



# VCU

## Curriculum Review and Evaluation Process

### Policy Statement and Purpose

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The Liaison Committee on Medical Education (LCME) has established standards regarding the ongoing monitoring, review, and revision of the curriculum, including all curricular content, learning objectives, and instructional and assessment methods. Additionally, published LCME standards require ongoing evaluation and review of outcome data, including performance on nationally normed assessments, in order to ensure achievement with institutional learning objectives. To support compliance with these standards and ensure ongoing, consistent monitoring of the curriculum, the Virginia Commonwealth University School of Medicine has created procedures outlining the requirements for constant, cyclical review of these items.

### Stakeholders

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The faculty, staff, and students of the VCU School of Medicine are responsible for knowing this standard operating procedure, its contents, and provisions.

### Definitions

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**VCU SOM:** Virginia Commonwealth University School of Medicine.

**CC:** Curriculum Council.

**LCME:** Liaison Committee on Medical Education. The group with authority to accredit medical education programs leading to the MD degree in the United States and Canada.

**OME:** Office of Medical Education.

**CD:** Course/Clerkship Director.

**AES:** Office of Assessment, Evaluation, and Scholarship.

**Committee:** Review Committee appointed to review the individual course, clerkship, pre-clinical, clinical, or totality of the curriculum.

**Pre-Clinical Curriculum:** Includes the Scientific Foundations of Medicine curriculum which spans the first portion of the M1 year, as well as the Applied Medical Sciences curriculum which spans the remainder of the M1 year and the full M2 year.

**Clinical Curriculum:** Includes the Core Clerkships curriculum which spans the M3 year, as well as the Advanced Electives curriculum which spans the M4 year.



**VCU** School of Medicine

**SOMTech:** School of Medicine Technology group.

**SADMESA:** Senior Associate Dean for Medical Education and Student Affairs.

**Associate Dean for CQI:** Associate Dean for LCME Standards and Continuous Quality Improvement.

**Director of CI&Q:** Director of Curriculum Initiatives and Quality.

## Responsibilities

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**CC:** The Curriculum Council is responsible for the oversight of the curriculum as a whole at the VCU SOM and has responsibility for the overall design, management, integration, evaluation, and enhancement of a coherent and coordinated medical curriculum. Charged with the ongoing review and central management of the undergraduate medical curriculum at VCU SOM, the CC is responsible for reviewing and approving the final reports generated from each required curricular review as outlined in these procedures.

**AES:** AES is responsible for the procurement and assimilation of data as outlined in these procedures. AES will also act as the primary liaison with SOMTech to procure and assimilate data for which that unit is responsible as outlined in these procedures.

**OME:** The OME is responsible for providing administrative support to the Chair of the CC in developing and publishing a schedule of reviews, and in contacting and confirming participation and attendance of individuals in accordance with the published schedule.

**Director of CI&Q:** The Director of CI&Q is responsible for the assimilation of final reports and distribution of CC approved reports from all scheduled curricular reviews in accordance with the timelines outlined in these procedures.

**Associate Dean for CQI:** The Associate Dean for CQI is responsible for the ongoing monitoring and reporting of implementation of final recommendations for each review. The Associate Dean for CQI is also accountable for reporting these items to the CC as outlined in these procedures.

## Procedures

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### Individual Course Reviews

#### *Schedule and Timing*

- Individual Course reviews are completed annually for each course within the required, core curriculum.
  - Course reviews are conducted within twelve (12) weeks of the conclusion of the specific course for the academic year.
  - The OME, in partnership with the Chair of the CC, will create and publish a schedule for all Course reviews for the duration of the academic year.



### Review Committee Membership

- The CC will appoint members to a review team to execute each individual Course review. These review teams must include the following members:
  - Review Committee Chair
    - This individual must be a voting member of the CC
  - Two (2) faculty members who are not affiliated with the course being reviewed
    - One (1) must be a current Course Director/Assistant Director
    - One (1) must be a current Clerkship Director/Assistant Director
  - Two (2) Students
    - One (1) must be a current curriculum representative elected to the CC
    - Students may be any year, but must have already completed the course being reviewed
  - Assistant/Associate Dean for Pre-Clinical Medical Education
  - Additional individuals may be invited as deemed necessary by the CC to ensure adequate review of the course is achieved
- The Chair of the CC, in conjunction with the OME, will generate a list of review team members for all scheduled course reviews for the academic year by April of the current calendar year for the upcoming academic year.
  - Individual review team members for each committee will be notified in May of the current calendar year by the OME of their appointment and the date of the scheduled presentation of their review at the CC for the upcoming academic year.

### Data Collection

- A variety of institutional and national data will be assimilated to use in the review and reporting process. These items include:
  - Data for review by the Committee:
    - The CD will generate the following items for review by the Committee:
      - Self-Study Form
      - Syllabus
      - Institutional Learning Objectives Mapped to Course Objectives
    - AES will generate data on the following items for review by the Committee:
      - Executive Summary of both qualitative and quantitative data from three (3) years of end of course evaluations
      - Qualitative comments from three (3) years of end of course evaluations
      - Select AAMC GQ Survey Data
      - Mistreatment
      - Grade Timeliness
      - Grade Distribution
      - Performance on Nationally Normed Assessments



- Students on the review committee will generate the following items for review by the Committee:
  - Diversity, Equity, and Inclusion Report
  - Strengths and Opportunities Report
- Associate Dean for CQI will generate the following item for review by the Committee:
  - Prior Recommendation Progress

#### Data Distribution and Review Procedures

- All reviews will be completed by the scheduled date published by the Chair of the CC and the OME. In order to ensure the effective execution of each course review, the following twelve (12) week timeline has been established:
  - Collection of Data for Review
    - The CD will submit all required data to the OME within three (3) weeks of the closure of the course evaluations.
    - AES will submit all required data to the OME within three (3) weeks of the completion of the course.
    - Associate Dean for CQI will submit all required data to the OME within three (3) weeks of the completion of the course.
  - Assimilation of Data for Review
    - The OME will compile the submitted data and provide this information to the Committee within one (1) week of receiving all required items from the Course Director, AES, and Associate Dean for CQI.
  - Review by the Committee
    - The Committee will have four (4) weeks to execute all components of the review and generate the required reports.
      - The OME will work with the Chair of the Committee to ensure the review meeting has been scheduled and calendar invites have been sent to all members of the Review Committee.
        - During the review meeting, the Committee will generate a final SWOT analysis and list of recommendations for the course.
          - These items must be submitted to the Director of CI&Q no later than the end of the four (4) week time frame for executing the Review.
      - The Director of CI&Q will ensure submitted recommendations are specific, measurable, action items with an estimated timeframe for completion.

