California University
of Science and Medicine

Handbook for Assessment of Student Learning Outcomes

Office of Academic and
Institutional Effectiveness

Approved by Assessment & Evaluation Committee

May 2024

Curriculum Map (page 13) updated 6.11.2024

Contents

1. Information in University Catalog

Please refer to the University Catalog on the CUSM website for information on the following:
- institutional mission and vision
- graduation requirements for CUSM degree programs
- code of ethics
- policy on academic progress

It is the responsibility of the student to ensure that they have read and understood the above information.

2. Principles of Assessment

California University of Science and Medicine (CUSM) has established policies and associated procedures with respect to formative and summative assessments of the courses offered in all degree programs in the university.

- These policies and procedures are based on educational practices that comply with the requirements set forth by 3 accreditation agencies – Bureau for Private Postsecondary Education (BPPE), WASC Senior College and University Commission (WSCUC), and the Liaison Committee on Medical Education (LCME).
- The purpose of assessment is to ensure that CUSM students are developing the required level of competence in knowledge, skills and attitudes required for the award of degrees as well as for real-world employment and professional practice.
- The Handbook for Assessment of Student Learning Outcomes describes the policies and the procedures associated with the assessment and student evaluation methods used in programs and course offered at CUSM. In this handbook, a course indicates any credit-earning unit of academic instruction at CUSM that is governed by an approved syllabus e.g. course, clerkship, elective, etc.

The principles that have guided development of the current assessment strategy include the following convictions:

A. The recognition that:
  - students are responsible, motivated adults and are therefore expected to participate actively in assessing their own learning progress, guided by faculty, staff, fellow students, and others.
  - the faculty has a responsibility to assure students, staff, employers and the public that CUSM graduates have achieved the prescribed institutional outcomes for the award of a degree.
  - the assessment process should encourage and acknowledge co-operative learning and excellence, and be clear so that students know in advance what they need to do to achieve learning outcomes.

B. Assessments should:
  - support learning and promote the integration and application of information, principles, and concepts.
  - closely match "real-life" situations whenever possible; for example in the MD program, this should include frequent observations of students interacting with patients.
  - use a combination of methods to provide a comprehensive assessment of the core knowledge, skills, and attitudes defined in the program outcomes for the degree.

C. All assessments have a formative function. Some assessments have a summative function. The formative (learning) functions of assessment will be given at least as much emphasis as the summative (grading and selection) functions.

D. Both formative and summative assessments will test and evaluate student knowledge based on expectations that are defined in learning outcomes.

E. The number, timing, and weighting of individual assessments are designed to maximize validity (both formative and summative). The more opportunities students get to work actively with course material and receive feedback, the better the chances that they will learn and retain it.

3. Learning Outcomes

The achievement of knowledge, skills and attitudes by students in CUSM programs is described at 4 levels: program, course/clerkship, and session. Learning outcomes are established by faculty and published in learning material and information management systems for access by students and faculty.

Institutional Learning Outcomes ILOs: These are outcomes that students are expected to achieve and demonstrate following completion of learning in any CUSM program.

Program Learning Outcomes PLOs: These are outcomes that students are expected to achieve following completion of learning in a degree program.

Formative Assessments

These assessments are designed to monitor student learning and provide ongoing feedback that can be used to improve both learning and teaching. They are informal and intended to (a) make students aware of their learning progress, help them identify their strengths and weaknesses, and thereby target areas that need modification or additional work (b) help the faculty recognize where students are struggling and address these problems appropriately and in a timely manner (c) provide regular feedback and evidence of progress (d) alert instructors about student misconceptions (e) serve as an "early warning signal" (f) allow students to build on previous experiences (g) align with instructional/curricular outcomes (h) portray student's life as a learner. Through the use of formative assessments, information about students' progress is accumulated and used to help make instructional decisions that improve learning and achievement levels.

Summative Assessments

These assessment are formal evaluations of student achievement of the learning outcomes of a course. These assessments serve to determine student mastery and understanding of information, skills, concepts, and processes, and are used to reach decisions regarding grade reports, student progression and exit achievement. The results of summative assessments contribute to the final result in a course.

Course/Clerkship Learning Outcomes CLOs: These are outcomes that students are expected to achieve following completion of learning in a course or clerkship. CLOs are mapped to the PLOs, and to the assessment methods that are used to measure student achievement of learning outcomes. CLOs are used in the evaluation of course/clerkship performance. For some programs, CLOs are also mapped to other outcomes (such as core Entrustable Professional Activities [developed by the AAMC] for courses with clinical experiences in the MD program).

Session Learning Outcomes SLOs: These are outcomes that students are expected to achieve following participation in a learning session. Examples of sessions include lecture, laboratory, or small group activity.

CUSM ILOs

ILO 1 – Demonstrate depth and breadth of knowledge in the discipline of the conferred degree

ILO 2 – Apply knowledge of the discipline effectively to health and science practice

ILO 3 – Develop critical thinking skills and apply them to health and science practice

ILO 4 – Demonstrate professional, ethical, and moral qualities supported by evidence-based decision-making skills

ILO 5 – Apply interpersonal communication skills, inter-professional collaboration skills, and humanism to health and science practice

ILO 6 – Engage in self-evaluation, self-directed learning, and lifelong learning

ILO 7 – Participate effectively and demonstrate commitment to community and system improvement.

4. Governance

At CUSM, the process of assessment of student learning and of courses is centrally governed. Leadership for oversight of all assessment policies, processes and procedures is provided by the Senior Associate Dean for Academic and Institutional Effectiveness.

Senior Associate Dean for Academic and Institutional Effectiveness

The Senior Associate Dean for Academic and Institutional Effectiveness (SADAIE) is responsible for the implementation of a comprehensive integrated assessment of student learning that also identifies goals and challenges for curricular assessment of educational objectives. The SADAIE utilizes data to establish facts and defines strategies and solutions for assessment policy. The SADAIE:

- is responsible for assisting educational program directors in the development and execution of comprehensive plans for student assessment and educational program assessment at CUSM.

- works closely with assessment/evaluation and program curriculum committees for ongoing review and revision (as needed) of formative and summative student assessment methods as well as course assessments aimed at improvements in curriculum and other services that will enhance student learning and the success of the educational

program, and ensure compliance with accreditation standards.

- collaborates with faculty to ensure the successful implementation of student assessment methods used in courses.
- supports the involvement of students, course and program directors, and curricular deans in the implementation and refinement of assessment methods used to ensure valid, comprehensive evaluations.

Office of Academic and Institutional Effectiveness

This Office is responsible for the day-to-day implementation of the assessment process and is the point of contact for students regarding the assessment process.

The OAIE is led by the Director of Academic and Institutional Effectiveness, and

- provides support for assessment in courses to course and program directors, and curricular deans
- manages communications with and notifications to students relating to assessments and course feedback
- provides information to appropriate committees during the grade appeals process, and
- assists in the maintenance of standards and integrity of items and tools that are used for student assessment and evaluation.

Assessment and Evaluation Committee (AEC)

This committee is a faculty standing committee that reviews assessment and evaluation methods of courses and programs with representative student membership. The role of the committee is governed by a set of responsibilities that are outlined in the faculty bylaws. The committee works closely with the OAIE to review standards of student assessment, and provides recommendations to course/clerkship directors to help them prepare their end-of-course/clerkship reports.

