



# *Connecting with the Secretariat Webinar*

**March 8, 2018**

**1:30 pm – 3:00 pm ET**

**Welcome!**

**Please remember to connect to audio.**

- You will not hear audio until the webinar begins at 1:30.
- An audio connection pop-up box should appear on your screen (if you closed it, click on the “Communicate” tab in the upper left of WebEx then click “Audio Connection”). Then select an option: “I Will Call In,” “Call Using Computer,” or “Call Me.”
- If you select “Call Using Computer,” you will have the option to test your microphone and speakers first. If they are disabled, please call in instead.
- If you call in, be sure to dial the access code and “Attendee ID” so your name will be linked to your phone and we can unmute you if you have a question.



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**BEGIN ISA RECORDING**



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## Guest Speakers

Students from Frank H. Netter MD School of Medicine  
at Quinnipiac University:

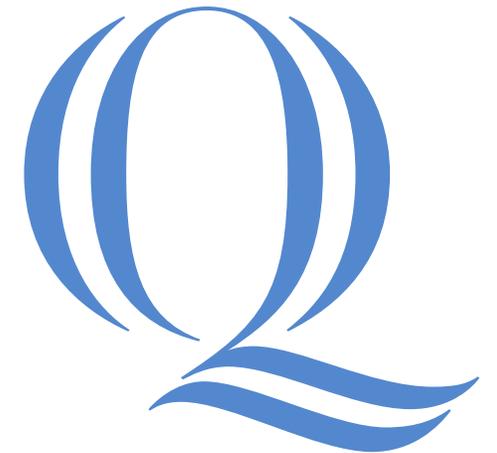
Douglas Campbell (Class of 2019)

Miriam Nathan (Class of 2019)

Jeffrey Anderson (Class of 2018)

# Independent Student Analysis

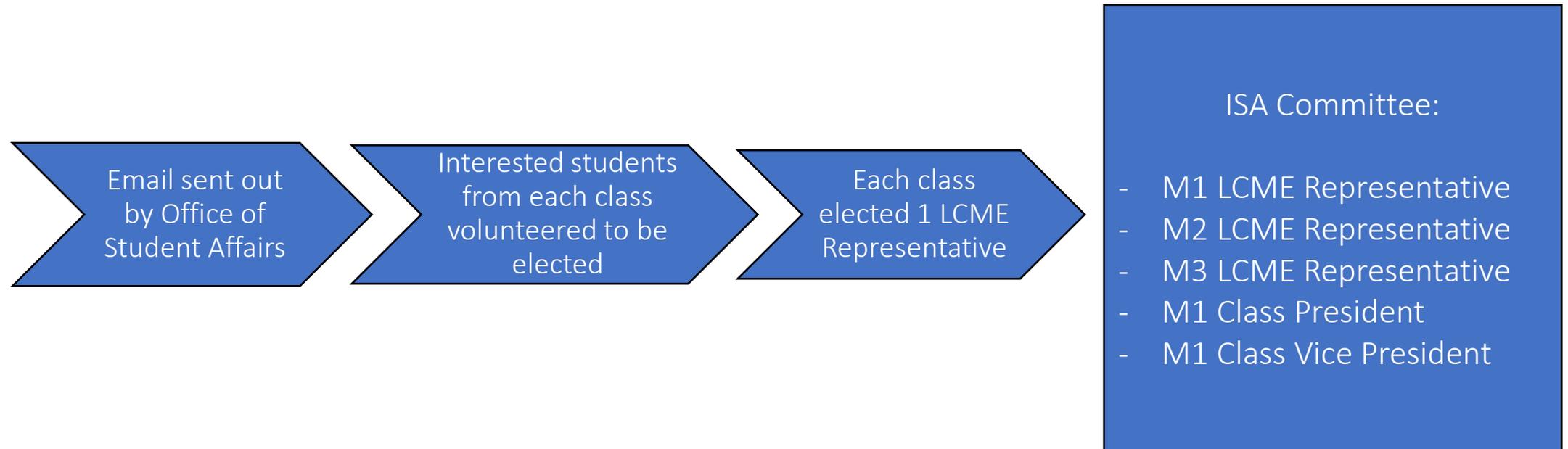
Perspectives from Frank H. Netter MD  
School of Medicine at Quinnipiac University  
Medical Students



