

Augusta University  
House Staff Policies and Procedures

Policy  
HS 28.0 Clinical Competency Committee

Source  
Graduate Medical Education Office

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1.0 Purpose

To define policies and procedures regarding the Clinical Competency Committee (CCC) which advise the Program Director of each Graduate Medical Education (GME) training Program at the Medical College of Georgia (MCG) at Augusta University (AU). At all times, the procedures and policies of each individual GME Training Program CCC must comply with those outlined herein and in the GME House Staff Evaluation, Grievance, and Due Process Policy (MCG GME HS 13.0) and the House Staff Performance Policy (MCG GME HS 18.0).

2.0 Procedure

- 2.1 All GME training programs must have a CCC appointed by the Program Director. The Program Director should also appoint a chair of the CCC.
- 2.2 In selecting CCC members, the Program Director should understand the goal of the CCC which is to provide broad input from several qualified individuals regarding a House Staff's progress in achieving the specialty-specific ACGME Milestones, promotion and graduation requirements of the program, skills and behaviors necessary to enter autonomous practice, and requirements for certifying board examination.
- 2.3 Each CCC must be composed of at least three members of the program faculty including at least one core faculty. Additional members must be faculty members from the same program or other programs or other health professionals who have extensive contact and experience with the program's House Staff.
- 2.4 Each CCC must have a written description of its responsibilities and procedures including its current membership and chair that is available if needed to the GME Office and ACGME.
- 2.5 Meeting minutes must be taken. These should be fair and complete but succinct. They must include the names of the House Staff discussed, associated pertinent findings and recommendations, and the names of the CCC members present. Meeting minutes must be maintained with the Program for the duration of the House Staff's training period. Minutes describing CCC recommendations for significant disciplinary action at the level of probation or higher should be maintained indefinitely or until an appropriate time passes.
- 2.6 All discussions detailing an individual House Staff at a CCC meeting must be held in confidence and should only be discussed in good faith with the House Staff member, their mentor, or others providing active House Staff guidance.
- 2.7 All proceedings and records generated pursuant to CCC meetings will be treated as confidential to the extent possible allowed by law and should be shielded from discovery and introduction into evidence to the extent allowed by law and applicable statutes.

3.0 Responsibilities of the CCC include:

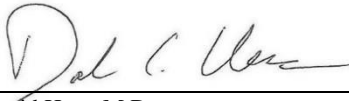
- 3.1 review of all House Staff evaluations including multi-source evaluations at least semi-annually;
- 3.2 determination of each House Staff's progress on achievement of the specialty-specific Milestones;
- 3.3 meeting prior to the House Staff's semi-annual evaluation with advisement of the Program Director regarding each House Staff's performance and progress towards unsupervised practice;
- 3.4 providing recommendations to the Program Director regarding final evaluations and a House Staff's ability to graduate and enter autonomous practice;
- 3.5 recommending resources or other steps to correct identified House Staff deficiencies;

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- 3.6 recommending disciplinary actions including remediation, probation, dismissal, non-renewal, and/or prolongation of training;
- 3.7 helping to ensure program compliance with GME HS policies 13.0 and 18.0; and
- 3.8 advising the Program Evaluation Committee about any findings that may represent a systemic/Program-wide issue.

  
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David Hess, M.D.  
Dean, Medical College of Georgia

9/2/22  
Date

  
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Natasha M Savage, M.D.  
Senior Associate Dean, Graduate Medical Education and  
DIO

9/2/22  
Date