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**National Institute for Health Specialties**

**Rubrics for Obstetrics and Gynaecology Residency Program**

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| **GENERAL INFORMATION** |
| **1 Institution Information** |
| Institution: | Click or tap here to enter text. |
| Address: | Click or tap here to enter text. |
| Date: | Click or tap here to enter text. |
| **Requirements**  | **Status** | **Evidence if applicable**  | **Comments** |
|  | **Met** | **P. Met** | **Not Met** |  |  |
| **INSTITUTION** |
| 1. The program is sponsored by a National Institute for Health Specialties accredited sponsoring institution.
 |[ ] [ ] [ ]   |  |
| 1. A valid program letter of agreement (PLA) exists with each participating site.
 |[ ] [ ] [ ]   |  |
| 1. The program has a mechanism to monitor the clinical learning and working environment at each participating site.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT FOR INSTITUTION SECTION:** | Click or tap here to enter text. |
| **PROGRAM PERSONNEL AND RESOURCES**  |
| **Program Director** |
| 1. The program director has an active consultant license.
 |[ ] [ ] [ ]   |  |
| 1. The program director has qualification(s) or competency in medical education.
 |[ ] [ ] [ ]   |  |
| 1. The program director has at least 3-years’ experience in residency training/management.
 |[ ] [ ] [ ]   |  |
| 1. The sponsoring institution provides the program director with adequate protected time for program administration (0.5 Full-Time Equivalent).
 |[ ] [ ] [ ]   |  |
| 1. The program director actively participates in the Graduate Medical Education Committee.
 |[ ] [ ] [ ]   |  |
| **Associate Program Director**  |
| * + 1. The program has appointed (an) associate program director(s).
 |[ ] [ ] [ ]   |  |
| * + 1. The associate program director actively participates in program administration and educational activities.
 |[ ] [ ] [ ]   |  |
| * + 1. The sponsoring institution provides the associate program director with adequate protected time for program administration (0.3 Full-Time Equivalent).
 |[ ] [ ] [ ]   |  |
| **Faculty**  |
| * + 1. Physician faculty hold a specialist or a consultant license in their specialty/subspecialty.
 |[ ] [ ] [ ]   |  |
| * + 1. The program director has designated core faculty members who have a significant role in resident education and supervision.
 |[ ] [ ] [ ]   |  |
| * + 1. The program director has designated subspecialty education directors (SED) in the following subspecialties (gynae oncology, reproductive endocrinology and infertility, urogynaecology, maternal fetal medicine).
 |[ ] [ ] [ ]   |  |
| * + 1. The sponsoring institution provides core faculty members with adequate protected time for resident education (0.2 Full-Time Equivalent).
 |[ ] [ ] [ ]   |  |
| * + 1. The ratio of core faculty to residents is a minimum of 1:4.
 |[ ] [ ] [ ]   |  |
| * + 1. The ratio of all faculty to residents is a minimum of 1:1.
 |[ ] [ ] [ ]   |  |
| * + 1. Faculty members regularly participate in organized educational and teaching activities.
 |[ ] [ ] [ ]   |  |
| * + 1. Faculty members regularly attend faculty development activities.
 |[ ] [ ] [ ]   |  |
| * + 1. Faculty are evaluated at least annually by the program director.
 |[ ] [ ] [ ]   |  |
| **Program Coordinator** |
| * + 1. The program has a dedicated program coordinator.
 |[ ] [ ] [ ]   |  |
| * + 1. The sponsoring institution provides the program coordinator with adequate time and support to perform the administrative duties of the program.
 |[ ] [ ] [ ]   |  |
| **Resources**  |
| 1. The following clinical services are available in the sponsoring institution or the participating site(s).
 |[ ] [ ] [ ]   |  |
| * + - 1. Gynae oncology
 |[ ] [ ] [ ]   |  |
| * + - 1. Urogynaecology including urodynamics
 |[ ] [ ] [ ]   |  |
| * + - 1. Reproductive endocrinology / Infertility
 |[ ] [ ] [ ]   |  |
| * + - 1. Maternal fetal medicine
 |[ ] [ ] [ ]   |  |
| * + - 1. Colposcopy
 |[ ] [ ] [ ]   |  |
| * + - 1. Access to simulation as required.
