

STANDARDS AND REQUIREMENTS FOR APPROVAL OF PODIATRIC FELLOWSHIPS

COUNCIL ON PODIATRIC MEDICAL EDUCATION

TABLE OF CONTENTS

	Page
Introduction	1
About This Document	2
Standards for Approval of Podiatric Fellowship Programs.....	3
Institutional Standards and Requirements	4
Program Standards and Requirements	10

INTRODUCTION

The profession of podiatric medicine is the only independent practice profession that dedicates itself to the foot and ankle. The ever increasing body of medical knowledge necessitates the development of fellowships to facilitate the ability of highly trained professionals to continue the search for innovative and improved methods to prevent disease, promote health, and more effectively manage foot and ankle pathology.

A podiatric fellowship is an educational program that provides advanced knowledge, experience, and training in a specific content area within podiatric medical practice. Fellowships, by nature of their specific content concentration, seek to add to the body of knowledge through research and other collaborative scholarly activities.

Following four years of professional education, podiatric medical graduates complete at least two years of postdoctoral training. Podiatric fellowship education is a component in the continuum of the educational process, and as such occurs after completion of an approved residency.

The Council on Podiatric Medical Education (CPME) is an autonomous, professional accrediting agency designated by the American Podiatric Medical Association (APMA) to serve as the accrediting agency in the profession of podiatric medicine. The Council evaluates, accredits, and approves educational institutions and programs. The scope of the Council's approval activities extends to institutions throughout the United States and its territories and Canada.

The mission of the Council is to promote the quality of graduate education, postgraduate education, certification, and continuing education. By confirming these programs meet established standards and requirements, the Council serves to protect the public, podiatric medical students, and doctors of podiatric medicine.

The Council has been authorized by the APMA to approve institutions that demonstrate and maintain compliance with the standards and requirements in this publication. Podiatric fellowship approval is based on programmatic evaluation and periodic review by the Joint Residency Review Committee and the Council on Podiatric Medical Education.

Standards and requirements in this publication are divided into institutional standards and requirements and program standards and requirements. Under no circumstances may the standards and requirements for approval by the Council supersede federal or state law.

Prior to adoption, all Council policies, procedures, standards, and requirements are disseminated widely in order to obtain information regarding how the Council's community of interest may be affected.

The Council formulates and adopts its own procedures. These procedures are stated in CPME 830, *Procedures for Approval of Podiatric Fellowships*. This document, as well as CPME 820, may be obtained on the Council's website at www.cpme.org or by contacting the Council office.

ABOUT THIS DOCUMENT

This publication describes the standards and requirements for approval of podiatric fellowship programs. The standards and requirements, along with the procedures for approval, serve as the basis for evaluating the quality of the educational program offered by a sponsoring institution and holding the institution and program accountable to the educational community, podiatric medical profession, and the public.

The **standards** for approval of fellowship programs serve to evaluate the quality of education. These standards are broad statements that embrace areas of expected performance on the part of the sponsoring institution and the fellowship program. Compliance with the standards ensures good educational practice in the field of podiatric medicine and surgery and thus enables the Council to grant or confirm approval.

Related to each standard is a series of specific **requirements**. Compliance with the requirements provides an indication of whether the broader educational standard has been satisfied. During an on-site evaluation of a fellowship program, the evaluation team gathers detailed information about whether these requirements have been satisfied. Based upon the extent to which the requirements have been satisfied, the Council determines the compliance of the sponsoring institution and the fellowship program with each standard. In the requirements, the verb “shall” is used to indicate conditions that are imperative to demonstrate compliance.

The **guidelines** are explanatory materials for the requirements. Guidelines are used to indicate how the requirements either must be interpreted or may be interpreted to allow for flexibility, yet remain within a consistent framework. The following terms are used within the guidelines:

- The verbs “must” and “is” indicate how a requirement is to be interpreted, without fail. The approval status of a fellowship program is at risk if noncompliance with a “must” or an “is” is identified.
- The verb “should” indicates a desirable, but not mandatory, condition.
- The verb “may” is used to express freedom or liberty to follow an alternative.

