

UNIVERSITY OF MARYLAND MEDICAL CENTER GRADUATE MEDICAL EDUCATION POLICY AND PROCEDURE MANUAL	PAGE: 1 of 2	PROCEDURE NO: GMS-F
	EFFECTIVE DATE: 6/27/02	REVISION:
SUBJECT: INTERNAL REVIEWS	FUNCTION: RESIDENCY TRAINING PROGRAMS	
APPROVALS: Final – Executive Vice President & Chief Operating Officer: _____ <i>John W. Ashworth III</i> _____ Concurrences: _____ _____		

1. Purpose

This policy provides a mechanism for all residency programs, including subspecialty programs, to assess their compliance with both the Institutional Requirements and Program Requirements of the relevant ACGME Residency Review Committees (RRCs).

2. Scope

This policy applies to all residency educational programs that the University of Maryland Medical Center (UMMC) sponsors.

3. Responsibility

It is the responsibility of all residency program directors, residents, and UMMC and School of Medicine officials to comply with this policy.

4. Procedure

4.1 Regular internal review of all residency training programs shall be conducted by the Graduate Medical Education Committee (GMEC) or a body designated by the GMEC composed of faculty, residents, and administrators from institutional programs other than the one being reviewed. Each review shall follow the GMEC approved written protocol. External reviewers may be included on the review body as determined by the GMEC.

4.2 Internal reviews shall be conducted mid-cycle between the scheduled ACGME program surveys and shall follow a written protocol approved by the GMEC.

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- 4.3 During the assessment of a residency training program’s compliance with each of the ACGME program standards, the review shall appraise the following:
- 4.3.1 the educational objectives of the program including the development of curricula that incorporates the competencies of patient care, medical knowledge, practice-based learning and improvement, interpersonal and communications skills, professionalism, and systems-based practice as specified in the specialty’s Program Requirements;
 - 4.3.2 the adequacy of available educational and financial resources to meet these objectives;
 - 4.3.3 the effectiveness of the program in meeting its objectives; and
 - 4.3.4 the program’s effectiveness in addressing citations from previous ACGME letters of accreditation and previous internal reviews.
 - 4.3.5 progress in the development of and use of an assortment of evaluation tools to assess resident competence
 - 4.3.6 evidence of the program’s progress in the development and use dependable measures to assess residents' competence as defined in Institutional Requirements and in specialty’s Program Requirements; and
 - 4.3.7 the effectiveness of each program in implementing a process that links educational outcomes with program improvement.
- 4.4. Materials and data used in a review shall include the following:
- 4.4.1 Institutional and Program Requirements from the Essentials of Accredited Residency Programs;
 - 4.4.2 letters of accreditation from previous ACGME reviews;
 - 4.4.3 reports from previous internal reviews of the program; and
 - 4.4.4 interviews with the program director, faculty, and residents in the program and individuals outside the program deemed appropriate by the GMEC.
- 4.5. A written report of each internal review shall be presented to and reviewed by the GMEC so that it may monitor areas of non-compliance and take appropriate action. These reports shall be included in the ACGME institutional review document. Subsequent Progress Reports shall also be presented to the GMEC for continued monitoring of compliance.