#### Final Report Development and Distribution

- The Director of CI&Q will generate a final report within two (2) weeks of completion of the review by the Committee.



- The final report will include all of the data collected for the Review.
- Reference materials, while not disseminated with the final report to the CC, will be available for review at the request of the Chair of the CC.
  - The reference materials will include the following items from the collected data:
    - Syllabus
    - Institutional Learning Objectives Mapped to Course Objectives
    - Qualitative comments from three (3) years of end of course evaluations
- The Director of CI&Q will advance the Final Report to the CC for review and approval.
  - The Final Report will be distributed to the CC at least one (1) week prior to the date of the CC meeting for which the Final Report is scheduled to be presented.
    - The CC will review the Final Report and provide a vote of approval.
      - If the CC fails to approve the Final Report, it will be returned to the Committee to address any areas of concern noted by the CC.
        - An updated Final Report addressing areas of concern will be reviewed by the CC at their next regularly scheduled meeting(s) until a vote of approval is achieved.
- The Director of CI&Q will ensure distribution and retention of the CC approved version of the Final Report.
  - The Final Report will be distributed to the following individuals:
    - Course Director(s)
    - Department Chair
    - Chair of the CC
    - SADMESA
    - Associate Dean for CQI
    - Assistant/Associate Dean for Pre-Clinical Medical Education
    - Assistant/Associate Dean for Medical Education
    - Associate Dean(s) of Student Affairs
    - Director of Evaluation for UME
  - A copy of the Final Report will be maintained within the OME.

## Individual Clerkship Reviews

### Schedule and Timing

- Individual Clerkship reviews are completed annually for each Clerkship within the required, core curriculum.
  - The OME, in partnership with the Chair of the CC, will create and publish a schedule for all Clerkship reviews for the duration of the academic year.

### Review Committee Membership

- The CC will appoint members to a review team to execute each individual Clerkship review. These review teams must include the following members:
  - Review Committee Chair
    - This individual must be a voting member of the CC
  - Two (2) faculty members who are not affiliated with the clerkship being reviewed
    - One (1) must be a current Course Director/Assistant Director
    - One (1) must be a current Clerkship Director/Assistant Director
  - Two (2) Students
    - One (1) must be a current curriculum representative elected to the CC
    - Students may be any year, but must have already completed the clerkship being reviewed
  - Assistant/Associate Dean for Clinical Medical Education
  - Additional individuals may be invited as deemed necessary by the CC to ensure adequate review of the clerkship is achieved
- The Chair of the CC, in conjunction with the OME, will generate a list of review team members for all scheduled clerkship reviews for the academic year by April of the current calendar year for the upcoming academic year.
  - Individual review team members for each committee will be notified in May of the current calendar year by the OME of their appointment and the date of the scheduled presentation of their review at the CC for the upcoming academic year.

### Data Collection

- A variety of institutional and national data will be assimilated to use in the review and reporting process. These items include:
  - Data for review by the Committee:
    - The CD will generate the following items for review by the Committee:
      - Self-Study Form
      - Syllabus
      - Institutional Learning Objectives Mapped to Clerkship Objectives
      - OSCE Utilization
      - Adequacy of Clinical Sites Report
      - Comparability of Teaching Sites
      - Residents as Teachers Data
    - AES will generate data on the following items for review by the Committee:
      - Executive Summary of both qualitative and quantitative data from three (3) years of end of clerkship evaluations
      - Qualitative comments from three (3) years of end of clerkship evaluations
      - Select AAMC GQ Survey Data
      - Mistreatment
      - Grade Timeliness



- Grade Distribution
- Performance on Nationally Normed Assessments
- Compliance with Required Clinical Experiences
- Direct Observation of EPAs
- Mid-Rotation Feedback
- Time/Duty Hours
- Students on the review committee will generate the following items for review by the Committee:
  - Diversity, Equity, and Inclusion Report
  - Strengths and Opportunities Report
- Associate Dean for CQI will generate the following item for review by the Committee:
  - Prior Recommendation Progress

#### Data Distribution and Review Procedures

- All reviews will be completed by the scheduled date published by the Chair of the CC and the OME. In order to ensure the effective execution of each clerkship review, the following ten (10) week timeline has been established:
  - Collection of Data for Review
    - The CD will submit all required data to the OME no later than three (3) weeks from the start of the ten (10) week timeline.
    - AES will submit all required data to the OME no later than three (3) weeks from the start of the ten (10) week timeline.
    - Associate Dean for CQI will submit all required data to the OME no later than three (3) weeks from the start of the ten (10) week timeline.
  - Assimilation of Data for Review
    - The OME will compile the submitted data and provide this information to the Committee within one (1) week of receiving all required items from the CD, AES, and Associate Dean for CQI.
  - Review by the Committee
    - The Committee will have four (4) weeks to execute all components of the review and generate the required reports.
      - The OME will work with the Chair of the Committee to ensure the review meeting has been scheduled and calendar invites have been sent to all members of the Review Committee.
        - During the review meeting, the Committee will generate a final SWOT analysis and list of recommendations for the course.
          - These items must be submitted to the Director of CI&Q no later than the end of the four (4) week time frame for executing the Review.



- The Director of CI&Q will ensure submitted recommendations are specific, measurable, action items with an estimated timeframe for completion.

### Final Report Development and Distribution

- The Director of CI&Q will generate a final report within two (2) weeks of completion of the review by the Committee.
  - The final report will include all of the data collected for the Review.
  - Reference materials, while not disseminated with the final report to the CC, will be available for review at the request of the Chair of the CC.
    - The reference materials will include the following items from the collected data:
      - Syllabus
      - Institutional Learning Objectives Mapped to Clerkship Objectives
      - Qualitative comments from three (3) years of end of clerkship evaluations
- The Director of CI&Q will advance the Final Report to the CC for review and approval.
  - The Final Report will be distributed to the CC at least one (1) week prior to the date of the CC meeting for which the Final Report is scheduled to be presented.
    - The CC will review the Final Report and provide a vote of approval.
      - If the CC fails to approve the Final Report, it will be returned to the Committee to address any areas of concern noted by the CC.
        - An updated Final Report addressing areas of concern will be reviewed by the CC at their next regularly scheduled meeting(s) until a vote of approval is achieved.
- The Director of CI&Q will ensure distribution and retention of the CC approved version of the Final Report.
  - The Final Report will be distributed to the following individuals:
    - Clerkship Director(s)
    - Department Chair
    - Chair of the CC
    - SADMESA
    - Associate Dean for CQI
    - Assistant/Associate Dean for Clinical Medical Education
    - Assistant/Associate Dean for Medical Education
    - Associate Dean(s) of Student Affairs
    - Director of Evaluation for UME
  - A copy of the Final Report will be maintained within the OME.