Throughout this publication, the use of the terms “institution” and “program” is premised on the idea that the program exists within and is sponsored by an institution.

STANDARDS FOR APPROVAL OF PODIATRIC FELLOWSHIP PROGRAMS

Standards 1.0 - 7.0 pertain to all fellowship programs for which initial or continuing approval is sought. These standards relate to essential elements in fellowship programs concerning sponsorship, administration, and program development and assessment.

INSTITUTIONAL STANDARDS:

- 1.0 The sponsorship and control of a podiatric fellowship program are under the specific administrative responsibility of a healthcare institution that develops, implements, and monitors the fellowship program.*
- 2.0 The sponsoring institution ensures the availability of appropriate facilities and resources for fellowship training.*
- 3.0 The sponsoring institution formulates, publishes, and implements policies affecting the fellow.*
- 4.0 The sponsoring institution reports to the Council on Podiatric Medical Education regarding the conduct of the fellowship program in a timely manner and at least annually.*

PROGRAM STANDARDS:

- 5.0 The program has a well-defined administrative organization with clear lines of authority and a qualified faculty.*
- 6.0 The program has appropriate goals and objectives that are comprehensive in addressing the body of scientific knowledge underlying the fellowship and from which a curriculum of at least 12 months duration is derived and implemented. Curricular components of the program demonstrate consistency with the stated goals and objectives to impart specific knowledge and values and develop specific skills to produce highly trained professionals to continue the search for innovative and improved methods to prevent disease, promote health, and more effectively manage foot and ankle pathology.*
- 7.0 The fellowship program conducts appropriate evaluation, remediation, and self-assessment processes.*

INSTITUTIONAL STANDARDS AND REQUIREMENTS

1.0 *The sponsorship and control of a podiatric fellowship program are under the specific administrative responsibility of a healthcare institution(s) that develops, implements and monitors the fellowship program.*

1.1 **The sponsor shall be a hospital or academic health center. Hospital facilities shall be provided under the auspices of the sponsoring institution or through an affiliation with an accredited institution(s) where the affiliation is specific to fellowship training.**

A college or school of podiatric medicine may co-sponsor a fellowship with a hospital and/or academic health center but cannot be the sole sponsor of the program. A surgery center may co-sponsor a fellowship with a hospital and/or academic health center but cannot be the sole sponsor of the program.

Institutions that co-sponsor a fellowship must define their relationship to each other to delineate the extent to which financial, administrative, and teaching resources are to be shared. The document defining the relationship between the co-sponsoring institutions and the fellow contracts must describe arrangements established for the fellowship program and the fellow in the event of dissolution of the co-sponsorship.

1.2 **The sponsor or, in the case of a cosponsorship, one of the sponsors shall be accredited by the Joint Commission on the Accreditation of Healthcare Organizations or the American Osteopathic Association.**

1.3 **The sponsoring institution shall formalize all arrangements with affiliated institutions and/or facilities by means of written agreements that clearly define the roles and responsibilities of each institution and/or facility involved.**

When training is provided at a secondary institution or facility, the participating institutions must indicate their respective training commitments through a memorandum of understanding or contract that is reaffirmed at least once every five years. This document must:

- Acknowledge the affiliation and delineate financial support (including fellow liability) and educational contributions of each training site.
- Be signed and dated by the chief administrative officer of each participating institution or facility.
- Be forwarded to the program director.

If the program director does not participate actively at the affiliated institution or facility, or if a significant portion of the program is conducted at the affiliated institution or facility, an on-site coordinator must be designated formally to ensure appropriate conduct of the program at this training site.

2.0 *The sponsoring institution ensures the availability of appropriate facilities and resources for fellowship training.*

2.1 The sponsoring institution shall ensure that the physical facilities, equipment, and resources of the primary and affiliated training site(s) are sufficient to permit achievement of the stated goals and objectives of the fellowship program.

