**ACMC Emergency Medicine Residency Promotion and Appointment Policy**

1. **PURPOSE**

To establish a policy and procedure for annual promotion of residents in the Advocate Christ Medical Center Emergency Medicine (ACMC-EM) residency program as well as establish criteria for graduation of these residents to the independent practice of emergency medicine without supervision.

1. **POLICY**

In compliance with ACGME guidelines and ACMC EM Residency policy, the responsibility of promotion of ACMC-EM Residents will ultimately rest with the ACMC-EM Program Director. Also according to ACGME guidelines, the decisions of the Program Director will be informed by the ACMC-EM Residency Clinical Competency Committee (CCC) recommendations, as outlined below. Additional promotion requirements for all residents and promotion requirements specified by year are also listed below.

1. **PROCEDURE**

As stated in the ACMC Emergency Medicine Residency Clinical Competency Committee (CCC) Charter, and following ACGME guidelines, the purpose of the CCC is to provide the Program Director with biannual consensus recommendations on the competence of each resident in the training program. These recommendations will be based on multisource evaluations in large part developed using the 23 Emergency Medicine (EM) Milestones. The Program Director will give strong consideration to all recommendations of the Clinical Competency Committee but the Program Director retains the final decision on all resident advancement/remediation/expulsion decisions. Biannual CCC recommendations will be reported and tracked through a Google Drive Dashboard to provide continuous monitoring of resident competence over the course of their residency. CCC members and the Residency Program Coordinator use the Google Drive Dashboard to enter and share evaluation metrics for each resident prior to each CCC meeting. The Google Drive Dashboard is also a standing record of the graduated responsibilities and consensus recommendation for advancement voted on by the CCC at the time of each CCC meeting.

**Measures of Performance Considered by the CCC include but are not limited to:**

1. Semi-annual evaluations by EM faculty
2. End of shift evaluations
3. Off-service rotation evaluations
4. Nursing Evaluations
5. Peer Evaluations
6. Self-Evaluations
7. Procedure log completion
8. Conference attendance
9. Individualized Interactive Instruction Compliance
10. Patients per hour (or total patients)
11. In-Training Examination score
12. Oral board scores (individual)
13. Oral Boards (ACMC Oral Boards day)
14. Oral Boards (State)
15. Simulation evaluations
16. Status of resident project
17. Compliance with EMS ride-along and lecture
18. Graduated responsibilities

**Additional promotion requirements:**

Promotion to the next annual level of training (PGY-1 to PGY-2, PGY-2 to PGY-3, PGY-3 to residency graduation) is dependent on:

* Demonstrating an average Milestone level of 2.0 to be promoted from PGY-1 to PGY-2; 3.0 to be promoted from PGY-2 to PGY-3; and 3.8 to be promoted from PGY-3 to residency graduation. These averages are determined from the semi-annual evaluations from emergency medicine faculty
* Caring for an average of 1.2-1.5 patients per hour by the end of PGY-1 year
* Caring for an average of 1.5-2.0 patients per hour by the end of PGY-2 year
* Caring for an average of 2.0-2.5 patients per hour by the end of PGY-2 year
* Successful completion of all rotations, including all required off-service rotations and electives
* Completion of updated procedure log every 6 months

Beyond the above requirements, graduation from the ACMC-EM Residency Program also requires:

* Maintaining an overall 70% Departmental Conference Attendance average
* Meeting all ACGME-EM procedural requirements
* Completion of a resident scholarly project
* Completion of the Institute for Health Care Improvement (IHI) Basic Certificate

.

Revised June 1, 2021; eol