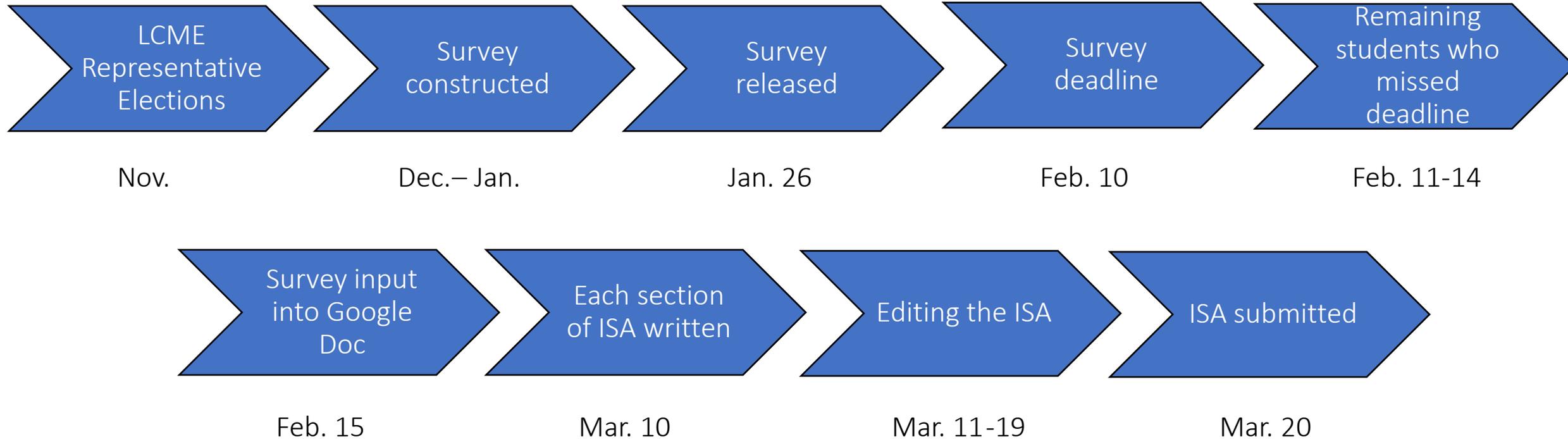
# Outline

- ISA committee organization
- Timeline
- Survey design and launch
- Getting 100% participation
- Data analysis
- Creating the final report
- Lessons learned

# ISA Committee Organization



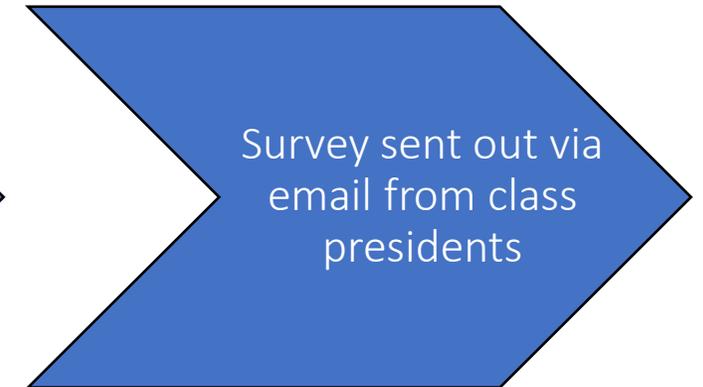
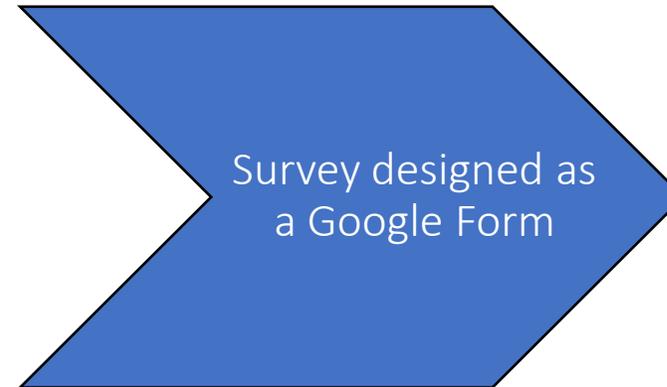
# Timeline