The physical plant must be well maintained and properly equipped to provide an environment conducive to teaching, learning, and providing patient care. Adequate patient treatment areas, adequate training resources, and a health information management system must be available for fellowship training.

The sponsoring institution must be in operation for at least 12 months before submitting an application for approval to assure that sufficient resources are available for the fellowship program. The institution must have an active podiatric service for at least 12 months prior to submitting an application for approval.

2.2 The sponsoring institution shall afford the fellow ready access to adequate library resources, including a diverse collection of current podiatric and non-podiatric medical texts and other pertinent reference resources (i.e., journals and audiovisual materials/instructional media).

Library resources should be located on-site or within close geographic proximity to the institution(s) at which the fellow is afforded training. Library services must include the electronic retrieval of information from medical databases.

2.3 The sponsoring institution shall afford the fellow ready access to adequate information technologies and resources.

Computer hardware, software, and related resources must be readily available and utilized to further the fellow's training.

2.4 The sponsoring institution shall afford the fellow ready access to adequate office and study spaces at the institution(s) in which fellowship training is primarily conducted.

2.5 The sponsoring institution shall provide adequate support staff to ensure efficient administration of the fellowship program.

The institution must ensure that neither the program director nor the fellow assumes the responsibility of clerical personnel. The institution must ensure that the fellow does not assume the responsibilities of nurses, podiatric medical assistants, or operating room or laboratory technicians.

3.0 *The sponsoring institution formulates, publishes, and implements policies affecting the fellow.*

3.1 The sponsoring institution shall utilize a fellowship selection committee to interview and select prospective fellow(s). The committee shall include the program director and individuals who are active in the fellowship program.

3.2 The sponsoring institution shall develop and make public recruitment, selection, and retention criteria and procedures that assure nondiscriminatory treatment of all applicants.

The sponsoring institution shall publish a mechanism for the resolution of allegations of sexual harassment from program candidates and fellows. The mechanism shall ensure due process to all individuals involved. The sponsoring institution shall ensure that the mechanism is distributed to and acknowledged in writing by the fellow prior to the start of the training year.

3.3 The sponsoring institution shall conduct its process of interviewing and selecting fellows equitably and in an ethical manner. The sponsoring institution shall inform the prospective fellow in writing of the selection process and conditions of appointment established for the program. An institution that sponsors more than one fellowship program shall inform the prospective fellow(s) of the selection process established for each program.

The sponsoring institution must make a written copy of the fellowship curriculum available to the prospective fellow.

3.4 Application fees, if required, shall be paid to the sponsoring institution and shall be used only to recover costs associated with processing the application and conducting the interview process.

The sponsoring institution must publish its policies regarding application fees (i.e., amount, due date, uses, and refunds).

3.5 The sponsoring institution shall inform all applicants as to the completeness of the application as well as the final disposition of the application (acceptance or denial).

- 3.6 The sponsoring institution shall accept only graduates of residency programs approved by the Council on Podiatric Medical Education who demonstrate the levels of knowledge, skills, and attitudes requisite for advanced training.**
- 3.7 The sponsoring institution shall provide the fellow a written contract or letter of appointment. The sponsoring institution shall state in the contract or letter the amount of the fellow stipend to be paid for the entire training year. The contract or letter shall be signed and dated by the chief administrative officer or appropriate senior administrative officer of the institution and the fellow.**

When a letter of appointment is utilized, a confirmation of acceptance must be put in writing by the prospective fellow and forwarded to the chief administrative officer or appropriate senior administrative officer. In the case of a co-sponsored program, the contract or letter of appointment must be signed and dated by the chief administrative officer of each co-sponsoring institution or appropriate senior administrative officer of each institution and the fellow.

- 3.8 The sponsoring institution shall include or reference the following items in the contract or letter of appointment:**

a. fellow duties and hours of work.

