



[Subject Name]
[Subject Status]
[Evaluation Dates]
[Subject Rotation]

Evaluator
[Evaluator Name] [Evaluator Status]

Could find him or her when needed

Yes

No

Provided useful information and depth of knowledge not misinformation; gave more than textbook responses

Yes

No

Was willing to teach

Yes

No

Was able to consult with a patient without interfering with the resident patient relationship

Yes

No

Showed empathy for me; cared for me and others as people; interact openly

Yes

No

Ran a well structured practice and rotation

Yes

No

In teaching, used relevant information for cases at hand

Yes

No

Close Window

Form 8 - Program Evaluations (Resident) 04/29/2014

[Program Name]

[Evaluation Dates]

Please offer your feedback on our residency training program. Results of this survey are used to assess, track and make improvements in the program. Please note: All individual responses will remain anonymous and confidential. Thank you for your participation.

-
- 1) Do you receive sufficient teaching time from your faculty?
YES NO N/A or Not Sure
 - 2) Is a faculty supervisor always available to you within a reasonable amount of time during patient care activities: clinic, hospital, long term care facility, and on-call?
YES NO N/A or Not Sure
 - 3) Does the quality of teaching and supervision from faculty meet your expectation?
YES NO N/A or Not Sure
 - 4) Do you have available resources to assist you with the use of the technology (i.e. PDA, EMR, computers, software.)?
YES NO N/A or Not Sure
 - 5) Do you have the opportunity to confidentially evaluate your faculty at least once a year?
YES NO N/A or Not Sure
 - 6) Do you have an 80-hour work week (or less) averaged over a 4 week period?
YES NO N/A or Not Sure
 - 7) Do you have an assigned faculty mentor to communicate with on a regular basis?
YES NO N/A or Not Sure
 - 8) Do you receive competency based goals and objectives for each rotation?
YES NO N/A or Not Sure
 - 9) Does your continuity patient panel include each of the following: children, older adults, male and female, and OB patients?
YES NO N/A or Not Sure
 - 10) Do you receive feedback on your performance after each rotation?
YES NO N/A or Not Sure
 - 11) Do you receive formal evaluation summary of your educational progress at least twice a year?
YES NO N/A or Not Sure

Form 8 - Program Evaluation 04/29/2014
[Program Name]
[Evaluation Dates]

Please select the answer that best tells us how much you agree or disagree with each statement:

-
- 1) This program is well organized to permit adequate resident training and education.
YES NO N/A or Not Sure
 - 2) Residents have the opportunity to actively manage their own patients.
YES NO N/A or Not Sure
 - 3) Residents have an adequate mix of continuity/chronic disease and acute visits.
YES NO N/A or Not Sure
 - 4) Residents receive adequate supervision.
YES NO N/A or Not Sure
 - 5) The rapport between resident and faculty is good.
YES NO N/A or Not Sure
 - 6) I receive adequate feedback on my performance as a faculty member.
YES NO N/A or Not Sure
 - 7) I am satisfied with my role and responsibilities as a faculty member.
YES NO N/A or Not Sure
 - 8) The faculty development opportunities are adequate.
YES NO N/A or Not Sure
 - 9) There are adequate and sufficient resources (space, staff, equipment, etc.) to support the education requirements of the training program.
YES NO N/A or Not Sure
 - 10) Do you feel residents are within duty hours? If not, please explain.
Yes No

Attachment: Program Specific Evaluation Tools

360° evaluation (semiannual):



[Subject Name][Credentials]
[Subject Status]
[Subject Employer]
[Subject Program]
[Evaluation Dates]

Evaluator
[Evaluator Name][Credentials]
[Evaluator Status]
[Evaluator Employer]
[Evaluator Program]

1) ... is honest and trustworthy

never rarely (25% of the time) sometimes (50% of the time) most of the time (75% majority of the time (> 90% of the time))

2) ... is reliable and dependable

never rarely (25% of the time) sometimes (50% of the time) most of the time (75% majority of the time (> 90% of the time))

3) ... accepts responsibility for his/her actions

never rarely (25% of the time) sometimes (50% of the time) most of the time (75% majority of the time (> 90% of the time))

4) ... works effectively with others in a respectful manner

never rarely (25% of the time) sometimes (50% of the time) most of the time (75% majority of the time (> 90% of the time))

