

LIAISON COMMITTEE ON MEDICAL EDUCATION

# **Connecting with the Secretariat Webinar**

### January 9, 2025 1:30 pm - 3:00 pm ET

### Welcome!

Thank you for joining us for today's webinar. The program will begin shortly. You will not hear audio until we begin.

If you have technical questions, please email <u>aamc@commpartners.com</u>.



### **Guest Speakers**

LIAISON COMMITTEE ON MEDICAL EDUCATION

### **Planning and Conducting Your Accreditation Survey Visit**



### Steven Herrine, MD

Vice Dean for Academic Affairs/UME Chair, Department of Medical Education Professor of Internal Medicine Sidney Kimmel Medical College at Thomas Jefferson University



### Yana Panich

Executive Assistant, Academic Affairs/UME Sidney Kimmel Medical College at Thomas Jefferson University

# Planning and Conducting Your Accreditation Survey Visit

Steven Herrine, MD Vice Dean for AA/UME Faculty Accreditation Lead Yana Panich Executive Assistant, AA/UME Survey Visit Coordinator

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### What is the



LIAISON COMMITTEE ON MEDICAL EDUCATION

### And why are they doing this to me?



## Outline

- About SKMC
- Institutional Readiness
- DCI Preparation
- Institutional Self-study preparation
- The ISA
- The site visit
- Incentives and recognitions
- Lessons learned

Jefferson University Hospital

Founded in 1824, Sidney Kimmel Medical College has awarded > 31,000 medical degrees and has more living graduates than any other private medical school in the US

states

67%

3.83 AVERAGE TOTAL GPA

AVERAGE SCIENCE GPA 3.78

12%

27-37

513 AVERAGE MCAT

30%

24-26

4%

MOST COMMON ARE: PENNSYLVANIA, NEW JERSEY, DELAWARE, NEW YORK, MASSACHUSETTS & CALIFORNIA

112

GRADUATE ANI

UNDERGRADUATE SCHOOLS REPRESENTED

SCAN TO

10,377 AMCAS APPLICANTS

5%

OF APPLICANTS

STUDENTS ACCEPTED

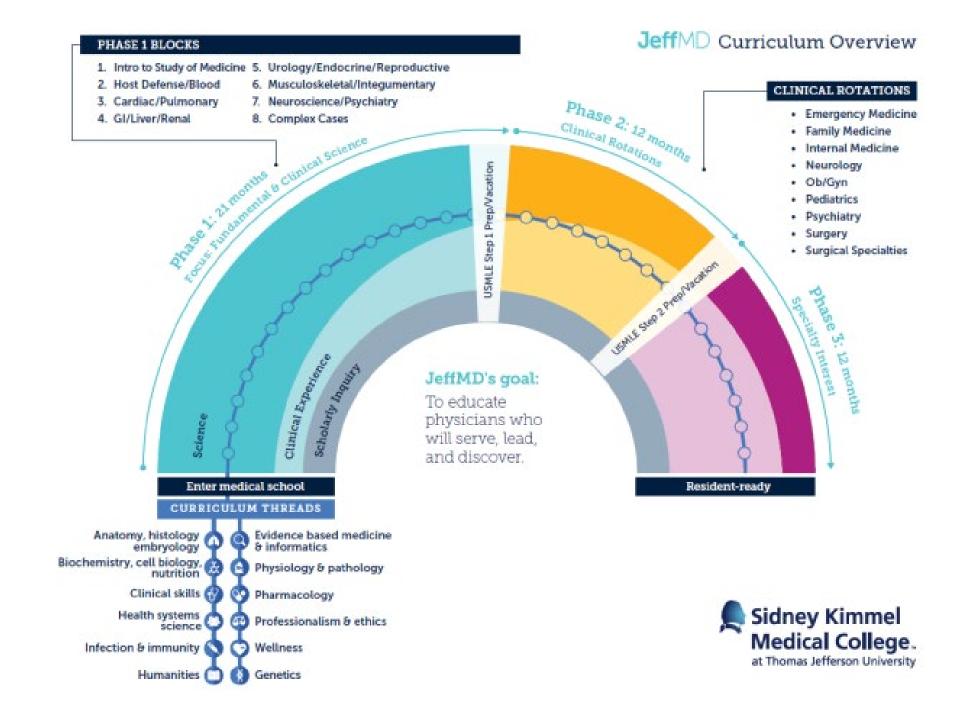
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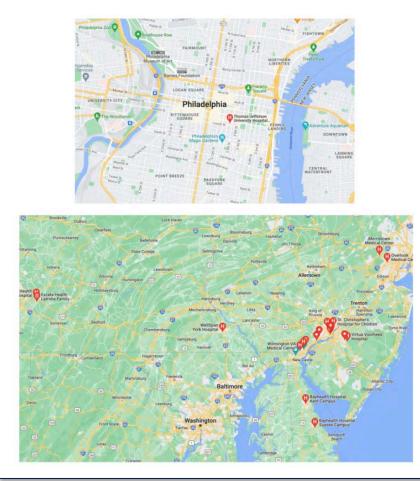
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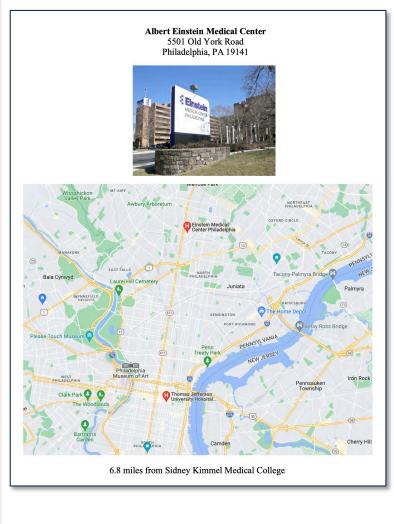
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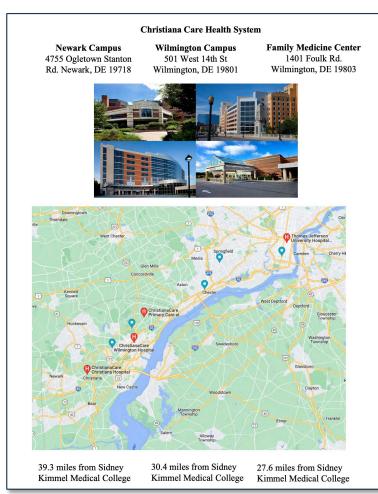
AGE RANGE OF MEDICAL STUDENTS



