<table>
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<tr>
<th>Policy/Process/Procedure Name:</th>
<th>Periodic and Comprehensive Evaluation of Curriculum Policy</th>
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<tr>
<td>MSEC/ADMIN Number:</td>
<td>MSEC-0314-10</td>
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<td>Approving Officer:</td>
<td>Ramsey McGowen, PhD</td>
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<td>Agent(s) Responsible for Implementation:</td>
<td>MSEC</td>
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| Original Approval Date: 3/18/14 Effective Date(s): 3/18/14; 4/21/15; 11/8/16; 2/20/18; AY 2019-2020 | Originator Name/Committee: MSEC |

| Revision Date(s): 4/21/15; 11/8/16; 2/20/18; 12/17/19 | LCME Required Policy/Procedure/Process: Yes ☐ No ☐ LCME Element(s) Number and Description: |

8.3 CURRICULAR DESIGN, REVIEW, REVISION/CONTENT MONITORING - The faculty of a medical school are responsible for the detailed development, design, and implementation of all components of the medical education program, including the medical education program objectives, the learning objectives for each required curricular segment, instructional and assessment methods appropriate for the achievement of those objectives, content and content sequencing, ongoing review and updating of content, and evaluation of course, clerkship, and teacher quality. These medical education program objectives, learning objectives, content, and instructional and assessment methods are subject to ongoing monitoring, review, and revision by the faculty to ensure that the curriculum functions effectively as a whole to achieve medical education program objectives.

[Also include the LCME Element number in (B) Purpose of Policy/Procedure/Process statement below].

All policies/processes/procedures will be reviewed during the MSEC Evaluation of the Curriculum as a Whole unless an earlier review is identified.

(A.) Policy/Process/Procedure Statement:

The name of this policy has been changed from *MSEC Periodic and Comprehensive Review of Curriculum* to *Periodic and Comprehensive Evaluation of Curriculum*.

The Medical Student Education Committee (MSEC) conducts a systematic and comprehensive evaluation of all required courses and clerkships, phases of the curriculum and the curriculum as a whole on a prescribed periodic basis. Following the evaluation of the curriculum as whole (program evaluation), appropriate modifications are implemented to the curriculum and Institutional Educational Objectives to assure a coherent and coordinated curriculum.
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(B.) Purpose of Policy/Process/Procedure:

To assure a coherent and coordinated curriculum. This policy pertains to LCME requirements of Element 8.3 (Curricular Design, Review, Revision / Content Monitoring).

(C.) Scope of Policy/Procedure/Process (applies to):

Quillen College of Medicine Curriculum

(D.) Activities of Policy/Procedure/Process (start to finish):

Reviews of required courses and clerkships and integrated curriculum threads are conducted by three MSEC standing subcommittees. The M1/M2 Review Subcommittee reviews required courses from the preclerkship phase of the curriculum and the M3/M4 Review Subcommittee reviews required courses and clerkships from the clinical phase.

The Curriculum Integration Subcommittee (CIS) reviews integrated content threads and curriculum content reports. A fourth standing subcommittee, the Institutional Outcomes Subcommittee, reviews curriculum benchmarks and overall curriculum performance.

Standing subcommittee membership consists of faculty, including at least one MSEC voting member, and at least one medical student. Members are appointed by MSEC and the Executive Associate Dean for Academic and Faculty Affairs (EAD).

Phases of the curriculum are reviewed by an ad hoc work group comprised of designated members of the standing subcommittees and medical education program administration.

Program evaluation is based on the work of all four subcommittees, the Phase review work group and other ad hoc groups charged with evaluating specific aspects of the curriculum as a whole.

Curriculum Evaluation and Revision Process

The periodic and comprehensive evaluation of the curriculum is accomplished in two (2) parts over five (5) years. The first part is conducted during a three (3) year evaluation cycle which includes annual and comprehensive reviews of all required courses, clerkships and evaluation of integrated curriculum threads. During this period each required course and clerkship director submits two (2) annual self-studies and at least one (1) comprehensive self-study according to an established schedule, or sooner as deemed necessary based on a variety of factors outlined below. Course/clerkship director self-studies form the basis of subcommittee reviews. Annual reviews of all required courses/clerkships focus on educational outcomes. Comprehensive reviews additionally focus on a three (3) year trend analysis of effectiveness, including teaching, assessment, content, sequencing, integration, gaps and unplanned redundancies. Integrated curriculum content threads continue to be reviewed every three years with a focus on educational outcomes, teaching, assessment, content, sequencing, integration, gaps and unplanned redundancies.

During the second part of the curriculum evaluation process (years four [4] and five [5]), MSEC evaluates the phases of the curriculum and the curriculum as a whole. Findings from
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this process determine what changes may be needed. In year five (5), identified curriculum revisions are planned. During years four (4) and five (5), each course and clerkship continues to be reviewed but the review is conducted as an administrative review. The same data is considered, but the review is conducted by selected members of the M1M2 and M3M4 review subcommittees and/or educational administrators (review team). The reviewing team reports the findings of the administrative review of each course/ clerkship directly to MSEC rather than going through the entire subcommittee.

Phases of the curriculum are defined as preclerkship and clinical phases. Phase evaluations consider educational outcomes, teaching, assessment, content, sequencing, integration, gaps and unplanned redundancies and overall effectiveness of the phase.

