



# *Connecting with the Secretariat Webinar*

**July 18, 2019**

**1:30 pm – 3:00 pm ET**

**Participants should hear music until the start time.**

If you don't hear anything, call CommPartners at 800-274-9390 or email [aamc@commpartners.com](mailto:aamc@commpartners.com).

## 1.1 Strategic Planning and Continuous Quality Improvement

A medical school engages in **ongoing strategic planning** and **continuous quality improvement** processes that establish its **short and long-term programmatic goals**, result in the achievement of **measurable outcomes** that are used to improve educational program quality, and ensure **effective monitoring of the medical education program's compliance with accreditation standards**.

### Why Does the LCME Care?

1. Alignment of institutional strategic direction/resource deployment with medical education program initiatives
2. Conversion of the “eight-year high hurdle” to a steady jog consistent with “continuous accreditation readiness”

## 1.1 Strategic Planning and Continuous Quality Improvement

### Deconstruction:

- Be familiar with the white paper on the LCME Website: *Implementing a System for Monitoring Performance in LCME Accreditation Standards* (October 2016)
- Strategic planning and continuous quality improvement (CQI) may complement each other, but are **NOT** the same - institutional direction/goals vs specific accreditation expectations

## 1.1 Strategic Planning and Continuous Quality Improvement

### Deconstruction con't:

- Strategic planning
  - Policy, process, personnel, resources
  - **Short- and long-term (i.e., timelines) programmatic goals**
  - Measurable outcomes
  - Periodic data collection and review
- Continuous quality improvement
  - Policy, process, personnel, resources
  - **Element selection (the “generics” and the “specifics”)**
  - Measurable outcomes
  - Periodic data collection and review



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# What to Monitor: Overview

## Overview:

- The LCME does not require all elements to be monitored
- Schools should be able to describe how and by whom the chosen elements were selected, the timing of monitoring for each element, and how/by whom the results of monitoring will be addressed

Elements that are Monitored	Timing of Monitoring of the Element	Data source(s) used to Monitor the Element	Individuals/Groups Receiving the Results	Individual/Group Responsible for Taking Action



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## Possible Categories of Elements to Monitor

### ***Note That There Is Overlap Among The Categories And Some Elements Within Categories Could Be Commonly-Cited***

- Elements where the language states that monitoring is required
- Elements that involve a regularly-occurring process that could be “prone to slippage”
- New elements or those that have recent changes/have new expectations
- Elements that directly or indirectly affect core operations
- Elements where policies must be congruent with current operations
- Elements cited in the school’s previous full survey



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## Common Sources of Citations for 1.1

### **Satisfactory with a Need for Monitoring**

- The school's CQI process identifies specific elements that are monitored, which data are collected and by whom, how often this occurs, and which individuals/groups receive and review the results. Resources are available within the dean's office dedicated to this purpose. This structure was very recently put into place, and therefore the school has yet to demonstrate that the identified resources are functioning together as an effective system for CQI.



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## Common Sources of Citations for 1.1

### Unsatisfactory

- There is no systematic process to ensure effective monitoring of the medical education program's compliance with accreditation elements
- Clarity is lacking as to the responsibility for corrective action when performance in elements is not satisfactory
- The school has not implemented a process for systematic review of elements
- The school has not begun the process of identifying its CQI system, including the elements to be monitored, how/by whom/how frequently data will be collected, analyzed, and reported, and the measurable outcomes that will be used to improve the medical education program's quality and to ensure effective monitoring of the program's compliance with accreditation standards





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# Submitted Questions for Element 1.1



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## Submitted Question 1

Please describe the differences (and/or the similarities) between **Element 8.4 Program Evaluation** and **Element 1.1 Strategic Planning and CQI**, and the LCME white paper “**Implementing a System for Monitoring Performance in LCME Accreditation Standards**”.



