

Quillen College of Medicine
Medical Student Education Committee
Policy for Periodic and Comprehensive Evaluation of Curriculum

The Medical Student Education Committee (MSEC) conducts a systematic and comprehensive evaluation of all required courses and clerkships on a prescribed periodic basis and the curriculum as a whole for both integration and content every four (4) years. Following the four (4) year evaluation of the curriculum as whole, appropriate modifications to the curriculum and Institutional Educational Objectives to assure a coherent and coordinated curriculum will be implemented during Year five (5).

The systematic and comprehensive evaluation of the curriculum is accomplished in a two-part process. The first part is conducted during a three (3) year evaluation cycle which includes annual and comprehensive reviews of all required courses and clerkships. During this phase each required course and clerkship director submits two annual self-studies and at least one (1) comprehensive self-study according to the schedule established in the Comprehensive Evaluation Cycle for MSEC Subcommittees, or sooner as deemed necessary based on a variety of factors outlined below. Self-studies form the basis of subcommittee reviews. Annual reviews of all required courses/clerkships focus on educational outcomes. Comprehensive reviews additionally focus on teaching, assessment, content, sequencing, integration, gaps and unplanned redundancies. Integrated curriculum content threads are reviewed annually with a focus on educational outcomes, teaching, assessment, content, sequencing, integration, gaps and unplanned redundancies. During the second phase of the curriculum evaluation process, which is conducted during Year four (4), MSEC evaluates the curriculum as a whole and determines what changes are needed.

Three (3) standing subcommittees are charged with conducting reviews of the self-studies and the integrated thread content reports. The M1/M2 Subcommittee reviews required courses from the pre-clinical years of the curriculum and the M3/M4 Subcommittee reviews required courses and clerkships from the clinical years. The Curriculum Integration Subcommittee (CIS) reviews curriculum content presented in integrated threads. Subcommittee membership consists of faculty, including at least one (1) MSEC voting member, and at least one (1) medical student. Members are appointed by MSEC and the Executive Associate Dean for Academic and Faculty Affairs (EAD). A fourth standing subcommittee, the Institutional Outcomes Subcommittee; reviews curriculum benchmarks and overall curriculum performance. The Year four (4) evaluation of the curriculum as a whole is based on the work of all four (4) subcommittees.

Roles and responsibilities

Years 1-3 Annual and Comprehensive Reviews of Required Courses and Clerkships:

Office of Academic Affairs

The Office of Academic Affairs:

- distributes MSEC-approved annual or comprehensive self-study form to pre-clinical course directors at the conclusion of their course and to clinical clerkship directors at the end of Period 4
- receives the completed self-study forms from directors
- distributes the forms to the appropriate review subcommittee, and
- provides staff support to subcommittees

Course/Clerkship Directors

Within thirty (30) days of distribution of self-study forms, course and clerkship directors:

- submit an annual or comprehensive self-study as requested
- participate in the subcommittee's annual or comprehensive review process as needed

Standing Curriculum Review Subcommittees

M1/M2 and M3/M4 Subcommittees:

- develop and follow a protocol for accomplishing their work.
- conduct annual and comprehensive reviews based on appropriately completed course/clerkship director self-study forms using teams of subcommittee members and/or ad hoc faculty and students selected by the subcommittee, but not to include the course/clerkship director or key teaching faculty for the course/clerkship under review.

For Annual reviews, each subcommittee submits a report to MSEC within three (3) months of receipt of the completed self-study that includes:

- a summary of the review findings, focusing on educational outcomes
- short and long recommendations and/or needed follow-up and
- changes in the course that will need to be reflected in the curriculum management system

For Comprehensive reviews, each subcommittee submits a report to MSEC within six (6) months of receipt of the completed self-study form that includes:

- a comprehensive summary of the review findings, including teaching, assessment, content, sequencing, integration, gaps and unplanned redundancies.

- short and long term recommendations and/or needed follow-up, and
- changes in the course that will need to be reflected in curriculum management system.

A comprehensive review may be deemed necessary outside the established review cycle based on a variety of factors including, but not limited to:

- issues identified in the annual self-study or student evaluation of the course/clerkship,
- concerns about NBME/final exam scores;
- changes in major teaching faculty; or
- faculty initiated curriculum change.

