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## Checklist of Requirements

## for Completing the Independent Student Analysis (ISA) for Provisional Accreditation Surveys

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| Please note that the LCME considers the Independent Student Analysis critical, but it can only use the analysis if it is completed using the required survey items with the data presented in the required format. * Include all the [survey items listed in the Required Student Opinion Survey Items section below](#_Required_Student_Opinion_1) exactly as written (these same items are listed in Appendix C of the *Role of Students* document).
* Add survey items not included in the required list as needed to reflect the distinctive characteristics of your medical school or to address other issues of particular importance to your medical school’s students.
* Use the [required response scale in the Reporting of Results - Tables in the Independent Student Analysis section below](#_Appendix_D:_Reporting) for all survey items, including those for the added survey items.
* Encourage participation in the survey; aim for at least a 70-80% response rate for each class year to which the survey is sent.
* Title the ISA narrative report sections “Methods”, “Narrative Description of Results”, “Summary and Conclusions”, and “Numerical Tables”. See the [ISA Report Development section below](#_ISA_Report_Development).
* Use the [table in the Reporting of Results - Tables in the Independent Student Analysis section below](#_Appendix_D:_Reporting) to report responses to each survey item in the “Numerical Tables” section.
* Note that the Faculty Accreditation Lead may ask for the survey and the Independent Student Analysis to be redone if they do not contain the required items or are not reported in the required format.

**IMPORTANT NOTE: Be certain to provide the ISA, including the data tables, in a Microsoft Word document so that survey team members can easily copy its tables into the team report.**For more detailed background information, see *The Role of Students in the Accreditation of U.S. Medical Education Programs for Provisional Accreditation* (March 2024) on the LCME website (lcme.org/publications). |

# ISA Report Development

The ISA report includes a narrative and the data tables for each item in the survey. The following are guidelines for writing the required ISA Report sections:

* “Methods”. Begin with a description of the method(s) used to gather student opinion data, including the survey of students. Include the start and end dates when the survey was administered and a response rate table that displays the number and percent of students in the first entering class responding to the survey; If the survey was administered to the second entering class, provide that information for that class and the overall response rate. If applicable, also include the number of students participating in other methods used by students to collect opinions from their classmates, such as class meetings or focus groups.
* “Narrative Description of Results”. Use the narrative to concisely summarize the results of the student opinion survey, organizing the findings by topic areas (e.g., curriculum, student services). Note the areas in which the medical school is doing well and areas in which it needs improvement, documenting conclusions using data from the survey. DO NOT INCLUDE individual student data or individual student comments. However, you may include as illustrations in the “Narrative Description of Results” section comments that are representative of a large number of student responses and/or include a synthesis of similar comments from a number of students.
* “Summary and Conclusions”. This is at the end of the narrative and offers an overall summary and conclusions regarding the various topic areas. Use this section to highlight major findings and organize it by accreditation elements or by some other framework (e.g., curriculum, student services).
* “Numerical Tables”. This follows the “Summary and Conclusions” section. Include a table for each item on the survey. For each item, the LCME requires providing the number and percent of students who selected “N/A”, “Disagree”, and “Agree”. These must be presented in total and by class year ([see the Reporting of Results - Tables in the Independent Student Analysis section below](#_Appendix_D:_Reporting)).

# Required Student Opinion Survey Items

**The LCME requires that the student opinion survey include, at a minimum, the following items and that you use the scale below.**

**This is so that the response data include topics that relate to LCME accreditation requirements and that are required for your medical school’s Data Collection Instrument.**

**You may add survey items as needed to reflect the distinctive characteristics of your medical school or to address other issues of particular importance to your medical school’s students.**