## **Pre-Clinical Curriculum Phase Review**

### Schedule and Timing

- The Pre-Clinical Curriculum Phase review must be completed annually.





- The Pre-Clinical Curriculum Phase review must be scheduled and completed prior to the scheduled date of the *in toto* review.
- The OME, in partnership with the Chair of the CC, will create and publish a schedule for the Pre-Clinical Phase review for the upcoming academic year.

### Review Committee Membership

- The CC will appoint members to a review team to execute the Pre-Clinical Curriculum Phase Review. This review team must include the following members:
  - Review Committee Chair
    - This individual must be a voting member of the CC
  - Vice-Chair of CC: Pre-Clinical Curriculum
  - Four (4) faculty members
    - Two (2) must be current Course Directors/Assistant Directors
    - Two (2) must be current Clerkship Directors/Assistant Directors
  - Two (2) Students
    - One (1) must be a current curriculum representative elected to the CC
    - One (1) must be a student currently in the Pre-Clinical Curriculum
    - One (1) must be a student currently in the Clinical Curriculum
  - Assistant/Associate Dean for Pre-Clinical Medical Education
  - One (1) Assistant/Associate Dean for Student Affairs
- The Chair of the CC, in conjunction with the OME, will generate a list of review team members for the scheduled Pre-Clinical Curriculum Phase Review at least four (4) months prior to the scheduled presentation of the review at the CC.
  - Individual review team members for the committee will be notified by the OME of their appointment and the date of the scheduled presentation of the review at the CC.

### Data Collection

- A variety of institutional and national data will be assimilated to use in the review and reporting process. These items include:
  - Data for review by the Committee:
    - OME will generate data on the following items for review by the Committee:
      - Mapping of Key Topics as Pre-Determined by the CC
      - Individual Topic Mapping (Horizontal and Vertical Integration)
      - Institutional Learning Objectives Mapping Matrix
    - AES will generate data on the following items for review by the Committee:
      - Student Demographics and Advancement Rates
      - Course Evaluation Summary
      - Select AAMC Y2Q Survey Data
      - Select AAMC GQ Survey Data
      - Internal End of Year Survey Data



- Learning Environment
- Mistreatment
- Wellness Data
- Grade Timeliness
- Grade Distribution
- Performance on Nationally Normed Assessments
- Self-Directed Learning
- Narrative Evaluation
- Associate Dean for CQI will generate the following item for review by the Committee:
  - Prior recommendations and current progress from previous Pre-Clinical Curriculum Phase Report
  - Individual course recommendations and progress on implementation

#### Data Distribution and Review Procedures

- The Pre-Clinical Curriculum Phase review will be completed by the scheduled date published by the Chair of the CC and the OME. In order to ensure the effective execution of this review, the following timeline has been established, and will begin ten (10) weeks prior to the date of the CC meeting for which the review is scheduled:
  - Collection of Data for Review
    - OME will submit all required data no later than the three (3) weeks from the start of the ten (10) week timeline.
    - AES will submit all required data to the OME within three (3) weeks from the start of the ten (10) week timeline.
    - Associate Dean for CQI will submit all required data to the OME within three (3) weeks from the start of the ten (10) week timeline.
  - Assimilation of Data for Review
    - The OME will compile the submitted data and provide this information to the Committee within one (1) week of receiving all required items from the AES and the Associate Dean for CQI.
  - Review by the Committee
    - The Committee will have four (4) weeks to execute all components of the review and generate the required reports.
      - The OME will work with the Chair of the Committee to ensure the review meeting has been scheduled and calendar invites have been sent to all members of the Review Committee.
        - During the review meeting, the Committee will generate a final SWOT analysis and list of recommendations for the Pre-Clinical curriculum.



- These items must be submitted to the Director of CI&Q no later than the end of the four (4) week time frame for executing the Review.
- The Director of CI&Q will ensure submitted recommendations are specific, measurable, action items with an estimated timeframe for completion.

#### Final Report Development and Distribution

- The Director of CI&Q will generate a final report within two (2) weeks of completion of the review by the Committee.
  - The final report will include all of the data collected for the Review.
- The Director of CI&Q will advance the Final Report to the CC for review and approval.
  - The Final Report will be distributed to the CC at least one (1) week prior to the date of the CC meeting for which the Final Report is scheduled to be presented.
    - The CC will review the Final Report and provide a vote of approval.
      - If the CC fails to approve the Final Report, it will be returned to the Committee to address any areas of concern noted by the CC.
        - An updated Final Report addressing areas of concern will be reviewed by the CC at their next regularly scheduled meeting(s) until a vote of approval is achieved.
- The Director of CQ&I will ensure distribution and retention of the CC approved version of the Final Report.
  - The Final Report will be distributed to the following individuals:
    - Course Directors
    - Chair of the CC
    - SADMESA
    - Associate Dean for CQI
    - Assistant/Associate Dean for Pre-Clinical Medical Education
    - Assistant/Associate Dean for Clinical Medical Education
    - Assistant/Associate Dean for Medical Education
    - Associate Dean(s) of Student Affairs
    - Director of Evaluation for UME
  - A copy of the Final Report will be maintained within the OME.

### Clinical Curriculum Phase Review

#### Schedule and Timing

- The Clinical Curriculum Phase review must be completed annually.
  - The Clinical Curriculum Phase review must be scheduled and completed prior to the scheduled date of the *in toto* review.



- The OME, in partnership with the Chair of the CC, will create and publish a schedule for the Clinical Curriculum review for the upcoming academic year.

### Review Committee Membership

- The CC will appoint members to a review team to execute the Clinical Curriculum Phase Review. This review team must include the following members:
  - Review Committee Chair
    - This individual must be a voting member of the CC
  - Vice-Chair of CC: Clinical Curriculum
  - Four (4) faculty members
    - Two (2) must be current Course Directors/Assistant Directors
    - Two (2) must be current Clerkship Directors/Assistant Directors
  - Two (2) Students
    - One (1) must be a current curriculum representative elected to the CC
    - One (1) must be a student currently in the Pre-Clinical Curriculum
    - One (1) must be a student currently in the Clinical Curriculum
  - Assistant/Associate Dean for Clinical Medical Education
  - One (1) Assistant/Associate Dean for Student Affairs
- The Chair of the CC, in conjunction with the OME, will generate a list of review team members for the scheduled Clinical Curriculum Phase Review at least four (4) months prior to the scheduled presentation of the review at the CC.
  - Individual review team members for the committee will be notified by the OME of their appointment and the date of the scheduled presentation of the review at the CC.

