

Suggested Annual Program Evaluation Template

Academic Year (AY) _____

Use this template for aggregating information from a single year's Annual Program Evaluation. The template is suggested, and you may adapt it in any way you find useful to facilitate program improvement. You may also use attachments or appendices if additional detail is relevant to tracking a given issue.

(Note: This form should NOT be shared with the Review Committee or with ACGME site visitors during accreditation site visits).

Program: _____ Date: _____

1. Membership, Program Evaluation Committee (*Program Requirements (PR) V.C.1.a*)

2. Resident/Fellow Complement

	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
Positions approved							
Current trainees							

3. Number/Types of Other Learners (other residents, fellows, medical students, other health professions)

4. Program Changes in the Past Year

5. Plans for Upcoming Changes

6. Annual Evaluation Process and Sources of Data

7. Evaluation Parameters and Results

Evaluation Parameter 1: Resident/Fellow Performance (*PR V.C.2.a*) and source(s) of information (e.g., faculty evaluations, OSCEs, in-service exam, Case Logs, scholarly activity, etc.)

Results Parameter 1:

Evaluation Parameter 2: Faculty Development (*PR V.C.2.b*) and sources of information (e.g., formal and informal, online, departmental, institutional, and regional/national, as well as topics/content, any post-development assessment of enhanced skills)

Results Parameter 2:

Evaluation Parameter 3: Graduate Performance (*PR V.C.2.c*) and sources of information (e.g., board examination performance, graduate placement, surveys of graduates and/or their employers or clinical settings)

Results Parameter 3:

Evaluation Parameter 4: Program Quality (*PR V.C.2.d*) (Core) and sources of information (e.g., assessments by residents/fellows and faculty members, recruitment, institutional data on performance)

Results Parameter 4:

8. Key Findings and Action Plans:

a. Strengths:

b. Areas for Improvement:

c. Action Plans for Areas for Improvement (V.C.2):

Area for Improvement	Intervention/Initiative	Responsible Individual(s) and Resources	Follow-up/ Reassessment Method	Follow-up Date

d. Date of the Review and Approval of the Action Plan by the Teaching Faculty (documentation in faculty meeting minutes V.C.3.a) (Detail)):_____

9. Final Step: Transfer action plan data to Action Plan Tracking Form.