**Biannual Summative Review**

Background: In compliance with the Accreditation Council for Graduate Medical Education (ACGME), the Clinical Competency Committee (CCC) is providing a comprehensive summative review of your assessments based on information gathered in the resident portfolio and New Innovations.

This is an in-depth summative review completed by your advisor and the Clinical Competency Committee designed to provides significant feedback regarding resident progression towards independent practice and board eligibility. The information provided here is based on institutional and governing body (ACGME, ABFM) requirements for yearly advancement, matriculation for graduation, and board eligibility. This information will be provided to each resident in mid October and mid May. Additional meetings may be scheduled to review information and provide educational action plans if recommended.

\*\*Below box to be filled out by the Residency Office\*\*

|  |  |  |
| --- | --- | --- |
| **Assessment** | **Details** | **Core Outcome** |
| Time Away From Curriculum | Number of Days: | Core Outcome 5 |
| Step 3 | Pass/Fail: | Core Outcome 10 |
| ITE Exam | Score: | Core Outcome 10 |
| 1000 Hours of Clinic/3 years | Number of Hours: | Core Outcome 1 |
| 40 Weeks/year | Number of Weeks: | Core Outcome 1 |

\*\*Below information to be filled out by the advisor\*\*

*Attendance Review*

|  |  |
| --- | --- |
|  | Resident is on track for meeting 40 week continuity clinic requirement |
|  | Resident is not on track for meeting 40 week continuity clinic requirement |
|  | Resident is on track for meeting 1000 hours continuity clinic requirement |
|  | Resident is not on track for meeting 1000 hours continuity clinic requirement |

Resident has \*\* days away from curriculum at time of review.

Resident has \*\*\* inbasket delinquency notifications at time of review.

Helpful comments from the Resident Attendance Review Assessment:

*Residency Checklist Review*

\*\*See Residency Checklist under Resident Library\*\*

Please report any missing items from the Resident Checklist:

*Milestone Review*

\*\*Noted in New Innovations under “subcompetency” tab\*\*

|  |  |
| --- | --- |
|  | Resident is meeting most designated benchmarks for milestones thus far |
|  | Resident is meeting some designated benchmarks for milestones thus far |
|  | Resident is not meeting a majority of designated benchmarks thus far |

Pertinent milestone review comments:

Please note any milestones requiring additional support:

*Direct Observation Review*

\*\*Noted under “CCC Review, Core Outcomes” tab\*\*

Number of Direct Observations Completed Since Last Biannual Review:

Are the clinical encounters varied in complexity (low, moderate, high)?: YES NO

|  |  |
| --- | --- |
|  | Resident is meeting most designated benchmarks for direct observations thus far |
|  | Resident is meeting some designated benchmarks for direct observations thus far |
|  | Resident is not meeting a majority of designated benchmarks for direct observations thus far |

Pertinent direct observation comments:

Please note any core outcomes based on direct observations requiring additional support:

*Reflection Review*

|  |  |
| --- | --- |
|  | Resident is on track to complete the required reflection assessments for the year |
|  | Resident is not on track to complete the required reflection assessments for the year |
|  |  |

*Procedure Competency Assessments*

Number of Procedures Completed Since Last Review:

Procedures in which independence has been achieved:

POCUS Scan Areas Completed:

* Gallbladder
* Cardiac
* Lung
* Kidney
* Soft Tissue
* MSK/Joint

Pertinent Procedural Assessment Comments:

|  |  |
| --- | --- |
|  | Resident is on track to meet the procedure assessment benchmarks for the year |
|  | Resident is not on track to meet the procedure assessment benchmarks for the year |

*Scholarship/Teaching Review*

\*\*Look in portfolio under Core Outcome 10 and 15 and New innovations Teaching or Precepting Assessments\*\*

|  |  |
| --- | --- |
|  | Resident has completed their wellness scholarship (R1) |
|  | Resident has completed their journal club scholarship (R2) |
|  | Resident has completed their morbidity and mortality scholarship (R3) |

Teaching Assessments reach level of (R2, R3):

|  |  |
| --- | --- |
|  | Novice |
|  | Advanced Beginner |
|  | Proficient |
|  | Competent |
|  | Expert |

Precepting Assessments reach level of (R3):

|  |  |
| --- | --- |
|  | Requires significant prompting |
|  | Requires minimal prompting |
|  | Completes Independently |
|  | Role Models |

Pertinent Scholarship or Teaching Comments:

*Elective Assessment Review*

\*\*Look under pertinent Core Outcomes in Resident Notebook for uploaded assessments\*\*

|  |  |
| --- | --- |
|  | Resident has uploaded all assessments for pertinent electives thus far |
|  | Resident is missing assessments from pertinent electives thus far |

Pertinent Comments from Elective Assessments:

*Exam Scores Review*

R1 passed Step 3:

ITE Score:

Will the R3 require additional board studying support based on these [guidelines](https://contracostahsd.sharepoint.com/:w:/r/sites/onedrivefmr/_layouts/15/Doc.aspx?sourcedoc=%7B3E34AC3E-9C95-413E-9E15-D58E65EC868F%7D&file=Board%20Prep.docx&action=default&mobileredirect=true&DefaultItemOpen=1)?