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## Submitted Question 2

The LCME's White Paper on a **System for Monitoring Performance in LCME Accreditation Standards** recommends "a formal (i.e., approved) policy or guideline" confirming that monitoring will occur and describing the monitoring process and responsibilities.

**Could you address the expectations about formalizing (i.e., approving) such a policy?** For example, what roles/groups or committee(s) would be involved? My informal survey of colleagues suggests that there is variation in whether their school's policy/guideline is formalized through official governance channels (curriculum committee, faculty senate, etc.) or simply having the education dean and dean/dean's cabinet "approve" it.



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## Submitted Question 3 and 4

In operationalizing (through a formal policy) the Continuous Quality Improvement standing committee, chaired/directed by an individual with LCME accreditation knowledge/experience, do you have a “best practice” for committee composition? Specifically an optimal ratio of elected vs. appointed faculty members?

Is there a “best practice” envisioned by LCME for other essential standing (i.e. determined by policy and/or bylaws) in terms of elected vs. appointed faculty representation - or is this left to the institution?



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# Questions from webinar chat



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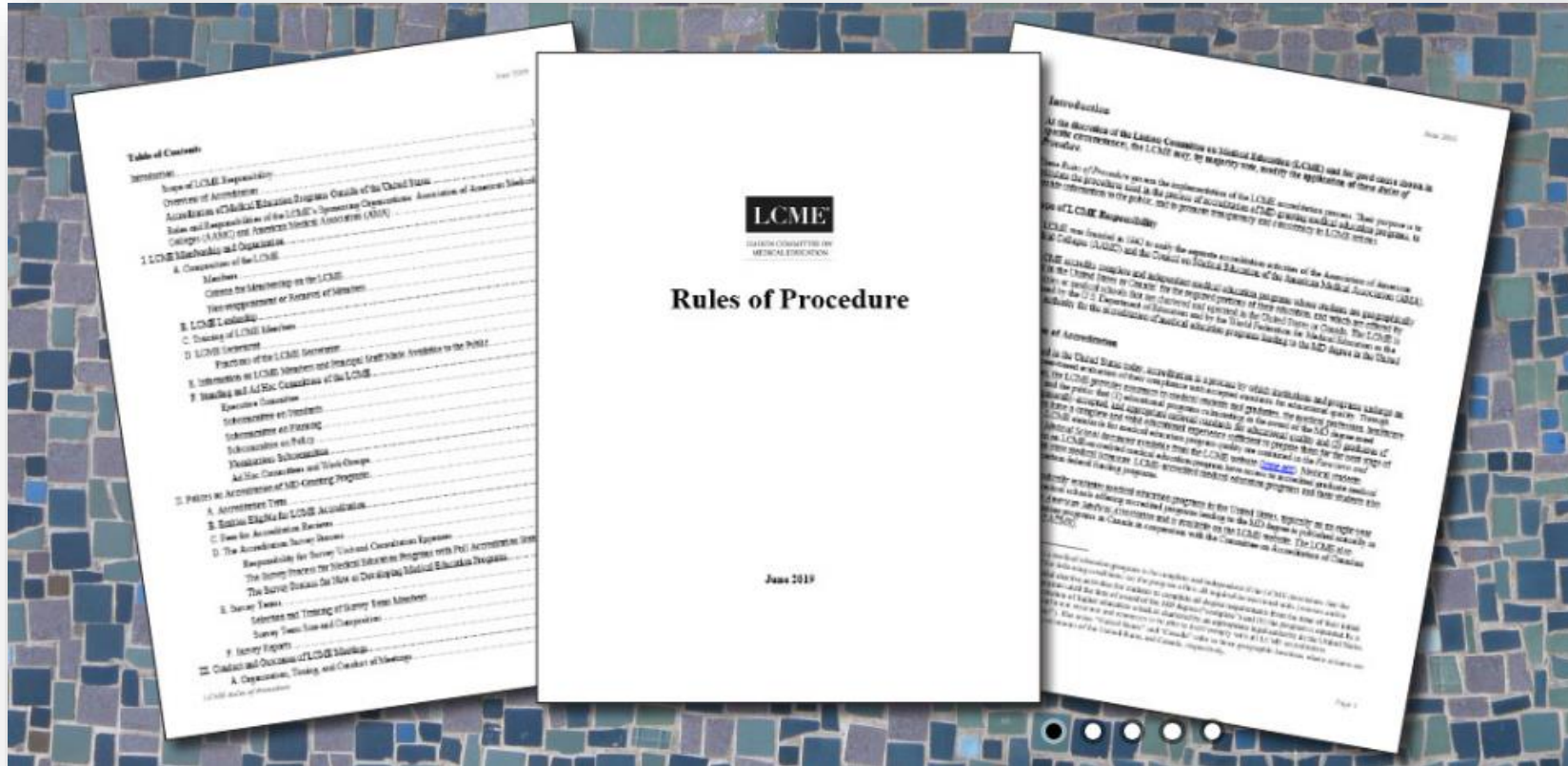
# Announcements