**Thomas Jefferson University Hospital** 111 S. 11th Street Philadelphia, PA 19107

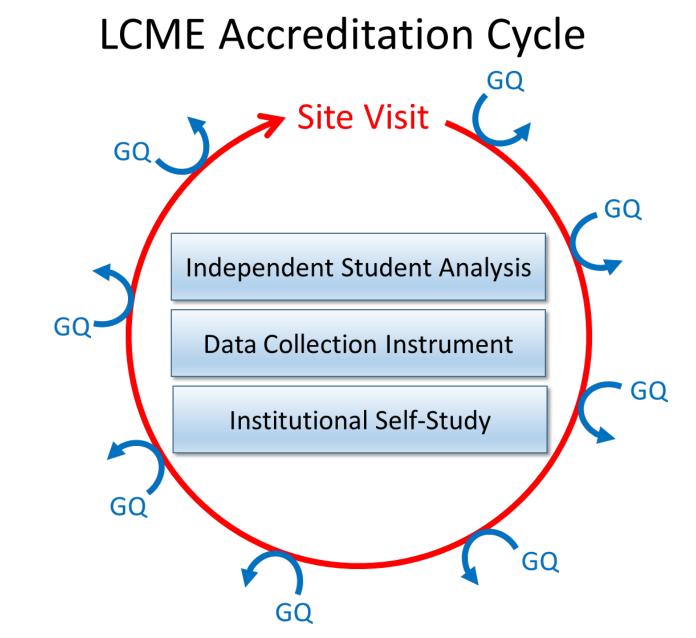






# Institutional Readiness





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July 20 SSTF, commit ISA beg	tees,	Oct 202 results to committ Committ review D sections	o ees ees	draft compe	eted & tted to ittees port	-	Self-	Jan 20 Mock \	
	Sept 2021 Committees identify high priority issue ISA survey prep/distribu	2S	<b>Dec 2021</b> Committee reports du to SSTF	-	<b>April 2022</b> DCI feedback reports submitted to SSTF		<b>Dec 2022</b> <b>Submit</b> DCI Study repor ISA to LCME	rt &	Mar 2023 LCME site visit

# 2023 Areas of Concern

Need for enhanced communication Administrative accessibility Use of student feedback **Research** opportunities IPE and HMP Learning Environment Diversity of student body, housestaff, faculty and administration Affiliate clinical site amenities Financial aid services **NBME** preparation resources **Financial challenges** 

THOMAS JEFFERSON UNIVERSITY

### Sidney Kimmel Medical College STRATEGIC PLAN 2020



### TABLE OF CONTENTS

Introduction 1 Strategic Plan Philosophy & Process	
Mission Statements	
Core Values	
Vision Statements	
Organizational Overview	
Situational Analysis   External Scanning	
Critical Issues	
Goals & Objectives	
Summary. 13	
APPENDIX A: List of Participants	
APPENDIX B: Organization Chart	

Element T	Standard	Description	Metric Unsatisfactory	Metric Warning	Metric Met 👻	Status of Me 🔻	Data Source	Review Frequen ▼	AY 25 Review Date 💌	Site of Review ▼	Responsibility for Results 💌
1.4	Affiliation Agreements	annual review of affiliation	< 90% of clinical sites have agreement	90%-99% of clinical sites have agreement	100% of clinical sites have agreement	Met	GME office	yearly	09/01/25	SDSPG	Vice Dean, GME and Affiliations
1.5	Bylaws	annual review of bylaws	document review > 2 years	document review within 1- 2 years	document review within one calendar year	Met	Annual CQI meeting	yearly	01/06/25	Annual CQI meeting	Vice Dean, UME
3.3	Diversity/Pipeline Programs and Partnerships	admissions diversity	<70 URM admissions offers	70-79 URM admissions offers	≥ 80 URM admissions offers	Met	Admissions committee	yearly	08/01/25	SDSPG	Senior Associate Dean for Admissions
3.3	Diversity/Pipeline Programs and Partnerships	faculty diversity	URM faculty hires < 8%	URM faculty hires 8%-12%	URM faculty hires > 12%	Met	Faculty affairs	yearly	08/01/25	SDSPG	Senior Associate Dean for Faculty
3.3	Diversity/Pipeline Programs and Partnerships	senior administration diversity	<20% of hires for senior administration meet definition	20%-30% hires for senior administration meet definition	>30% of hires for senior administration meet definition	Met	Faculty affairs	yearly	08/01/25	SDSPG	Senior Associate Dean for Faculty
3.5	Learning Environment/Prof essionalism	learning environment reporting	Respect questionnaire (Likert 4,5) < 90%	Respect questionnaire (Likert 4,5) 90%-98%	Respect questionnaire (Likert 4,5) > 98%	Met	New Innovations/Jef fRATE	3 months	09/01/25	JeffRATE review committee	Associate Dean, Professionalism
3.5	Learning Environment/Prof essionalism	learning environment reporting	Jefferson learning Environment Score < 3.5	Jefferson learning Environment Score 3.5-4.0	Jefferson learning Environment Score > 4.0	Met	New Innovations/Jef fRATE	Yearly	09/01/25	JeffRATE review committee	Associate Dean, Professionalism
3.6	Student Mistreatment	student mistreatment rates	listed behaviors associated with mistreatment > 50%	listed behaviors associated with mistreatment 45%-50%	listed behaviors associated with mistreatment < 45%	Met	GQ	yearly	07/31/25	JeffRATE review committee	Associate Dean, Professionalism
4.1	Sufficiency of Faculty	student/teaching faculty ratio	ratio >30 (total	student/teaching faculty ratio 25-30 (total student/FTE ratio)	student/teaching faculty ratio <25 (total student/FTE ratio)	Met	Academic finance	yearly	07/31/25	CC mtg	Vice Dean, UME
4.4	Feedback to Faculty	%, annual reviews	< 95% annual reviews completed	95%-98% annual reviews completed	> 98% annual reviews completed	Met	Faculty affairs	yearly	12/31/25	SDSPG	Vice Dean, Faculty Affairs
5.1	Adequacy of Financial Resources	LCME Part I-A Annual Financial Questionnaire	Net operating income as a percentage of total revenue <0%	Net operating income as a percentage of total revenue 0%-0.9%	Net operating income as a percentage of total revenue >0.9%	Met	LCME Part I-A Annual Financial	yearly	12/31/25	SDSPG	SKMC Executive Committee
5.1	Adequacy of Financial Resources	LCME Part I-A Annual Financial Questionnaire	EBIDA as percentage of total revenue <6%	EBIDA as percentage of total revenue 6%-8%	EBIDA as percentage of total revenue >8%	Met	LCME Part I-A Annual Financial	yearly	12/31/25	SDSPG	SKMC Executive Committee
6.1	Program and Learning	Faculty Attestation	Faculty attestation knowledge of LOs < 85%	Faculty attestation knowledge of LOs 85%-95%	Faculty attestation knowledge of LOs > 95%	Met	Faculty training module	yearly	12/31/25	CC mtg	Vice Dean, UME
6.3		quantity of instructional hours	Average number of 2-hr blocks of unscheduled	Average number of 2-hr blocks of unscheduled	Average number of 2-hr blocks of unscheduled	Met	One45	yearly	06/30/25	Phase 1 Subcommitt	Senior Associate Dean, Curriculum

