**Checklist of Required ACGME Documents for Site Visit**

This is the list that will come attached to your site visit letter. Obtained from the ACGME, this is a list of required documents which must be available during the site visit. List has been divided into three sections - Program Documentation, Resident Documentation, and Policies and Procedures.

Be sure you have all these required documents updated and available for site visitors, no exceptions.

**Program Documentation**

* Overall mission and educational goals/aims for the program (Common Program Requirements, CPR IV.A.1)
* Sample of competency-based goals and objectives at each educational level for one rotation/assignment (CPR IV.A.2)
* All Current Program Letters of Agreement (PLAs) (CPR I.B.1)
* Completed annual written confidential evaluations of faculty by residents/fellows – current and last academic year (CPR V.B.3)
* Completed annual written confidential program evaluations by residents/fellows - current and last academic year (CPR V.C.1.d(1))
* Completed annual written confidential program evaluations by faculty - current and last academic

year (CPR V.C.1.d(1))

* Documentation (meeting minutes) of program evaluation and written improvement plan with residents/fellows participation (CPR V.C)
* Documentation of residents/fellows’ duty hours (CPR II.A.4.j; VI.D.1-3)
  + Sample duty hour compliance data demonstrating your monitoring system
* Conference schedules- current and last academic year (CPR IV.A.3)
* Documentation of conference attendance, if required by the RRC
* Review of Case/Procedure logs, if applicable and specified in the program requirements
* Documentation of internal review: date, participants’ titles, type of data collected, and date of GMEC (GME Office will supply this information to the program
  + Do NOT give the site visitor the actual Internal Review Report (Institutional Requirement – IR)

**Resident Files**

* Files of current residents/fellows and most recent program graduates (1-2 in each year of training)
* Files of current residents/fellows who have transferred into the program, if applicable- including
  + documentation of previous experiences and competency-based performance evaluations (CPR III.C.1)
* Files of residents/fellows who have resigned or been dismissed from the program in the past 3 years, if applicable
* Evaluations of residents/fellows at the completion of each assignment - current and last academic year (CPR V.A.1.a)
* Evaluations showing use of multiple evaluators: faculty, peers, other professional staff, patients, self-evaluation - current and last academic year (CPR V.A.1.b(2))
* Documentation of residents/fellows’ semi-annual evaluations of performance with feedback - current and last academic year (CPR II.A.4.g; V.A.1.b(4))
* Final (summative) evaluation of residents/fellows, documenting performance during the final period of education and verifying that the fellow has demonstrated sufficient competence to enter practice without direct supervision (CPR V.A.2)
* Sample documentations of residents’/fellows’ participation in patient safety and quality improvement activities/projects

**Policies and Procedures**

* Program-specific (not institutional) policy for supervision of residents/fellows addressing progressive responsibilities for patient care and faculty responsibility for supervision, including (CPR IV.A.4, IR)
  + night coverage
  + events that require housestaff to communicate with appropriate supervising faculty members
* Policies and procedures (institution and program) for fellows’ wellness, including (CPR and IR)
  + Resources
  + Duty hours and
  + Learning/work environment
* Policy for transitions of care and hand-offs for all rotations, including night coverage
* Moonlighting policy (CPR II.A.4.j and CPR VI.F and IR)
* Policy for recruitment, appointment, eligibility, selection, and promotion of fellows (IR)
* Institutional policy for discipline and dismissal of fellows, including due process (IR)
* Written description of CCC including
  + membership,
  + semi-annual resident evaluation process,
  + reporting of Milestones evaluation by ACGME,
  + CCC advising on resident progress including promotion, remediation, and dismissal
* Written description of PEC including
  + membership,
  + evaluation and tracking protocols,
  + resident evaluations of rotations/assignments,
  + development of written APE, and
  + action plans resulting from APE

**Annual Program Evaluations and Self-Study Documents**

Below documents will not be accessed or reviewed by site visitors but should be available to PD for a discussion of the program’s ongoing improvement efforts

* Annual Program Evaluations for the past 5 years including
  + Action plans resulting from these evaluations
  + Data tracked and information on improvement activities
* Self-Study documentations (in addition to the Self-Study Summary)