# Survey Design and Launch

## Survey:

- Student Opinion Survey for the ISA (Appendix D) in *The Role of Students in the Accreditation of Medical Education Programs in the U.S. for Survey Visits in the 2016-2017 Year*
- Graded on a 4-point Likert scale:
  - 4-very satisfied
  - 3-somewhat satisfied
  - 2-somewhat dissatisfied
  - 1-very dissatisfied
  - N/A = No opportunity to assess/No opinion/Have not experienced this yet
- Free response at end of each section



# Getting 100% Participation

- New medical school—only three classes:
  - 91 M1s
  - 87 M2s
  - 59 M3s
- Email sent out to all students: “The LCME ISA is a survey conducted by students independent of faculty input. The LCME takes this survey into consideration when they determine if we receive full accreditation, and while the survey contributes to the LCME decision it is important to be honest. This is an opportunity for our school to identify particular strengths and potential areas for improvement. Please complete the survey by February 10th, it should only take approximately 15 minutes and we need 100% student participation.”
- Students who had not taken the survey by the deadline were notified via email and in person to achieve a 100% response rate.
- Response rate: 100% across all three classes

# Data Analysis

- Compiled all of the M1, M2, M3 data into one Google Doc to get all of the data in one place.
- We established a standard for reporting in our write ups (number of students vs. percentage of students). Answers were reported as a percentage as it was required to standardize for the variation in class size.

# Delegation of Responsibilities

- Each LCME Representative input the information from the survey into the Google Doc
- Work divided by using section breakdown
- Each wrote 2-3 sections and contributed to proofreading
- Each signed up for the sections we wanted to write
- Wrote our sections together in a Google Doc

# Creating the Final Report

## Example Section: Office of the Associate Dean for Medical Education

1. Common themes across all classes
  - Highlight individual questions that were graded higher and lower than others
  - Highlight common themes from free response
2. Individual areas where there are discrepancies between classes
  - Highlight areas that show improvement or regression across classes
3. Summarize with general strengths and indicate areas for improvement

### Sections:

1. Introduction
2. Office of the Associate Dean of Students
3. Office of the Associate Dean for Medical Education
4. Learning Environment and Facilities
5. Library and Information Resources
6. Student Services
7. Medical Education Program
8. Conclusion

# Lessons Learned

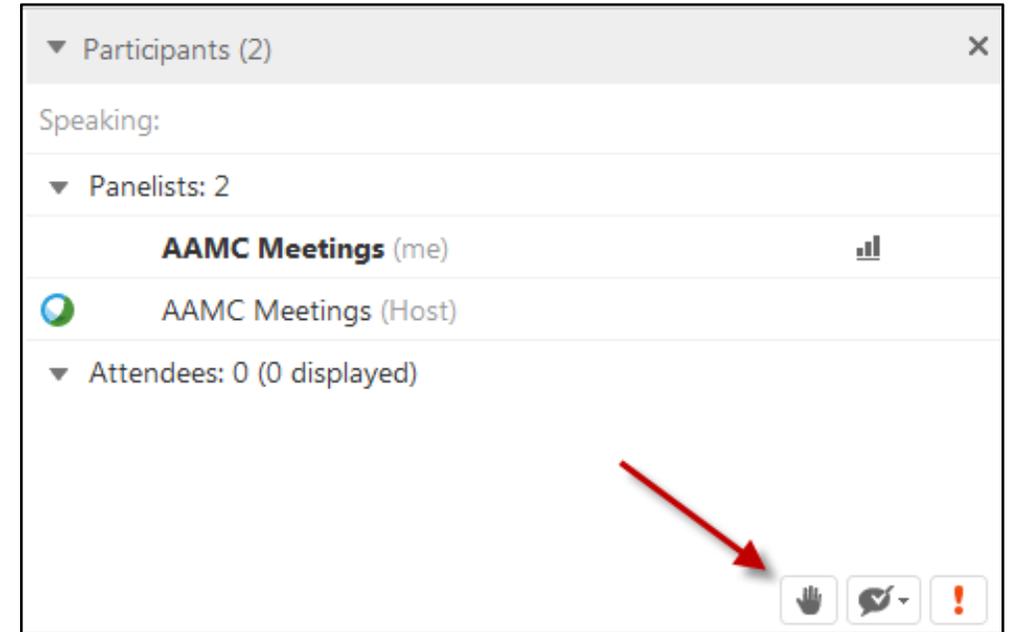
- May be helpful to identify faculty for each section as not all students will be familiar with each office
  - i.e. Office of the Associate Dean for Medical Education (referring to Ms. Smith and staff)
- Have separate survey for each class, so when results come in they can be organized