5. OAIE Services

OAIE Platforms

ExamSoft: Faculty-developed multiple-choice examinations are administered through the secure testing software system ExamSoft. Access by students, staff and faculty to the testing system is through institutional login with a valid CUSM email address. Matriculating students receive training and orientation to the system during orientation week, and also receive assessment-related notifications through the ExamSoft system.

Examination Management System: OAIE uses a a variety of platforms to provide services to faculty and students including information to students about courses, and uses these systems to retrieve student feedback data from surveys administered at the end of courses/clerkships. Students and faculty receive auto-generated notifications via these platforms, and log into the system to perform and/or view evaluations.

SimCapture: SimCapture is a video capture and recording platform that is used to facilitate student learning, support remote proctoring, and the recording of scores during clinical examinations.

Examinations and Evaluations

Following an assessment or course survey, the OAIE collects and reports data (e.g., student performance data, survey data) to the course director/Associate Dean of Clinical Curriculum, and and prepares aggregate data for reporting to the AEC. Students receive auto-generated notification about scores and grades through the curriculum management system. The AEC reports their recommendations to the course director/Associate Dean of Clinical Curriculum and the appropriate curriculum committees.

Course and Curricular Reviews

At the end of courses and clerkships, students complete end-of-course/clerkship as well as faculty evaluation surveys. Survey items are designed and set up in the learning management system by the Office of Medical Education for automated notification/delivery to students. Students complete and submit the surveys through the learning management system when the course ends. The OAIE retrieves survey results and reports from the learning management system for inclusion in course data dashboards. Aggregate student performance and survey data is reviewed by AEC and sends recommendations to the course director/Associate Dean of Clinical Curriculum and curriculum committees.

Curriculum reviews are implemented by the Office of Medical Education. OAIE supports reviews of program curricula by providing aggregate outcome data and charts for discussion of curriculum improvement plans.

Comprehensive Program Reviews

Periodic comprehensive reviews of CUSM educational programs are overseen by the Office of Accreditation and Continuous Quality improvement (OACQI) following guidelines that satisfy requirements outlined by the WASC Senior Colleges and University Commission (WSCUC).

6. Policies

Policy on Academic Progress

Students are advised to refer to the Student Handbook (Section on Policy on Academic Progress) for a full description of rules, regulations and guidelines that govern academic progression, graduation requirements, as well as academic probation, suspension, and appeal.

Policy on Conflict of Interest

Please refer to the University Catalog for details of the conflict of interest policy.

At the start of each course, faculty are required to complete a conflict of interest declaration that records any conflicts of interest that may exist relating to their role as instructors and evaluators in the course. Notifications to faculty to compete the declaration is managed through the curriculum management system (CMS).

Procedure: Automated notifications are set up in the CMS by the Office of Medical Education. During the first week of each course, faculty receive notification via email to log into the CMS (OASIS) to complete and submit the conflict of interest form.

Standards of Performance

CUSM has established and published standards of performance (SoPs) for all courses in all programs. The standards of performance contain the course learning outcomes, the methods used to assess them, and define the levels of satisfactory aggregate achievement for learning outcomes. This information on expectations and satisfactory levels of performance for courses is available to faculty and students, and is published in each course syllabus or handbook which are available on the learning management system (Canvas).

The SoPs are used by the OAIE and the AEC in the analysis of data collected during end-of-course evaluation.

The SoP template that is used to construct the SoPs for courses in all programs is shown below.

Expectations for student work		Expectations for instruction	
Students who take this course will a. b.		Instruction in the course will be delivered as a. b.	
Content Standard: Course Learning Outcomes (CLO)		Expected Standard of Performance for outcomes	
		Assessment	Course
1	What is measured?		At least nnn% of class achieves satisfactory level
	How measured?		
	When/frequency:		
	Satisfactory level:		
2	What is measured?		
	How measured?		
	When/frequency:		
	Satisfactory level:		

7. Procedures

Testing Day Requirements

CUSM is committed to providing students with fair and secure test-taking conditions. As far as is possible, CUSM strives to ensure that these conditions are provided uniformly for all students and serve the interests of students and faculty. Students who violate the rules and regulations that govern assessments at CUSM may later choose in future to ignore community or workplace rules. Students are encouraged to join in a commitment to a fair and secure assessment process by reporting any irregular behavior, rules violations, or exam security violations of which they become aware. If a student receives confidential content regarding any assessment, even unintentionally, CUSM regulations also require that the student report such incidents using reporting forms for violation of professionalism.

Confidentiality

Test items and the content of all internally-generated assessments are the proprietary property of CUSM. Communicating, publishing, reproducing, and transmitting any part of an assessment, in any form or by any means (verbal, electronic, written) for any purpose is prohibited.

Notification

General instructions for all assessments at CUSM are posted in the learning management system, and are available to view at all times. Information regarding the date, starting time, and location of assessments is also published in the learning management system for students to access. Students are expected to make arrangements to arrive at the assessment location/site and be in their seat before the starting time of the assessment.

Student Conduct

- Students are expected to be professional, civil, and respectful at all times during an assessment. Proctors and examiners

will not dismiss students for any violation of testing procedures and rules. Proctors are instructed to notify other proctors and the chief proctor of suspicious behavior, allowing the student to complete the assessment without interruption until proper investigation can occur. An incident report outlining such violations and any actions taken at the assessment location will be sent by OAIE to the course/ clerkship director for due process.

- Students are advised to dress so that they can adapt to any room temperature, within limitations outlined in subsequent section, e.g., heavy jackets, hats, hooded sweatshirts/jackets are not allowed during examinations.
- Students must present a valid and current CUSM ID or login credentials in order to be permitted to take an assessment. No other form of identification is acceptable.
- The student name on an ID must match the name on the exam attendance record/login permission.
- Students must inform a proctor before accessing a stored item (e.g., medicines) during an assessment or during a break in an assessment.
- Students may only bring authorized materials into the testing room. If a proctor or examiner finds, during the assessment, that a student has unauthorized material, in whatever form, in the vicinity of their desk or on their person, whether in the testing room or the restrooms or en route to / from the restrooms, an incident report will be generated by OAIE and sent to the course/clerkship director for due process. This will apply regardless of whether or not the material has been used at the time it is found.
- Any student, who finds that they have inadvertently brought any unauthorized material whatsoever into the examination room, should declare it to the proctor or examiner immediately. Students who are uncertain whether any material is authorized should ask the proctor or examiner for clarification. A list of some unauthorized items is provided below and updated regularly.
- Friends or relatives will not be allowed into the testing room or be permitted to wait in the assessment location or be in contact with a student while they are taking an assessment. Except for authorized observers, visitors are not permitted in the assessment room while testing is in progress.

The following behaviors are explicitly prohibited during an assessment, as well as during any assessment breaks including lunch breaks.