 |[ ] [ ] [ ]   |  |
| * + - 1. Imaging studies including ultrasound, computed tomography, magnetic resonance imaging, and radionuclide scans.
 |[ ] [ ] [ ]   |  |
| 1. The patient population served is diverse with a variety of clinical problems.
 |[ ] [ ] [ ]   |  |
| 1. Allied healthcare services are available (including social workers, dieticians, physiotherapists, etc.) to assist in patient care.
 |[ ] [ ] [ ]   |  |
| 1. Consultation from other clinical services is available in a timely manner.
 |[ ] [ ] [ ]   |  |
| 1. Adequate clinical and teaching space is available including meeting rooms, classrooms, examination rooms, computers, visual and other educational aids, and office space for educational staff.
 |[ ] [ ] [ ]   |  |
| 1. The program has a mechanism to monitor the number of other learners (including medical students, interns, residents from other programs), to ensure it does not interfere with the program’s residents’ learning experience.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF PERSONNEL AND RESOURCES SECTION:** | Click or tap here to enter text. |
| **RESIDENT APPOINTMENT** |
| 1. There is a minimum of three residents in each year of the program.
 |[ ] [ ] [ ]   |  |
| 1. There is a minimum of 15 residents enrolled in the program at all times.
 |[ ] [ ] [ ]   |  |
| 1. Eligibility and selection of residents as per NIHS criteria.
 |[ ] [ ] [ ]   |  |
| 1. Program orientation process for new residents available including but not limited to policies, work structure, curriculum, wellbeing, physician impairment, fatigue and sleep deprivation, etc.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF RESIDENT APPOINTMENT:** | Click or tap here to enter text. |
| **EDUCATIONAL PROGRAM** |
| **Curriculum** |
| 1. The program has written competency-based goals and objectives for each rotation.
 |[ ] [ ] [ ]   |  |
| 1. The goals and objectives are available for all residents and faculty members.
 |[ ] [ ] [ ]   |  |
| 1. Didactic activities take place regularly.
 |[ ] [ ] [ ]   |  |
| 1. The following didactic-sessions take place at least monthly:
 |  |
| * 1. Grand rounds.
 |[ ] [ ] [ ]   |  |
| * 1. Case-based discussions.
 |[ ] [ ] [ ]   |  |
| * 1. Multidisciplinary meetings/conferences.
 |[ ] [ ] [ ]   |  |
| * 1. Morbidity and mortality meetings/rounds.
 |[ ] [ ] [ ]   |  |
| * 1. Subspecialty-specific Lectures and workshop.
 |[ ] [ ] [ ]   |  |
| 1. Residents are provided with protected time to attend didactic activities.
 |[ ] [ ] [ ]   |  |
| **Clinical Experiences** |
| 1. Residents’ clinical experience includes the following rotations:
 |[ ] [ ] [ ]   |  |
| * 1. At least 2 blocks of gynae oncology.
 |[ ] [ ] [ ]   |  |
| * 1. At least 2 blocks of urogynaecology.
 |[ ] [ ] [ ]   |  |
| * 1. At least 2 blocks of reproductive endocrinology and infertility.
 |[ ] [ ] [ ]   |  |
| * 1. At least 2 blocks of maternal fetal medicine.
 |[ ] [ ] [ ]   |  |
| * 1. At least 1 block in emergency care.
 |[ ] [ ] [ ]   |  |
| * 1. At least 3 weeks ICU/1 week Anaesthesia.
 |[ ] [ ] [ ]   |  |
| * 1. At least 1 block Neonatology NICU rotation.
 |[ ] [ ] [ ]   |  |
| * 1. At Least 1 block General Surgery.
 |[ ] [ ] [ ]   |  |
| * 1. At least 1 block PHC/Family Medicine.
 |[ ] [ ] [ ]   |  |
| * 1. At least 1 block Psychiatry.
 |[ ] [ ] [ ]   |  |
| * 1. At least 2 blocks of Imaging rotation.
