



UMKC Resident Records Management Policy and Procedure

November 1, 2010

Purpose: To establish a uniform policy and procedures for the graduate medical education office, the academic departments, and the residency/fellowship program directors to follow in the management of all resident files.

Scope: This policy and procedure applies to all residents and fellows accredited and non-accredited programs sponsored by UMKC School of Medicine. Each program or department may have additional policies intended to further define the required procedures, however, the guidelines provided in this policy must be followed.

Background: Housestaff files serve as both records of employment and academic program records. They are the primary source used for verification of training throughout the career of most physicians. As such, it is necessary that they are accurate and contain all information needed for licensure and medical privileges applications. The files also serve as a record of housestaff performance and competency, occasionally needed in the course of a variety of legal actions. In order to ensure that all housestaff trained in UMKC programs have training records that support their future needs, a uniform policy of minimal standards for records management is implemented.

This policy recognizes four categories of housestaff:

1. Housestaff who are accepted into and complete their program
2. Housestaff who are accepted into but do not complete their program
3. Individuals that apply and are interviewed for the program but do not enroll in the program
4. Individuals that apply for the program but are not interviewed for a program position

Program Applicants: It is important that an accurate description of the applicant pool is maintained for a minimum of three years. This can be most effectively accomplished by maintaining each application (either electronically or in hard copy). The application includes the standard application form plus all supporting documents (personal statement, exam scores, letters of recommendation). In addition, the University expects that the criteria used to deny an applicant an interview is recorded. In lieu of individual comments on each application, a Resident/Fellow Selection Policy outlining the criteria used to select residents for the training program is acceptable.

Interviewed Applicants: All records pertaining to interviewed applicants must be maintained for a minimum of three years. In addition to the full application and supporting documents, this would typically include interview evaluation forms used by the program to obtain feedback from program faculty and residents about each applicant.

Program Housestaff: Housestaff files are kept in four categories:

1. Employment records maintained by University Human Resources
2. Contract and credentialing records maintained by the Office of Graduate Medical Education
3. Academic records maintained by the Academic Department
4. Health records maintained by the Employee Health Departments of the hospital affiliates

Employment and health records of housestaff are managed in a manner established by the institution (university or hospital affiliate) and consistent with their policies for all employees or covered physicians. This policy is not intended to change or influence those processes.

The GME Office at UMKC will be responsible for maintaining records related to housestaff academic program participation, completion, and medical/dental licensure. The required elements of the GME Housestaff file and the minimum duration that the information should be kept are:

1. Employment contract (7 years)
2. State medical/dental license (7 years)
3. BNDD/DEA Certification (7 years)
4. ECFMG certificate (7 years)
5. Visa (7 years)
6. Completion/Graduation letter or certificate (permanently)
7. Consent for release of information (permanently)

The residency or fellowship program office will be responsible for maintaining a complete academic record. For current housestaff, the minimum content of the academic record includes:

1. Written performance evaluations from faculty and others
2. Semi-annual summary evaluations from the program director or selected faculty
3. Record of the resident's/fellow's rotations and other training experiences
4. Record of surgical and procedural training
5. Disciplinary action
6. Moonlighting approval form (for applicable residents)
7. Documentation of prior training and performance evaluation (for transferring residents)
8. Any other information specifically required by the training program accrediting body

Once a resident or fellows leaves a program, it is necessary to maintain records sufficient to document the training experience and competency of the trainee. The content of the permanent academic file should include the following:

1. Rotation schedule or other document that details the entire educational curriculum of the resident and the dates that the resident was enrolled in the program
2. Procedure or surgical case log
3. Patient case log, if required by the specialty
4. Summative comprehensive reports of the resident's performance (e.g. semi-annual interview reports), including the final document that confirms the resident's ability to practice competently and independently
5. Any documentation related to disciplinary action and remediation

For residents that are terminated from the program (for any reason), the entire academic file must be kept indefinitely.

File Management: Permanent files may be paper or electronic. Regardless of the format, a process should be in place that ensures ongoing access to the files in case of natural disaster, program closure, or other program changes resulting in significant changes or disruptions in the usual course of business. The GME Office can work with each individual program to develop a process that ensures continued availability of training information for the life of the graduated physician.

Revision Date: November 1, 2014



JILL MOORMEIER, M.D.
Associate Dean,
Graduate Medical Education

Date: November 1, 2010