- Unauthorized possession, access, or use of electronic devices at any time after check-in and prior to completing an assessment
- Unauthorized possession, access, or use of cameras, or recording equipment of any kind
- Giving or receiving aid on any assessment
- Sharing, transferring or exchanging erasable noteboards
- Possessing, accessing, or using books, notes, or any other written materials (other than erasable noteboard provided for student use by the proctor or examiner)
- Looking at the content of another student's screen, testing material, or erasable noteboard
- Disruptive or abusive behavior, talking in the testing room with anyone other than a proctor, or talking about or discussing the assessment during a break in testing.
- Talking to other students in the testing room during an assessment
- Writing assessment-related information on anything (e.g., clothing, ID documents, water bottles, body parts) that can be read during the course of the examination

Student Personal Property

- For many assessments, students will be expected to bring their CUSM-issued laptop computer to take an examination. The specifications for laptops that can be used for these assessments are provided in documentation that students originally received upon acceptance to CUSM. Only approved devices are permitted to be used during examinations.
- CUSM cannot guarantee the safety of any personal property that students may bring with them to an assessment or leave behind in the testing room after an assessment. Students are advised to leave all non-essential personal property in a safe place, and to arrive at the assessment location with only those items that are permitted during the assessment.
- Students should ensure that they take all their personal property with them when they finish an assessment and leave the assessment location.

Allowed Items

- Students may have the following items at their workstation during the assessment: student ID, erasable noteboard and dry erase marker, soft ear plugs (provided at the assessment location). Permission must be sought from the proctor or examiner for other personal items such as medicines, and crutches.

- All materials issued for the assessment (e.g., erasable noteboard and dry erase pens) must be returned at the end of testing.
- Light clothing items (e.g., sweaters, suit jackets, scarves) must be hung on the student's chair when they are not being worn. Do not place such items in laps or on the workstation desktop.

Prohibited Items

- Weapons are not allowed in an assessment location.
- The following personal items may not be brought into the testing room: food, drinks, baseball caps, hats, gloves, purses, briefcases, notebooks, watches, cell phones, electronic devices, wearable technology. Heavy coats, hoods, parkas, raincoats, etc., are not permitted in the testing room. Students are encouraged to dress in light layers, layers not being worn should be hung on the back of their chair and not in their lap, or on the desktop or floor.
- Written notes, published materials, and other testing aids are prohibited in the assessment location, except where permitted for the assessment. Unauthorized written notes or electronic devices discovered in the test room will be confiscated by the proctor.
- Students may use only soft ear plugs and tissues (e.g., Kleenex) provided in the assessment location.

Clarifications

Student-initiated Clarifications during Assessments

If a student requires clarification of any aspect of the conduct or content of an assessment during the testing period, the student should indicate by raising a hand during the assessment, explain their query to a proctor or examiner, and continue with the assessment until the query is addressed and resolved if possible.

Faculty-initiated Clarifications during Assessments

If a need arises for clarification of aspects of the conduct and/or contents of an assessment, announcements are made by a proctor or examiner as a verbal communication, PowerPoint projected notice, or a PowerPoint projected amendment.

Accommodations

Full details about accommodations for assessments is available from the Office of Student Affairs. Students who require accommodation for specific circumstances during examinations must inform the Office of Student Affairs to arrange for the appropriate assessment of their needs. All requests for accommodation for assessments from the Office of Student Affairs to the OAIE must be completed 2 weeks prior to the date of the assessment.

Extended time

OAIE arranges for students who have been approved for accommodations that require extended time during assessments to receive notification regarding the location and timing of their assessment. Students receive such notifications (as well as reminders) at the same time as other students taking the same assessment.

Emergency Communications

In the event of an emergency, students must follow the instructions given by the proctors and examiners. If an evacuation of the assessment location is necessary, students should refrain from talking or communicating in any other way to anyone except a proctor or examiners.

Penalties and Process following Violations

Violations of rules that govern assessments are reported (as an Incident Report) by the proctors and examiners to OAIE and forwarded to the course/clerkship and program director for due process.

Special Consideration and Deferred (Make-Up) Assessments

Students whose study has been adversely affected by illness or other significant circumstances outside of their control can apply for special consideration. Students should consult the Office of Student Affairs to determine their eligibility for special consideration. This is not the same as excused absences for classes or labs. Students who are excused by the course/clerkship director and the Office of Student Affairs from taking assessments during a course or clerkship must take a deferred examination. Applying for special consideration is not designed to save students from the consequences of poor academic preparation. Significant circumstances may include but are not limited to:

- death or serious illness of a member of the student's immediate family or household or of a close friend
- serious injury or illness
- being a victim of a crime
- breakdown of relationship
- sudden loss of income or employment
- serious disruption to domestic arrangements

Where special circumstances prevent a student from taking an assessment as originally scheduled, the student may apply for a deferred (make-up) assessment. If an application for a deferred assessment is granted, the student must be available to take the assessment during the published deferred/make up

assessment period. The date of the deferred assessment is confirmed by the course/clerkship director in consultation with the OAIE. Transcripts of students who take a deferred assessment will show the course, clerkship, or elective grade without any additional remarks or notes indicating that students have taken a deferred assessment.

Program specific rules may apply for the following sections

Seating Arrangements

A roster indicating the allocation to seats by student name as well as a seating map may be posted in the assessment location. This does not apply to remote online assessments.

Time Allotment and Breaks

- The time allowed for each assessment will be specified in posted notifications. This information will be available at least one week prior to each assessment. Some assessments are designed to mimic testing conditions for external examinations, e.g., professional licensing examinations.
- Arrangements may be made for a student to leave the examination room temporarily under supervision but no student will be permitted to leave the examination room until after the expiration of 30 minutes after the start of the examination, except in special circumstances.
- Where the duration of an assessment is 1 hour or less, no student will be permitted to leave the testing room after the start of the assessment.
- CUSM assessments are administered using various platforms such as ExamSoft, a computer-based examination platform. External assessments use different testing platforms.
- Students who finish their assessment before the allocated time may leave the testing room, provided they can do so without disturbing the remaining students who are still taking the assessment.
- To avoid disturbing students who have not finished their examination, students who complete their exam before the scheduled end time for the exam should leave the exam area and lobby area immediately.
- A student can leave an assessment location (after informing the proctor) due to illness.
- Assessments may have scheduled or unscheduled breaks. Students who leave the assessment location for reasons other than a restroom break may only be allowed back to continue their assessment at the discretion of the proctor or examiner.

- At any given time, only 1 student may be escorted to the restrooms during an assessment.
- Students are not expected to take excessive or extended unscheduled breaks during an assessment. Testing room proctors and examiners are required to strictly monitor unscheduled breaks and file incident reports regarding students who take excessive or extended breaks during an assessment.
- For students who miss / do not attend / do not turn up for an examination or assessment without prior approval/ permission, the proctor will notify OAIE who will in turn notify the course/clerkship or program director. No examination score will be returned by OAIE to the course/ clerkship director for the student. The course/clerkship or program director will contact the student in writing and request an explanation for the absence.

Late Arrival to Assessments

In general, students arriving late for examinations may be admitted into the testing room without question during the first 30 minutes of the start of the assessment but no additional time will be made available to students to complete their assessment. Students may not be admitted to a testing room 30 minutes after an assessment has started.
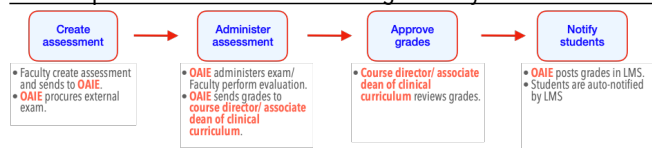
Assessment Review

Students who take a written examination using the electronic assessment system ExamSoft, may receive a provisional "exit" indication of performance at the end of the examination. Students are not permitted to review individual assessment items or associated answer options following an assessment.