<b>Thomas Jefferson</b>		Athlet	ics Jefferson Onlin	e Global Jefferson Alumni			
	NEWS OF LIDET SIZESI, MEDICAL COLLIGS		APPLY	VISIT GIVE Q			~
JEFFERSON ADVANTAGE ACADE					APPLY		2
	JEFFERSON ADVANTAGE	ACADEMICS	ADMISSIONS	TUITION & FINANCIAL AID	LIFE AT JEFFERSON	RESEARCH NEW	VS

Sidney Kimmel Medical College - MD Program - LCME Accreditation - LCME Accreditation Resources

Academics - Sidney Kimmel Medical College -



### **LCME** Accreditation Resources

#### **MD** Program

Curriculum

**Guiding Principles** 

Learning Environment

Commitment to Anti-Racist Educatic

Policies & Guidelines Pertaining to **SKMC Students** 

Student Resources

Frequently Asked Questions

Additional Educational Programs

Our Team

**DEA Information for SKMC Graduate** 

LCME Accreditation

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MD Program	
Curriculum	+
Guiding Principles	
Learning Environment	+
Commitment to Anti-Racist Educat	ion
Policies & Guidelines Pertaining to SKMC Students	
Student Resources	
Frequently Asked Questions	
Additional Educational Programs	+
Our Team	

DEALLASSING AN OWNER CONTINUES

SKMC Strategic Plan (PDF) \_

- SKMC Student Handbook (PDF)
- SKMC Course Catalog (PDF)
- SKMC Curriculum Governance (PDF)
- Graduation Competencies (PDF)
- Residency Match Results: Class of 2020 (PDF)
- Thomas Jefferson University Faculty Handbook (PDF) -
- Supplement to the Faculty Handbook SKMC (PDF)
- University Bylaws

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#### Q Search Files and Folders

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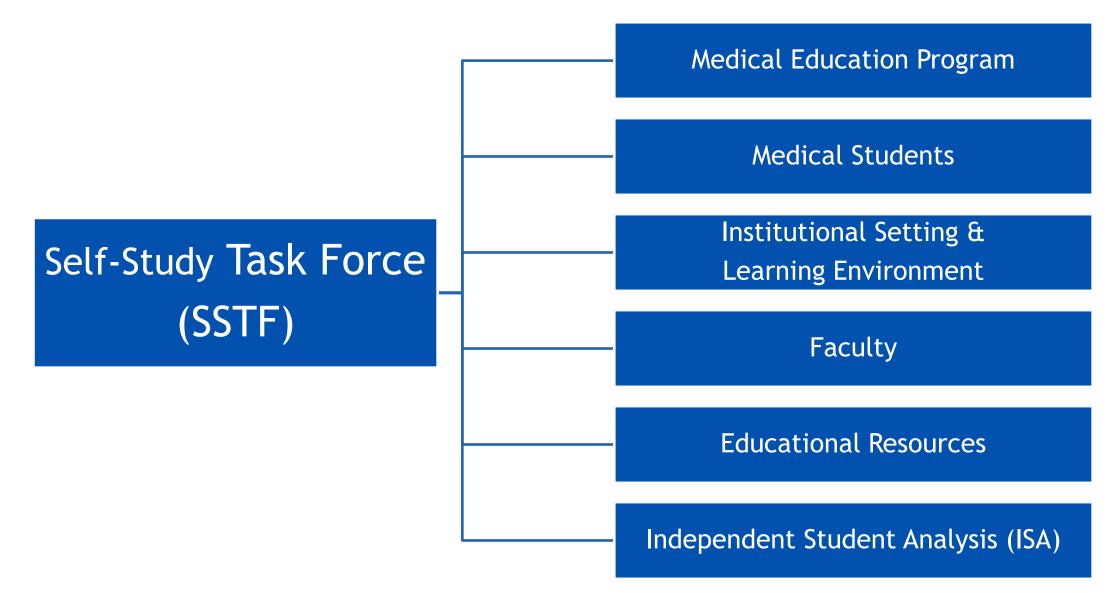
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All Files > LCME 2023 > Self Study Task For
---------------------------------------------