5) ... an advocate for the patient

never rarely (25% of the time) sometimes (50% of the time) most of the time (75% majority of the time (> 90% of the time))

6) ... fosters an atmosphere of teamwork and collegiality

never rarely (25% of the time) sometimes (50% of the time) most of the time (75% majority of the time (> 90% of the time))

7) ... handles stress and difficult situations in an appropriate manner

End of Rotation Evaluation (1):



[Subject Name][Credentials]
 [Subject Status]
 [Subject Employer]
 [Subject Program]
 [Evaluation Dates]
 [Subject Rotation]

Evaluator
 [Evaluator Name][Credentials]
 [Evaluator Status]
 [Evaluator Employer]
 [Evaluator Program]

In evaluating the resident's performance, use as your standard the level of knowledge, skills and attitudes expected from the clearly satisfactory resident at this stage of training. For any component that needs attention or is rated as 4 or less, please provide specific comments and recommendations. Be specific as possible, including reports of critical incidents and/or outstanding performance. Global adjectives or remarks, such as "good resident," do not provide meaningful feedback to the resident.

Patient Care/Clinical Skills

- 1) 1 = Incomplete/inaccurate medical interviews and physical exams; incomplete treatment plans; fails to analyze clinical data/scientific evidence and patient preference when making medical decision, poor judgment.
- 9 = Superb, accurate, comprehensive, medical interviews and physical exams; complete/appropriate treatment plans based on synthesis of clinical data, available scientific evidence and patient preference; good judgment.

Unsatisfactory Satisfactory Excellent Insufficient contact to judge
 1 2 3 4 5 6 7 8 9

Comments

Remaining Characters: 5,000

Patient Care/Surgical Skills

- 2) 1 = Tentative, lacks confidence; inappropriately over estimates surgical ability; clumsy; requires constant supervision/direction; cannot manage post-operative complications
- 9 = Appropriately confident and self-assured, few wasted steps; needs limited supervision/direction; adapts appropriately to intraoperative conditions; capable of managing post-operative complications.

Unsatisfactory Satisfactory Excellent Insufficient contact to judge
 1 2 3 4 5 6 7 8 9

End of Rotation Evaluation (2):

Comments

Remaining Characters: 5,000

Medical Knowledge

- 3) 1 = Limited knowledge of basic and clinical sciences; minimal interest in learning; does not understand complex relationship, mechanisms of disease.

9 = Exceptional knowledge of basic and clinical sciences; highly resourceful development of knowledge; comprehensive understanding of complex relationship, mechanism of disease.

Unsatisfactory			Satisfactory			Excellent			Insufficient contact to judge
1	2	3	4	5	6	7	8	9	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Remaining Characters: 5,000

Interpersonal and Communication Skills

- 4) 1 = Does not demonstrate ability to build relationships with patients, families and colleagues through listening, narrative or nonverbal skills; does not provide education or counseling to patients, families or colleagues; poor oral presentations, written records inaccurate or incomplete.

9 = Demonstrates excellent relationship building with patients, families and colleagues through listening, narrative and nonverbal skills, excellent education and counseling of patients, families and colleagues; always "interpersonally" engaged excellent oral presentation; records complete and accurate.

Unsatisfactory			Satisfactory			Excellent			Insufficient contact to judge
1	2	3	4	5	6	7	8	9	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Remaining Characters: 5,000

Professionalism

- 5) 1 = Lacks respect, compassion, integrity, honesty; disregards need for self-assessment; lacks insight; fails to acknowledge errors; does not consider needs of patients, families, colleagues; does not display responsible behavior; is unreliable.

9 = Always demonstrates respect, compassion, integrity, honesty; teaches/role models responsible behavior; total commitment to self-assessment; willingly acknowledges errors; always considers needs of patients, families, colleagues; very reliable.

Unsatisfactory			Satisfactory			Excellent			Insufficient contact to judge
1	2	3	4	5	6	7	8	9	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

End of Rotation (3):



Comments

Remaining Characters: 5,000

Practice-Based Learning & Improvement

6) 1 = Never analyzes effectiveness of own practice; does not use information technology to enhance patient care or pursue self improvement; poor understanding and application of principals of evidence-based medicine

9 = Constantly evaluates effectiveness of won practice; effectively use technology to manage information for patient care and self improvement; excellent understanding and application of principals of evidence-based medicine.

