Executive Summary

Clinical Competency Committee Structure and Membership

Introduction
The Common and specialty-specific Program Requirements underwent extensive revisions to produce their current format, with tremendous progress in harmonizing them. Some areas of the Common Program Requirements can be individualized by the relevant Review Committee; others are required to be standard across all specialties and subspecialties. Clinical Competency Committee (CCC) requirements are generally the same for all programs. The ACGME considers all CCC-related requirements “core,” or essential.

History
The ACGME’s requirements for a CCC are found in the Common Program Requirements, for Residencies, Fellowships, One-Year Fellowships, and Post-Doctoral Education Programs, and also contained within the specialty-specific Program Requirements. Although there are no specific CCC requirements in the ACGME Institutional Requirements, there are some Institutional Requirements that may strongly influence CCC practices.

Noteworthy Practices
CCC members should review the current Common and specialty-specific Program Requirements, along with the associated Background and Intent sections as applicable, in section V.A..

For programs with Osteopathic Recognition, there are additional CCC requirements in the Osteopathic Recognition Requirements.
**Long-Term and Short-Term Actions/Goals**

- Review your CCC’s membership compared with the requirements.
- Assess CCC size to determine how it facilitates robust group process (ideal size is five to seven and no more than eight to 10; sub-CCCs may be needed for large programs).
- Determine institutional processes that will impact the CCC.
- Clarify the roles of CCC members, the program director, the program coordinator, and residents/fellows. Residents/fellows CANNOT serve on a CCC.
- Although no longer an ACGME requirement, programs may find that a written description of the CCC is useful to help faculty members and residents/fellows better understand its purpose and function.
- Recognize typical sources of bias in assessments and seek to mitigate them.
- Plan ongoing professional development for CCC members.

**Conclusions and In-Depth Guidebooks**

The ACGME has provided FAQs on various CCC elements, including the roles of program director and coordinator, non-physician faculty members, and residents/chief residents/fellows.

[Common Program Requirements Frequently Asked Questions (Updated 08/2017)](#)
See pages 12-13

For more information, see the full Clinical Competency Committee Guidebook and additional references on the [Milestones Resources](#) page of the ACGME website.