Name	^	Updated	Size	 >
	Supporting Documentation	Sep 16, 2021 by Yana Panich	0 Files	
PDF	132_gq_2021.pdf	Aug 26, 2021 by Steven Herrine	212.9 KB	
	2022-23_DCI_Full2021-08-03.docx	Aug 26, 2021 by Steven Herrine	468.9 KB	
	2022-23_Functions-and-Structure_2021-03-30.docx	Aug 26, 2021 by Steven Herrine	84.3 KB	
	DCI process grid 092321.xlsx V3	Sep 25, 2021 by Steven Herrine	17.9 KB	
PDF	example for DCI writing (Element 7.6).pdf	Aug 26, 2021 by Steven Herrine	920.8 KB	
Ø	GQ Graphic Summary 2021.pptx	Aug 26, 2021 by Steven Herrine	1.6 MB	
	LCME DCI preparation guide.docx	Aug 26, 2021 by Steven Herrine	14 KB	
	LCME information for Self-Study Task Force Members 071321	Aug 26, 2021 by Steven Herrine	20.3 KB	
	LCME information for Self-Study Task Force Members 080521	Aug 26, 2021 by Steven Herrine	19 KB	

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### Committee Structure for Self-Study





Chair, SSTF	Dean, SKMC	Clinical Science Department Chair	Chair, Emergency Medicine
Co-Chair, SSTF	Vice Dean, AA/UME	Basic Science Department Chair	Chair and Senior Associate Dean
Project Director	UME Executive Assistant	Chief of Hospitalist Division	Director, Hospital Medicine
Institutional Setting Co-Chair	Associate Dean, Professionalism	Senior clinical Faculty Member	Professor of Surgery
Institutional Setting Co-Chair	Chief Operating Officer, TJU	Junior clinical Faculty Member	Associate Professor, Medicine
MedEd Program Co-Chair	Senior Associate Dean, AA/UME	Senior Science Faculty Member	Professor of Biochemistry
MedEd Program Co-Chair	Phase 1 Director	Junior Science Faculty Member	Assistant Professor, Cancer Biology
Medical Student Co-Chair	Vice Dean, SA	Hospital-based resident	PGY3, Internal Medicine
Medical Student Co-Chair	Associate Dean, SA	Surgical resident	PGY3, Surgery
Faculty Co-Chair	Vice Dean, Faculty Affairs	Trustee	TJU Trustee
Faculty Co-Chair	Associate Dean, Faculty Affairs	Provost's Office	Acting Provost, TJU
Educational Resources Co-Chair	VP, Academic Finance	Administrator of general university	Dean, College of Life Sciences
Educational Resources Co-Chair	Vice Dea, GME	Student SSTF member	Student - Class of 2022
Database/Self Study Reviewer	Vice Dean, Program Development	Student SSTF member	Student - Class of 2023
CAO/Affiliated Institution	Chief People Office, CC	Student SSTF member	Student - Class of 2024



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### October 2015 – Full 8-yr accreditation

Satisfactory/need for Monitoring		2/17	10/19
Element 3.3 (diversity/pipeline programs and partnerships)	Recent initiatives to enhance <b>diversity</b> . Too early to assess the effectiveness of these efforts.	S	S
Element 3.5 (learning environment/professionalism)	Multifaceted approach to address <b>learning environment</b> ; sustained effectiveness should be monitored.	SM	S
Element 9.4 (observation of core clinical skills)	New procedures designed <b>observation of medical student skills</b> ; sustained effectiveness should be monitored.	S	S
Element 9.7 (formative assessment and feedback)	New process provide formal <b>mid-clerkship feedback</b> ; sustained effectiveness should be monitored.	S	S

Unsatisfactory		2/17	10/19
Element 6.3 (self-directed and life- long learning)	Insufficient educational opportunities for <b>active learning</b> in pre-clinical curriculum.	S	S
Element 8.2 (use of medical educational program objectives)	Educational program competencies not used to establish curriculum content; evaluate effectiveness.	S	S
Element 8.3 (curricular design, review, revision/content monitoring)	The objectives, content, and pedagogy of each <b>curricular segment</b> not routinely and systematically reviewed.	SM	S
Element 10.2 (final authority of admission committee)	Admissions committee must make final decision regarding MD/PhD students.	S	S

#### 2021 SKMC ISA Heat Map Analysis

10%-14.9% Combined Dissatisfied and Very Dissatisfied Responses

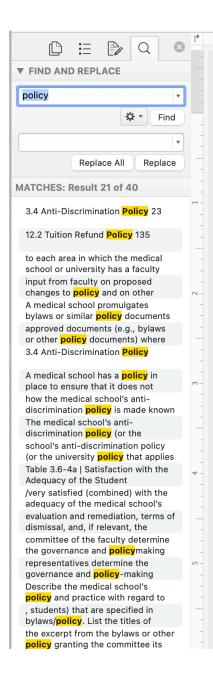
15%-19.9% Combined Dissatisfied and Very Dissatisfied Responses

20%-24.9% Combined Dissatisfied and Very Dissatisfied Responses

 $\geq$  25% Combined Dissatisfied and Very Dissatisfied Responses

<b>Q</b> #	M1	M2	<b>M3</b>	<b>M4</b>	Description	DCI Table	RS*
1					Student Affairs - Awareness of student concerns	2.4-2b	
2					Student Affairs - Responsiveness to student problems	2.4-2c	
3					Academic Affairs - Awareness of student concerns	2.4-4b	
4					Academic Affairs - Responsiveness to student problems	2.4-4c	
5					Adequacy of safety and security at medical school campus	5.7-1a	
6					Adequacy of safety and security at clinical sites	5.7-1b	
7					Adequacy of educational/teaching spaces at hospitals	5.6-2	
8					Student relaxation space at medical school campus	5.11-4	х
9					Student study space on campus	5.11-2a	
10					Study space at hospitals/clinical sites including affiliates	5.11-2b	х
11					Secure storage space on campus	5.11-7a	
12					Secure storage space at the hospitals/clinical sites	5.11-7b	х
13					Relaxation space at hospitals/clinical sites	5.11-5	x
14					Virtual education during clinical years/COVID-19 policies		
15					Access to research opportunities	3.2-2a	

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b. Summarize the content of any policies/guidelines covering the amount of time per week that students spend in required activities during the pre-clerkship phase of the curriculum. Note whether the **policy** addresses only in-class activities or also includes required activities assigned to be completed outside of scheduled class time.