### Data Collection

- A variety of institutional and national data will be assimilated to use in the review and reporting process. These items include:
  - Data for review by the Committee:
    - OME will generate data on the following items for review by the Committee:
      - Mapping of Key Topics as Pre-Determined by the CC
      - Individual Topic Mapping (Horizontal and Vertical Integration)
      - Institutional Learning Objectives Mapping Matrix
    - AES will generate data on the following items for review by the Committee:
      - Student Demographics and Advancement Rates
      - Clerkship Evaluation Summary
      - Compliance with Required Clinical Experiences
      - Availability of Electives by Specialty
      - Acting Internship Evaluation Summary
      - Intern Survey
      - Program Director Survey



- Select AAMC GQ Survey Data
- Internal End of Year Survey Data
- End of Clerkship Evaluation Items to Include:
  - Overall Clerkship Quality
  - Direct Observation of History and Physical
  - Mid-Clerkship Feedback
  - Quality of Faculty/Residents Teaching
  - Clinical Supervision
  - Time/Duty Hours
- M4 OSCE Data
- Comparability of Educational Sites
- Residents as Teachers
- Learning Environment
- Mistreatment
- Wellness Data
- Grade Timeliness
- Grade Distribution
- Performance on Nationally Normed Assessments
- Associate Dean for CQI will generate the following item for review by the Committee:
  - Prior recommendations and current progress from previous Clinical Curriculum Report
  - Individual clerkship recommendations and progress on implementation

#### Data Distribution and Review Procedures

- The Clinical Curriculum Phase review will be completed by the scheduled date published by the Chair of the CC and the OME. In order to ensure the effective execution of this review, the following timeline has been established, and will begin ten (10) weeks prior to the date of the CC meeting for which the review is scheduled:
  - Collection of Data for Review
    - OME will submit all required data no later than the three (3) weeks from the start of the ten (10) week timeline.
    - AES will submit all required data to the OME within three (3) weeks from the start of the ten (10) week timeline.
    - Associate Dean for CQI will submit all required data to the OME within three (3) weeks from the start of the ten (10) week timeline.
  - Assimilation of Data for Review
    - The OME will compile the submitted data and provide this information to the Committee within one (1) week of receiving all required items from the AES and the Associate Dean for CQI.



- Review by the Committee
  - The Committee will have four (4) weeks to execute all components of the review and generate the required reports.
    - The OME will work with the Chair of the Committee to ensure the review meeting has been scheduled and calendar invites have been sent to all members of the Review Committee.
      - During the review meeting, the Committee will generate a final SWOT analysis and list of recommendations for the Clinical Curriculum.
        - These items must be submitted to the Director of CI&Q no later than the end of the four (4) week time frame for executing the Review.
    - The Director of CI&Q will ensure submitted recommendations are specific, measurable, action items with an estimated timeframe for completion.

#### Final Report Development and Distribution

- The Director of CI&Q will generate a final report within two (2) weeks of completion of the review by the Committee.
  - The final report will include all of the data collected for the Review.
- The Director of CI&Q will advance the Final Report to the CC for review and approval.
  - The Final Report will be distributed to the CC at least one (1) week prior to the date of the CC meeting for which the Final Report is scheduled to be presented.
    - The CC will review the Final Report and provide a vote of approval.
      - If the CC fails to approve the Final Report, it will be returned to the Committee to address any areas of concern noted by the CC.
        - An updated Final Report addressing areas of concern will be reviewed by the CC at their next regularly scheduled meeting(s) until a vote of approval is achieved.
- The Director of CI&Q will ensure distribution and retention of the CC approved version of the Final Report.
  - The Final Report will be distributed to the following individuals:
    - Clerkship Directors
    - Chair of the CC
    - SADMESA
    - Associate Dean for CQI
    - Assistant/Associate Dean for Pre-Clinical Medical Education
    - Assistant/Associate Dean for Clinical Medical Education
    - Assistant/Associate Dean for Medical Education
    - Associate Dean(s) of Student Affairs
    - Director of Evaluation for UME



- A copy of the Final Report will be maintained within the OME.

## Curriculum *in toto* Review

### Schedule and Timing

- The Curriculum *in toto* Review must be completed at least once every three (3) years, but may be completed more frequently at the request of the CC.
  - The OME, in partnership with the Chair of the CC, will create and publish a schedule for the Curriculum *in toto* Review at least six (6) months in advance of the scheduled date.

### Review Committee Membership

- The CC will appoint members to a review team to execute the *in toto* Curriculum Review. This review team must include the following members:
  - Review Committee Chair
    - This individual must be a voting member of the CC
  - Vice-Chair of CC: Pre-Clinical Curriculum
  - Vice Chair of CC: Clinical Curriculum
  - Four (4) faculty members
    - Two (2) must be current Course Directors/Assistant Directors
    - Two (2) must be current Clerkship Directors/Assistant Directors
  - Two (2) Students
    - One (1) must be a current curriculum representative elected to the CC
    - One (1) must be a student currently in the Pre-Clinical Curriculum
    - One (1) must be a student currently in the Clinical Curriculum
  - Assistant/Associate Dean for Pre-Clinical Medical Education
  - Assistant/Associate Dean for Clinical Medical Education
  - One (1) Assistant/Associate Dean for Student Affairs
- The Chair of the CC, in conjunction with the OME, will generate a list of review team members for the scheduled *in toto* review at least four (4) months prior to the scheduled presentation of the review at the CC.
  - Individual review team members for the committee will be notified by the OME of their appointment and the date of the scheduled presentation of the curriculum *in toto* review at the CC.

