

Evaluation and Promotion of Residents

gme-adm-0049

About This Policy

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Responsible University Administrator:

Senior Associate Dean for GME

Policy Contact:

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Scope

This policy applies to all Indiana University School of Medicine (IUSM) Graduate Medical Education (GME) trainees and training programs.

Policy Statement

Equal Opportunity and 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 on the basis of age, color, disability, ethnicity, sex, gender identity, gender expression, genetic information, marital status, national origin, race, religion, sexual orientation, or veteran status, or ancestry.

As required by Title IX of the Education Amendments of 1972, Indiana University does not discriminate on the basis of sex in its educational programs and activities, including employment and admission. Questions specific to Title IX may be referred to the Office for Civil Rights or the University Title IX Coordinator. (**Reference 1**)

Evaluation

Each resident 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, including Milestones when available, 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:
 1. Faculty members must directly observe, evaluate, and frequently provide feedback on resident performance during each rotation or similar educational assignment.
 2. Written semiannual evaluations that are communicated to each resident in a timely manner. These include Milestones evaluations and formal evaluations of knowledge, medical student evaluations, skills, and professional growth of residents as teachers and required counseling by the program director or designee.

3. The maintenance of a record of evaluation for each resident that is accessible to the resident. For further information, refer to the [policy\(Reference 2\)](#).
- c. A process involving the use of assessment results to achieve progressive improvements in trainee competence and performance. Appropriate sources of evaluation include faculty, patients, peers, self, medical students, and other professional staff.
- d. More frequent evaluations and discussions with the trainee should occur and be documented should significant problems be identified. A course of structured improvement should be implemented and progress tracked **(Reference 3)**.
- e. The program director (or designee) must meet with each resident or fellow at least semi-annually.
- f. The program director must provide a final evaluation for each resident who completes the program. This evaluation must include recommendations from the Clinical Competency Committee or equivalent committee in non-ACGME programs. The evaluation must include a review of the resident's performance during the final period of education and must verify that the resident has demonstrated the knowledge, skills, and behaviors to enter autonomous practice without direct supervision. The final evaluation must be part of the resident's permanent record maintained by the program.

For non-ACGME fellowship programs, evaluation must follow the [policy\(Reference 4\)](#).

Promotion/Conditions for Reappointment and Non-Promotion

The program must advance residents to positions of higher responsibility based on individual professional growth as measured by satisfactory achievement of program-developed, competency-based learning objectives and satisfactory progressive scholarship. The program must ensure, with each year of training, that each resident has increasing responsibility in patient care, leadership, teaching, and administration.

A program may determine whether a resident has not performed to a level that would allow the resident to progress to the next year of their training program. Program directors must refer to the [policy](#) for further details **(Reference 3)**.

Reason For Policy

The purpose of this policy is to define guidelines and procedures regarding trainee evaluation and promotion.

Procedure

Letter of Appointment Preparation and Issuance

Each year, the program director must confirm that a resident is on track to advance to the next level of training at the conclusion of the current appointment year by submitting a reappointment request. The GME Office will review the reappointment request to ensure that all appointment requirements are complete before routing a Letter of Appointment to the trainee for review and signature.

A Letter of Appointment must be signed by both the trainee as well as the Program Director before it routes to the GME Office for review, receipt, and approval.

Any trainee whose Letter of Appointment is not complete on the first day of training indicated within the appointment period must not engage in training activities or patient care until the letter is fully executed, received, and approved by the GME Office.

USMLE or COMLEX Requirements

Each trainee must satisfy licensing examination requirements as outlined in the [policy \(Reference 5\)](#).

Annual Requirements

In addition to the onboarding requirements due prior to beginning IUSM GME training (see Resident Appointment policy, **Reference 6**) each trainee must complete annual requirements in accordance with University, School, and affiliate hospital guidelines.

Definitions

ACGME is the Accreditation Council for Graduate Medical Education.

A trainee is an IUSM resident or fellow providing clinical care as part of a GME program.

A *Letter of Appointment* is a written agreement of appointment outlining the terms and conditions of a resident's appointment to a GME training program.

Implementation

The Designated Institutional Official (DIO) for Graduate Medical Education is responsible for implementation of this policy.

Oversight

Policy authority for this document resides with the Graduate Medical Education Committee. The DIO and the Graduate Medical Education Committee are responsible for oversight. This policy will be reviewed every three years or more often if deemed necessary.

History

1. Policy gme-adm-0007 approved by GMEC and published on 16 January 2013.
2. Policy approved by the GMEC on 06 December 2016.
3. Policy updated for formatting 06 March 2018.
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