October 2021

\*Policy \*\* 40 matches
 \*Policies \*\* 82 matches
 \*Procedure \*\* 54 matches
 \*Procedures \*\* 48 patches

#### **Supporting Documentation**

- 1. Formal policies or guidelines addressing the amount of scheduled time during a given week during the preclerkship phase of the curriculum.
- 2. The formally approved **policy** relating to duty hours for medical students during the clerkship phase of the curriculum, including on-call requirements for clinical rotations.

#### Academic Workload Policy - Phase 1

#### Purpose

This policy establishes guidelines for maximum required curricular activities for Phase 1 (pre-clerkship) students at SKMC to maximize educational benefit while also attending to students' needs for rest, study, and personal time. **Overview** 

Sidney Kimmel Medical College is committed to providing a safe and supportive learning environment for all students throughout their educational program to maximize student success. A current, separate duty hour policy exists for the educational program during Phases 2 and 3 (clinical phases).

#### **Related LCME Element**

8.8 Monitoring Student Time

#### Definitions:

In-class activity: An in-class activity refers to an educational session on the academic schedule and involves presentation of curricular content through direct interaction between medical students and faculty. Although these sessions appear on the weekly academic calendar, not all sessions are considered mandatory. Required out-of-class activity: A required out-of-class activity refers to an educational activity that is required to be completed outside of scheduled class time, generally in preparation for a scheduled in-class activity. Examples of required out-of-class activities include, but are not limited to, preparation for Case based learning sessions, required reading assignments, preparation for Team based learning sessions and writing reflective essays. Required out-of-class activities do not include time to study material presented during in-class activities.

#### Policy

- Scheduled required in-class activities, averaged over the course of the academic year should not exceed 30 hours per week during Phase 1.
- 2. Required out-of-class activities averaged over the course of the academic year should not exceed 10 hours per week during Phase 1.

#### Monitoring

- The Phase 1 Director is responsible for ensuring compliance with this policy. Data on total time for required activities is collected by the Academic Affairs office and presented to the Phase 1 Curriculum Subcommittee during all Block and Course reviews in Phase 1.
- 2. The Phase 1 Curriculum Subcommittee report and recommendations will be forwarded to the Curriculum Committee to ensure compliance.
- Annual student surveys are conducted to collect average time spent out-of-class for recurring weekly activities such as case-based learning preparation and Scholarly Inquiry project work to ensure accuracy of these estimates.
- 4. If individual blocks or courses are found to be out of compliance with this policy or the overall policy guidelines are deemed to no longer be appropriate, the Curriculum Committee will take action to remedy the situation and re-establish compliance.

Governance: Curriculum Committee | Approved 9/21/2021

# **DCI** Preparation



Standard	Description	subcommittee	writing	early concerns	Submitted (Y/N)	Compliant	Partially compliant	Not compliant	Missing info/notes & questions
8.4	Program Evaluation	Medical Education Program	Abraham	Table assigning responsbility for review of MEPO outcomes. <b>Need "feedback from residency program's</b> on performance of graduates					
8.5	Medical Student Feedback	Medical Education Program	Ziring	student course evaluation forms - change to or port to AEFIS?		£			3
8.6	Monitoring of Completion of Required Clinical Experiences	Medical Education Program	Mingioni	PELS: review criteria and process by which this data is reviewed by students, clerkship directors, CC					
8.7	Comparability of Education/Assessment	Medical Education Program	Mingioni	Comparibility: how are faculty (including affiliate) informed of standards? How is comparibilty reviewed?			1	1	
8.8	Monitoring Student Time	Medical Education Program	Ziring	Duty hours and workload. Clerkship duty hours policy.			P.		
9.1	Preparation of Resident and Non- Faculty Instructors	Medical Education Program	Diemer				1		
9.2	Faculty Appointments	Medical Education Program	Novielli	Concern: Need better process to identify who needs faculty appointment at affiliate sitesshould be led by clerkship directors	ų		Mennil	l Mead	
9.3	Clinical Supervision of Medical Students	Medical Education Program	Mingioni	Clinical supervision policy		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
9.4	Assessment System	Medical Education Program	Berg	Clinical skills assessment - OSCE, H&P. Provide data from clerkship evaluation regarding student perceptions that they were observed					
9.5	Narrative Assessment	Medical Education Program	Ziring	If narrative not provided where applicable, why?					

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Home Insert Draw	Design Layout References Mailings Review View Acrobat	Comments C Editing ~	🖄 Share 🗸			
P F I I I I I I I I I I		5	6			
	9-05 CSSG overall performance rubric.pdf					
	9-05 HMP reflection essay rubric.pdf					
	9-05 Student Narrative Assessment Policy.pdf					
9-05 Wellness week essay rubric.pdf						
9-07 Formative Assessment and Feedback Policy.pdf						
	9-08 AY2021-22 Phase 2 Comparability Report for Clerkship Locations.pdf					
	9-08 Phase 2 Clerkship Evaluation Form.pdf					
	9-08 Phase 3 Clinical Evaluation Form.pdf					
	9-08 Timely Summative Assessment Policy.pdf					
	9-09 Academic Dismissal Policy.pdf					
	9-09 Community Standards Policy and Process.pdf					
	9-09 Due Process for Decisions other than Academic Dismissal Po	olicy.pdf				
	9-09 Faculty Recusal from Student Assessment and Promotion Po	licy.pdf				
	9-09 Phase 1 Promotion Policy.pdf					
	9-09 Phase 2 and Phase 3 Promotion Policy.pdf					
	10-02 Committee on Admissions – Faculty Handbook.pdf					
	10-02 Committee on Admissions COI.pdf					
10-02 Committee on Admissions Information Guide.pdf						
10-02 Committee on Admissions Membership 2023.pdf						
10-02 Student Admissions Policy.pdf						
Dago 2 of F 1224 words	10-03 Committee on Admissions COL.ndf					
Page 3 of 5 1234 words	English (United States) 😤 Accessibility: Good to go		<b>+</b> 220%			