### Data Collection

- A variety of institutional and national data will be assimilated to use in the review and reporting process. These items include:
  - Data for review by the Committee:
    - The OME will generate the following items for review by the Committee:



- Curriculum Mapping
  - The Chair of CC in conjunction with OME will provide the list of topics to be pulled for mapping at least 2 months prior to the Review.
    - These topics will be based on institutionally selected societal problems, as well as the current items listed for curricular content review by the LCME.
- Curriculum Mapping Matrix
- Adequacy of Clinical Sites Report
- AES will generate data on the following items for review by the Committee:
  - Student Demographics
  - Matriculation Rates
  - Select AAMC Y2Q Survey Data
  - Select AAMC GQ Survey Data
  - Performance on Nationally Normed Assessments
  - Direct Observation of EPAs
  - M4 OSCE Performance
  - Wellness and Resiliency Data
  - Program Director Survey Data
  - Intern Survey Data
  - Diversity, Equity, and Inclusion Council Recommendations
- Associate Dean for CQI will generate the following item for review by the Committee:
  - Prior Recommendation Progress

#### Data Distribution and Review Procedures

- The Curriculum *in toto* review will be completed by the scheduled date published by the Chair of the CC and the OME. In order to ensure the effective execution of this review, the following timeline has been established, and will begin ten (10) weeks prior to the date of the CC meeting for which the review is scheduled:
  - Collection of Data for Review
    - OME will submit all required data no later than the three (3) weeks from the start of the ten (10) week timeline.
    - AES will submit all required data to the OME within three (3) weeks from the start of the ten (10) week timeline.
    - Associate Dean for CQI will submit all required data to the OME within three (3) weeks from the start of the ten (10) week timeline.
  - Assimilation of Data for Review





- The OME will compile the submitted data and provide this information to the Committee within one (1) week of receiving all required items from the AES and the Associate Dean for CQI.
  - Review by the Committee
    - The Committee will have four (4) weeks to execute all components of the review and generate the required reports.
      - The OME will work with the Chair of the Committee to ensure the review meeting has been scheduled and calendar invites have been sent to all members of the Review Committee.
        - During the review meeting, the Committee will generate a final SWOT analysis and list of recommendations for the Curriculum *in toto*.
          - These items must be submitted to the Director of CI&Q no later than the end of the four (4) week time frame for executing the Review.
      - The Director of CI&Q will ensure submitted recommendations are specific, measurable, action items with an estimated timeframe for completion.

#### Final Report Development and Distribution

- The Director of CI&Q will generate a final report within two (2) weeks of completion of the review by the Committee.
  - The final report will include all of the data collected for the Review.
- The Director of CI&Q will advance the Final Report to the CC for review and approval.
  - The Final Report will be distributed to the CC at least one (1) week prior to the date of the CC meeting for which the Final Report is scheduled to be presented.
    - The CC will review the Final Report and provide a vote of approval.
      - If the CC fails to approve the Final Report, it will be returned to the Committee to address any areas of concern noted by the CC.
        - An updated Final Report addressing areas of concern will be reviewed by the CC at their next regularly scheduled meeting(s) until a vote of approval is achieved.
- The Director of CI&Q will ensure distribution and retention of the CC approved version of the Final Report.
  - The Final Report will be distributed to the following individuals:
    - Course and Clerkship Directors
    - Chair of the CC
    - SADMESA
    - Associate Dean for CQI
    - Assistant/Associate Dean for Pre-Clinical Medical Education
    - Assistant/Associate Dean for Clinical Medical Education



- Assistant/Associate Dean for Medical Education
- Assistant/Associate Dean(s) for Student Affairs
- Director of Evaluation for UME
- A copy of the Final Report will be maintained within the OME.

## Ongoing Monitoring of Final Recommendations

### Review of CC Approved Recommendations

- The Associate Dean for CQI will meet with the curriculum leaders outlined below within four (4) weeks of the receipt of the CC approved Final Report from each Review.
  - Course and Clerkship Reviews
    - Individual Director(s) and Assistant Director(s) for the specific Course or Clerkship
  - Pre-Clinical Curriculum Phase Review
    - Vice-Chair of CC: Pre-Clinical Curriculum
    - Assistant/Associate Dean for Pre-Clinical Medical Education
  - Clinical Curriculum Phase Review
    - Vice Chair of CC: Clinical Curriculum
    - Assistant/Associate Dean for Clinical Medical Education
  - Curriculum *in toto* Review
    - Chair of CC
    - Vice-Chair of CC: Pre-Clinical Curriculum
    - Vice Chair of CC: Clinical Curriculum
    - Assistant/Associate Dean for Pre-Clinical Medical Education
    - Assistant/Associate Dean for Pre-Clinical Medical Education
    - Assistant/Associate Dean for Medical Education
    - Assistant/Associate Dean(s) for Student Affairs
- The Associate Dean for CQI will discuss the Final Recommendations and ensure each of the above individuals understand the Final Recommendations, their responsibility in implementing and/or completing each Recommendation, and the timeline for ongoing monitoring as outlined below.

### Ongoing Monitoring for Continuous Quality Improvement

- The Associate Dean for CQI will maintain the final recommendations approved for the specific review and work with individuals assigned responsibility for each recommendation to monitor progress toward implementation.
  - The Associate Dean for CQI will provide a report of progress toward implementation and/or completion of the previously approved recommendations for each review to the CC on a quarterly basis at minimum.
    - The CC may request more frequent updates based on the urgency of the recommendations requiring implementation.



## Appendices

### Select AAMC Y2Q and GQ Data for Report Inclusion

#### Course Reviews

AAMC Y2Q Survey Items
Question
N/A
AAMC GQ Survey Items
Question
How well did your study of the following sciences basic to medicine prepare you for clinical clerkships and electives?

#### Clerkship Reviews

AAMC Y2Q Survey Items
Question
N/A
AAMC GQ Survey Items
Question
Were you observed taking the relevant portions of the patient history?; Were you observed performing the relevant portions of the physical or mental status exam?; Were you provided with mid-clerkship feedback?; Faculty provided effective teaching during the clerkship; Residents provided effective teaching during the clerkship

#### Pre-Clinical Curriculum Reviews

AAMC Y2Q Survey Items
Question
Overall, I am satisfied with the quality of my medical education
Are you aware that your school has policies regarding the mistreatment of medical students?
Do you know the procedures at your school for reporting the mistreatment of medical students?



## Appendices

Please indicate the extent to which you agree with the following statements about your medical school: My medical school prepares students to effectively communicate with people across a broad spectrum of backgrounds; I often feel isolated at school; My teachers and mentors have told me that they have high standards for my performance; I often feel that my performance is being judged more closely than others; My teachers and mentors have told me that they feel sure that I can perform well against high standards; I closely share the professional values and interests of most of my classmates; I often feel as if my performance is being judged as a member of the identity group that I belong to more than as an individual; Students learn effective tools for recognizing their own bias in interacting with people of different identity groups; The medical school experience, to this point, contributes to students' ability to work in disadvantaged communities

To what extent [or, how often] the educational experience leads to a sense of achievement valuing oneself, and confidence in one's academic abilities; perceived distance among students, to what extent students get to know each other well, spend time assisting each other, and gather in informal activities; perception of faculty supportiveness, perceived distance between faculty and students, to what extent students feel that faculty are helpful when providing academic advice, when providing non-academic advice, and when answering questions and providing criticism