 |[ ] [ ] [ ]   |  |
| * 1. At least 2 blocks of Obstetrics Medicine.
 |[ ] [ ] [ ]   |  |
| * 1. At least 19 blocks Rotation in general obstetrics.
 |[ ] [ ] [ ]   |  |
| * 1. At least 19 blocks of Rotation in general Gynaecology.
 |[ ] [ ] [ ]   |  |
| * 1. At least 2 blocks of electives
 |[ ] [ ] [ ]   |  |
| * 1. At least 12 months of weekly continuity clinic in obstetrics.
 |[ ] [ ] [ ]   |  |
| The program has a mechanism to ensure that junior residents are not providing ongoing care for more than 15 patients.  |[ ] [ ] [ ]   |  |
| 1. The program has a mechanism to ensure that residents do not report to an excessive number of most-responsible physicians.
 |[ ] [ ] [ ]   |  |
| 1. The program has a mechanism to ensure that residents receive adequate clinical supervision.
 |[ ] [ ] [ ]   |  |
| 1. The program has a mechanism to ensure that senior residents are not providing ongoing care for more than 30 patients.
 |[ ] [ ] [ ]   |  |
| 1. Residents have adequate and graded supervision in all years of the program.
 |[ ] [ ] [ ]   |  |
| 1. The program has a mechanism to train residents on the performance of the following procedures: instrumental delivery, caesarean section, fetal blood sampling, fetal surveillance, management of antepartum and postpartum haemorrhage, management of maternal sepsis, hysteroscopy, evacuation of uterus, laparoscopy, hysterectomy by various methods, pelvic floor repair, ob and gynae scan.
 |[ ] [ ] [ ]   |  |
| 1. The program has a mechanism to evaluate the number of procedures and competence of each resident in above-mentioned procedures.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF THE EDUCATIONAL PROGRAM SECTION:** | Click or tap here to enter text. |
| **SCHOLARLY ACTIVITIES** |
| **Resident Scholarly Activities** |
| * + 1. The program provides the residents with research training.
 |[ ] [ ] [ ]   |  |
| * + 1. The program provides residents with opportunities to participate in scholarly activities.
 |[ ] [ ] [ ]   |  |
| * + 1. All residents in the program participate in scholarly activities.
 |[ ] [ ] [ ]   |  |
| **Faculty Scholarly Activities** |
| * + 1. Faculty demonstrate accomplishment in scholarly activities.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF THE SCHOLARLY ACTIVITES SECTION:** | Click or tap here to enter text. |
| **RESIDENT EVALUATION AND PROMOTION** |
| **Resident Evaluation** |
| * + 1. The program has objective performance evaluation tools for all core competencies.
 |[ ] [ ] [ ]   |  |
| * + 1. Residents are evaluated by multiple evaluators (e.g. faculty, peers, midwifery and nursing, patients, etc.).
 |[ ] [ ] [ ]   |  |
| * + 1. Residents receive feedback after each rotation.
 |[ ] [ ] [ ]   |  |
| * + 1. Evaluations are documented at the end of each rotation.
 |[ ] [ ] [ ]   |  |
| * + 1. The PD or designee meet at least semi-annually with each resident, and review the resident’s performance
 |[ ] [ ] [ ]   |  |
| * + 1. Semi-annual evaluations are documented for each resident.
 |[ ] [ ] [ ]   |  |
| * + 1. Final evaluations are completed for each resident at the end of the training period (Summative letter).
 |[ ] [ ] [ ]   |  |
| **Resident Promotion** |
| * + 1. The program has written annual resident promotion criteria.
 |[ ] [ ] [ ]   |  |
| * + 1. The promotion criteria is available for residents to review.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF RESIDENT EVALUATION AND PROMOTION SECTION:** | Click or tap here to enter text. |
| **CLINICAL COMPETENCY COMMITTEE** |
| * 1. The program has a clinical competency committee that meets at least semi-annually.
 |[ ] [ ] [ ]   |  |
| * 1. CCC has at least three members.
 |[ ] [ ] [ ]   |  |
| * 1. At least one of the CCC members is a core faculty.