#### **Style Guide for DCI Preparation**

- Use Times New Roman, 11 pt. black font and single spacing for all responses to survey report questions and tables (note, this does necessarily not apply to template headings, footers, etc.).
- Use a serial comma (Oxford comma) before the coordinating conjunction (usually "and" or "or") in a series of three or more items.
- The words "ex officio", "ad hoc", and "via" (or other Latin phrases used colloquially) should not be italicized.
- No periods are used with degrees and other abbreviations, with the exception of "U.S."
- Academic years should be listed as 20##-## (e.g., 2022-23).
- The first occurrence of an abbreviation of acronyms should be spelled out with the abbreviation/acronym in parentheses. Subsequent uses should list just the abbreviation/acronym.
- The word "data" is plural (e.g., data are available not, data is available).
- Only one space should be used after periods in between sentences.
- The word "dean" is not capitalized except when it begins a sentence or is linked to an individual's name, such as "Dean Robert Jones." The same is true for vice president, provost, president, chair, and associate dean.
- The words "medical school," "college," and "university" are not capitalized unless they begin sentences or are used as the school's full name (e.g., Jones Medical School).
- The word "faculty" is not capitalized unless it begins a sentence.
- Discipline names (e.g., "Physiology," "Biochemistry," "Medicine") are capitalized when they refer to departments. Note that "department" is not capitalized unless it is used with reference to a specific discipline, as in "Department of Medicine."
- Capitalize the names of formal school committees and subcommittees (e.g., Committee on Educational Policy), but do not capitalize the committee if the formal name is not used and the committee is referred to just by function (e.g., curriculum committee).
- The word "assess" is used for students' performance and "evaluate" is used for programs.
- In the narrative (not tables), numbers one through nine are spelled out, and numbers 10 and higher are listed as numbers.

#### **Glossary of Terms for LCME Accreditation Standards and Elements**

Adequate numbers and types of patients (e.g., acuity, case mix, age, gender): Medical student access, in both ambulatory and inpatient settings, to a sufficient mix of patients with a range of severity of illness and diagnoses, ages, and both genders to meet medical educational program objectives and the learning objectives of specific courses, modules, and clerkships. (Element 5.5)

Admission requirements: A comprehensive listing of both objective and subjective criteria used for screening, selection, and admission of applicants to a medical education program. (Standard 10)

Admission with advanced standing: The acceptance by a medical school and enrollment in the medical curriculum of an applicant (e.g., a doctoral student), typically as a second or third year medical student, when that applicant had not previously been enrolled in a medical education program. (Element 10.7)

Affiliation agreement: A document which describes the roles and responsibilities between a medical education program and its clinical affiliates. (Element 1.4)

Any related enterprises: Any additional medical school-sponsored activities or entities. (Element 1.2)

Assessment: The systematic use of a variety of methods to collect, analyze, and use information to determine whether a medical student has acquired the competencies (e.g., knowledge, skills, behaviors, and attitudes) that the profession and the public expect of a physician. (Standard 9; Elements 1.4, 4.5, 6.1, 8.3, 8.7, 9.1, 9.4, 9.5, 10.3, 10.8, 11.1, 11.3, and 12.5)

**Benefits of diversity**: In a medical education program, the facts that having medical students and faculty members from a variety of socioeconomic backgrounds, racial and ethnic groups, and other life experiences can: 1) enhance the quality and content of interactions and discussions for all students throughout the preclinical and clinical curricula and 2) result in the preparation of a physician workforce that is more culturally aware and competent and better prepared to improve access to healthcare and address current and future health care disparities. (Standard 3)

**Central monitoring**: Tracking by institutional (e.g., decanal) level offices and/or committees (e.g., the curriculum committee) of desired and expected learning outcomes by students and their completion of required learning experiences. (Elements 8.6 and 9.1)

**Clinical affiliates**: Those institutions providing inpatient medical care that have formal agreements with a medical school to provide clinical experiences for the education of its medical students. (Elements 1.4 and 3.5)

## A word about consultations

- 1. Communications with LCME Secretariat are non-punitive
- 2. External consultations are allowable by the LCME
- 3. Our choices
  - External consultant
  - Professional writer
  - Proofreader
- 4. Content DCI/responses to questions provided by institutional content experts