There are disconnects between what I am taught about professional behaviors/attitudes and what I see being demonstrated by faculty

Please rate how often the following professional behaviors/attitudes are demonstrated by your medical schools' faculty: Respecting patient confidentiality; Using professional language/avoiding derogatory language; Dressing in a professional manner; Resolving conflicts in ways that respect the dignity of all involved; Being respectful of house staff and other physicians; Respecting diversity; Being respectful of other health professions; Being respectful of other specialties; Being on time and managing a schedule well; Providing direction and constructive feedback; Showing respectful interaction with students; Showing empathy and compassion

Indicate whether you agree or disagree with the following statement: My medical school has done a good job of fostering and nurturing my development as a person; My medical school has done a good job of fostering and nurturing my development as a future physician

When thinking about your career path after medical school, how important are the following considerations? Working for social change; High income potential; Social recognition or status; Stable, secure future; Creativity and initiative; Expression of personal values; availability of jobs; Leadership potential; Work/life balance; Ability to pay off debt; Opportunity for innovation

### AAMC GQ Survey Items

#### Question

Basic science coursework had sufficient illustrations of clinical relevance; required clinical experiences integrated basic science content

How well did your study of the following sciences basic to medicine prepare you for clinical clerkships and electives?

## Clinical Curriculum Reviews

### AAMC Y2Q Survey Items



**VCU** School of Medicine

## Appendices

Question
N/A
AAMC GQ Survey Items
Question
Overall, I am satisfied with the quality of my medical education
Basic science coursework had sufficient illustrations of clinical relevance; required clinical experiences integrated basic science content
Rate the quality of your educational experiences in clerkships
Were you observed taking the relevant portions of the patient history?; Were you observed performing the relevant portions of the physical or mental status exam?; Were you provided with mid-clerkship feedback?; Faculty provided effective teaching during the clerkship; Residents provided effective teaching during the clerkship
To what extent (or how often) the educational experience leads to a sense of achievement, valuing oneself, and confidence in one's academic abilities; Perception of faculty supportiveness, perceived distance between faculty and students, to what extent the students felt that the faculty are helpful when providing academic advice, when providing non-academic advice, and when answering questions and providing criticism
There are disconnects between what I am taught about professional behaviors/attitudes and what I see being demonstrated by faculty
Respecting patient confidentiality; Using professional language/avoiding derogatory language; Being respectful of house staff and other physicians; Respecting diversity; Being respectful of other health professions; Being respectful of other specialties; Providing direction and constructive feedback; Showing respectful interaction with students; Showing empathy and compassion; Being respectful of patients' dignity and autonomy; Actively listened and showed interest in patients; Taking time and effort to explain information to patients; Advocating appropriately on behalf of his/her patients; Resolving conflicts in ways that respect the dignity of all involved
Disengagement; Exhaustion
Are you aware that your school has policies regarding the mistreatment of medical students?
Do you know the procedures at your school for reporting the mistreatment of medical students?
Been publicly embarrassed; Been publicly humiliated; Been threatened with physical harm; Been physically harmed; Been required to perform personal services; Been subjected to unwanted sexual advances; Been asked to exchange sexual favors for grades or other rewards; Been denied opportunities for training or rewards based on gender; Been subjected to offensive sexist remarks/names; Received lower evaluations or grades solely because of gender rather than performance; Been denied opportunities for training or rewards based on race or ethnicity; Been subjected to racially or ethnically offensive remarks/names; Received lower evaluations or grades solely because of race or ethnicity rather than performance; Been denied opportunities for training or rewards based on sexual orientation; Been subjected to offensive remarks/names related to sexual orientation; Received lower evaluations or grades solely because of sexual orientation rather than performance; Been subjected to negative or offensive behavior(s) based on your personal beliefs or personal characteristics other than your gender, race/ethnicity, or sexual orientation?



## Appendices

### In toto Curriculum Reviews

#### AAMC Y2Q Survey Items

##### Question

There are disconnects between what I am taught about professional behaviors/attitudes and what I see being demonstrated by faculty

Please rate how often the following professional behaviors/attitudes are demonstrated by your medical schools' faculty: Respecting patient confidentiality; Using professional language/avoiding derogatory language; Dressing in a professional manner; Resolving conflicts in ways that respect the dignity of all involved; Being respectful of house staff and other physicians; Respecting diversity; Being respectful of other health professions; Being respectful of other specialties; Being on time and managing a schedule well; Providing direction and constructive feedback; Showing respectful interaction with students; Showing empathy and compassion

Indicate whether you agree or disagree with the following statement: My medical school has done a good job of fostering and nurturing my development as a person; My medical school has done a good job of fostering and nurturing my development as a future physician

Please describe how often you attend: In-person pre-clerkship courses/lectures at YOUR medical school; Virtual pre-clerkship courses/lectures (e.g., podcast or video) at YOUR medical school

#### AAMC GQ Survey Items

##### Question

Overall, I am satisfied with the quality of my medical education

I am confident that I have acquired the clinical skills required to begin a residency program; I have the fundamental understanding of common conditions and their management encountered in the major clinical disciplines; I have the communication skills necessary to interact with patients and health professionals; I have basic skills in clinical decision making and the application of evidence based information to medical practice; I have a fundamental understanding of the issues in social sciences of medicine (e.g., ethics, humanism, professionalism, organization and structure of the health care system); I understand the ethical and professional values that are expected of the profession; I believe I am adequately prepared to care for patients from different backgrounds; I have the skills to apply the principles of high value care (e.g., quality, safety, cost) in medical decision-making; I have the skills to address the social determinants that differentially influence the health status of patients

Indicate the activities you will have participated in during medical school on an elective (for credit) or volunteer (not required) basis

I received appropriate guidance in the selection of electives

My knowledge or opinion was influenced or changed by becoming more aware of the perspectives of individuals from different backgrounds; The diversity within my medical school class enhanced my training and skills to work with individuals from different backgrounds

To what extent (or how often) the educational experience leads to a sense of achievement, valuing oneself, and confidence in one's academic abilities; Perception of faculty supportiveness, perceived distance between faculty and students, to what extent the students felt that the faculty are helpful when providing academic advice, when providing non-academic advice, and when answering questions and providing criticism