Questions?

# 2 Ways to Ask Questions

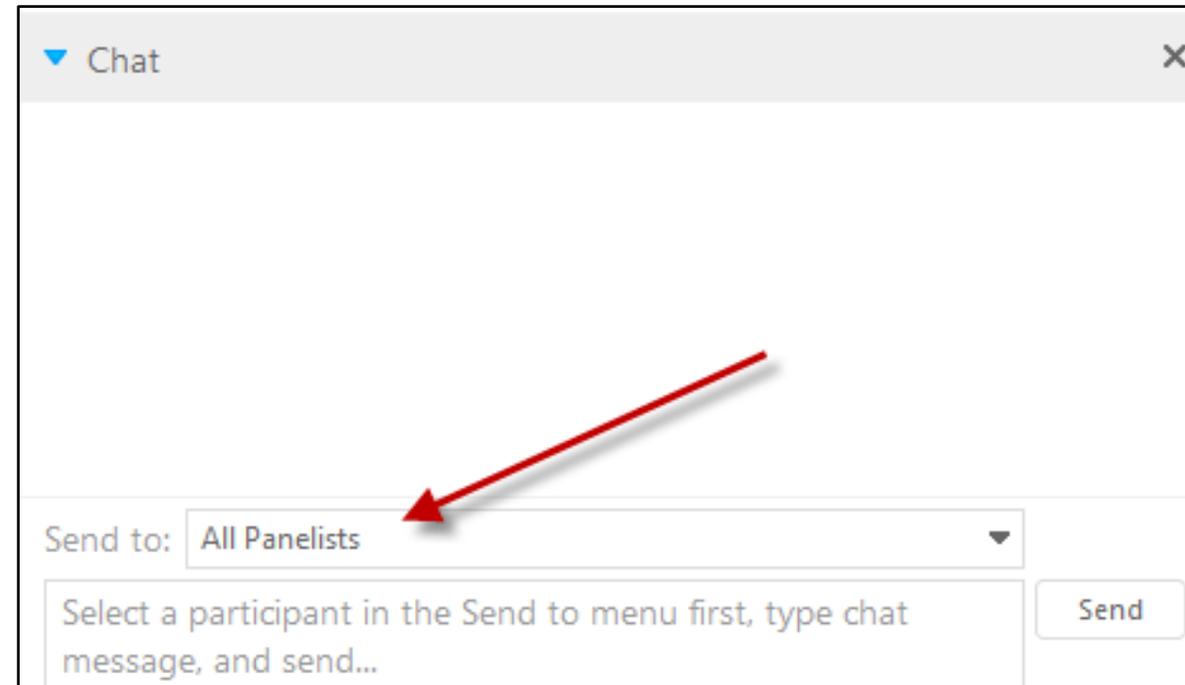
## Verbal

Click the “Raise Hand” icon (  ) to ask a question over the teleconference line. Your name will be called and your phone line will be unmuted. Then click the  again so we know you are finished.



## Written

Submit typed questions through the Chat panel. Send to All Panelists.





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# END OF ISA RECORDING

*Schools, please stay on for  
announcements and additional Q&A*



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# Questions for the Secretariat on the ISA

## Question for the Secretariat

How do you balance the requirement of the students' autonomy in conducting the ISA, while at the same time ensuring they present a synthesized version of the survey results as summary?