The sponsoring institution must prohibit fellow participation in any outside activities that could adversely affect the fellow's ability to function in the training program.

While the Council does not define what constitutes inappropriate outside activities that could have a detrimental effect on the fellow's ability to function, the program director is expected to evaluate any external employment that may impede, either physically or mentally, the capability of the fellow to participate effectively in the program.

A fellow may function as a member of the attending staff in certain clinical situations that are defined by the program and sponsoring institution.

b. duration of the agreement.

c. health insurance benefits.

The sponsoring institution must provide health insurance coverage for the fellow for the duration of the training program. The fellow's health insurance coverage must be at least equivalent to that afforded other postgraduate trainees at the same level of training.

d. professional, family, and sick leave benefits.

The fellow's leave benefits must be at least equivalent to those afforded other postgraduate trainees at the same level of training.

e. leave of absence.

The sponsoring institution must establish a policy pertaining to leave of absence or other interruption of the fellow's designated training period. In accordance with applicable laws, the policy must address continuation of pay and benefits and the effect of the leave of absence on meeting the requirements for completion of the fellowship.

f. professional liability insurance coverage.

The sponsoring institution must provide professional liability insurance for the fellow that is effective when training commences and continues for the duration of the training program. This insurance must cover all training experiences at all training sites and must provide protection against awards from claims reported or filed after the completion of training if the alleged acts or omissions of the fellow were within the scope of the fellowship. The sponsoring institution must provide the fellow proof of coverage.

g. other benefits if provided (e.g., meals, uniforms, vacation policy, housing provisions, payment of dues for membership in professional organizations, and disability insurance benefits).

3.9 The sponsoring institution shall ensure that the following written policies and mechanisms are distributed to and acknowledged in writing by the fellow prior to the start of the training year and following any written revisions to these policies and mechanisms.

a. the mechanism of appeal.

The sponsoring institution must establish a written mechanism of appeal that ensures due process for the fellow and the sponsoring institution, should there be a dispute between the parties. Any individual possessing a conflict of interest related to the dispute, including the program director, must be excluded from all levels of the appeal process.

b. the remediation methods established to address instances of unsatisfactory fellow performance.

The sponsoring institution must establish remediation methods to address instances of unsatisfactory fellow performance (academic and/or attitudinal). Remediation methods may include requiring that the fellow repeat particular training experiences, spend additional hours in a clinic, or complete additional assigned reading to facilitate achievement of the stated objectives of the curriculum. Remediation should be completed no later than three months beyond the normal length of the fellowship.

c. the rules and regulations for the conduct of the fellow.

3.10 The sponsoring institution shall provide the fellow a certificate verifying satisfactory completion of training requirements. The certificate shall specify the type of fellowship afforded the fellow.

The certificate must indicate that the fellowship program is approved by the Council on Podiatric Medical Education. The sponsoring institution may identify on the certificate any other institution(s) that have contributed significantly to the training of the fellow.

3.11 The sponsoring institution shall ensure that the fellowship program is established and conducted in an ethical manner.

The conduct of the fellowship must focus upon the educational development of the fellow rather than on service responsibility to individual faculty members.

4.0 *The sponsoring institution reports to the Council on Podiatric Medical Education regarding the conduct of the fellowship program in a timely manner and at least annually.*

4.1 The sponsoring institution shall report annually to the Council office on institutional data, fellows completing training, fellows selected for training, changes in the curriculum, and other information that may be requested by the Council and/or the Joint Residency Review Committee.

4.2 The sponsoring institution shall inform the Council in writing within 30 calendar days of substantive changes in the program.

The sponsoring institution must inform the Council of changes in areas including, but not limited to, sponsorship, appointment of a new program director, affiliated training sites, and curriculum.

4.3 The sponsoring institution shall provide the Council office copies of its correspondence to current and prospective fellows informing them of denial of eligibility for initial on-site evaluation, probation, administrative probation, withholding of provisional approval, withdrawal of approval, denial of an increase in positions, or voluntary termination of the program.