### **Consultation firm**

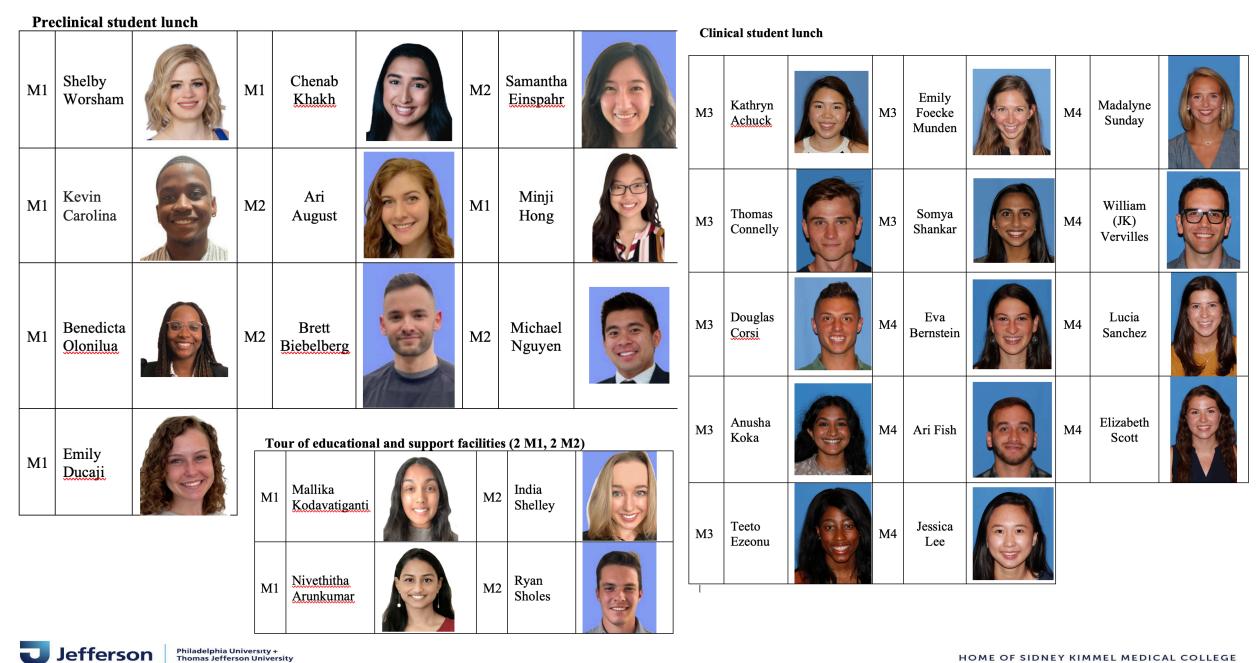
# Institutional self-study preparation



Preparation of the Self-study Summary Report         It is the responsibility of the task force to review the documentation (e.g., DCI, ISA) to make evidence-based determinations about performance in accreditation elements. This analysis is the basis of the self-study summary report, which contains a summary description of institutional strengths, challenges related to performance in elements, and strategies to address the specific identified challenges.         Members of the self-study task force may find it helpful to refer to the Survey Report Template for Full Survey Visit Reports which is used by survey team members to compile the survey report to determine the specific areas year.						
of team focu ( <u>lcme.org/pu</u>	Survey Team Documents	Survey Report Template for Full Survey Visit Reports 2024-25 April 2024				
	Survey Team Documents	Structure of the Self-study Summary Report				
	Survey Team Documents	The report should begin with a brief introduction describing how the self-study process was conducted and include the membership categories of self-study task force members (with a reference to the complete list of task force members in the Appendix). It also should include a brief history of recent major changes that have relevance to performance in accreditation elements. The remainder of the self-study summary report should be organized into sections of institutional strengths, challenges/areas of concern related to performance in accreditation elements including any information about the root causes of problem areas, and specific activities undertaken or planned to address each of the challenges/areas of concern. Note that the self-study summary report should be evidence-based and grounded in the intent of elements. The concerns may reference a single element or group of related elements (e.g., elements related to curriculum management).				

# The ISA

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# The Site Visit

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HOME OF SIDNEY KIMMEL MEDICAL COLLEGE

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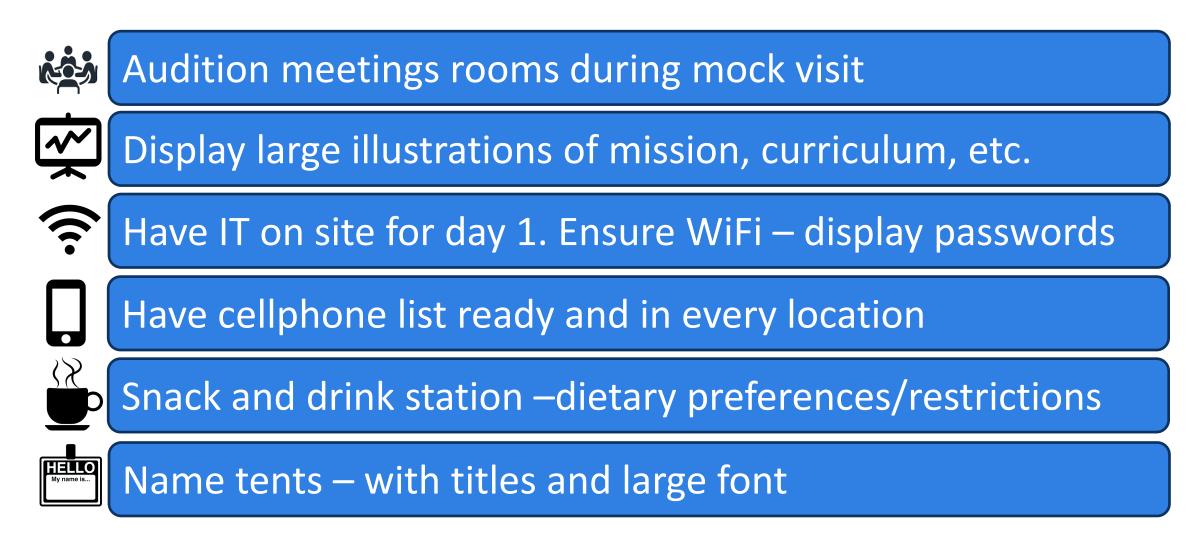
## Site Visit (and mock visit) - advanced preparation

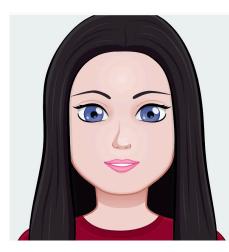


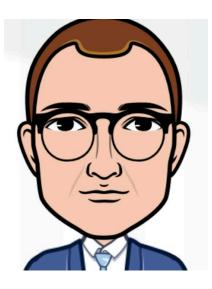
## Site Visit (and mock visit) - advanced preparation

	Audiovisual/tech services
	Map of campus (restrooms and any security codes)
; ; ;	Content of prep sessions
	Preparation of key groups – make a cellphone list!
	Etiquette (attire, cellphones, punctuality)
$\bigcirc$	Debriefing sessions

### The Site Visit





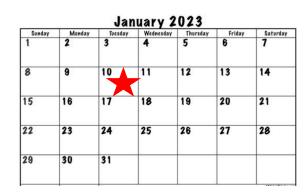


# FAL and SVC are on call 24/7!

- Print out any documentation you may need ahead of time
- Keep all documents central
- "Staff runner" for documents, geographic guidance, other needs
- Group preparation and debrief room

