Frequently Asked Questions: Clinical Competency Committee and Program Evaluation Committee
Common Program Requirements
ACGME

Question	Answer
Evaluation	
What is the role of the program director on the Clinical Competency Committee (CCC)? *[Program Requirement: V.A.1.]*	The requirements regarding the CCC do not preclude or limit a program director's participation on the CCC. The intent is to leave flexibility for each program to decide the best structure for its own circumstances, but a program should consider: its program director's other roles as resident advocate, advisor, and confidante; the impact of the program director's presence on the other CCC members' discussions and decisions; the size of the program faculty; and other program-relevant factors. The program director has final responsibility for the program's evaluation and promotion decisions.
How can small programs have three members of the program faculty on the CCC? *[Program Requirement: V.A.1.a)]*	The intent is to have enough members to broaden the input in a resident's evaluation. Program faculty can include more than the physician faculty such as other physicians and non-physicians who teach and evaluate the program's residents. For example, a fellowship may include faculty from the core program or from required rotations in other specialties.
Are non-physicians permitted to serve on the CCC? *[Program Requirement V.A.1.a).(1).(a)]*	The requirements are intended to provide the program director with sufficient flexibility to select individuals he/she believes have the background and experience needed to evaluate resident/fellow performance based on the Milestones. This may include health professionals who have extensive contact and experience with residents. Examples include, but are not limited to, nurses, PhDs, physicians' assistants, and therapists.
What is the role of the program coordinator on the CCC? *[Program Requirement: V.A.1.a).(1).(a)]*	Program coordinators play a critical role in their residency programs and may, through the program's resident evaluation system, provide valuable insight on resident performance in areas such as interpersonal and communication skills, teamwork, and professionalism. Further, the program coordinator may, at the program director's discretion, attend CCC meetings to support the activities of the CCC, such as collation of data on each resident, taking meeting minutes, recording decisions, and managing the submission of Milestones data to the ACGME. However, evaluation of resident competence related to the Milestones for patient care and medical knowledge is a vital responsibility of the CCC and these assessments should be made by individuals with background and experience in health care. Therefore, program coordinators, although they may administratively serve the CCC and take part in the 360 assessments of the resident/fellow, may not serve as voting members of the CCC.

Question	Answer
What role can program residents, including chief residents who have not completed the program, play on the CCC? *[Program Requirement:* *V.A.1.a).(1).(b)]*	Program residents and chief residents in accredited years of the program may provide input to the CCC Chair and/or the program director, outside the context of the CCC meetings, through the evaluation system. However, to ensure that residents' peers are not providing promotion and graduation decisions, and that they are not involved in recommendations for remediation or disciplinary actions, these residents may not serve as CCC members or attend CCC meetings.
When would it be acceptable to not include a resident on the Program Evaluation Committee? *[Program Requirement: V.C.1.a).(1)]*	A resident must always be included on a Program Evaluation Committee unless there are no residents enrolled in the program. The PEC must meet annually, even when there are no residents enrolled in the program, to evaluate and review the program.

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