

UNIVERSITY OF FLORIDA COLLEGE OF MEDICINE JACKSONVILLE
Office of Graduate Medical Education

POLICY: Evaluation of Resident or Fellows Policy: Minimum Standards	
Approved by: GMEC	Page(s): 1 of 1
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RESIDENT/FELLOW EVALUATION: MINIMUM STANDARDS FOR ALL GME PROGRAMS

1. Program Director review of ACGME Program Requirements for resident evaluation ([ACGME Common Program Requirements](#)).
2. Required evaluations and frequency (frequency must be increased if necessary to meet individual program requirements):
 - a. End of rotation – after each rotation (at least every three months for block rotations longer than 3 months or longitudinal experiences)
 - b. Semi-annual – at least twice per year
 - c. Final – once at completion of program
3. The Clinical Competency Committee (CCC) is required to assess each resident’s performance semi-annually and confirm the trainee’s progress towards autonomous practice and the specialty-specific milestones.
4. The Program Director or their designee must meet with the residents semi-annually to review the evaluations, assist residents in developing individualized learning plans, and develop plans for residents failing to progress.
5. Semi-annual and final evaluation forms should include a signature line and date by the resident and Program Director or their designee.

Records:

6. A copy should go in each resident's file (electronic or hard copy).
7. All original or electronically signed final summative evaluations must be provided to the Office of Graduate Medical Education for the institutional files and include the required wording (see Program Requirements).
Note: ALL residents must have a final, year-end evaluation, regardless of appointment status as prelim, chief resident, or trainee who leaves the program before completing training, etc.
8. Electronic copies of individual semi-annual, non-terminal evaluations must be submitted to the Office of Graduate Medical Educations.

Written criteria for advancement/promotion and program-specific criteria for evaluation are required by the ACGME

9. Programs are encouraged to use the institutional evaluation templates. If programs choose to use their own format, they must include the elements on the institutional template (summary of competency-based rotation evaluations, 360-degree evaluations, conference attendance, in-training examination scores, medical licensing examination results, scholarly work, clinical outcome data, patient safety and quality improvement participation, handoffs assessments, milestone level achievement, exact disciplinary action wording in addition to any program specific evaluation tools and procedural tracking).