 |[ ] [ ] [ ]   |  |
| * 1. CCC has a written description of the duties, meeting process, decision making and reporting of the committee.
 |[ ] [ ] [ ]   |  |
| * 1. CCC meetings are minuted.
 |[ ] [ ] [ ]   |  |
| * 1. CCC reviews each resident’s performance at least semi-annually, and develops individual plans for residents.
 |[ ] [ ] [ ]   |  |
| * 1. The PD or designee meets with each resident semi-annually and shares the CCC’s findings and plan.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF RESIDENT EVALUATION AND PROMOTION SECTION:** | Click or tap here to enter text. |
| **PROGRAM EVALUATION COMMITTEE** |
| 1. The program has a program evaluation committee that meets at least annually.
 |[ ] [ ] [ ]   |  |
| 1. The PEC has at least two faculty members, one of whom is a core faculty.
 |[ ] [ ] [ ]   |  |
| 1. The PEC has resident representatives from each year of training.
 |[ ] [ ] [ ]   |  |
| 1. The PEC has a written description of the duties, meeting process, decision making and reporting of the committee.
 |[ ] [ ] [ ]   |  |
| 1. The PEC produces an annual program evaluation report.
 |[ ] [ ] [ ]   |  |
| 1. The program annual report is presented by the PD or designee to the GMEC annually.
 |[ ] [ ] [ ]   |  |
| 1. At minimum, the PEC evaluates the following aspects of the program:
 |[ ] [ ] [ ]   |  |
| * 1. Competency-based rotation goals and objectives.
 |[ ] [ ] [ ]   |  |
| * 1. Curriculum.
 |[ ] [ ] [ ]   |  |
| * 1. Resident and faculty scholarly activity.
 |[ ] [ ] [ ]   |  |
| * 1. Written program evaluations.
 |[ ] [ ] [ ]   |  |
| * 1. Annual program survey by faculty and residents.
 |[ ] [ ] [ ]   |  |
| * 1. Aggregate faculty evaluation.
 |[ ] [ ] [ ]   |  |
| * 1. Aggregate resident in-training examination.
 |[ ] [ ] [ ]   |  |
| * 1. Board pass rates.
 |[ ] [ ] [ ]   |  |
| * 1. Graduate performance.
 |[ ] [ ] [ ]   |  |
| * 1. Resident recruitment and retention.
 |[ ] [ ] [ ]   |  |
| * 1. Quality and safety of patient care.
 |[ ] [ ] [ ]   |  |
| * 1. Prior annual program reports.
 |[ ] [ ] [ ]   |  |
| 1. The annual report is distributed and discussed with the residents and faculty.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF PROGRAM EVALUATION COMMITTEE SECTION:** |  |
| **DUTY HOURS** |
| * 1. The program has a mechanism to monitor residents’ working hours.
 |[ ] [ ] [ ]   |  |
| * 1. The program adheres with duty hour regulations.
 |[ ] [ ] [ ]   |  |
| * 1. Duty hours are limited to 80-hours per week averaged over 4-weeks.
 |[ ] [ ] [ ]   |  |
| * 1. Residents have one day off in seven free from all clinical and educational duties, averaged over 4-weeks.
 |[ ] [ ] [ ]   |  |
| * 1. A minimum of 10-hours off in between all duty periods.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF DUTY HOURS SECTION:** |  |
| **RESIDENT SUPERVISION** |
| * 1. The program has a written supervision policy.
 |[ ] [ ] [ ]   |  |
| * 1. Each resident in the program has appropriate privileges assigned to them based on their level of training, ability, and complexity and acuity of the situation.
 |[ ] [ ] [ ]   |  |
| * 1. Faculty are aware of supervision requirements.
 |[ ] [ ] [ ]   |  |
| **OVERALL ASSESSMENT OF RESIDENT SUPERVISION SECTION:** | Click or tap here to enter text. |
| Overall assessment of all domains:  | Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **POSITION** | **NAME** | **SIGNATURE** | **DATE** |
| ***Program Director*** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| ***Designated Institutional Official/ Head of Medical Education Department*** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |