

Evaluation

All fellows are formally evaluated two times a year. Teaching attendings routinely evaluate all cardiovascular disease fellows and review their performance at the completion of each assignment or rotation. Each fellow has access to these anonymous evaluations through EVAL. The program director meets formally with each fellow at least twice yearly and twice informally to provide structured feedback on their performance, including appropriate counseling and remedial work as needed. In the event of an adverse annual evaluation, the resident is offered an opportunity to address judgements of academic deficiency/misconduct. Formal evaluations are done using the EVAL system.

Direct feedback on fellows performances from nursing and ancillary personnel is given to appropriate attending in the various clinical venues (eg. Echo lab, cath lab, CCU). This information is then included in narrative discussions done by the attendings at the time of evaluations.

We do not have a formal evaluation mechanism in place for patients to provide anonymous feedback about a fellow's performance. Information from patients normally goes directly to the supervising attending, again with this feedback noted in the evaluation process.

Evaluation Process

Written records are maintained per each evaluation. They are available for review by the fellow and appropriate faculty and include:

- Evaluations of each resident by appropriate attendings, with respect to each specific rotation, including the continuity experience in the outpatient setting
- Evaluation of residents development of professional attitudes
- Annual evaluations of residents clinical competence

- Evaluations of clinical competence at the conclusion of period of training (Residents summative evaluations)
 - Residents evaluations of the faculty and the training program counseling of a resident by the program director
 - Faculty evaluate and document the cardiovascular disease residents clinical and technical competence by observation, assessment and substantiation of the residents provision of medical care for the following:
 - Comprehensive and specialized medical knowledge
 - Advanced skills in history-taking
 - Advanced skills in performing a physical examination
 - Advanced skills in clinical judgement
 - Advance management and consultation skills
 - Ability to critically analyze clinical situations and make medical decisions Ability to perform invasive procedures
 - Ability to establish good interpersonal relationships with patients, families, other residents, other health workers and attending physicians
 - Ability to behave towards others (especially patients) with integrity, respect and compassion (e.g., humanistic attributes)
 - Ethical behavior

Each fellow will be asked on a quarterly basis to evaluate the rotations they participated in the previous three months. The primary focus of these evaluations is to ascertain the effectiveness of the rotation in

meeting the educational goals as well as expectations of the fellow.

In addition to each rotation, the fellow is asked to discuss the program overall. Comments concerning conferences, clinic as well as the educational experience overall are solicited.

Each fellow is asked to submit a self evaluation form annually. This form is provided to the fellow a week prior to the Fall meeting with the program director and reviewed with him.

Finally, each fellow is asked to evaluate each attending with whom they have had contact with in the preceding three months. General and specific comments are encouraged.