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***Please indicate your level of agreement, using the following scale:***

a = Agree

b = Disagree

N/A = No opportunity to assess/Have not experienced this

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**STUDENT-FACULTY-ADMINISTRATION RELATIONSHIPS**

**Office of the Associate Dean of Students/Student Affairs (OSA)**

1. The members of the OSA are accessible.

2. The OSA leadership and staff are aware of student concerns.

3. The OSA leadership and staff respond to student problems.

**Office of the Associate Dean for Educational Programs/Medical Education (OME)**

4. The members of the OME are accessible.

5. The OME leadership and staff are aware of student concerns.

6. The OME leadership and staff respond to student problems.

**LEARNING ENVIRONMENT AND FACILITIES**

7. I have been introduced to and know how to find the medical school’s student mistreatment policy.

8. The medical school’s student mistreatment policy is clear.

9. I know the procedures for reporting student mistreatment or know where to find it.

10. The procedures to report student mistreatment are clear.

11. I am aware of the medical school’s activities to prevent student mistreatment.

12. I am aware that the medical school investigates/acts on reports of student mistreatment.

13. I feel safe and secure on the medical school campus.

14. The medical school’s pre-clerkship lecture halls and large group classroom facilities are suitable for the educational sessions that are held in them.

15. The medical school’s pre-clerkship small group teaching spaces are suitable for the educational sessions that are held in them.

16. I have access to relaxation space for pre-clerkship students on the medical school campus.

17. I have access to study space for pre-clerkship students on the medical school campus.

18. I have access to secure storage space for my personal belongings on the medical school campus.

19. I have access to research opportunities.

20. The medical school supports student participation in research.

21. I have access to service-learning/community service opportunities.

22. I am able to access personal counseling/mental health services during the first year of the medical education program.

23. Mental health services available through the medical school are confidential.

24. Student well-being programs are available in the first year of the medical education program.

25. I am able to access personal health care services during the first year of the medical education program.

26. The medical school’s career advising system includes access to knowledgeable advisors.

27. I have access to knowledgeable and helpful financial aid services personnel.

28. Financial aid services at my medical school include debt management counseling by knowledgeable and accessible personnel.

29. Academic advising is available to me during all years of the medical education program.

30. If I am experiencing academic difficulty, academic counseling is available to me.

31. Tutorial help is available to me during all years of the medical education program.

32. I am taught how to prevent exposure to infectious and environmental hazards before I begin seeing patients.

33. I am aware of or have ready access to the procedures to follow after potential exposure to an infectious or environmental hazard.

**MEDICAL EDUCATION PROGRAM**

34. I am aware of the school’s medical education program objectives.

35. I receive adequate clinical skills instruction in the first year of the medical education program.

36. The amount of formative feedback in the first year is sufficient to allow me to self-assess how I am progressing in the courses of this phase of the medical education program.

37. The quality of formative feedback in the first year allows me to identify areas in which I need to improve as I progress through this phase of the curriculum.

38. The curriculum provides sufficient practice in the skills of self-directed learning as defined by the LCME. §

39. There is adequate available time in the first year for self-directed learning and other types of preparatory assignments. §

40. Student workload in the first year is manageable.

41. Curriculum content in the first year is coordinated/integrated within and across courses.

42. The medical school responds to student feedback on courses.

§ Self-directed learning (Element 6.3, Element 8.8) includes self-assessment of learning needs, identification of information to meet those needs from credible sources, and feedback on this skill.

# Reporting of Results – Required Tables in the Independent Student Analysis

**Develop a separate table for each survey item. If the survey is administered to more than one class, include a row in the table for each class.** The required template for the table is shown below. The column titled “Number of Total Responses/Response Rate to this Item” shows the total number of students responding to the item (N) divided by the total number of students in the class (%). For the other columns, please use N/A, disagree, and agree response options as shown in the table below. Calculate all response data percentages using the total number of responses **which includes N/A responses** as the denominator, and the type of response (e.g., agree) as the numerator.

Response data percentages calculated any other way will need to be redone, which may cause delays for your medical school.

If more than one class is responding to a question (i.e., students in the M1 and M2 years), include a row titled “Total,” which includes the total number of responses and percent of responses for each category.

**If only one class of students (the charter class) is responding, then delete the “M2” and “Total” rows.**

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| **Table Title\*** |
| Medical School Class | Number of Total Responses/Response Rate to this Item | Number and % ofN/AResponses | Number and % of Disagree Responses | Number and % ofAgree Responses |
| N | % | N | % | N | % | N | % |
| M1 |  |  |  |  |  |  |  |  |
| M2 |  |  |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |  |  |

\* The table title should match the required survey items listed above. For example, the table title for #1 in the Required Student Opinion Survey Items would be “The members of the OSA are accessible.”