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## Question for the Secretariat

My question relates to the presentation of ISA data in the DCI.

The LCME instructs students to use a 4-point Likert scale and a NA option for no opinion/not experienced yet. Students are instructed to provide the number and percentage of respondents choosing *each option* for each question. That data is provided in tables in the ISA appendix, but the DCI typically asks for % satisfied/very satisfied.

How do you recommend presenting results in which the %NA seriously affects the percentage of satisfied students? For example:

75% NA, 5% dissatisfied, **20% satisfied**

-VS-

20% NA, 5% dissatisfied, **75% satisfied**

## Appendix E: Sample Reporting of Results – Tables in the Independent Student Analysis (ISA), 2019-20 *The Role of Students in the Accreditation of Medical Programs in the U.S.*

1 = Very dissatisfied

2 = Dissatisfied

3 = Satisfied

4 = Very satisfied

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

In creating the table, please add dissatisfied/very dissatisfied (1 and 2) and satisfied/very satisfied (3 and 4)

Medical School Class	Number of Total Responses to this item	Number and % of N/A Responses		Number and % of Very Dissatisfied (1)/ Dissatisfied (2)		Number and % of Satisfied (3)/ Very Satisfied (4)	
		N	%	N	%	N	%
M1							
M2							
M3							
M4							
Total							



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# General Submitted Question for the Secretariat



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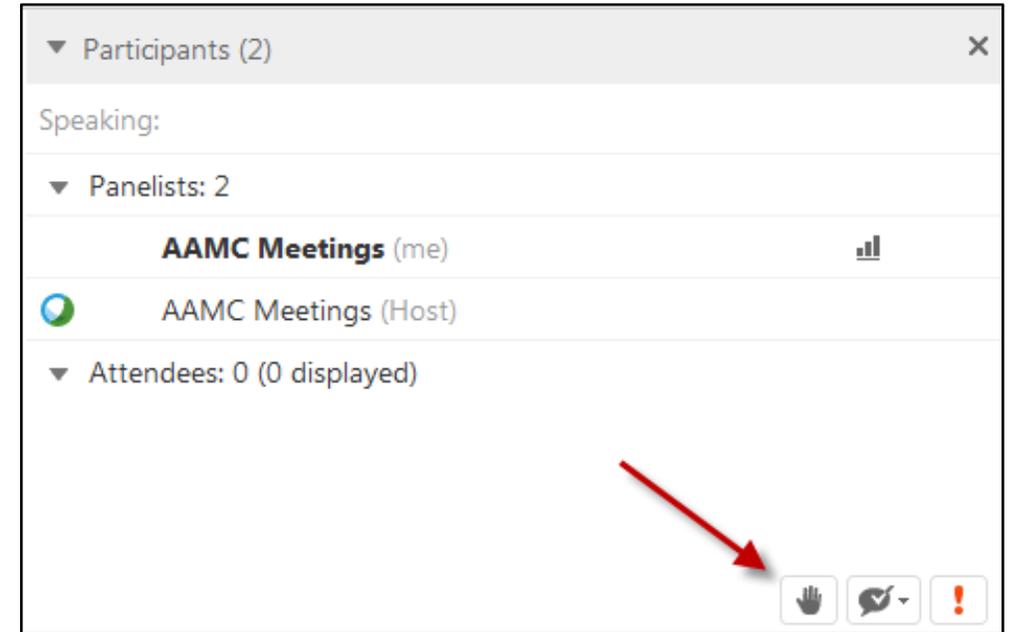
## Question for the Secretariat

Does the LCME categorize Physician Assistant as interprofessional? Since PAs are often called “physician extenders” and their training, goals, roles, etc. are the same as MDs but on a shorter timeline, is this a significantly different health profession in terms of the learning objectives for medical students? If you have a PA student and an MD student on the same clerkship, does this address, in part, Element 6.7? Does a PA member of a health care Team address, in part, Element 7.9?