*Resident Portfolio Review*

|  |  |
| --- | --- |
|  | Resident has engaged with their portfolio, is up to date with most assessments thus far |
|  | Resident has engaged with their portfolio, has some missing assessments based on schedule |
|  | Resident has engaged with their portfolio, are missing several assessments based on their schedule |

*ILP Review*

Summary of ILP review (include if there is missing information, any important comments from resident and advisor):

Level of Engagement Based on Advisor Assessment:

* Independent
* Advanced
* Novice

*Faculty Feedback*

Summary of Strengths:

Summary of Growth Edges:

*Educational Action Plan Review (list previous Educational Action Plans)*

\*\*Noted in Resident Library in Education Action Plan Folder\*\*

Summary of previous educational action plans if applicable:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Education Action Plan** | **Date Started** | **Date Completed** | **Relevant Core Outcomes** | **Further Intervention Required?** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

\*\*Below will be filled out by the Clinical Competency Committee\*\*

ILP and Education Action Plan recommendations will be noted at the end

**Core Outcome 1:**

*Practice as personal physicians, providing first contact, comprehensive and continuity care, to include excellent doctor-patient relationships, excellent care of chronic disease and routine preventive care and effective practice management.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with current ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 2:**

*Diagnose and manage acute illness and injury for people of all ages in the emergency room or hospital.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 3:**

*Provide comprehensive care of children, including diagnosis and management of the acutely ill child and routine preventive care.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 4:**

*Develop effective communication and constructive relationships with patients, clinical teams, and consultants.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 5:**

*Model professionalism and be trustworthy for patients, peers, and communities.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 6:**

*Practice as personal physicians, to include care of women, the elderly, and patients at the end of life, with excellent rate of continuity and appropriate referrals.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 7:**

*Provide care for low-risk patients who are pregnant, to include management of early pregnancy, medical problems during pregnancy, prenatal care, postpartum care and breastfeeding, with or without competence in labor and delivery.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 8:**

*Diagnose and manage of common mental health problems in people of all ages.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 9:**

*Perform the procedures most frequently needed by patients in continuity and hospital practices.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 10:**

*Model lifelong learning and engage in self-reflection.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 11:**

*Practice as personal physicians, to include musculoskeletal health, appropriate medication use and coordination of care by helping patients navigate a complex health system.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 12:**

*Provide preventive care that improves wellness, modifies risk factors for illness and injury, and detects illness in early, treatable, stages for people of all ages while supporting patients’ values and preferences.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 13:**

*Assess priorities of care for individual patients across the continuum of care—in-office visits, emergency, hospital, and other settings, balancing the preferences of patients and medical priorities.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 14:**

*Evaluate, diagnose, and manage patients with undifferentiated symptoms, chronic medical conditions, and multiple comorbidities.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

**Core Outcome 15:**

*Effectively lead, manage, and participate in teams that provide care and improve outcomes for the diverse populations and communities they serve.*

At the time of this review, the Clinical Competency Committee confirms that the resident consistently meets the following competency requirements for the above outcome:

|  |  |
| --- | --- |
|  | Observer |
|  | Direct Supervision |
|  | Indirect Supervision |
|  | Independence |
|  | Role Model |

The Clinical Competency Committee recommends the following:

|  |  |
| --- | --- |
|  | Continue with current curriculum, anticipate independence based on current trajectory |
|  | Continue with current with ILP recommendation to address growth edge, anticipate independence based on current trajectory |
|  | Continue with current curriculum with education action plan, anticipate independence based on current trajectory |
|  | Introduce addended curriculum with education action plan, anticipate significant support to achieve independence |

Overall, in review of the above,

|  |  |
| --- | --- |
|  | The resident is on track for matriculation/advancement |
|  | The resident is on track for matriculation/advancement with support of an educational action plan, which is provided as an attachment |
|  | The resident requires remediation of curriculum to be on track for matriculation/advancement, which is provided as an attachment |

CCC Liason Signature

Advisor Signature

Resident Signature