


Name of Policy: College of Medicine & Life Sciences: Continuous Quality Improvement Policy for the MD Program		 <p>Revision date: 6/8/2022</p> <p>Original effective date: March 25, 2019</p>	
Policy Number: 3364-81-20			
Approving Officer: Dean, College of Medicine & Life Sciences			
Responsible Agent: Assistant Dean for Assessment and Accreditation and Sr. Assoc. Dean for UME, COMLS			
Scope: COMLS Medical Education Program			
<input type="checkbox"/>	New policy proposal	<input checked="" type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

The College of Medicine and Life Sciences (COMLS) medical school engages in a process of continuous quality improvement (CQI) to regularly monitor the quality of the medical education program, and to provide effective monitoring of the program's compliance with accreditation standards.

(B) Purpose of policy

To outline the Liaison Committee on Medical Education's (LCME) accreditation Element 1.1 that requires medical schools to engage in ongoing planning and CQI processes and to ensure effective monitoring for compliance with accreditation standards.

(C) Scope

This policy is used by the COMLS medical education program to support the collection of data and analysis by individuals and curriculum committees and to establish programmatic goals on an ongoing basis for quality improvement.

(D) Procedure

Data will be collected and housed in the Department of Medical Education and/or Office of Student Affairs and available to all involved faculty and administrative staff in a timely manner. The responsible authority will summarize the findings based on the data and recommend a plan of action in collaboration with all responsible faculty and/or committees. In case of a committee being responsible for a standard, the chair of the

committee will be the final responsible person for an action plan. Once the plan has been developed, specific metrics that have been established will be utilized to assess outcomes.

- (1) The CQI process includes regular data collection and review.
 - (2) LCME elements for monitoring are identified from the following categories:
 - (a) Elements that have been cited as “unsatisfactory” or “satisfactory with a need for monitoring” during previous accreditation visits.
 - (b) Elements that explicitly require monitoring or involve a regularly-occurring process: 3.5; 4.4; 8.3; 8.4; 8.5; 8.6; 8.8; 9.1; 9.4; 9.5; and 9.8.
 - (c) New elements, or elements where LCME expectations have evolved: The Assistant Dean for Assessment and Accreditation will periodically (quarterly) review LCME standards and current/relevant literature.
 - (d) Elements that include policies that must be congruent with current operations: 1.4; 1.5; 3.3; 12.5; and 12.8.
 - (e) Elements that directly or indirectly affect the core operations of the medical school: 4.1; 5.1; and 8.1.
 - (f) Other elements identified through program evaluation processes or COMLS leadership
- (E) References

Implementing a System for Monitoring Performance in LCME Accreditation Standards. Retrieved from http://lcme.org/wp-content/uploads/filebase/white_papers/CQI-Guidance-Document-10-16.docx. Published October 19, 2016.

<p>/s/ Christopher J. Cooper, M.D. Executive Vice President for Clinical Affairs and Dean for the College of Medicine and Life Sciences</p> <p>June 13, 2022 Date</p> <p><i>Review/Revision Completed by:</i></p> <p><i>Assistant Dean for Assessment and Accreditation and Sr. Associate Dean for Undergraduate Medical Education</i></p>	<p>Policies Superseded by This Policy: None</p> <p>Initial effective date: March 25, 2019</p> <p>Review/Revision Date: June 8/2022</p> <p>Next review date: June 8, 2025</p>
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