# 2 Ways to Ask Questions

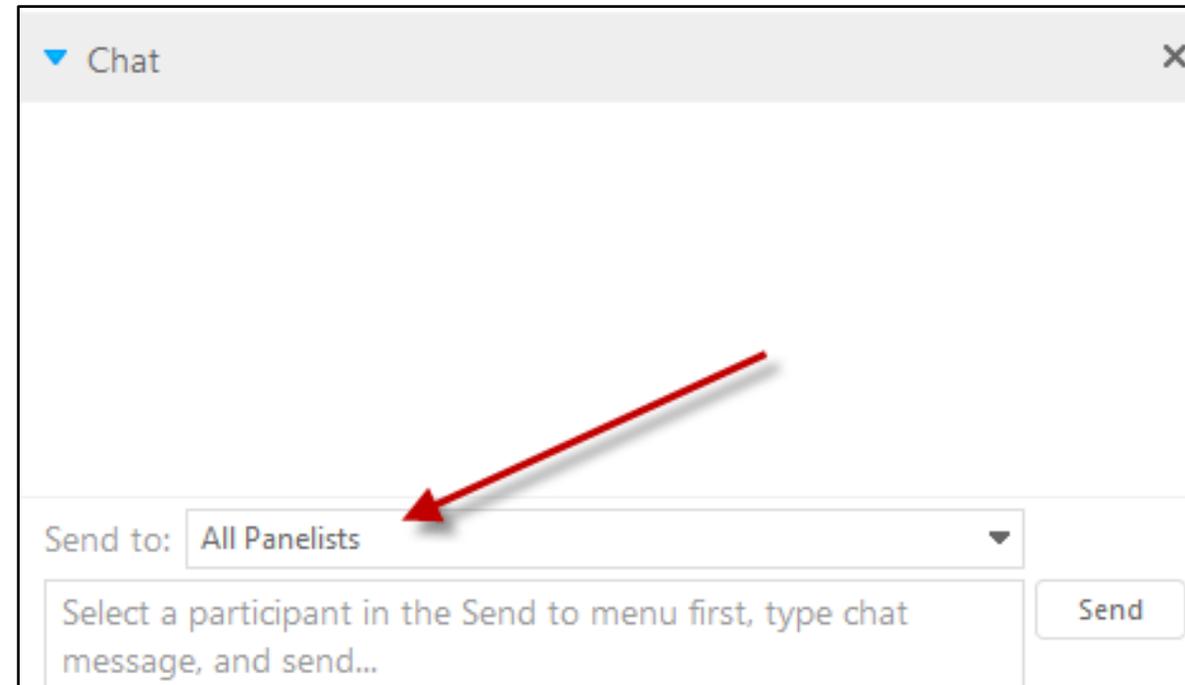
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## Announcements: 2019-20 *Functions and Structure*

The **2019-20 *Functions and Structure of a Medical School*** is now available on the LCME website: [lcme.org/publications](https://www.lcme.org/publications)

*Changes to Element language effective for the 2019-20 academic year:*

### **7.3 Scientific Method/Clinical/Translational Research**

The faculty of a medical school ensure that the medical curriculum includes instruction in the scientific method and in the basic scientific and ethical principles of clinical and translational research, including the ways in which such research is conducted, evaluated, explained to patients, and applied to patient care.

### **9.9 Student Advancement and Appeal Process**

A medical school ensures that the medical education program has a single set of core standards for the advancement and graduation of all medical students across all locations. A subset of medical students may have academic requirements in addition to the core standards if they are enrolled in a parallel curriculum. A medical school ensures that there is a fair and formal process for taking any action that may affect the status of a medical student, including timely notice of the impending action, disclosure of the evidence on which the action would be based, an opportunity for the medical student to respond, and an opportunity to appeal any adverse decision related to advancement, graduation, or dismissal.



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# Next Webinar: Thursday, May 10, 2018

## Element of the Month:

1.1 (strategic planning and continuous quality improvement)

## Guest Speaker:

Sandy Allen, Director of Accreditation and Quality  
Florida International University  
Herbert Wertheim College of Medicine

Email your questions and element suggestions to [lcme@aamc.org](mailto:lcme@aamc.org)

**There will be no April 2018 webinar.**