

## **POLICY ON RESIDENT ELIGIBILITY, SELECTION, EVALUATION, AND PROMOTION**

### **RESIDENT/FELLOW ELIGIBILITY**

Applicants must have one of the following qualifications to be eligible for appointment to IU School of Medicine accredited residency programs:

- a. Graduate of medical school in the United States or Canada accredited by the Liaison Committee on Medical Education (LCME).
- b. Graduate of college of osteopathic medicine in the United States accredited by the American Osteopathic Association (AOA).
- c. Graduate of medical school outside the United States or Canada who meets one of the following qualifications:
  1. Has received a currently valid certificate from the Educational Commission for Foreign Medical Graduates prior to appointment or
  2. Has a full and unrestricted license to practice medicine in a US licensing jurisdiction in which they are training.
- d. Graduate of medical school outside the United States who has completed a Fifth Pathway program provided by an LCME accredited medical school.

### **RESIDENT/FELLOW SELECTION**

- a. Programs must select from among eligible applicants on the basis of their preparedness, ability, aptitude, academic credentials, communication skills, and personal qualities such as motivation and integrity. ACGME-accredited programs must not discriminate with regard to sex, race, age, religion, color, national origin, disability or veteran status.
- b. In selecting from among qualified applicants, it is strongly suggested that programs participate in an organized matching program, where available, such as the national Resident Matching Program (NRMP).
- c. Programs should establish written criteria to determine qualified applicants for the interviewing process. Applicants should be interviewed by two or three faculty members and a resident. It is suggested that an interview evaluation form be written to standardize the interviewing process. A selection committee should be set up to review and rank all applicants.
- d. If prior GME is required before entry into a program or if an individual is transferring from another institution into the same program, the program director must receive written verification of the previous educational experience as well as a statement describing the performance of the transferring resident. These documents must be received by the program director prior to accepting the resident into the program.

### **RESIDENT/FELLOW APPOINTMENT**

After the selection process is complete, program directors should forward the following documents to the Office for House Staff Affairs:

- a. ERAS universal application or current CV
- b. Current address of the appointee

- c. Copy of the medical school diploma
- d. Copy of the ECFMG certificate (if applicable)
- e. Verification of prior GME training (if applicable)
- f. Documentation of Indiana Sex Offender Registry

The Director of House Staff Affairs will review the above material for completeness after which a contract will be processed.

### **RESIDENT/FELLOW EVALUATION**

Each trainee will be evaluated by the program director or his/her designee as required by the applicable ACGME Residency Review Committee (RRC).

The training program must demonstrate that it has an effective plan for assessing resident performance throughout the program and for utilizing the results to improve resident performance. This plan should include:

- a. The use of methods that produce an accurate assessment of residents' competence in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice.
- b. Mechanisms for providing regular and timely performance feedback to residents that include at least: 1) Written semiannual evaluations that are communicated to each resident in a timely manner. These include formal evaluations of knowledge, skills, and professional growth of residents and required counseling by the program director or designee. 2) The maintenance of a record of evaluation for each resident that is accessible to the resident. The permanent record should include both the evaluation and counseling sessions.
- c. A process involving use of assessment results to achieve progressive improvements in residents' competence and performance. Appropriate sources of evaluation include faculty, patients, peers, self, and other professional staff.
- d. More frequent evaluations and discussions with the resident should occur and be documented should significant problems be identified. A course of remediation should be implemented and progress tracked.

The program director must provide a final evaluation for each resident who completes the program. The evaluation must include a review of the resident's performance during the final period of education and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. The final evaluation must be part of the resident's permanent record maintained by the program.

### **RESIDENT/FELLOW PROMOTION/CONDITIONS FOR REAPPOINTMENT**

The program must advance residents to positions of higher responsibility on the basis of their satisfactory demonstration of achievement of program-developed milestones in the competencies and their satisfactory progressive scholarship and professional growth. The program must ensure, with each year of training, that each resident has increasing responsibility in patient care, leadership, teaching, and administration. In January of each year, the program director will provide the Office of House Staff Affairs with a list of those trainees who will advance to the next level on July 1st. Contracts for these trainees will be processed and sent to the trainees by the end of March.

In the event of an adverse annual evaluation, a resident has the right to file a grievance against this action. In instances where a resident's contract is not going to be renewed, the resident must be provided with a written notice of intent not to renew a resident's contract no later than four months prior to the end of the resident's current agreement. However, if the primary reason(s) for the nonrenewal occurs within the four months prior to the end of the contract, the resident must be provided with as much written notice of the intent not to renew as the circumstances will reasonably allow, prior to the end of the contract. The resident will have the opportunity to file a grievance against this action. All policies and procedures for grievance, discipline, and termination will be applicable.

### **EQUAL OPPORTUNITY/AFFIRMATIVE ACTION**

Indiana University pledges itself to continue its commitment to the achievement of equal opportunity within the University and throughout American society as a whole. In this regard, Indiana University will recruit, hire, promote, educate, and provide services to persons based upon their individual qualifications. Indiana University prohibits discrimination based on arbitrary considerations of such characteristics as age, color, disability, ethnicity, gender, marital status, national origin, race, religion, sexual orientation or veteran status.

Indiana University will take affirmative action, positive and extraordinary, to overcome the discriminatory effects of traditional policies and procedures with regard to the disabled, minorities, women, and Vietnam-era veterans.

(Board of Trustees, Nov. 21, 1969; Amended: Board of Trustees, Dec. 4, 1992)

Approved by COGME  
June 16, 2004