The institution must submit either the fellow's written acknowledgment of the status of the program or verifiable documentation of fellow receipt of the institution's letter (i.e., signed copies of return receipts for certified mail). These materials must be received in the Council office within 50 calendar days of the director's receipt of the letter informing the institution of the action taken by the Joint Residency Review Committee or the Council on Podiatric Medical Education.

PROGRAM STANDARDS AND REQUIREMENTS

5.0 *The program has a well-defined administrative organization with clear lines of authority and a qualified faculty.*

5.1 **The sponsoring institution shall designate one individual as fellowship program director to serve as administrator of the fellowship program. The program director shall be provided proper authority by the sponsoring institution to fulfill the responsibilities required of the position.**

Because of the potential of creating confusion in the leadership and direction of the program, co-directorship is specifically prohibited; however, the program director may appoint an assistant director to assist in administration of the fellowship. A fellowship training committee also may be established to assist the program director in the administration of the fellowship.

The sponsoring institution should provide an orientation when the program director is new to this position. A consultant may be utilized to present or participate in this orientation.

The sponsoring institution should provide compensation to the program director.

5.2 **The program director shall possess appropriate clinical, administrative, and teaching qualifications for implementing the program and achieving stated goals and objectives.**

The program director must be either certified in an appropriate specialty area or possess suitable equivalent qualifications.

5.3 **The program director shall be responsible for the administration of the fellowship in all participating institutions. The program director shall be able to devote sufficient time to fulfill the responsibilities required of the position. When a program trains more than one fellow, the program director shall ensure that fellows receive equitable training experiences.**

The director is responsible for maintenance of records related to the educational program, communication with the Joint Residency Review Committee and Council on Podiatric Medical Education, scheduling of training experiences, instruction, supervision, evaluation of the fellow, periodic review and revision of curriculum content, and program self-assessment.

The director must not delegate to the fellow maintenance of records related to the

educational program, communication with the Joint Residency Review Committee and Council on Podiatric Medical Education, scheduling of training experiences, instruction, supervision, evaluation of the fellow, periodic review and revision of curriculum content, and program self-assessment.

The program director ensures fellow participation in educational experiences and didactic experiences (e.g., lectures, journal club, conferences, and seminars).

5.4 The program director shall participate at least annually in faculty development activities (i.e., administrative, organizational, teaching, and/or research skills for postgraduate training programs).

The faculty development activities should be approved as continuing education programs by the Council on Podiatric Medical Education or another appropriate agency.

5.5 The fellowship program shall have a sufficient complement of podiatric and non-podiatric medical faculty to implement program objectives and to supervise and evaluate the fellow.

The complement of faculty should relate to the number of fellows, institutional type and size, organization and capabilities of the services through which the fellow rotates, and training experiences offered outside the sponsoring institution.

5.6 Podiatric and non-podiatric medical faculty members shall be qualified by education, training, experience, and current clinical competence in the subject matter for which they are responsible.

Faculty members should participate in faculty development activities to improve teaching, research, and evaluation skills.

5.7 Faculty members with major responsibility for teaching the fellow shall be fully aware of program goals and objectives and shall be willing to contribute the necessary time and effort to the program.

Faculty members take an active role in the presentation of seminars, lectures, conferences, journal clubs, and other didactic activities. Faculty members supervise and evaluate the fellow in clinical sessions and assume responsibility for the quality of care provided by the fellow during the clinical sessions that they supervise. Faculty members also discuss patient evaluation, treatment planning, patient management, complications, and outcomes of all cases with the fellow and review records of patients assigned to the fellow to ensure the accuracy and completeness of these records.

6.0 *The program has appropriate goals and objectives that are comprehensive in*

addressing the body of scientific knowledge underlying the fellowship and from which a curriculum of at least 12 months duration is derived and implemented. Curricular components of the program demonstrate consistency with the stated goals and objectives to impart specific knowledge and values and develop specific skills to produce highly trained professionals to continue the search for innovative and improved methods ways to prevent disease, promote health, and more effectively manage foot and ankle pathology.