Grade Notification and Reporting

The OAIE administers assessments on behalf of course and clerkship directors. Following an assessment, students receive system-generated notification from the learning management system when scores are posted. Grades are reviewed by the course director/Associate Dean for Clinical Curriculum before posting. Final grades are posted in the learning management system according to timelines described in CUSM grading policy.

The Office of Student Affairs presents grades for all students to the Student Academic Standards and Promotion (SASaP) Committee for routine consideration and ratification to approve academic progression.

Normal procedure for notification of grades by OAIE to students

Create assessment	Administer assessment	Approve grades	Notify students
• Faculty create assessment and sends to **OAIE**. • **OAIE** procures external exam.	• **OAIE** administers exam/ Faculty perform evaluation. • **OAIE** sends grades to **course director/ associate dean of clinical curriculum**.	• **Course director/ associate dean of clinical curriculum** reviews grades.	• **OAIE** posts grades in LMS. • Students are auto-notified by LMS

For students in their final year of a program, the SASaP Committee presents their recommendations to the Faculty Assembly for consideration for graduation.

Responsibility for preparing and issuing transcripts of academic performance for individual students lies with the Registrar. Information on student performance for transcripts is obtained from the learning management system by the Registrar's office.

Grade Appeal Procedures

The purpose of the Grade Appeal procedure is to provide an arbitration system for students at CUSM to appeal the assignment of a final grade of a course/clerkship or the evaluation of other professional activity (e.g., examination performance, narrative assessment, etc.). Students wishing to appeal a grade received in a course/clerkship at CUSM must follow the formal grade appeal process outlined below. The principle upon which the appeal is designed is that students can appeal grade outcomes and assessment circumstances including information, e.g., factual inaccuracies that contribute to an evaluation letter or summary. The appeals process is not an adversarial process. The Student Affairs Office acts as advocate for a student's right to due process.

Step 1: Pre-Appeal Resolution

A student can appeal only after meeting with the instructor and course/clerkship director to discuss resolution of the student's concern about the grade assigned. The student must write to the course/clerkship director within three (3) working days after notification of their grade or evaluation report and outline their concerns regarding the grade. The course/clerkship director must reply in writing and meet with student (in a Pre-Appeal Meeting) within 3 working days of receipt of the student's letter to discuss the concerns outlined by the student. A student can only file an appeal where the Pre-Appeal Meeting with a course/clerkship director fails to resolve the student's concerns. Any resolution that is agreed with the course/clerkship director must be communicated by the course/clerkship director in writing to the student and instructor.

Step 2 (File an Appeal)

A student can file an appeal to any decision by the course/clerkship director following pre-appeal meetings.

A. Submit Appeal Form

The student should obtain an Appeal Form from the Office of Student Affairs (OSA), complete the form, describe the outcome of the Pre-Appeal meeting, include any documentation and communications from course/clerkship director, and submit the completed form to the OSA. Appeals forms should be submitted within 7 working days following the Pre-Appeal meeting with the course/clerkship director. Students are encouraged to seek guidance regarding the Appeals process from the Office of Student Affairs.

Appeals Procedure
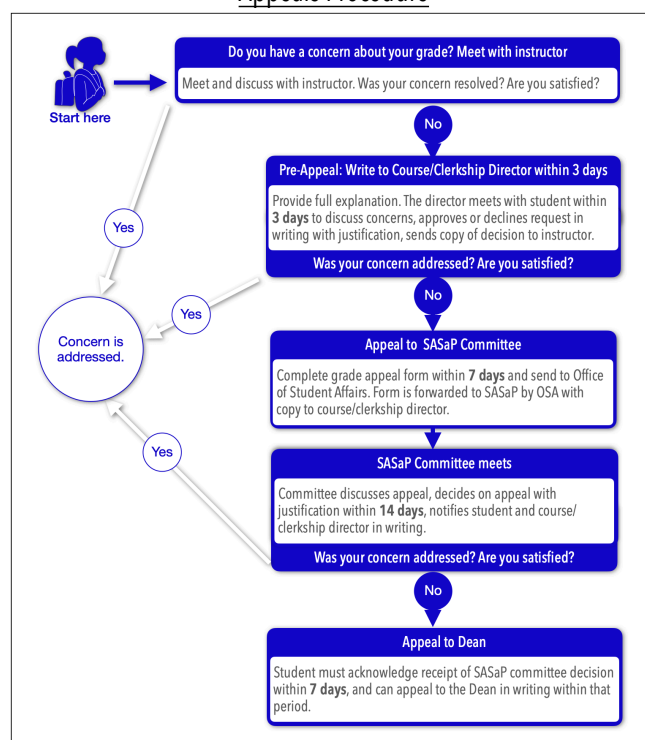
B. Acknowledgement of Receipt of Appeal

Upon receipt of a student's completed appeal form, the OSA notifies the student and acknowledges date of receipt, and forwards the application form with documentation to the Student Academic Standards and Promotions (SASaP) Committee. A copy of the appeal is sent to the course/clerkship director

C. Decision of SASaP Committee

The SASaP Committee considers all grade appeals by students. As a party in the appeals process, the course/clerkship director

cannot participate in any decision-making process of the SASaP Committee. No faculty of any course/clerkship in which a grade is being appealed by a student is allowed to participate in any decision-making process of the SASaP Committee. The committee meets to consider and decide on the appeal within 14 working days of receipt of the completed Appeal Form and Documentation. The decision of the committee (with justification) is communicated within 48 hours to the student and course/clerkship director. The student must acknowledge receipt of the decision letter within 7 working days of being notified of the decision. If the student fails to acknowledge receipt of the decision letter, or fails to appeal the decision to the Dean (see next section) within 7 working days of the decision of the SASaP Committee, the OSA forwards the decision of the committee to the Registrar.

Step 3: Appeal to the Dean

The student has the right to appeal to the Dean regarding any decision of the SASaP Committee. Such appeals must be made in writing to the Dean within 7 working days of receipt of the decision of the committee. The student should outline in their letter the reasons for appealing the decision of the SASaP Committee. The Dean considers and responds to the appeal letter from the student within 10 working days of receipt of the letter. The Dean's decision and justification is sent to the student and copied to the OSA (who notifies the course/clerkship director and the Registrar). The Dean's decision is final.

Assessment of Learning Outcomes in the MD Program

Contents

1. MD Program Learning Outcomes

The educational approach in the MD program at CUSM is structured as an integrated model in which students demonstrate incremental acquisition and mastery of competencies required for entering residency as they progress through medical school. This approach utilizes two sets of competencies published by the Accreditation Council for Graduate Medical Education (ACGME).

- Six core ACGME competencies for resident education
- A list of integrated activities to be expected of graduating medical students (without direct supervision) making the transition from medical school to residency training – the Core Entrustable Professional Activities for Entering Residency (listed below).

The learning skills and competencies that medical students should acquire upon successful completion of the MD program are outlined in the program learning outcomes (PLOs) below.