Unsatisfactory			Satisfactory			Excellent			Insufficient contact to judge
1	2	3	4	5	6	7	8	9	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Remaining Characters: 5,000

7) 1 = Fails to educate students and other health care professionals; avoids teaching responsibilities.

9 = Excellent educator of students and health professionals; seeks out opportunities to teach.

Unsatisfactory			Satisfactory			Excellent			Insufficient contact to judge
1	2	3	4	5	6	7	8	9	
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Remaining Characters: 5,000

Systems-Based Practice

8) 1 = Unable to access/mobilize outside resources; actively resists efforts to improve system of care; does not use systematic approaches to reduce error and improve patient care; ineffective in health team based activities.

9 = Effectively accesses/utilizes outside resources; effectively uses systematic approaches to reduce errors and improve patient care; enthusiastically assists in developing systems; improvement; effective member of health team based activities.

Unsatisfactory			Satisfactory			Excellent			Insufficient contact to judge
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End of Rotation (4):

Comments

Remaining Characters: 5,000

g) Any additional comments please add below.

Comments

Remaining Characters: 5,000

Overall Comments:

Remaining Characters: 5,000

Subcompetency questions are generated based on the resident's rotation.

[Choose a rotation](#)

Attachment: Semiannual and Summative Evaluations

Practice Domain	Competency	Critical Deficiencies	LEVEL 1		LEVEL 2		LEVEL 3		LEVEL 4	
Care For Diseases and Conditions (CDC)	PATIENT CARE (PC1)	This resident is not able to perform an efficient and accurate initial history and physical for patients admitted to the hospital.	This resident performs a focused, efficient, and accurate initial history and physical of a full spectrum of patients admitted to the hospital, including critically-ill patients.		This resident accurately diagnoses <i>many</i> "broad" <u>surgical conditions</u> in the SCORE curriculum and initiates appropriate management for <i>some</i> common, "broad" conditions. This resident can develop a diagnostic plan and implement initial care for patients seen in the Emergency Department (ED).		This resident accurately diagnoses <i>most</i> "broad" conditions in the SCORE curriculum and <i>some</i> "focused" conditions and initiates appropriate management for <i>most</i> "broad" surgical conditions independently.		This resident can lead a team that cares for patients with common and complex conditions and delegates appropriate clinical tasks to other health care team members. This resident recognizes atypical presentations of a large number of conditions.	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:	Not Yet Assessable							
Care For Diseases and Conditions (CDC)	PATIENT CARE (PC2)	This resident is unable to recognize or manage common post-operative problems such as fever, hypotension, hypoxia, confusion, and oliguria.	This resident recognizes and manages common post-operative problems such as fever, hypotension, hypoxia, confusion, and oliguria with the assistance of senior residents or staff members who are physically present.		This resident recognizes and manages common post-operative problems such as fever, hypotension, hypoxia, confusion, and oliguria with the assistance of senior residents or staff members who are available for consultation, but not physically present.		This resident recognizes and manages complex post-operative problems such as sepsis, systemic inflammatory response syndrome, and multiple system organ failure independently.		This resident can lead a team and provide supervision in the evaluation and management of complex post-operative problems such as sepsis, systemic inflammatory response syndrome, and multiple system organ failure.	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:	Not Yet Assessable							

Yet Assessable <input type="checkbox"/>						
Domain Practice	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
Performance of Operations and Procedures (POP)	PATIENT CARE (PC3)	This resident lacks basic surgical skills such as airway management, knot tying, simple suturing, suture removal, use of Doppler ultrasound, administration of local anesthetic, universal precautions and aseptic technique and is unable to reliably perform basic procedures, including venipuncture, arterial puncture, incision and drainage, minor skin, and excisions placement of an IV, nasogastric tube, or urinary catheter.	This resident has basic surgical skills such as airway management, knot tying, simple suturing, suture removal, use of Doppler ultrasound, administration of local anesthetic, universal precautions, and aseptic technique, and is able to reliably perform basic procedures, including venipuncture, arterial puncture incision and drainage, minor skin excisions and placement of an IV, nasogastric tube, or urinary catheter. This resident can perform basic operative steps in "essential- common" operations/procedures of the SCORE curriculum.	This resident has respect for tissue, and is developing skill in instrument handling. This resident moves through portions of common operations without coaching and makes straightforward intra-operative decisions. This resident performs <i>some</i> of the "essential" operations in the SCORE curriculum with minimal assistance.	This resident demonstrates proficiency in the handling of most instruments and exhibits efficiency of motion during procedures. This resident moves through the steps of <i>most</i> operations without much coaching and is making intra-operative decisions. This resident performs <i>many</i> of the "essential" operations and is beginning to gain experience in the "complex" operations.	This resident demonstrates proficiency in use of instruments and equipment required for "essential" operations, guides the conduct of most operations and makes independent intra-operative decisions. This resident can perform <i>all</i> of the "essential" operations and has significant experience in the "complex" operations. This resident can effectively guide other residents in "essential-common" operations.
		Comments:				Not Yet Assessable <input type="checkbox"/>

