

COUNCIL ON PODIATRIC MEDICAL EDUCATION

AGENDA GUIDE

A schedule that identifies individuals to be interviewed by the evaluation team must be prepared by the sponsoring institution(s) and forwarded to the Council office at least four weeks prior to the on-site visit. Council staff will then forward the agenda to the evaluation team. The following guidelines are to be used in preparing the agenda.

- Depending on the number of residents participating in the program(s) and the number of facilities involved, a minimum of six to eight hours is required to evaluate a podiatric residency program. When multiple institutions are involved in providing residency training, the evaluation team may need to meet with personnel involved at multiple sites. Contact the Council office for further details regarding programs sponsored by multiple institutions.
- The evaluation team does not conduct any meetings related to the on-site evaluation prior to the actual scheduled date and time of the visit. All meetings occur at the institution(s) being visited and occur on the scheduled day of the evaluation.
- The on-site evaluation should begin as early as possible to enable thorough review of the program and allow flexibility in scheduling the required components of the evaluation.
- An appropriate meeting room must be arranged for the evaluation team to conduct its interviews; this is usually best provided through the sponsor's administrative office (e.g., boardroom, conference room). The room provided must be private and secure. The evaluation team must have access to a computer with internet capability during the on-site evaluation. The preferred location is in the meeting room dedicated to the team's use. The evaluation team should be provided with a lunch meal to be coordinated by the program staff.
- In order that the evaluation team may assess the extent to which curriculum content meets standards established by the profession as well as the competencies utilized by the sponsoring institution, the agenda for the on-site evaluation requires that key participants in the training program be interviewed (these individuals are identified below in boldface print). Interviews must be conducted in person; **the Council does not permit telephone interviews**. The Council may elect to cancel the visit if
 - the agenda does not include interviews as indicated in items 1-4 below or
 - individuals identified in the agenda (administration and faculty directly responsible for resident training) are not available for interview on the day of the visit.

Cancellation of the visit may jeopardize the accreditation status of the program.

The following guidelines are provided in determining order and lengths of interviews (all items in bold are required; the time listed for interviews is approximate)

1. **Program director:** One-hour interview to be scheduled at the beginning of the evaluation. The program director must be available to the team throughout the entire evaluation.
2. Confidential interviews with administrative and teaching staffs. The program director must not be present for these interviews. The following are not in a specific order:
 - a. **Chief administrative or executive officer(s) of the sponsoring/co-sponsoring institution(s) or designated representative(s):** 30 minutes.
 - b. **Director of medical education (if the sponsoring/co-sponsoring institution(s) has(ve) such a position) or a designated representative:** 10-20 minutes.
 - c. **Site coordinators (if secondary institutions or facilities are utilized in the program and the program director does not participate actively at the affiliated institutions):** 10-20 minutes
 - d. **Chiefs of medical and/or surgical staffs:** 15 minutes for each individual
 - e. **Podiatric and medical/osteopathic staffs:** 10 minutes for each individual. Interviews should be conducted individually; group interviews may be appropriate if approved in advance by the chair of the team. Podiatric staff should include the individuals most active in the training experiences afforded the residents. **Medical/osteopathic staff must represent each rotation provided.**
3. **Podiatric residents** (confidential interview): Unspecified length of time. Either individual or group interviews may be conducted depending on the number of residents and at the discretion of the team chair.
4. Interview(s) with representative(s) of the nursing and/or ancillary staffs: 10-20 minutes. An interview with the operating room supervisor and clinic supervisor is required.
5. Tour of the physical facilities, including the operating room(s) and clinic(s): 20-30 minutes.
6. Review of medical records including appropriate imaging studies to be selected by the evaluation team in advance of the visit: Unspecified length of time; records should be available in the meeting room at the beginning of the day.
7. Executive session of evaluation team to prepare for summation review: 20 minutes.
8. Summation review of evaluation team findings with the program director and the chief administrative officer(s) of the institution(s): 15-30 minutes.

NOTE: The following information must be available for the evaluation team during the visit (these items are referenced to the applicable requirements in CPME publication 320, *Standards and Requirements for Approval of Podiatric Medicine and Surgery Residencies*):

- a. On-site access to web-based resident logs. (requirements 6.2 and 7.1)
- b. Collective bargaining agreement, if applicable.
- c. Employee handbook, if applicable.

The following documents are required only if different than previously submitted with the pre-evaluation materials:

- d. Each resident's signed contract. (requirements 3.8 and 3.9)
- e. Residency manual. (requirement 3.10)
- f. Resident assessment forms completed by podiatric and non-podiatric medical staff members. (requirement 7.2)

SAMPLE AGENDA

St. Servatus Hospital
Evaluation of Podiatric Medicine and Surgery Residency (PMSR)
Monday, November 7, 2021
Conference Room, 5th Floor

Evaluation Team: Rona Norwood, DPM (CPME-Team Chair)
Michael Daley, DPM (ABPM Representative)
Kim Welby, DPM (ABFAS Representative)

- 8:00 a.m. Mary Ann Gray, DPM, Program Director
- 9:00 a.m. James Purnell, Chief Administrative Officer
- 9:30 a.m. Martin Levine, MD, Director of Medical Education
Amy Gunther, MD, Chief of Medical Staff
Carl Crawford, MD, Chief of Surgery
- 10:00 a.m. Ann Kellogg, DPM, Assistant Program Director
Ramiro Valdes, DPM
Karen Calden, DPM
- 10:30 a.m. Raul Casey, DPM, Clinic Supervisor
Lawrence Byrne, RN, Operating Room Supervisor
- 10:50 a.m. Robert Auerbach, MD, Medical Imaging
Timothy Woods, MD, Pathology
David Strobl, MD, Anesthesiology
- 11:20 a.m. Rhee Howard, MD, Internal Medicine
Paul Waters, MD, Rheumatology
Natalie MacEvoy, MD, Infectious Disease
- 11:50 a.m. Mike Regler, MD, Dermatology
James Thomas, MD Pediatrics
Stephen Greene, MA, Behavioral Science
- 12:30 p.m. Lunch
- 1:00 p.m. Tour of physical facilities
- 1:30 p.m. William McGuire, MD, Orthopedic Surgery
Janis Ulmanis, MD, General Surgery
June D'Amico, MD, Emergency Medicine
- 2:00 p.m. Chart Review
- 3:00 PM First-year residents

3:20 PM	Second-year residents
3:40 PM	Third-year residents
4:00 p.m.	Executive Session of Evaluation Team
4: 30 p.m.	Summation Review with Program Director and CAO