Course Learning Outcomes CLOs

Course Learning Outcomes are established by course /clerkship committees and published for courses and clerkships in the MD program in syllabi, clerkship handbook, and the learning/ curriculum management system. CLOs are mapped to program learning outcomes.

Core Entrustable Professional Activities EPAs

Developed by the American Association of Medical Colleges AAMC, the core EPAs are a clear, concise list of what graduating medical students should be entrusted to do without direct supervision on day one of residency. The EPAs outline expectations for both learners and teachers that include 13 activities that all medical students should be able to perform upon entering residency, regardless of their future career specialty. CUSM has mapped learning outcomes for clerkships to the core EPAs.

1. Gather a history and perform a physical examination
2. Prioritize a differential diagnosis following a clinical encounter
3. Recommend and interpret common diagnostic and screening tests
4. Enter and discuss orders/prescriptions
5. Document a clinical encounter in the patient record
6. Provide an oral presentation of a clinical encounter
7. Form clinical questions and retrieve evidence to advance patient care
8. Give or receive a patient handover to transition care responsibility
9. Collaborate as a member of an interprofessional team
10. Recognize a patient requiring urgent or emergent care, and initiate evaluation and management
11. Obtain informed consent for tests and/or procedures
12. Perform general procedures of a physician
13. Identify system failures and contribute to a culture of safety and improvement

2. Standards of Performance

These standards are established by faculty for courses and clerkships in the MD program, and published in syllabi, clerkship handbook, and the learning management system. The SoPs are outlined according to the template described in the Handbook for Assessment of Student Learning Outcomes,

and are linked to the assessment methods used to measure student achievement of learning outcomes. The OAIE and the Assessment & Evaluation Committee (AEC) work together to evaluate course/clerkship performance using the SoPs, and report aggregate metrics for achievement of CLOs to course/ clerkship/program directors.

Graduation Requirements

The degree of Doctor of Medicine is conferred upon students who satisfactorily complete all the requirements for the award of the degree. These requirements are published in the MD Student Handbook which is available on the CUSM website. Students, faculty, and staff should consult the MD Student Handbook for details.

3. Assessment Methods in the MD Program

The tables in this section summarize the methods of formative and summative assessments used to evaluate achievement of learning outcomes in the MD program.

Formative Weekly Assessments

Weekly formative assessments are administered to students online in the organ system (SYTM) courses. The purpose of these tests is to inform students on their level of on-going preparation by identifying concepts and/or topics which may require additional study. Assessment items are styled in USMLE Step 1 format and cover assigned material for that week. These assessments are mandatory, and their submission contributes to the course grade as participation points. Scores are posted for students to provide individual performance feedback. Scores from these tests do not contribute to the final grade for a course.

Multiple choice Examinations

At the end of organ system courses, students take in-house multiple choice examinations that assess material learned during the course. Test items are designed according to guidelines suggested by NBME when setting standardized examinations, and standards for the design of assessment items are overseen by the OAIE. Faculty are responsible for setting standards for test items. In-house multiple choice examinations are summative and scores contribute to the final course grade.

MD Program Learning Outcomes (PLOs)

PLO 1 – Medical Knowledge: Students must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care, through prevention, diagnosis, and treatment of disease.

PLO 2 – Patient Care: Students must be able to provide patient care that is compassionate, appropriate, and effective for the promotion of health and the treatment of health-related problems. Students must prioritize patient's problems, formulate appropriate differential diagnoses and develop appropriate plans for the diagnosis and/or management. Students are expected to perform clinical procedures safely and effectively while respecting patients' needs, and concerns.

PLO 3 – Professionalism: Students must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Students are expected to demonstrate:

a. compassion, integrity, and respect for others
b. respect for patient privacy and autonomy
c. responsiveness to patient needs that supersedes self-interest
d. accountability to patients, society, and the profession
e. awareness of biases, sensitivity, and responsiveness to diverse populations.

PLO 4 – Interpersonal Communication: Students must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals. Students are expected to:

a. communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds
b. work effectively as a member or leader of a healthcare team and communicate effectively with physicians, other health professionals, and health related agencies.

PLO 5 – Personal Improvement (Practice-based Learning): Students must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning. Students are expected to identify strengths, deficiencies, and limits in one's knowledge and expertise and set learning and improvement goals.

PLO 6 – System Improvement (System-based Practice): Students must demonstrate an awareness of and responsiveness to the larger context and system of healthcare, as well as the ability to call effectively on other resources in the systems available to provide optimal healthcare. Students are expected to work effectively in various healthcare delivery settings and in inter-professional teams to enhance patient safety and contribute to high-quality care. Graduates are expected to demonstrate an awareness of the US health care system, as well as local Inland Empire health care needs and social determinants of health

Objective Structured Practical Examinations OSPE

During organ system courses, students attend lab sessions (virtual/online or in-person) for learning how to identify specimens, interpret lab results/findings, virtual microscopy, laparoscopic skills training, and radiologic imaging. These sessions are often associated with online quizzes (specimen and/or image identification) that are provided during lab for students to assess their understanding of the material being learned, and obtained helpful feedback. Objective structured practical examinations OSPE that are administered at the end of the course test identification, learning and critical thinking. The OSPE is summative and contributes to the final course grade.

Rubric-dependent Assessments

These assessments are used to evaluate student achievement in various components in courses and clerkships and often contain narrative components. Rubrics are used to score presentation and critical thinking during clinical case presentation when students work together and share knowledge in their college with college faculty facilitating clinical reasoning. They are also used to evaluate paper review presentations in college colloquium courses, to evaluate information literacy and research methodology in the Academic Research Study courses, and to provide feedback to students through checklists regarding progress towards achieving competency. Professional conduct is monitored in all courses and clerkships and a Violation/Professionalism Concern Report

MD Program Curriculum Map

	PLO 1–4	PLO 5	PLO 6
	1. Med. Knowledge 2. Patient Care 3. Professionalism 4. Interprofessional Communication	Personal Improvement	System Improvement
M1 **>>** **M2**	Foundations	Foundations	Nervous/Behavior
	MSK	MSK	Colloquium I/II
	Blood/Lymph/Renal	Blood/Lymph/Renal	
	Cardiopulmonary	Cardiopulmonary	
	Digestive	Digestive	
	Endocrine	Endocrine	
	Reproductive	Reproductive	
	Nervous/Behavior	Nervous/Behavior	
	Colloquium I/II	Colloquium I/II	
	Clinical Skills I/II	Acad Res Stud I/II	
M2 **>>** **M3**	Emergency Med	Emergency Med	Emergency Med
	Family Med	Family Med	Family Med
	Internal Med	Internal Med	Internal Med
	Neurology	Neurology	Neurology
	OBGYN	OBGYN	OBGYN
	Pediatrics	Pediatrics	Pediatrics
	Psychiatry	Psychiatry	Psychiatry
	Surgery	Surgery	Surgery
	Prof. Development	Prof. Development	Prof. Development
M4	Radiology	Radiology	Radiology
	Sub-internships	Sub-internships	Sub-internships
	Clinical Electives	Clinical Electives	Clinical Electives
	Prof. Development	Prof. Development	Prof. Development
	Internship Prep	Internship Prep	Internship Prep

Interval progress measures: USMLE Step exams 1 & 2, OSCEs, Clerkship Student Performance Evaluations

is filed with the Office of Student Affairs when a student displays unethical or unprofessional conduct. The program curriculum map shows the learning outcomes for the MD program mapped at the program, and course/clerkship levels, including interval markers/measures (assessments and evaluations) that are used to demonstrate achievement of satisfactory competence for each program learning outcome.