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4		
Care For Diseases and Conditions (CDC)	MEDICAL KNOWLEDGE (MK1)	This resident does not have basic knowledge about common surgical conditions to which a medical student would be exposed in clerkship.	This resident has a basic understanding of the symptoms, signs, and treatments of the <u>"broad" diseases</u> in the SCORE curriculum and has basic knowledge about common surgical conditions to which a medical student would be exposed in clerkship.	This resident has basic knowledge about <i>many</i> of the "broad" diseases in the SCORE curriculum and can make a diagnosis and recommend appropriate initial management. This resident can recognize variation in the presentation of common surgical conditions.	This resident has significant knowledge about <i>many</i> "broad" diseases in the SCORE curriculum and a basic knowledge of the "focused" diseases in the SCORE curriculum, and can make a diagnosis and initiate appropriate initial management.	This resident has a comprehensive knowledge of the varying patterns of presentation and alternative and adjuvant treatments for "broad" diseases in the SCORE curriculum and can make the diagnosis and provide initial care for the "focused" diseases in the SCORE curriculum.		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Comments:						Not Yet Assessable	
Performance of Operations and Procedures (POP)	MEDICAL KNOWLEDGE (MK2)	This resident does not have basic knowledge about the common "essential" operations to which a medical student would be exposed in clerkship.	This resident has a basic knowledge of the <u>"essential-common" surgical operations</u> in the SCORE curriculum to which a medical student would be exposed in clerkship.	This resident has basic knowledge of the operative steps, peri-operative care, and post-operative complications for <i>many</i> of the "essential" operations in the SCORE curriculum.	This resident has a significant knowledge of the operative steps, peri-operative care, and post-operative complications for <i>most</i> of the "essential" operations in the SCORE curriculum and a basic knowledge of some of the "complex" operations.	This resident has a comprehensive level of knowledge of the operative steps, peri-operative care, and post-operative complications for the "essential" operations in the SCORE curriculum and a basic knowledge of many of the "complex" operations.		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Comments:						Not Yet Assessable	

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4						
Coordination of Care (CC)	SYSTEMS-BASED PRACTICE (SBP1)	This resident does not have a basic understanding of the resources available for coordinating patient care, including social workers, visiting nurses, and physical and occupational therapists.	This resident has a basic understanding of the resources available for coordinating patient care, including social workers, visiting nurses, and physical and occupational therapists.	This resident knows the necessary resources to provide optimal coordination of care and how to access them. This resident is aware of specialized services like home total parenteral nutrition (TPN) or home antibiotic infusion.	This resident is able to efficiently arrange disposition planning for his or her patients and takes responsibility for preparing all materials necessary for discharge or transfer of his or her patients.	This resident coordinates the activities of residents, nurses, social workers, and other health care professionals to provide optimal care to the patient at the time of discharge or transfer, and to provide post-discharge ambulatory care that is appropriate for the patient's particular needs.						
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							Comments:					Not Yet Assessable
Improvement of Care (IC)	SYSTEMS-BASED PRACTICE (SBP2)	<p>This resident does not demonstrate evidence that he or she considers how hospital and health care systems impact his or her practice.</p> <p>This resident does not demonstrate awareness of variation in practice within or across health care systems.</p>	<p>This resident has basic knowledge of how health systems operate.</p> <p>This resident knows system factors that contribute to medical errors and is aware that variations in care occur.</p>	<p>This resident understands how patient care is provided in his or her system and recognizes certain specific system failures that can affect patient care.</p> <p>This resident follows protocols and guidelines for patient care.</p>	<p>This resident makes suggestions for changes in the health care system that may improve patient care.</p> <p>This resident reports problems with technology (e.g., devices and automated systems) or processes that could produce medical errors.</p>	<p>This resident participates in work groups or performance improvement teams designed to reduce errors and improve health outcomes.</p> <p>This resident understands the appropriate use of standardized approaches to care and participates in creating such protocols of care.</p>						
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							Comments:					Not Yet Assessable

