Department of Urology
QUALITY IMPROVEMENT/CLINICAL COMPETENCY COMMITTEE
(QIC/CCC)
Effective: July 1, 2013

PURPOSE:

The Program Director must appoint the program’s Quality Improvement/Clinical Competency Committee, and ensure the Committee’s effective evaluation of each resident’s competence as demonstrated through achievement of the ACGME specialty’s milestones.

POLICY:

The Quality Improvement/Clinical Competency Committee (QIC/CCC) will review all resident evaluations; prepare and assure the reporting of the Milestone evaluations of each resident to ACGME; and advise the program director regarding resident progress, including promotion, remediation and dismissal.

PROCEDURE:

1. The Program Director of the Department of Urology residency program must appoint the members of the Quality Improvement/Clinical Competency Committee.
   a. The Quality Improvement/Clinical Competency Committee must be composed of at least three members of the program’s faculty.
   b. Others eligible for appointment to the Quality Improvement/Clinical Competency Committee include faculty from other programs and non-physician members of the healthcare team.
   c. All members should work directly with the program’s residents on a regular basis.

2. Responsibilities of the Quality Improvement/Clinical Competency Committee include:
   a. Members must meet, at a minimum, semi-annually. Ad hoc meetings may occur as necessary.
   b. The Committee will select a Committee Chair.
   c. Review all resident evaluations semi-annually.
d. Complete the standard specialty Milestone reporting form; ensure reporting of Milestone evaluations of each resident semi-annually to ACGME through direct entry into ADS, or other method as directed by ACGME policy.

e. Make recommendations to the Program Director regarding resident progress, including promotion, remediation and dismissal.

f. Make recommendations to the Program Director for additional or revised formative evaluations needed to assess resident performance in the Milestone sub-competency levels.