## Appendices

There are disconnects between what I am taught about professional behaviors/attitudes and what I see being demonstrated by faculty
Respecting patient confidentiality; Using professional language/avoiding derogatory language; Being respectful of house staff and other physicians; Respecting diversity; Being respectful of other health professions; Being respectful of other specialties; Providing direction and constructive feedback; Showing respectful interaction with students; Showing empathy and compassion; Being respectful of patients' dignity and autonomy; Actively listened and showed interest in patients; Taking time and effort to explain information to patients; Advocating appropriately on behalf of his/her patients; Resolving conflicts in ways that respect the dignity of all involved
My medical school has done a good job of fostering and nurturing my development as a person; My medical school has done a good job of fostering and nurturing my development as a future physician
Disengagement; Exhaustion
How useful were the following resources in learning about specialty choice and career planning?: Advising/Mentoring; AAMC's Careers in Medicine website; Specialty interest group-sponsored panels and presentations; School-sponsored career planning workshops and courses; Participation in in-house and extramural electives; Other publications and web-based resources
Indicate your level of satisfaction with the following: Accessibility, Awareness of student concerns, Responsiveness to student problems; Participation of students on key medical school committees; Academic counseling; Tutoring; Personal counseling; Financial aid administrative services; Overall educational debt management counseling; Senior loan exit interview; Faculty mentoring; Career preference assessment activities; Information about specialties; Information about alternative medical careers; Overall satisfaction with career planning services; Student programs/activities that promote effective stress management, a balanced lifestyle and overall wellbeing; Student health services; Student mental health services; Student health insurance; Library; Computer resource center; Student study space; Student relaxation space
Are you aware that your school has policies regarding the mistreatment of medical students?
Do you know the procedures at your school for reporting the mistreatment of medical students?
Been publicly embarrassed; Been publicly humiliated; Been threatened with physical harm; Been physically harmed; Been required to perform personal services; Been subjected to unwanted sexual advances; Been asked to exchange sexual favors for grades or other rewards; Been denied opportunities for training or rewards based on gender; Been subjected to offensive sexist remarks/names; Received lower evaluations or grades solely because of gender rather than performance; Been denied opportunities for training or rewards based on race or ethnicity; Been subjected to racially or ethnically offensive remarks/names; Received lower evaluations or grades solely because of race or ethnicity rather than performance; Been denied opportunities for training or rewards based on sexual orientation; Been subjected to offensive remarks/names related to sexual orientation; Received lower evaluations or grades solely because of sexual orientation rather than performance; Been subjected to negative or offensive behavior(s) based on your personal beliefs or personal characteristics other than your gender, race/ethnicity, or sexual orientation?
Sources of "publicly humiliated"-only behaviors experienced personally, as percent of all who answered Q41 above, including those who indicated the "Never" experienced any of the listed behaviors. The actual question was: "Indicate below which person(s) engaged in the behavior that was directed at you. Check all that apply."



## Appendices

Sources of behaviors experienced personally, excluding "publicly embarrassed" and "publicly humiliated," as percent of all who answered Q41 above, including those who indicated they "Never" experienced any of the listed behaviors. The actual question was: "Indicate below which person(s) engaged in the behavior that was directed at you. Check all that apply."

Did you report any of the behaviors listed above to a designated faculty member or a member of the medical school administration empowered to handle such complaints?

How satisfied are you with the outcome of having reported the behavior(s)?

If there were any incidents of those behaviors that you did not report, why didn't you report them?





**Course/Clerkship Self-Study Template**

**Course/Clerkship Self-Study Form**

To be completed by the Course/Clerkship Director(s)

Course/Clerkship:	Date:
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**Review of Executed Content for the most recently completed iteration of the Course/Clerkship**

- Provide a brief narrative description of the Course/Clerkship.  
Click or tap here to enter text.
- Describe how the Course/Clerkship is integrated with other aspects of the curriculum, noting specifically: how integration is accomplished, how successful the integration is, and any specific ways in which you believe integration with other curricular aspects may be achieved.  
Click or tap here to enter text.
- Were there significant changes in any of the following areas executed for the Course/Clerkship over the prior year?

Specific Area	Yes	No
Course/Clerkship Leadership		
Core faculty or departmental restructuring		
Curricular content or organization of content		
Course/Clerkship level objectives		
Teaching methods and/or activities, including distribution of hours		
Assessment methods		
Grading schema		

- For any area above where ‘yes’ was selected, please provide a summary of the changes and how these impacted the Course/Clerkship.  
Click or tap here to enter text.

**Preview of Upcoming Content for the next iteration of the Course/Clerkship**

- Are there significant changes in any of the following areas planned for the Course/Clerkship?

Specific Area	Yes	No
Course/Clerkship Leadership		
Core faculty or departmental restructuring		
Curricular content or organization of content		
Course/Clerkship level objectives		
Teaching methods and/or activities, including distribution of hours		
Assessment methods		



## Appendices

Grading schema		
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- For any area above where 'yes' was selected, please provide a summary of the anticipated changes and how these will impact the Course/Clerkship.  
Click or tap here to enter text.

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### **LCME Required Elements**

- Does the Course/Clerkship have the resources necessary to deliver/execute the curricular content? If not, please provide specific information regarding what resources are needed. (LCME 5.5-5.6)  
Click or tap here to enter text.
- Describe opportunities within the department to aid in the development of faculty as educators, listing all professional development activities specifically related to teaching. (LCME 4.5)  
Click or tap here to enter text.
- Describe how the institutional learning objectives, Course/Clerkship level learning objectives, and list of Required Clinical Experiences are distributed to the following groups (LCME 6.1-6.2)
  - Medical Students  
Click or tap here to enter text.
  - Faculty operating within the Course/Clerkship  
Click or tap here to enter text.
  - Residents operating within the Course/Clerkship  
Click or tap here to enter text.
- Describe how each of the following items are taught and assessed within the Course/Clerkship (LCME 7.3-7.9)
  - Scientific method and clinical and translational research  
Click or tap here to enter text.
  - Critical judgement and problem-solving skills  
Click or tap here to enter text.
  - Cultural competence and healthcare disparities  
Click or tap here to enter text.
  - Ethical behavior and professionalism  
Click or tap here to enter text.
  - Communication with patients, their families, physicians, and other members of the healthcare team  
Click or tap here to enter text.
  - Interprofessional education and collaborative practice skills  
Click or tap here to enter text.
  - Self-directed learning  
Click or tap here to enter text.



## Appendices

### Course-Only Questions

- Instruction and Assessment Methods

Complete the chart by listing the total hours for each instructional activity within the course, and the total percentage of the final grade for each summative assessment method used.