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
Teaching (TCH)	PRACTICE- BASED LEARNING AND IMPROVEMENT (PBLI1)	This resident does not communicate effectively as a teacher (e.g., is disorganized, is inattentive, uses language unsuitable for the level of the learner, discourages and disregards questions).	This resident willingly imparts educational information clearly and effectively to medical students and other health care team members.	This resident communicates educational material accurately and effectively at the appropriate level for learner understanding.	This resident demonstrates an effective teaching style when asked to be responsible for a conference or formal presentation.	This resident recognizes teachable moments and readily and respectfully engages the learner.
			This resident uses media in presentations appropriately and effectively.	This resident accurately and succinctly presents patient cases in conferences.		This resident is a highly effective teacher with an interactive educational style and engages in constructive educational dialogue.
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:	Not Yet Assessable <input type="checkbox"/>			

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	
Self-directed Learning (SDL)	PRACTICE-BASED LEARNING AND IMPROVEMENT (PBLI2)	<p>This resident does not engage in self-initiated, self-directed learning activities.</p> <p>This resident does not complete simulation assignments. This resident is frequently absent for scheduled simulation exercises without a valid excuse.</p>	<p>This resident completes learning assignments using multiple sources.</p> <p>This resident participates in assigned skills curriculum activities and simulation experiences to build surgical skills.</p>	<p>This resident independently reads the literature and uses sources (e.g., SCORE modules, peer-reviewed publications, practice guidelines, textbooks, library databases, and online materials) to answer questions related to patients.</p> <p>This resident develops a learning plan based on feedback with some external assistance.</p> <p>This resident identifies gaps in personal technical skills and works with faculty members to develop a skills learning plan.</p>	<p>This resident looks for trends and patterns in the care of patients and reads and uses sources to understand such patterns.</p> <p>This resident can select an appropriate evidence-based information tool to answer specific questions while providing care.</p> <p>This resident independently practices surgical skills in a simulation environment to enhance technical ability.</p>	<p>This resident participates in local, regional, and national activities, optional conferences, and/or self-assessment programs.</p> <p>This resident demonstrates use of a system or process for keeping up with changes in the literature, and initiates assignments for other learners.</p> <p>This resident leads surgical skills experiences for students and residents and participates in skills curriculum development.</p>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:					Not Yet Assessable <input type="checkbox"/>

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	
Improvement of Care (IC)	PRACTICE-BASED LEARNING AND IMPROVEMENT (PBLI3)	<p>This resident does not demonstrate interest or ability in learning from the results of his or her practice.</p> <p>This resident fails to recognize the impact of errors and adverse events in practice.</p>	<p>This resident actively participates in Morbidity and Mortality (M&M) and/or other Quality Improvement (QI) conferences with comments, questions, and/or accurate presentation of cases.</p> <p>This resident changes patient care behaviors in response to feedback from his or her supervisors.</p> <p>This resident recognizes when and how errors or adverse events affect the care of patients.</p>	<p>This resident evaluates his or her own surgical results and the quality and efficacy of care of patients through appraisal and assimilation of scientific evidence.</p> <p>This resident uses relevant literature to support his or her discussions and conclusions at M&M and/or other QI conferences.</p> <p>This resident performs basic steps in a QI project (e.g., generates a hypothesis, conducts a cause-effect analysis, creates method for study).</p> <p>This resident understands how to modify his or her own practice to avoid errors.</p>	<p>This resident evaluates his or her own surgical results and medical care outcomes in a systematic way and identifies areas for improvement.</p> <p>This resident identifies probable causes for complications and deaths at M&M and/or other QI conferences with appropriate strategies for improving care.</p> <p>This resident begins to recognize patterns in the care of his or her patients and looks for opportunities to systematically reduce errors and adverse events.</p>	<p>This resident exhibits on-going self evaluation and improvement that includes reflection on practice, tracking and analyzing his or her patient outcomes, integrating evidence-based practice guidelines, and identifying opportunities to make practice improvements.</p> <p>This resident discusses or demonstrates application of M&M and/or other QI conference conclusions to his or her own patient care.</p> <p>This resident leads a QI activity relevant to patient care outcomes.</p>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:					Not Yet Assessable <input type="checkbox"/>

