Lehigh Valley Health Network’s Graduate Medical Education Committee (GMEC) believes that accurate and timely feedback is required for residents and fellows to improve their skills. New Innovations Residency Management System (NIRMS) is the GMEC network standard to support timely and accurate return of evaluations. This policy outlines how physician compliance with completing evaluations in a timely manner will be tracked and reported. This policy does not supercede ACGME or AOA requirements of timely evaluation.

While governing bodies (ACGME, AOA, CODA) recommend the minimum number of faculty based on program size, core faculty are those identified as essential to the administration of the program. While a core faculty member could also be identified as a key faculty member, it is not a requirement. This policy focuses only on core faculty.

1. Identification of Core Faculty

   a. Each Program Director, or designee, is required to identify core faculty.

      i. Guidelines for defining core faculty include:

         1. The program director identifies as critical to providing feedback.

         2. Experienced in educational methods (like evaluation and in depth knowledge of competencies)

         3. Understands the departments goals, objectives, and curriculum

         4. Involved in evaluations on a routine basis

         5. Expected to complete evaluations online

         6. Spends substantial amount of time working with residents

      ii. Core Faculty lists will be maintained by Program Director, or designee, in NIRMS Specific procedures for identifying core faculty and generating reports are available contained within NIRMS.

2. Institutional Reporting

   a. For a department to be compliant with institutional goals, core faculty need to complete 75% of the evaluations assigned to them within 30 days.

   b. The institutional report will be presented at GMEC twice yearly.
c. The Institutional Report will be run by the Division of Education.

d. Core faculty designations should be updated in NIRMS two weeks prior to the GMEC meetings listed above.

e. Compliance with this standard is maintained at the program management level and in consultation with division chiefs as needed.

Approved by the Graduate Medical Education Committee

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<th>Approved by:</th>
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<tbody>
<tr>
<td>Thomas Whalen (Evp &amp; Chief Med Officer)</td>
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