Curriculum Integration Subcommittee:

- develops and follow a protocol for accomplishing their work
- uses teams of subcommittee members and/or ad hoc faculty and students to annually review each curriculum thread
- uses appropriate data to determine the effectiveness of each thread
- submits a report on each thread annually to MSEC that includes:
- a summary of the review findings,
- recommendations and/or needed follow-up and
- changes in the thread that will need to be reflected in the curriculum management system.

Institutional Outcomes Subcommittee:

- establishes objective benchmarks for each institutional educational objective and other curriculum goals
- evaluates each established outcome measure at least annually
- provides quarterly reports to MSEC summarizing the performance of the curriculum in relation to established benchmarks, and
- recommending items for further action or benchmark modifications

Medical Student Education Committee (MSEC)

Year 4: MSEC Evaluation of the curriculum as a whole:

- Reviews all subcommittee reports, with any accepted action items being scheduled for action and annually revisited to ensure effective implementation or its progress.
- [MSEC chair] submits summaries of accepted Annual and Comprehensive reports to the Administrative Council.

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- Identifies priorities for the next year at the end of the academic year
- Hosts a joint “annual meeting” meeting the with all Course and Clerkship Directors that focuses on:
 - a) feedback and assistance among the pre-clinical and clinical directors
 - b) horizontal and vertical integration of curricular content
 - c) addressing gaps and unplanned redundancies across the curriculum
 - d) identifying areas in need of improvement

MSEC reviews the curriculum as a whole and determines whether changes are needed to ensure a coherent and coordinated curriculum. This evaluation occurs in Year four (4), following a full three (3) year cycle of annual and comprehensive course/clerkship, and thread reviews. The review includes the ongoing evaluation data of student mastery of the curriculum via their performance on curriculum outcome measures reported to MSEC by the Institutional Outcomes Subcommittee.

Curriculum modifications will be planned and implemented in a manner that adequately accommodates a variety of administrative and practical issues that affect adoption. For example, curriculum modifications that affect the academic calendar may require a year or more of advance planning, but session level changes may require less than a semester to adopt. In all circumstances the relevant time frame should be identified in advance and built in to the plan so that curriculum modifications are implemented in a timely manner and ensure curricular objectives are met.

MSEC determines the effectiveness of the Quillen curriculum by answering the following questions:

1. Does the curriculum include all required content? What evidence supports this conclusion?
2. To what extent is curriculum logical in its sequencing? What factors need to be considered regarding sequencing and what modifications should be considered?
3. To what extent is curriculum content organized, coherent and coordinated?

4. In what ways is curricular content integrated within and across academic periods of study (horizontally & vertically integrated)? Is this adequate? Where could additional integration occur?
 5. In each segment of the curriculum, are the methods of pedagogy appropriate? Clinically relevant? Student- centered? Effective? What are the practices in place that accomplish this? How does the pedagogy in each curriculum segment relate to the adequacy of our curriculum as a whole?
 6. To what extent are evaluations: linked to objectives and competency-based? Providing adequate formative and summative feedback? Measuring cognitive and non-cognitive achievement? Measuring knowledge, attitudes and skills? What needs to occur to improve evaluations throughout the curriculum?
 7. To what extent are we achieving our educational objectives and accomplishing our mission?
- To answer the questions, MSEC synthesizes data from a variety of sources including, but not limited to:
 - LCME Accreditation Standards
 - Institutional Educational Objectives
 - Evaluation of each segment of the curriculum (M1/M2 & M3/M4 Curriculum Review Subcommittee reports and Curriculum Integration Subcommittee reports)
 - Institutional Outcomes Subcommittee reports
 - Curriculum content and mapping reports
 - Summary of MSEC actions
 - Review of MSEC Annual Meeting feedback from course and clerkship directors
 - Feedback from students

The evaluation of the curriculum as a whole is accomplished by dividing the process among working groups according to the following timeframe which may need to be adjusted based on an identified administrative or practical issue that could affect adoption of the curriculum modification:

July-August	Identify members and tasks of working groups; organize data to respond to questions
September- February	Working groups collect and begin analyzing appropriate data and developing reports
January--March	MSEC reviews working group reports, synthesizes information into a comprehensive report and identifies actions commensurate with final report
March-April	Development of plan for and implementation of approved actions

Year 5: MSEC to Implement Appropriate Curricular Modifications

In Year five (5), following the evaluation of the curriculum as a whole, MSEC will implement appropriate modifications to the curriculum and Institutional Educational Objectives to assure a coherent and coordinated curriculum for students pursuing the doctorate of medicine degree.