Yet Assessable <input type="checkbox"/>							
Domain Practice	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	
Performance of Operations and Procedures (POP)	PATIENT CARE (PC3)	This resident lacks basic surgical skills such as airway management, knot tying, simple suturing, suture removal, use of Doppler ultrasound, administration of local anesthetic, universal precautions and aseptic technique and is unable to reliably perform basic procedures, including venipuncture, arterial puncture, incision and drainage, minor skin, and excisions placement of an IV, nasogastric tube, or urinary catheter.	This resident has basic surgical skills such as airway management, knot tying, simple suturing, suture removal, use of Doppler ultrasound, administration of local anesthetic, universal precautions, and aseptic technique, and is able to reliably perform basic procedures, including venipuncture, arterial puncture incision and drainage, minor skin excisions and placement of an IV, nasogastric tube, or urinary catheter. This resident can perform basic operative steps in "essential-common" operations/procedures of the SCORE curriculum.	This resident has respect for tissue, and is developing skill in instrument handling. This resident moves through portions of common operations without coaching and makes straightforward intra-operative decisions. This resident performs <i>some</i> of the "essential" operations in the SCORE curriculum with minimal assistance.	This resident demonstrates proficiency in the handling of most instruments and exhibits efficiency of motion during procedures. This resident moves through the steps of <i>most</i> operations without much coaching and is making intra-operative decisions. This resident performs <i>many</i> of the "essential" operations and is beginning to gain experience in the "complex" operations.	This resident demonstrates proficiency in use of instruments and equipment required for "essential" operations, guides the conduct of most operations and makes independent intra-operative decisions. This resident can perform <i>all</i> of the "essential" operations and has significant experience in the "complex" operations. This resident can effectively guide other residents in "essential-common" operations.	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:					Not Yet Assessable <input type="checkbox"/>

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4				
Maintenance of Physical and Emotional Health (MPEH)	PROFESSIONALISM (PROF2)	<p>This resident's behavior and/or physical condition concern me.</p> <p>This resident flagrantly and repeatedly violates duty hour requirements.</p>	<p>The resident understands the institutional resources available to manage personal, physical, and emotional health (e.g., acute and chronic disease, substance abuse, and mental health problems).</p> <p>The resident complies with duty hours standards.</p> <p>This resident understands the principles of physician wellness and fatigue mitigation.</p>	<p>This resident monitors his or her own personal health and wellness and appropriately mitigates fatigue and/or stress.</p> <p>This resident effectively and efficiently manages his or her own time and assures fitness for duty.</p>	<p>This resident sets an example by promoting healthy habits and creating an emotionally healthy environment for those working with him or her.</p> <p>The resident models appropriate management of personal health issues, fatigue and stress.</p>	<p>The resident promotes a healthy work environment.</p> <p>This resident recognizes and appropriately addresses personal health issues in other members of the health care team.</p> <p>This resident is proactive in modifying schedules or intervening in other ways to assure that those caregivers under his or her supervision maintain personal wellness and do not compromise patient safety (e.g., requires naps, counsels, refers to services, reports to program director).</p>				
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			Comments:	Not Yet Assessable <input type="checkbox"/>						

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	
Performance of Assignments and Administrative Tasks (PAT)	PROFESSIONALISM (PROF3)	This resident consistently fails to meet requirements for timely performance of administrative tasks and/or requires excessive reminders, follow-up, etc.	This resident completes his or her operative case logs and duty hour logs, performs other assigned and required administrative tasks in a timely fashion, and does not require excessive reminders or follow-up (e.g., visa renewal, credentialing, obtaining a medical license).	This resident is prompt in attending conferences, meetings, operations, and other activities. This resident responds promptly to requests from faculty members and departmental staff members (e.g., pager responsiveness).	This resident assures that others under his or her supervision respond appropriately to responsibilities in a timely fashion.	This resident sets an example for conference attendance, promptness, and attention to assigned tasks.	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:					Not Yet Assessable <input type="checkbox"/>

