****

## Checklist of Requirements

## for Completing the Independent Student Analysis (ISA)

## for Full Accreditation Surveys

|  |
| --- |
| Please note that the LCME considers the Independent Student Analysis to be critical, but it can only use the analysis if it is completed using the required survey items with the results presented in the required format.   * Include all of the [survey items listed in the Required Student Opinion Survey Items section below](#_Required_Student_Opinion_1) exactly as written. * 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](#_Reporting_of_Results_1) for all survey items, including those for the added survey items. * Encourage participation in the survey; **a response rate of 70% for the survey overall and of 70% for each item and each class year/cohort within the item is required.** * 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](#_Reporting_of_Results_1) 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.** |

# 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 in all classes. Include the start and end dates when surveys were administered and a response rate table that displays the number and percentage of students responding to the survey for each class year and overall. 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. Note any recent changes (e.g., curriculum revisions or changes in student services) that may reflect differences in how each class rated an item or other reasons for areas of student concern or differences across classes. The survey should have space for students to add comments.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.

# Required Student Opinion Survey Items

**The LCME requires that the student opinion survey includes, at a minimum, the following items and that it uses 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.**

----------------------------------------------------------------------------------------------------------------------------

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

a = Agree

b = Disagree

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

----------------------------------------------------------------------------------------------------------------------------

**Note: Data from items indicated by an asterisk (\*) should only be included for students in the required clerkship years of the curriculum (typically years 3 and 4, but in some schools, years 2 to 4).**

**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)**

1. The members of the OME are accessible.
2. The OME leadership and staff are aware of student concerns.
3. The OME leadership and staff respond to student problems.

**LEARNING ENVIRONMENT AND FACILITIES**

1. The medical school’s student mistreatment policy is clear.
2. I know the procedures for reporting student mistreatment or know where to find them.
3. The procedures to report student mistreatment are clear.
4. I am aware of the medical school’s activities to prevent student mistreatment.
5. The medical school’s activities to prevent student mistreatment are effective.
6. The medical school investigates reports of student mistreatment.
7. I feel physically safe on the medical school campus.
8. I feel physically safe at clinical sites.**\***
9. The medical school’s pre-clerkship lecture halls and large group classroom facilities are suitable for the educational sessions that are held in them.
10. The medical school’s pre-clerkship small group teaching spaces are suitable in quality for the educational sessions that are held in them.
11. Spaces for formal educational sessions at hospitals are suitable for the sessions that are held in them.\*
12. I have access to relaxation space for pre-clerkship students on the medical school campus.
13. I have access to pre-clerkship study space on the medical school campus.
14. I have access to workspace and computers to enter patient notes at hospitals/clinical sites.\*
15. I have access to space where I can read about my patients at hospitals/clinical sites.\*
16. I have access to secure storage space for my personal belongings on the medical school campus.
17. I have access to secure storage space for my personal belongings at hospitals/clinical sites.\*
18. I have access to research opportunities.
19. The medical school supports student participation in research.
20. I have access to service-learning/community service opportunities.

**LIBRARY AND INFORMATION RESOURCES**

1. I am able to access library resources and holdings from any location on and off the medical school campus.
2. I have access to library support personnel and services.
3. I have access to support from technology staff.
4. I am able to access online course and clerkship instructional materials from any location on and off the medical school campus.

**STUDENT SERVICES**

1. I am able to access personal health care services during the pre-clerkship phase of the medical education program.
2. I am able to access personal health care services during the clerkship phase of the medical education program.\*
3. I am able to access personal counseling/mental health services during the pre-clerkship phase of the medical education program.
4. I am able to access personal counseling/mental health services during the clerkship phase of the medical education program.\*
5. Mental health services available through the medical school are confidential.
6. Student well-being programs are available in the pre-clerkship phase of the medical education program.
7. Student well-being programs are available in the clerkship phase of the medical education program.\*
8. The medical school has a coordinated career advising system that spans all years of the medical education program.
9. The medical school’s career advising system includes access to knowledgeable advisors.
10. The medical school has an effective system for advising about elective choices.
11. I have access to knowledgeable and helpful financial aid services personnel.
12. Knowledgeable personnel at my medical school provide debt management counseling.
13. Academic advising is available to me during all years of the medical education program.
14. If I am experiencing academic difficulty, academic counseling is available to me during all years of the medical education program.
15. Tutorial help is available to me during all years of the medical education program.
16. I am taught how to prevent exposure to infectious and environmental hazards before I begin seeing patients.
17. 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**