Standardized Examinations (NBME and USMLE)

Standardized examinations obtained from the National Board of Medical Examiners (NBME) are used to assess achievement of learning in courses and clerkships. These are usually summative exams and contribute to the final grade. These exams provide aggregate data regarding student preparation in organ systems and subject areas and offer benchmarks for comparison with medical students nationally. Other NBME exams that students also take include the Comprehensive Basic Science Examination (CBSE), Comprehensive Basic Science Self-Assessment (CBSSA), and Comprehensive Clinical Science Self-Assessment (CCSSA). These are formative exams and cover material expected to appear on the United States Medical Licensing Examination USMLE Step Examinations that students are required to pass before graduation.

Multi-station OSCE

Objective Structured Clinical Examinations (OSCEs) in the clinical skills courses and clerkships are used to evaluate the ability of students to gather and interpret clinical patient data and communicate effectively. Students are assessed at stations on their ability in several skills including history taking and focused physical examination of a standardized patient (a professional trained to realistically and consistently portray a patient). Clinical skills OSCEs are aligned with learning of organ systems in other courses and students receive formative assessment through rubric-based evaluations and checklists.

4. Student Assessment and Evaluation in the Clinical Curriculum

All courses and clerkships use a combination of formative and summative methods to guide student learning and provide feedback, and to assess knowledge, skills and attitudes to arrive at a final grade. Each course and clerkship syllabus outlines the details and weighting of summative assessments for that particular course or clerkship. All syllabi are available to students and faculty on the learning management system.

Teaching Techniques and Evaluation Methodology in Clerkships

The specific objectives for each rotation are clearly defined in the curriculum sections of the Clerkship Handbook.
1. The student is required to keep an electronic log of all patient care activities.

Preclerkship	PLOs Assessed	Assessment Methods
Preclerkship	Medical Knowledge	Formative: 1, 2 Summative: 3, 4, 5, 6, 7
	Patient Care	Formative: 6 Summative: 5, 6, 7
	Professionalism	Formative: 1, 6 Summative: 1, 5, 6
	Interprofessional Communication	Formative: 6 Summative: 5, 6
	Personal Improvement	Formative: 1, 2, 6 Summative: 6
	System Improvement	Formative: 6 Summative: 6
Clerkship	ALL PLOs	Formative: 4*, 5, 8, 9, 10, 11 Summative: 4, 5, 8, 9, 10, 11
Transition to Independent Practice	ALL PLOs	Formative: 8 Summative: 8

1. Readiness Assurance Tests   2. CBSE   3. In-house MCQ   4. NBME Exams
5. Multistation OSCE   6. Assessment Rubrics   7. OSPE (Lab)
8. EPA-based Preceptor Evaluation (+CLAs)   9. Patient Log / Required Clinical Encounters   10. Patient Notes   11. Alternative Clinical Encounters
12. USMLE Step**
*except Emergency Medicine and Neurology
**Students must pass USMLE Step 1&2 exams to graduate.

	Assessments
Organ system courses	Formative: 1, 2, 6, 7 Summative: 3, 4, 6, 7
Clinical Skills	Formative: 6 Summative: 5
College Colloquium	Formative: 6 Summative: 3, 6
Academic Research Study	Formative: 6 Summative: 6
Core Clerkships	Formative: 4*, 5, 8, 9, 10, 11 Summative: 4, 5, 8, 9, 10, 11
Clinical Electives	Formative: 8 Summative: 8

1. Readiness Assurance Tests   2. CBSE   3. In-house MCQ   4. NBME Exams
5. Multistation OSCE   6. Assessment Rubrics   7. OSPE (Lab)
8. EPA-based Preceptor Evaluation (+CLAs)   9. Patient Log / Required Clinical Encounters   10. Patient Notes   11. Alternative Clinical Encounters
12. USMLE Step**
*except Emergency Medicine and Neurology
**Students must pass USMLE Step 1&2 exams to graduate.
CBSE Comprehensive Basic Science Examinations;   NBME National Board of Medical Examiners;   USMLE United States Medical Licensing Exam;   Assessment Rubrics (Team-work/peer assessment; Professionalism; Clinical Case presentation; College Colloquium; Student Self-assessment form; Academic Research Study); OSPE Objective Structured Practical Exam;   EPA Entrustable Professional Activity; CLA Core Learning Activities

2. The student is assessed by the attending physicians through periodic oral evaluation and by observations of clinical performance.
3. Supervising physicians and members of the healthcare team complete the Student Performance Assessment Form(s) provided for evaluation of students. These are completed at the mid-point and end of the clerkship and reviewed by the clerkship director.
4. The student completes and submits an evaluation form about the preceptor and overall clerkship.
5. Evaluations are performed through the learning management system.

General Philosophy for Evaluations (Clinical Curriculum)

While evaluation is an important part of the clinical education, focus should be maintained on gaining clinical experience, expanding fundamental knowledge, providing high-quality care, and developing professionalism and clinical competence. Students should pay close attention not only to the grade earned, but also specific components of evaluations that are designed to provide feedback and guidance to improve future performance.

Expectations for Clerkships

Expectations from students for each clerkship are described in the clerkship syllabus and explained at student orientation to the clerkship. Maintaining patient logs and completion of required learning experiences and procedures are mandatory.

Formative and Summative Evaluations in Clerkship Rotations

The Clerkship Phase of the MD curriculum is composed of the eight clerkships in addition to the Professional Development Semester. Students rotate twice through six of the eight clerkships (family medicine, internal medicine, obstetrics and gynecology, pediatrics, psychiatry, and surgery). The first participation in each of these clerkships (first segment) allows students to gain basic knowledge, skills, and experience in the discipline and results in formative evaluations. During the second segment of the rotations, students apply their accumulated experiences and undergo summative evaluations. Students rotate once through each of the remaining two clerkships (emergency medicine and neurology), with the end-of-rotation evaluations being summative.

1st Segment	EM*	FM	IM	OB	PED	PSY	SUR	FORMATIVE EVALS
2nd Segment	NEU*	FM	IM	OB	PED	PSY	SUR	SUMMATIVE EVALS

* one rotation only

Clinical Performance Assessment in Clerkships

Following each segment of the clerkships, students meet face-to-face with their clerkship director or designee to discuss their overall performance and the completion of rotation evaluation. The primary intent of CUSM's clinical performance assessment is the evaluation and provision of feedback to students to identify specific strengths and weakness and to offer guidance. Clinical faculty assess students' performance and offer advice for improvement. Students cannot view their final grade until they have completed and submitted the end-of-clerkship survey of the preceptor, site, and clerkship.

Comprehensive Clinical Assessment in Clerkships

Clerkship students are assessed using a comprehensive clinical assessment at the end of formative and summative rotations.