- 6.1 The fellowship program shall provide advanced education to allow the fellow to acquire special expertise related to the field of podiatric medicine beyond the level of training in the applicable approved prerequisite podiatric residency program.**

Fellowship education consists of academic and/or technical components. The academic component must emphasize a scholarly approach to clinical problem solving, self-directed study, development of analytic skills and surgical/treatment judgment, and research. The technical component ensures the ability of the fellow to perform skillfully the procedures and/or treatment plans required by the program.

- 6.2 When podiatric residents and fellows are being educated in the same institution, the fellowship and residency curricula shall not adversely affect each other.**

If the institution appoints different individuals to the positions, the residency director and the fellowship director must jointly prepare a written agreement specifying the educational relationship between the residency and fellowship programs, the roles of the residency and fellowship directors in determining the educational program of residents and fellows, and the roles of the residents and fellows in developing analytic skills and surgical/medical treatment judgment.

- 6.3 The goals and objectives of the fellowship shall be developed in conjunction with appropriate individuals involved in the training program.**

In developing the curriculum, the program director consults with service chiefs/ instructors to determine realistic objectives for each podiatric and non-podiatric medical educational experience. Members of the administrative staff and the office of medical education of the sponsoring institution may be involved in the development of goals and objectives.

- 6.4 The program shall have clearly stated goals that are appropriate for the fellowship and consistent with the expectations of the profession and the public.**

Goals are those long-range purposes that provide direction and philosophy for the program. Goals define those end results or outcomes to be achieved based on available

resources and, taken collectively, constitute a realistic overall mission for the fellowship, consistent with the expectations of the profession and the public. Goals are distinct from objectives. A clear statement of goals provides a basis for the development of objectives for all aspects of the program.

- 6.5 The program shall have clearly stated learning objectives that are appropriate for educational experiences provided in the fellowship. Learning objectives shall be statements that describe the knowledge, skills, and attitudes that the fellow is expected to acquire during training.**

Objectives are short-term conditions to be achieved within a given period of time and provide measurable evidence of progress toward the achievement of the goals of the program. Objectives are brief statements of accomplishments expected to be realized and attained by the fellow in the various educational experiences through departments and services of the sponsoring institution and through other affiliated facilities. Objectives reflect resources available for fellowship training at the sponsoring institution and affiliated institutions.

A prescribed set of clinical and/or didactic learning activities or tasks should accompany each objective to facilitate achievement of that objective by the fellow.

- 6.6 The goals and objectives shall focus upon the educational development of the fellow and shall not place undue emphasis on service responsibility to individual faculty members.**

- 6.7 The goals and objectives of the fellowship shall be distributed at the beginning of the training year to all individuals involved in the training program including fellows, teaching staff, and administrative staff.**

Prospective fellows are afforded the opportunity to review the goals and objectives of the program.

- 6.8 The program shall establish and publish at the beginning of the training year a formal schedule of educational experiences to be afforded the fellow.**

The formal schedule reflects the experiences provided the fellow at all training sites. The schedule is reviewed and modified as needed to ensure an appropriate sequencing of training experiences for the fellow consistent with the curriculum. Unless extenuating circumstances are present, the training period should be continuous and uninterrupted.

- 6.9 Didactic activities that complement and supplement the curriculum shall be available at least weekly.**

Didactic activities must be provided in a variety of formats. These formats may include lectures, clinical pathology conferences, morbidity and mortality conferences, cadaver dissections, tumor conferences, informal lectures, teaching rounds, continuing education activities, instructional media, and structured independent study.

Informal lectures and teaching rounds should be provided to complement the formal didactic program. Other activities such as computer-assisted instruction, video and audio tapes, and continuing medical education seminars on closed circuit television may supplement the formal didactic program.

