Name of Policy: **College of Medicine & Life Sciences:** THE UNIVERSITY OF Continuous Quality Improvement Policy for the MD Program **Policy Number:** 3364-81-20 **Effective date:** May 5, 2025 **Approving Officer:** Dean, College of Medicine & Life Sciences **Original effective date:** March 25, 2019 **Responsible Agent:** Associate Dean for Assessment and Accreditation and Sr. Assoc. Dean for UME, COMLS Scope: **COMLS Medical Education Program** Minor/technical revision of existing New policy proposal \boxtimes Major revision of existing Reaffirmation of existing policy

(A) Policy statement

policy

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, and committees 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 <u>Assistant Associate</u> 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.

Approved by:

Imran Ali, M.D.
Dean of the College of Medicine and
Life Sciences
Vice Provost for Health Education

Date: May 5, 2025

Review/Revision Completed by:

Associate Dean for Assessment and Accreditation and Sr. Associate Dean for Undergraduate Medical Education

Policies Superseded by This Policy:

• None

Initial effective date: March 25, 2019

Review/Revision Date:

June 8, 2022 May 5, 2025

Next review date: May 5, 2028