Additional Curricular Requirements (Clinical Curriculum)

Various additional requirements for satisfactory completion of clinical courses may also be applied. These requirements are outlined in syllabi prior to the start of the rotation and may include, but are not limited to:

- Attendance at didactic sessions (e.g., lectures, clinical case conferences)
- Completion of online educational modules
- Demonstration of competence in selected procedures
- Observed performance of clinical skills
- Written assignments (e.g., academic paper, sample History and Physical note)
- Completion of required clinical encounters

5. Feedback

Methods of providing feedback to Students

Mid-course/clerkship Feedback to Students

Student receive feedback at the midpoint of courses and clerkships from faculty or faculty advisors. Feedback including narrative regarding their progress is also provided to students at OSCEs during the clinical skills courses, and at OSCEs and preceptor evaluations during the formative segment of clerkships.

Notifications for scheduling feedback meetings is managed through the learning management system. Faculty and preceptors identify strengths and weaknesses and offer advice for improvement to students.

Rubrics

All rubrics used to evaluate pre-clerkship and clerkship students contain narrative feedback to the student.

Surveys for student feedback to faculty

End-of-course Evaluation Survey

At the end of each course and clerkship, students complete a course evaluation survey that is administered by OAIE. The data from the survey is reviewed by the Assessment and Evaluation Committee which provides reports with recommendations to the course/clerkship director and Associate Dean of Clinical Curriculum. Please see the MD Program Assessment Handbook for details regarding the process for data collection and analysis for end-of-course evaluation surveys.

Preceptor, Site and Clerkship Evaluations

During their core clerkships, students participate in 3- and 4-week rotation segments and are required to complete a rotation evaluation at the end of each segment. In this evaluation, they report on hours spent during the rotation and any duty hour concerns that arose during the rotation. Information collected from the evaluations is provided to the respective clerkship directors and the Associate Dean of Clinical Curriculum, as well as, reported by the clerkship director to the Clerkship Curriculum Subcommittee. Clerkship Directors also meet with students at the end of each rotation segment and specifically address any concerns regarding duty hours. Any concerns identified during these meetings are also reported to the Associate Dean of Clinical Curriculum and the Clerkship Curriculum Subcommittee and subsequently to the Curriculum Committee. Students complete the preceptor evaluation form online, which contains both Likert-scaled and narrative sections. Clinical faculty receive, via electronic mail, a link to the evaluation form for all students whom they have supervised.

6. Grading Policy in the MD Program

- A candidate for the MD degree at CUSM must be certified by the faculty to exhibit the requisite knowledge, skills, and attitudes as well as possess personal qualifications and attributes deemed necessary to complete the prescribed course of study. CUSM has an obligation to its students and society to ensure that its graduates meet the highest

scientific, skilled, and moral standards to perform the duties of the medical profession.

- Student work in required courses/clerkships for the MD degree is reported in terms of the grading system indicated in the Grading System Table.
- Scores and ratings earned and assigned to individual assignments and exams during a course, required clerkship or elective may contribute to the course/clerkship grade.
- The course/clerkship grade is finalized at the end of the academic year (or program phase, whichever comes first).
- All contributing scores to grades in courses, clerkships, and electives must be specified in the corresponding syllabus or clerkship handbook. The weighted breakdown for components for grades in courses, clerkships, and electives are specified in the corresponding syllabus or clerkship handbook. Not all grades have a numerical equivalence.
- Each syllabus and clerkship handbook is required to describe the satisfactory standards of performance in an assessment, course or clerkship that students need to achieve in order to pass. The scores and ratings required to pass a course, required clerkship, or elective and how they are achieved is determined by course faculty and available to students in the syllabus/handbook.
- Students can only earn one final grade following completion of the requirements for that course, required clerkship, or elective. Students cannot be re-assessed, or elect to be re-assessed, following completion of a course, required clerkship, or elective if they achieve a passing final grade in the course, required clerkship, or elective.
- In order to ensure that final grades are available to students within 6 weeks of the end of a course/clerkship, the CUSM grading policy requires that the course/clerkship director must assign the final grade within 28 days of the end of the course/clerkship or the remediation assessment.
- Each syllabus and clerkship handbook should include or refer to the grading and remediation policies for the course.
- When student grades are posted in the learning management system (LMS), the grades become available to the registrar for recording in the student's transcript of academic performance.

Grading System

Students must successfully complete and meet all expectations for all courses and all clerkship components following assessment and evaluations. Students in the clinical curriculum are enrolled in mandatory clinical clerkship rotations that have a specific set of academic and clinical grading components outlined within the clerkship handbook.

Grading System Table

	Performance Rating	Numerical range and threshold
Pre-clerkship courses	Pass	70-100%
	Fail	< 70
Clerkships and Electives	Honors	90-100%
	High Pass	80-<90%
	Pass	70-<80%
	Fail	<70%
Some 4th Year Electives	Pass	—
	Fail	—
All courses, clerkships and electives	I	Incomplete
	IP	In progress (*for delayed return of scores*)
	W	Withdrawn

Passing grade: The minimum passing final grade for all courses, clerkships and electives is specified in the Grading System Table. In order to pass a course, required clerkship or elective, a student must pass all required assessment components, and achieve a minimum passing final grade for the course, clerkship or elective.

Failing grade: Students who do not achieve a minimum passing final grade or fail to satisfy all the requirements for passing a required course, clerkship or elective will be required to remediate the deficiency. A student w ho is unable to successfully or satisfactorily remediate a course, required clerkship or elective will receive a Fail final grade.

Assessment and Progression Chart
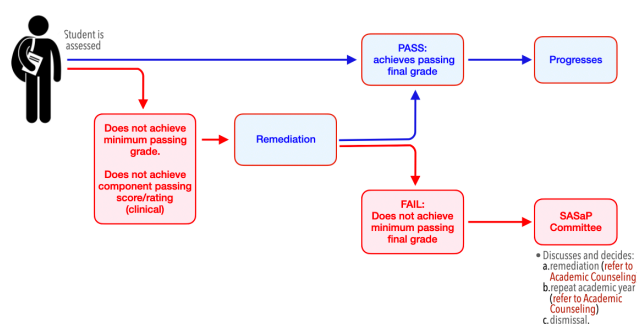
<u>Incomplete</u>: If a student is unable to complete all the requirements for a course or clinical rotation as scheduled, individual arrangements must be made with the course or clerkship director to develop a plan to address the deficit and make up missed time or repeat the course/clerkship. After meeting all components of the plan for completion, the student may be awarded credit and a grade for the course/ clerkship by the course/clerkship director.

Policy on Remediation and Deferred Assessments

The curriculum has been structured in such a way as to give students every possible opportunity to learn and succeed. The midcourse/midclerkship advising and feedback system is designed to help identify students in academic difficulty and provide them with additional support in order to reduce the likelihood of having to remediate. However, due to unforeseen circumstances, the need to remediate may occur. In such instances, the following procedures for remediation will apply to students who do not achieve minimum passing performance in a course, required clerkship, or elective.

