Pediatric Infectious Diseases Fellowship Program
Boston Children’s Hospital

Clinical Competency Committee

The Accreditation Council for Graduate Medical Education (ACGME) requires training programs to develop a clinical competency committee (CCC) to monitor and record the progress of their residents/fellows on predefined Milestones. In many programs, the current practice is for the program director to weigh the evaluation data from multiple sources and make decisions about each trainee’s progress with or without discussion with program faculty. Some programs, however, already use a committee for promotion decisions. The committee monitors fellow growth and makes recommendations, such as specific educational or remediation plans. The CCC is expected to assess each fellow’s progress in acquiring the relevant reporting Milestones for the fellow’s level of training. The CCC must make recommendations to the program director (PD) regarding fellow progress, including promotion, remediation, and dismissal. Therefore, CCC recommendations will be part of an early warning system for fellows who may not be progressing as expected.

1. **Membership:** CCCs should have a minimum of 3 faculty members but may have more. Membership can include faculty, assessment specialists, a medical director or service chief, faculty from other programs, nurses, and non-physician members of the medical team. The residency coordinator may not be a member of the CCC but may be present during meetings and may provide meeting documentation.

2. **Role and responsibility of CCC members:**
   a. The CCC members are expected to provide honest, thoughtful evaluations of each fellow and participate in consensus decisions about the trainee’s competency level. These decisions must be based on multisource input, not personal opinion alone.
   b. The CCC members will determine the schedule of meetings. The CCC should meet at least semiannually.

3. **CCC chair:** The chair guides the committee in its work to provide a consensus recommendation for reporting Milestones. Some program requirements state that the PD cannot serve as CCC chair. In programs where residency review committees are flexible on this issue, the PD may opt not to serve as chair to allow the CCC to provide independent recommendations, though the PD would continue to have ultimate decision-making authority.
   a. In our program, the PD will serve as the chair of the committee for administrative purposes, but will not conduct primary reviews of fellow portfolios.

4. **Faculty development:**
   a. The following points should be considered in terms of faculty development:
      i. Committee members must be oriented to each assessment tool and its relationship to the reporting Milestones. The CCC will need to decide how many assessments are needed for any given Milestone, how to aggregate data across tools, and how to verify data quality.
      ii. All program faculty must be trained regarding the reporting Milestones and their associated assessment tools to enhance rating consistency and accuracy. Training should include discussion of the Milestone levels and should establish agreement on the meaning assigned to each tool’s rating anchors. The CCC’s approach to aggregating and interpreting assessment data from each fellow will need to be discussed with and agreed on by all faculty members, in an ongoing fashion, to ensure consistency in evaluation decisions.
5. **The review process:**
   a. Each faculty member on the CCC will be assigned to conduct a primary review of 2-3 fellow portfolios prior to the CCC meeting. Portfolio components include rotation evaluations, including specific comments, multi-source (360-degree) evaluations, patient evaluations, teaching session evaluations, and Subspecialty In-Training Exam (SITE) scores. The primary review requires an in-depth review of the portfolio and an assignment of an overall milestones level.
   b. Each faculty member will be additionally assigned to conduct a secondary review of 2-3 fellow portfolios. The secondary review entails a more cursory review of the portfolio components to determine whether there is agreement with the milestones level assignment of the primary reviewer and instances in which further discussion is warranted.
   c. Faculty members should conduct primary/secondary reviews of the same fellows during a given 3-year fellowship.
   d. During the CCC meeting, milestones assignments will be reviewed and discussed among the members and with the PD. Specific recommendations regarding remediation/promotion will be made.
   e. The anticipated length of time for each primary review is 1 hour. The anticipated length of time for each secondary review is 15-30 minutes. The expectation is that the review time will become shorter as CCC members become facile with looking at evaluations and develop a better understanding of the milestones. The anticipated length of a CCC meeting is 1-1.5 hours.

6. **CCC feedback:** The PD will review the recommendations from the CCC with each fellow during the semi-annual fellow meetings in the spring and fall.