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# 2019 LCME Rules of Procedure

[lcme.org/publications](http://lcme.org/publications)



## The LCME Updates *Rules of Procedure* Publication

At the June 18-20, 2019 LCME meeting, members approved updates to the publication, *Rules of Procedure*.

[View Updated Publication](#)



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## Updated Publications

[lcme.org/publications](https://www.lcme.org/publications)

### **2020-21 School Publications**

- *The Role of Students in the Accreditation of U.S. Medical Education Programs for Full Accreditation*
- *The Role of Students in the Accreditation of U.S. Medical Education Programs for Provisional Accreditation*
- *Data Collection Instrument (DCI) for Provisional Accreditation Surveys*

### **2019-20 Survey Team Publication**

- *Survey Report and Team Findings Guide for Full Accreditation Surveys*





## Completing and Submitting the Survey Package for 2019-20 visits

Dean and FAL will receive an email approximately **4 weeks** before the survey package/briefing book due date with a username, password, and instructions on how to submit materials to the LCME Secretariat via Secure Electronic File Transfer (SEFT).

Type of Survey Visit	Submission Due Date
Full, Provisional, and Preliminary Survey	12 weeks before first day of survey visit
Limited Survey	6 weeks before first day of survey visit

If you have specific questions about the submission process, please email [lcmesubmissions@aamc.org](mailto:lcmesubmissions@aamc.org).

# LCME at Learn, Serve, Lead 2019: The AAMC Annual Meeting (November 8-12, 2019)

[lcme.org/event/2019-learn-serve-lead](https://lcme.org/event/2019-learn-serve-lead)



LCME Events at Learn  
Serve Lead 2019: The  
AAMC Annual Meeting

The LCME Secretariat will host events at the Learn Serve Lead 2019: The AAMC Annual Meeting in Phoenix, AZ November 8-12, 2019.

[View All LCME Events](#)



# LCME Private Consultations at LSL 2019: The AAMC Annual Meeting

[lcme.org/event/2019-learn-serve-lead](https://lcme.org/event/2019-learn-serve-lead)

## LCME Private Consultations

The Liaison Committee on Medical Education (LCME) Secretariat staff is available by appointment to meet with representatives from schools who seek guidance on issues unique to their school. These in person meetings could range from 30 to 60 minutes depending on the complexity of the discussion.

LCME Private Consultations are available November 8-11, 2019 by appointment. Please complete and submit the [online consultation request form](#) to request a private consultation during the AAMC Annual Meeting.

**To request a private LCME consultation at Learn Serve Lead 2019, complete and submit the online form:**

**[form.jotform.com/lcme/lcme-consultation-request](https://form.jotform.com/lcme/lcme-consultation-request)**

**Consultation scheduling is on a first come, first serve basis.**



**Next Webinar: Thursday, August 15, 2019**

**Topic of the Month:**

**Tapas: Navigating the “Systems” of LCME Accreditation**

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