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	
Care for Diseases and Conditions (CDC)	INTERPERSONAL AND COMMUNICATION SKILLS (ICS1)	<p>This resident is not able to clearly, accurately, and respectfully communicate with patients and their families.</p> <p>This resident fails to effectively communicate basic health care information to patients and families.</p>	<p>This resident uses a variety of techniques to ensure that communication with patients and their families is understandable and respectful (e.g., non-technical language, teach back, appropriate pacing, and small pieces of information).</p> <p>This resident effectively communicates basic health care information to patients and their families.</p>	<p>This resident customizes communication, taking into account patient characteristics (e.g., age, literacy, cognitive disabilities, culture).</p> <p>This resident provides timely updates to patients and their families during hospitalizations and clinic visits.</p>	<p>This resident is capable of delivering bad news to patients and their families sensitively and effectively.</p>	<p>This resident can customize emotionally difficult information (e.g., when participating in end-of-life discussions).</p> <p>This resident is capable of negotiating and managing conflict among patients and their families.</p>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:					Not Yet Assessable <input type="checkbox"/>

Practice Domain	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4				
Coordination of Care (CC)	INTERPERSONAL AND COMMUNICATION SKILLS (ICS2)	This resident displays disrespectful or resentful behaviors when asked to evaluate a patient or participate in a care conference with other members of the health care team.	<p>This resident willingly exchanges patient information with team members.</p> <p>This resident responds politely and promptly to requests for consults and care coordination activities.</p> <p>This resident performs face-to-face hand-offs.</p>	<p>This resident exhibits behaviors that invite information sharing with health care team members (e.g., respect, approachability, active listening).</p> <p>This resident performs hand-off best practices (e.g., uses multiple forms of information transfer, confirms receipt of information, invites questions).</p>	<p>This resident discusses care plans with the members of the health care team and keeps them up to date on patient statuses and care plan changes.</p> <p>This resident delivers timely, complete, and well organized information to referring physicians and to providers of follow-up care at the time of patient care transitions.</p>	<p>This resident assumes overall leadership of a health care team responsible for his or her patients, while at the same time seeking and valuing input from the members of the team.</p> <p>This resident negotiates and manages conflict among care providers.</p> <p>This resident takes responsibility for ensuring that clear hand-offs are given at transitions of care.</p>				
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Comments:					Not Yet Assessable <input type="checkbox"/>			

Yet Assessable

Domain	Practice	Competency	Critical Deficiencies	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
		PATIENT CARE (PC3)	This resident lacks basic surgical skills such as airway management, knot tying, simple suturing, suture removal, use of Doppler ultrasound, administration of local anesthetic, universal precautions and aseptic technique and is unable to reliably perform basic procedures, including venipuncture, arterial puncture, incision and drainage, minor skin, and excisions.	This resident has basic surgical skills such as airway management, knot tying, simple suturing, suture removal, use of Doppler ultrasound, administration of local anesthetic, universal precautions, and aseptic technique, and is able to reliably perform basic procedures, including venipuncture, arterial puncture incision and drainage, minor skin, and excisions.	This resident has respect for tissue, and is developing skill in instrument handling. This resident moves through portions of common operations without coaching and makes straightforward intra-operative decisions. This resident performs <i>some</i> of the "essential" operations in the SCORE curriculum with minimal assistance.	This resident demonstrates proficiency in the handling of most instruments and exhibits efficiency of motion during procedures. This resident moves through the steps of <i>most</i> operations without much coaching and is making intra-operative decisions. This resident performs <i>many</i> of the "essential" operations and is beginning to gain experience in the "complex" operations.	This resident demonstrates proficiency in use of instruments and equipment required for "essential" operations, guides the conduct of most operations and makes independent intra-operative decisions. This resident can perform <i>all</i> of the "essential" operations and has significant experience in the "complex" operations. This resident can effectively guide other residents in "essential-common" operations.
Performance of Operations and Procedures (POP)			placement of an IV, nasogastric tube, or urinary catheter.	excisions and placement of an IV, nasogastric tube, or urinary catheter. This resident can perform basic			