- The remediation process is intended to correct an academic deficiency and improve achievement of competency to allow academic progression in a timely manner.
- Remediation is not intended to address grade sanctions that result from academic dishonesty or plagiarism.
- Each syllabus and clerkship handbook should include or refer to the grading and remediation policy for the course.
- Students who need to remediate a pre-clerkship course can sit for the USMLE Step 1 examination only after successful remediation of the course.
- Remediation exams for pre-clerkship courses are scheduled after the end of the semester when the course was taught. Remediation exams for clerkships are scheduled after the end of the semester when the clerkship was completed.
- The deadline for completing all remediation of courses and clerkships is 3 weeks after the end of the semester or posting of course grades, whichever comes later.
- The deadline for remediation does not apply to a student who did not achieve the minimum passing performance in a course or clerkship that is under consideration through the appeals process. The remediation deadline for a student who submits an appeal will be determined by the ACT and the SASaP committee on a case-by-case basis. Please see the MD Student Assessment Handbook section on Grade Notification and Appeals for a description of the appeals process.

<u>Remediation</u>

- A student who does not achieve the passing requirements for a course, clerkship, or required component of a clerkship or elective (see Table below) must remedy the deficiency before a final grade can be assigned for the course, clerkship or elective. The student will be automatically registered to remediate by re-assessment, and the student's faculty advisor will be informed by the Course Director / Associate Dean of Clinical Curriculum.
- If a student achieves either less than a passing score on the NBME clinical subject examination OR less than a passing rating on the multi-station OSCE, the student must retake the NBME examination or OSCE on a timeline determined by ACT.
- The following circumstances will require remediation of clinical education activities as determined by the clerkship director or Associate Dean of Clinical Curriculum:
  a. no passing score in preceptor evaluation
  b. no passing score in more than one required clerkship component
  c. no passing total final grade

<u>Academic Counseling</u>

- Students who need to remediate one course or clerkship must
  a. meet with the course/clerkship director and appropriate Associate Dean of curriculum to discuss reasons for the poor performance,
  b. and subsequently meet with an Academic Counseling Team (ACT) set up by the Office of Student Affairs / PACE to establish a study and preparation plan for remediation. The extent and timing of remediation will be determined by the ACT.
- Students who need to remediate more than one course, or are unsuccessful in remediating a course, clerkship or elective must attend an Interventional Case Conference (ICC) meeting set up by the Office of Student Affairs / PACE with the course/clerkship director, the student's faculty advisor, Associate Dean of Student Affairs, appropriate Associate Dean of curriculum, and a representative of the Assessment and Evaluation Committee. A report from the ICC containing an analysis of the student's difficulties and the resulting advice offered is submitted to the Student Academic Standards and Promotion (SASaP) Committee.

Unsuccessful Remediation
- Referral to the Student Academic Standards and Promotions Committee (SASaP) following unsuccessful remediation is subject to the following outcomes:
  a. failing one course or clerkship carries a recommendation to repeat the course/clerkship
  b. failing two or more courses or clerkships carries a recommendation to either repeat the year or be subject to dismissal from the program
- Failure to achieve a passing final grade following remediation in a course, clerkship or elective will be recorded in the student's transcript as a Fail grade.
- The final grade for a clerkship or elective following successful remediation cannot exceed a High Pass.
- A student cannot carry forward any failed courses or clerkships into the following academic year or phase. See section on Academic Progression.
- A student cannot meet graduation requirements without remediating a failed course or clerkship.

Academic Progression

Students must achieve minimum passing final grades AND satisfy the appropriate requirements (listed below in the table) in order to progress in the MD program.
- Year 1: Complete and satisfy all requirements for Year 1 pre-clerkship courses in order to progress into the next academic year.
- Year 2: Complete and satisfy all requirements for Year 2 pre-clerkship courses in order to progress to the Clerkship Phase of the MD curriculum.
- Year 3: Complete all requirements for core clerkships in order to progress to the Transition to Independent Practice Phase of the MD curriculum.
- Year 4: Complete all requirements for required and clinical electives in order to satisfy part of the requirements for graduation.

- Students must sit and obtain a passing score in the USMLE Step 1 and 2 examinations before graduation from the MD program. Please refer to the Student Handbook / University Catalog for details on progression requirements and USMLE Step exam outcomes.
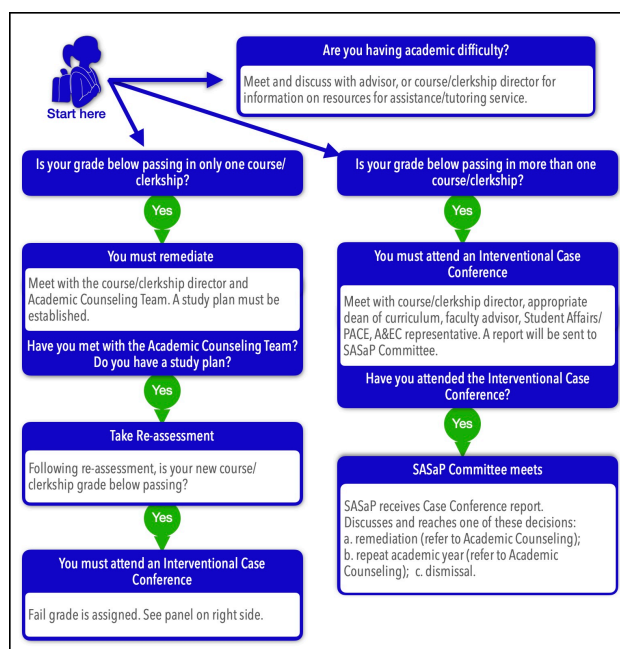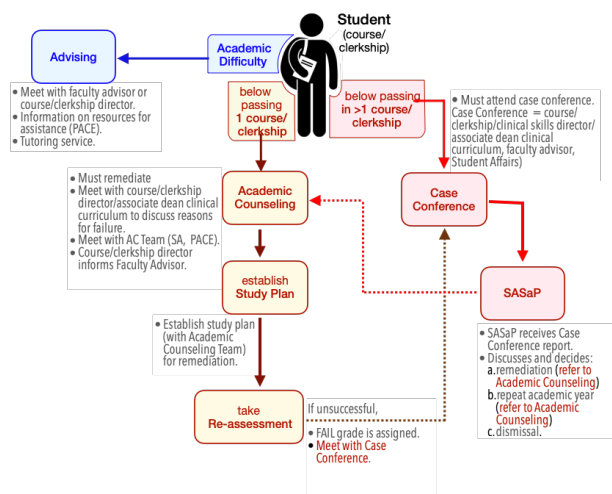
Table – Outcomes and Actions for Performance at Assessments

Assessment	Remediation	Action	Academic Counseling Team	Interventional Case Conference	SASaP referral
One course or clerkship or elective	Yes	For clerkships, remediate clinical education activities	Yes; requires approved study plan	When remediation is unsuccessful	When remediation is unsuccessful
More than one course or clerkship or elective	Yes			Yes	Yes
NBME clinical subject	Yes	Retake exam, timeline determined by ACT	Yes		When remediation is unsuccessful
Multistation OSCE	Yes	Retake exam, timeline determined by ACT	Yes		When remediation is unsuccessful
Patient log (RCE)	Must complete	Must complete	Yes		
Patient Note	Must complete	Must complete	Yes		
Preceptor Evaluation	Yes	Remediate clinical education activities	Yes		When remediation is unsuccessful
More than one component within a single core clerkship	Yes	Remediate clinical education activities		Yes, see Academic Progression policy	Yes
Final	Yes	Remediate clinical education activities		Yes	Yes