



**026_GMEC_Residency Clinical Competency
Committee**

Title:	Residency Clinical Competency Committee (CCC)	Index Number:	FM-GMEC-026		
Scope of application:	All Graduate Medical Education (GME) Programs	Original Date:	Reviewed on:	Next Review Date:	
		20.08.2014	15.01.2024	15.01.2027	

1. Purpose

- 1.1. To establish an institutional policy on CCC as mandated by the Accreditation Council for Graduate Medical Education -International (ACGME-I) that each GME training program must have a Clinical Competency Committee (CCC) to assess and evaluate the residents' performance in the program in each of the six ACGME core competencies.
- 1.2. To consider all of the evaluations and make an overall decision on how the resident is progressing, and which competencies have been met and which need to continue to work toward.
- 1.3. To increase the chances for a more balanced summary evaluation of each resident

2. Definitions

- 2.1. "Other members": faculty from other programs, non-physician members of the health care team, the program administrator, a medical director or service chief, nursing staff, and assessment specialists, may also be appointed to the committee. Trainees may not serve as members of this committee.
- 2.2. "Chair of the committee": will be either the program director or a core faculty member appointed by the program director or voted on by the committee, depending on the ACGME-I program's Review Committee requirements.
- 2.3. "Trainee": is a physician who is enrolled in a residency training program at the level of PGY I or above. This includes all other terms such as intern, fellow, housestaff member, or house-officer.

3. Policy

- 3.1. The committee will serve as an advisory board to the Program Director with regards to all resident issues including, but not limited to: feedback, evaluation, curriculum organization, promotion, remediation, certification, disciplinary action, chief resident selection, special awards and recommendations.

026_GMEC_Residency Clinical Competency Committee

- 3.2. The program director must appoint a CCC, and develop and maintain a written description of the CCC's responsibilities, including charge, membership and procedures. This policy must be provided to the GME Office.

4. **Composition:**

The committee shall consist of:

- 4.1. At a **minimum** three members of the program faculty including the chair of the committee
- 4.2. Other eligible members for appointment to the committee include faculty from other programs and non-physician members of the health care team
- 4.3. Residents and fellows **cannot** be members of the CCC

5. **Responsibility**

- 5.1. The members of the CCC are expected to provide honest and thoughtful evaluations of the competency level of trainees. They are responsible for reviewing all assessments of each trainee at least semiannually, and for determining each trainee's current performance level by group consensus.
- 5.2. The CCC consensus decision will initially be based on existing, multi-source assessment data and faculty member observations.
- 5.3. The committee is responsible for making recommendations to the program director on promotion, remediation and dismissal based on the committee's consensus decision of trainees' performance of each trainee semiannually. However, the program director has final responsibility for the evaluation and promotion of trainees.
- 5.4. The committee should inform, when appropriate, the Program Evaluation Committee (PEC) of any potential gaps in curriculum or other program deficiencies that appear to result in a poor opportunity for trainees to progress in each of the competencies.
- 5.5. The program director or designee(s) must provide feedback to each trainee regarding his/her progress in each of the competencies. This feedback must be documented in the trainee's file at least semiannually.
- 5.6. The committee is also responsible for providing feedback to the program director on the timeliness and quality (e.g., rating consistency and accuracy) of faculty's documented evaluations of trainees, in order to identify opportunities for faculty training and development.

026_GMEC_Residency Clinical Competency Committee

- 5.7. Finally, the committee is responsible for giving feedback to the program director to ensure that the assessment tools and methods are useful in distinguishing the developmental levels of behaviors in each of the competencies.

6. Meetings:

- 6.1. The CCC has to meet at least semiannually; and may meet more often for larger programs.
- 6.2. The length of the meetings might also vary depending on its size and the number of residents in the program.
- 6.3. The CCC committee shall maintain written minutes that should contain names of all residents being reviewed and all CCC members in attendance.
- 6.4. Special Meetings: The Program Director will call special meetings when an extraordinary situation arises involving a residency program or an urgent matter arises regarding a resident.

[Remainder of this page left blank intentionally. Signatures follow on next page.]



026_GMEC_Residency Clinical Competency
Committee

7. Signatures

Reviewed and Approved by	Name	Signature	Date
Assistant Dean for Graduate Medical Education (GME) & Chair of Graduate Medical Education Committee (GMEC)	Salah Zeineldine, MD		05.02.2024
Executive Associate Dean for Medical Education	Kamal Badr, MD		05.02.2024