Instructional Activity	Hours	Summative Assessment Method	% of Grade
Case-Based Instruction/Learning		Clinical Performance Rating / Checklist	
Self-Directed Learning		Direct Observation	
Clinical Experience		Evidence-Based Medicine Exercise	
Departmental Conference		Exam: Institutionally Developed / Clinical (OSCE/CPX)	
Discussion, Small Group (Include POGIL Here)		Exam: Institutionally Developed / Written/Online	
Lectures		Exam: Institutionally Developed / Oral	
Patient Presentation, Learner		Exam: Nationally Normed / Standardized NBME	
Reflection		Exam: Nationally Normed / Standardized, Other	
Simulation		360-Degree / Multisource Assessment	
Standardized Patients		Simulation	
Computer-Assisted Instruction (Online)		Quiz	
Lab		Written Assignment	
Team-Based Learning		Lab Practical	
Other (Please List)		Clinical Documentation Review (Includes H&Ps)	
		Professionalism	
		Peer Assessment	



## Appendices

Total Contact Hours		Other (Please List)	
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- Final Grade Distribution

Pass / Competency Achieved	Fail / Competency Not Achieved	Incomplete
n(%)	n(%)	n(%)

### Clerkship-Only Questions

- Instruction and Assessment Methods

Complete the chart by listing the total hours for each instructional activity within the clerkship, and place a X in the box next to each summative assessment method used within the clerkship.

Instructional Activity	Hours	Summative Assessment Method	Check if Applicable
Case-Based Instruction/Learning		Clinical Performance Rating / Checklist	
Clinical Experience Ambulatory		Direct Observation	
Clinical Experience-Inpatient		Evidence-based medicine exercise	
Departmental Conference		Exam: Institutionally Developed / Clinical (OSCE/CPX)	
Discussion, small group		Exam: Institutionally Developed / Written/Online	
Lectures		Exam: Institutionally Developed / Oral	
Patient presentation, learner		Exam: Nationally Normed / Standardized NBME	
Ward/Teaching Rounds		Exam: Nationally Normed / Standardized, Other	
Simulation		360-Degree / Multisource Assessment	
Standardized Patients		Simulation	
Computer-Assisted Instruction (Online)		Written Assignment	
Other (Please List)		Clinical Documentation Review	



## Appendices

		(Includes H&Ps)	
		Professionalism	
Total Contact Hours		Other (Please List)	

- Indicate the percentage of ambulatory versus inpatient time within the Clerkship. (LCME 6.4)

Area	Total Percentage of Time
Inpatient	
Ambulatory	

- Please describe the grading scheme for your course, listing all components that contribute to the final grade.  
Click or tap here to enter text.
- Describe how student completion of the Required Clinical Experiences is monitored, indicating if this is discussed during the Mid-Clerkship feedback process. (LCME 8.6)  
Click or tap here to enter text.
- Describe how Residents and Non-Faculty instructors are prepared to teach and assess medical students, including how you review the performance of these individuals, how resident evaluations are communicated to residency program directors, and how student feedback on these individuals is used to enhance the quality of instruction within the Clerkship. (LCME 9.1)  
Click or tap here to enter text.
- Describe the process within the clerkship for providing narrative evaluation of performance to students, including when and how often this is used, if it is summative or formative in nature, who drafts the narrative comments, and how the narrative feedback is made available to students. (LCME 9.5)  
Click or tap here to enter text.
- Describe the process for providing Mid-Clerkship feedback to students, including the parties responsible for ensuring all students complete this process. (LCME 9.7)  
Click or tap here to enter text.
- Describe how OSCE's are utilized within the Clerkship, including if these are formative or summative in nature, the grading scale, and how students receive feedback to students on their clinical performance.  
Click or tap here to enter text.



## Appendices

- Final Grade Distribution

Fail	Pass	High Pass	Honors	Incomplete
n(%)	n(%)	n(%)	n(%)	n(%)

Please submit this completed form, along with a copy of each of the following documents, to the Office of Medical Education at [vcuome@vcuhealth.org](mailto:vcuome@vcuhealth.org).

- Course/Clerkship Syllabus
- Any documentation to support substantive changes in the course/clerkship for which you will be seeking Curriculum Council approval
  - Please see the Curricular Changes Requiring Curriculum Council Approval SOP (<https://medschool.vcu.edu/education/medical-education/lcme-accreditation/policies/>) for clarification on which changes require approval prior to implementation



### Adequacy of Clinical Sites Report Template

## Adequacy of Clinical Sites Report

To be completed by the Clerkship Director(s)

Clerkship:

Date:

- How many clinical sites are available for the Clerkship?  
Click or tap here to enter text.
- How many students can each site accommodate for the year?  
Click or tap here to enter text.
- Do all sites have a current affiliation agreement?
  - Yes
  - No 
    - If no is selected, please explain when affiliation agreements will be complete for all clinical sites.  
Click or tap here to enter text.
- Do all preceptors have an affiliate faculty status?
  - Yes
  - No 
    - If no is selected, please explain when affiliate faculty status will be complete for preceptors across all clinical sites.  
Click or tap here to enter text.
- Did all students who rotated through the Clerkship have a clinical site placement?
  - Yes
  - No 
    - If no is selected, please explain how students were able to meet the requirements of the Clerkship without a clinical placement.  
Click or tap here to enter text.
- Do you anticipate any changes or shifts in clinical sites in the upcoming year?
  - Yes
  - No 
    - If yes is selected, please explain the anticipated changes in detail.  
Click or tap here to enter text.
- Please identify opportunities and describe the steps being taken to increase the availability of clinical sites for the Clerkship.  
Click or tap here to enter text.



*Student DEI Report Template*

**Diversity, Equity, and Inclusion Report**

*To be completed by Student Members of the Review Committee*

Course/Clerkship:

Date:

- Was the Course/Clerkship free from bias with regards to race/ethnicity, gender, sexual orientation, personal beliefs, or other characteristics? If no, please explain.  
Click or tap here to enter text.
- What are the opportunities to mitigate the perceived bias and increase the overall diversity, equity, and inclusion of the Course/Clerkship?  
Click or tap here to enter text.





Student Strengths and Opportunities Report Template

**Strengths and Opportunities Report**

*To be completed by Student Members of the Review Committee*

Course/Clerkship:

Date:

- What are the strengths of the Course/Clerkship?  
Click or tap here to enter text.
- What are the opportunities for improvement of the Course/Clerkship?  
Click or tap here to enter text.



### Related Policies

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### Review Cycle and Revision History

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The policy is reviewed and may be revised by the Curriculum Council as necessary, but at least every three years.

Initial Policy Approved: 08.08.2022

Current Revision Approved: 08.08.2022

### Applicable Laws, Regulations & Standards

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LCME Standards for Accreditation of Medical Education Programs Leading to the MD Degree:

- LCME Standard 8, Element 3
- LCME Standard 8, Element 4