Roles and Responsibilities

Annual and Comprehensive Reviews of Required Courses, Clerkships and Phases

Office of Academic Affairs

- Distributes MSEC-approved annual or comprehensive self-study form to pre-clerkship course directors at the conclusion of their course and to clinical clerkship directors no later than the end of Period 4.
- Receives the completed self-study forms from directors.
- Distributes the forms and supporting documentation to the appropriate review subcommittee.
- 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 and supplemental information 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.
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For Annual reviews, each subcommittee submits a report to MSEC within three (3) months of receipt of the completed self-study that includes (exception to this timeframe would be in Year 4 and 5 Annual reviews when the review team will submit an administrative report to MSEC within sixty (60) days):

- A summary of the review findings, focusing on educational outcomes.
- Short-term and long-term recommendations and/or needed follow-up.
- Changes in the course or clerkship that will need to be reflected in the curriculum management system and/or reviewed as part of the curriculum as a whole review.

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 an analysis of course/clerkship trends, teaching, assessment, content, sequencing, integration, gaps and unplanned redundancies.
- Short-term and long-term recommendations and/or needed follow-up.
- Changes in the course/clerkship that will need to be reflected in the 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.
- Faculty initiated curriculum change.

Curriculum Integration Subcommittee:

- Develops and follows a protocol for accomplishing their work.
- Conducts reviews of and reports to MSEC on curriculum content to monitor effectiveness of selected curricular topics.
- Uses teams of subcommittee members and/or ad hoc faculty and students to review each curriculum thread every three (3) years.
- Submits a report to MSEC on each thread every three (3) years that includes:
  - A summary of the review findings.
  - Recommendations and/or needed follow-up.
  - Changes in coverage of the thread that will need to be reflected in the curriculum management system.
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Institutional Outcomes Subcommittee:

- Establishes objective benchmarks for each institutional educational objective category 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.
- Recommending items for further action or benchmark modifications.

Ad hoc Working group to Evaluate Curriculum Phases:

- Convenes during the program evaluation year.
- Synthesizes reports from MSEC standing subcommittees as well as additional supplemental information (USMLE year-end reports, student end-of year retrospective reviews of the curriculum, status of Institutional Educational Objectives coverage, GQ, etc.) to evaluate curriculum phases.
- Evaluates the effectiveness of the preclerkship phase and clinical phase of the curriculum, taking into account the primary purposes of each segment of the curriculum (individual courses and clerkships and distinct time periods of the curriculum) and how these function in relation to one another.
- Reports finding to MSEC during the program evaluation year so that results can be incorporated into the evaluation of the curriculum as a whole.

Medical Student Education Committee (MSEC):

- Reviews all subcommittee and ad hoc committee reports, with any accepted action items being scheduled and monitored to ensure effective implementation or its progress.
- [MSEC chair] submits summaries of accepted Annual and Comprehensive reports to the Administrative Council.
  - [MSEC chair] submits summaries of accepted Annual and Comprehensive reports to department chairs.
  - Identifies priorities for the next year at the end of the academic year.
  - Hosts a joint “annual meeting” with all Course and Clerkship Directors that focuses on:
    - Feedback and assistance among the pre-clerkship and clinical directors.
    - Horizontal and vertical integration of curricular content.
    - Addressing gaps and unplanned redundancies across the curriculum.
    - Identifying areas in need of improvement.
MSEC Evaluation of the Curriculum as a Whole

MSEC reviews the curriculum as a whole (program evaluation) and determines whether changes are needed to ensure a coherent and coordinated curriculum. This evaluation occurs in Year four (4), following the three (3) year cycle of annual and comprehensive course/clerkship and thread reviews as well as continued annual course/clerkship and thread reviews in Years 4 and 5.

The review includes the ongoing evaluation of data related to student mastery of the curriculum via their performance on curriculum outcome measures reported to MSEC by the Institutional Outcomes Subcommittee. The work of the ad hoc Phase review committee will occur simultaneously with the review of the curriculum as a whole and the conclusions and recommendations of this group will be factored into decisions made about the curriculum.

Curriculum modifications generally will be planned in year five (5) of the curriculum review cycle and in a manner that adequately accommodates a variety of administrative and practical issues that affect adoption. Changes will be implemented in a logical sequence after planning is complete. Changes that do not require significant planning or reorganization may be implemented at other times. 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 overall effectiveness of the Quillen College of Medicine 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 phases of study (horizontally & vertically integrated)? Is this adequate? Where could additional integration occur?

5. In each segment and phase 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 and phase relate to the adequacy of our curriculum as a whole?

6. To what extent are assessments: linked to objectives and competency-based? Providing adequate formative and summative feedback?
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Measuring cognitive and non-cognitive achievement? Measuring knowledge, attitudes and skills? What needs to occur to improve assessments 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 and phase of the curriculum (M1/M2 & M3/M4)
  - Curriculum Review Subcommittee reports, Curriculum Integration
  - Subcommittee and Ad hoc Phase 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
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<th>Name / Title: Ramsey McGowen, PhD / MSEC Chair</th>
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<tr>
<td><strong>Policy/Process/Procedure Superseded by this Current Policy/Process/Procedure (name and number):</strong></td>
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