6.10 A journal club and/or research seminars shall be organized for the purpose of ensuring the fellow can interpret research studies. The activities shall include participation of the faculty and the fellow and be conducted at least monthly.

6.11 The fellow shall be afforded opportunity to participate in research or other scholarly activities, and the fellow shall participate in such scholarly activities.

The fellow must participate in basic and/or clinical hypothesis-based research. The fellow must learn to design, implement, and interpret research studies under supervision by qualified faculty. The fellow must be afforded the time and facilities for research activities.

6.12 The sponsoring institution shall require that the fellow maintains an activity log appropriate for the type of fellowship. The log shall be submitted at least quarterly to the program director for review, evaluation, and verification. The activity log shall document the fellow's educational experiences.

The activity log may include information regarding didactic experiences including lectures, journal club, research seminars, clinical experiences, patient interactions, interesting clinical observations, pathologies emergency room activity, and/or surgical procedures.

To document surgical training, programs are encouraged to utilize JRRC 671, *Clinical Report Log*, and JRRC 681, *Summary Sheet*.

7.0 *The fellowship program conducts appropriate evaluation, remediation and self-assessment processes.*

7.1 Upon completion of each training experience (e.g., clinical education, research project), the fellow shall be evaluated in writing by the instructor responsible for providing training. An evaluation form shall be used to document attainment of the stated objectives of each educational experience and completion of the research project. Evaluation of the fellow's performance in ongoing experiences shall be conducted at least quarterly.

The written evaluation also may include assessment of the fellow in areas such as communication skills, professional behavior, attitudes, and initiative. Intermittent evaluation is encouraged during all educational experiences. Information from patients and/or peers having direct contact with the fellow may contribute to the evaluations.

The evaluations must be written or completed in an electronic format. The evaluation instrument must indicate the dates covered and must be validated by the faculty member, the fellow, and the program director. The instrument may include evaluation of the fellow in areas such as communication skills, professional behavior, attitudes, and initiative. The timing of the evaluation for each educational experience must allow sufficient opportunity for remediation.

7.2 The program director, faculty, and fellow(s) shall conduct an annual self-assessment of the program's resources and curriculum. Information resulting from this annual review shall be used in improving the program.

The review must include evaluation of the program's compliance with the current standards and requirements of the Council, the fellow's formal evaluation of the program, and the director's formal evaluation of the faculty.

The review should assess the relationship between the fellowship and any podiatric residency program conducted at the sponsoring institution in order to assure the integrity of each. The review must determine the extent to which the objectives are being achieved, whether all those involved understand the objectives, and whether resources need to be enhanced, modified, or reallocated to assure that the objectives can be achieved. The review also must determine the extent to which didactic activities complement and supplement the curriculum.

Upon completion of each educational experience, the fellow should provide the program director a written evaluation of the experience. Upon completion of fellowship training, the fellow should meet with the program director to evaluate the training program as a whole. The fellow's evaluation should include comments regarding patient diversity and volume, quality of teaching, clinical, and research supervision, level of participation in patient care, whether appropriate feedback was provided by faculty members, and overall impression of the educational experience.

The fellow's evaluation may be utilized to assess and improve the effectiveness of the program in areas such as appropriateness of goals and objectives, strengths and weaknesses of the program, coordination of didactic and clinical experiences, and effectiveness of the podiatric and non-podiatric medical faculty.

To enhance the effectiveness of the review process, the program director should ensure that appropriate individuals are involved. The review process should include the service

chiefs/instructors responsible for providing educational experiences, the fellowship training committee, and the fellow. The results of fellow evaluation

should be used to determine the appropriateness of program goals and objectives in view of training experiences provided.

The program director should share the evaluation with the faculty, administration, and fellowship training committee.

The review should be based on an assessment of the program's compliance with standards and requirements of the Council. The assessment also should include review of measures of program outcomes such as success of previous fellows in private practice and teaching environments, podiatric administrative activities, faculty appointments, attainment of board certification, state licensure, hospital appointments, and publications.

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