1. The medical education program objectives are useful to support my learning.
2. I receive adequate clinical skills instruction in the pre-clerkship phase of the medical education program.
3. The amount of formative feedback in the pre-clerkship phase is sufficient to allow me to assess how I am meeting the expectations in the courses of this phase of the medical education program.
4. The quality of formative feedback in the pre-clerkship phase allows me to identify areas in which I need to improve as I progress through this phase of the curriculum.
5. Pre-clerkship summative assessments are pertinent to the course objectives and content taught in the courses of this phase of the medical education program.
6. The curriculum provides sufficient practice in the skills of self-directed learning as defined by the LCME. §
7. There is adequate available time in the pre-clerkship phase for self-directed learning and other types of preparatory assignments. §
8. Student workload in the pre-clerkship phase is manageable.
9. Curriculum content in the pre-clerkship phase is coordinated/integrated within and across courses.
10. The pre-clerkship phase prepared me for the clerkship phase of the curriculum.\*
11. The overall quality of the required clerkships is satisfactory.\*
12. I have sufficient access to patients during the required clerkships to complete the required clinical encounters/skills and to meet the clerkship objectives.\*
13. Student workload in the required clerkships is manageable.\*
14. I am appropriately supervised in clinical settings.\*
15. The amount of formative feedback in the clerkship phase allows me to assess how I am meeting the expectations in the required clerkships of this phase.\*
16. The quality of formative feedback in the clerkship phase allows me to identify areas in which I need to improve as I progress through this phase of the curriculum.\*
17. The manner in which summative assessments are used to determine a clerkship grade is clear and consistent.\*
18. The policies for advancement/graduation are clear.
19. I am aware that there is a process for reviewing and challenging my academic record or know where to find it.
20. The medical school responds to student feedback on courses.
21. The medical school responds to student feedback on clerkships.\*
22. The curriculum prepares me to diagnose disease.\*
23. The curriculum prepares me to manage disease.\*
24. The curriculum includes education in disease prevention.
25. The curriculum includes education in health maintenance.
26. The curriculum prepares me to care for patients from different backgrounds.
27. The curriculum promotes development of interprofessional collaborative skills. √

§ 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.

√ Interprofessional collaborative skills (Element 7.9) prepare students to function collaboratively on health care teams with students/health professionals from other professions.

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

**Develop a separate table for each survey item** such that the data for all relevant class years are included in the same table. The required format for the tables 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.

Use the following table format for items where students in all years of the curriculum respond.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Table Title\*** | | | | | | | | |
| Medical School  Class | Number of Total Responses/Response Rate to this Item | | Number and % of  N/A Responses | | Number and % of  Disagree Responses | | Number and % of  Agree Responses | |
| N | % | N | % | N | % | N | % |
| M1 |  |  |  |  |  |  |  |  |
| M2 |  |  |  |  |  |  |  |  |
| M3 |  |  |  |  |  |  |  |  |
| M4 |  |  |  |  |  |  |  |  |
| 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.”

If a survey item is specific to a set of students, such as an item about the clinical years/clerkships, modify the table to reflect the medical school class(es) that can provide data based on their experience. Use the following table format if an item is directed to students who are or have been in the clerkship years:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Table Title** | | | | | | | | |
| Medical School Class\* | Number of Total Responses/Response Rate to this Item | | Number and % of  N/A Responses | | Number and % of  Disagree Responses | | Number and % of  Agree Responses | |
| N | % | N | % | N | % | N | % |
| M2 |  |  |  |  |  |  |  |  |
| M3 |  |  |  |  |  |  |  |  |
| M4 |  |  |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |  |  |

\* Delete any rows that include students who have not experienced the required clerkships.