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<b>1</b>	2023 LCME Site Visit Prep - Academic, career, personal counseling, student health	4
WE	2023 LCME Site Visit Prep - Admissions, Student Selection, Financial Aid	4
w∎	2023 LCME Site Visit Prep - Affiliates	4
<b>W</b>	2023 LCME Site Visit Prep - Basic Science Chairs	4
w i	2023 LCME Site Visit Prep - Clerkship Directors	$\leq$
•	2023 LCME Site Visit Prep - Clerkship Student Lunch	
w	2023 LCME Site Visit Prep - Clinical Chairs	
	2023 LCME Site Visit Prep - Dean	$\leq$
WE	2023 LCME Site Visit Prep - Educational Program Objectives, Content, Curr Mgmt, Evaluation	$\leq$
	2023 LCME Site Visit Prep - Finance	$\leq$
WE	2023 LCME Site Visit Prep - Institutional diversity	$\leq$
	2023 LCME Site Visit Prep - Institutional faculty issues	$\leq$
w i	2023 LCME Site Visit Prep - Junior Faculty	4
<b>W</b> 1	2023 LCME Site Visit Prep - Learning environment and student mistreatment	4
WE	2023 LCME Site Visit Prep - Library and Information Services	$\leq$
<b>W</b>	2023 LCME Site Visit Prep - Preclerkship Course Directors	$\leq$
w i	2023 LCME Site Visit Prep - Preclerkship Student Lunch	4
•	2023 LCME Site Visit Prep - Research; Medicesearch opportunities; Academic environment	$\leq$
<b>W</b> E	2023 LCME Site Visit Prep - Residents	$\leq$
<b>W</b>	2023 LCME Site Visit Prep - Senior Leadership Staff	$\leq$
w i	2023 LCME Site Visit Prep - Student Tour	$\leq$
•	2023 LCME Site Visit Prep - Teaching, supervn, student assessment, student advancement	$\leq$
w i	2023 LCME student tour itinerary	$\leq$
-		

### Dates of in-person sessions



## Tuesday, January 10, 2023 2:45 - 3:30 Basic Science Chairs 3:30 - 4:30 Clinical Chairs



## Tuesday, March 21, 2023 3:00 - 4:00 Basic Science Chairs 4:00 - 5:00 Clinical Chairs



### General points about sessions



### Please arrive a bit early



No need to remind the visitors that our school is large



Answer only the question asked



Each question has a purpose -determine compliance



Not the time to air dirty laundry or personal grievances



Professional attire, ID badge, cellphones off



Perfectly acceptable to bring notes



Review information on faculty website

#### LCME Site Visit student tour itinerary

Mock site visit: Sunday, January 9 @ 11:15 am-12:00 pm LCME Site visit: Monday, March 20, 2023 @ 11:15 am - 12:00 pm

#### Student tour leaders:

- Nivethitha Arunkumar, SKMC '26
- India Shelley, SKMC '25
  Ryan Sholes, SKMC '25
- Mallika Kodavatiganti, SKMC '26
   R

Start: College Building conference room 126 (site of LMCE meetings) Exit conference room through Diversity Office door Cross hall to Student Affairs Office Walk to Curtis Building to see Admission Office and Academic Services Office

Go up one floor to **Curtis small group classrooms** Walk across to college building second floor to **Foerderer Auditorium** Continue down hall to show **Kellow Conference Center** and **Rooms 201/202** Walk down to **Dean's Education Office (100 College)** Go down to ground floor past **Assessment Office** and show **Locker Rooms** 

Head back up to first floor, cross Walnut Street to **Scott Building**, take elevator to third floor; make a loop around the third floor.

Go downstairs to second floor. walk past glass **group study rooms**, **circulation desk** – perhaps any displays from the archives...

Take main stairs down to exit Scott library

#### Jefferson Alumni Hall: Enter lobby. Note common relaxation space

Take the elevators on the left to second floor. (not Mezzanine!)

Turn (west) towards the anatomy labs and anatomy faculty offices. Go through back entrance of the facility (the northside) swiping-in to access

Enter **Dissection room 5** (first door on the right) and view the interior (note updated student computers, teaching stations and Projectors!)

Exit room 5 and walk up the center hallway past other dissection rooms. Turn left into **locker rooms** Leave locker rooms, exit the dissection facility (southside doors) proceed past the blue wall arcade. Stairs down to mezzanine, turn left to **swipe-in study rooms** 

#### Turn around and go to Learning Resource Center

Walk to other side of JAH (atrium on your right), turn left, take stairs (near tech transfer center) down to first floor

Visit student lounge, Solis Cohen large room and small meeting rooms

#### Cross Lubert Plaza and proceed to Hamilton Building: show $1^{st}$ floor lobby and Connelly Auditorium

Take elevator to 3<sup>rd</sup> floor **Clinical skills center** Left out of elevator past room 305, right past Rms 318 show **SP room** with cameras, etc. Left to **inpatient simulation rooms** 

U-turn, then turn left to **Control Room** Through door to Rm 333 – **Sim Adult room**, left to Rm 332 **Harvey room** Take elevator or walk down to 2<sup>nd</sup> floor **small group classrooms** - show around a bit

Bring site visit team to Hamilton 208/209 for lunch



### Incentives and recognitions



### Incentives and recognitions

- Updates of status of site review
- Notification of accreditation!
- Presentations to college, university and clinical leadership
- Parties!



### **Lessons learned**

- Use LCME resources follow the instructions!
- Leverage expertise of faculty/staff
- Self-study is an opportunity to garner resources
- Talk to your friends and colleagues, consider consultant, writer and proofreader
- It is impossible to start too early
- Be patient and perseverant
- Try to have fun a team-building exercise





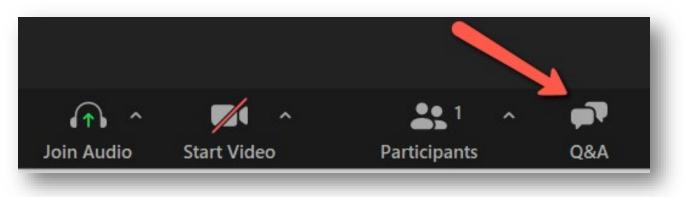
# **Submitted Question**

### How did you manage multiple drafters working on the DCI while tracking versions of the DCI (for recordkeeping)? Any tips, strategies, etc.?



### How to ask questions in Zoom:

Participants can ask questions by hovering their mouse at the bottom of the screen to bring up their toolbar.



Click the Q&A icon and a box will open where you can submit a question.

Participants will not see other participants' questions. Only speakers will see the questions submitted.



MEDICAL EDUCATION

Topic of the Month: Independent Student Analysis

Guest Speakers: Phoebe Livingston, Class of 2026 Mattie Harris, Class of 2026 Wake Forest University School of Medicine

Email <u>lcme@aamc.org</u> with element or topic suggestions.