

**YALE UNIVERSITY  
SCHOOL OF MEDICINE**

**EDUCATION COMMITTEE STRUCTURE**

**Introduction:**

The Educational Policy and Curriculum Committee (EPCC) has 31 members (see below). The EPCC is responsible for the centralized oversight of the school's educational policies and curriculum, and for ensuring that the educational program is integrated, coordinated and designed to achieve the school's overarching goals. To achieve this, the EPCC:

- Provides careful and thorough oversight of the curriculum review process, including the curriculum as a whole as well as its various components
- Promotes the development of new ideas and considers recommendations for curricular changes made by its review committees as well as suggestions from students, faculty and departments
- Reviews and monitors the school's educational policies to ensure that they are effectively implemented, adhered to and are up to date
- Regularly reviews and monitors LCME accreditation standards and implements changes as needed to ensure that the educational program is in full compliance with all standards and elements

**Decision-making process:**

The deliberations and decisions of the EPCC are guided by the principles and values embodied in the YSM educational mission statement as well as the Yale System of education. A quorum of 10 members is required, and decisions will be based on a simple majority vote. In the event of a tie vote the chair of the committee has the deciding vote.

**The membership of the committee will include:**

Associate Dean for Curriculum, Chair

***Appointed Members (17) – All Appointed members serve without term***

Associate Dean for Student Affairs

Associate Dean for Educational Scholarship/Director, Teaching and Learning Center

Associate Dean for Graduate Medical Education

Deputy Dean and Chief Diversity Officer

Director of Accreditation and Continuous Quality Improvement Strategy Development

Associate Director for Curriculum and Educator Assessment, TLC

Associate Director for Student Assessment, TLC

Co-Directors of Pre-Clerkship Curriculum (2)

Director of Clerkships

Director of Electives

Director, Clinical Skills Program

Director, MD/PhD Program

Academic Advisor (rotating)

Curriculum Support Librarian

Chair, Progress Committee

Medical Student Council President

Deputy Dean for Education, *ex-officio*

***Elected Members (14) : Elected faculty and alumni positions have a 4-year term with re-election permitted***

Integrated Course Director<sup>1</sup>

Clerkship Director<sup>2</sup>

Elective Director<sup>3</sup>

At-large Faculty <sup>4</sup> (4 - elected by the YSM Faculty Advisory Committee)

Alumni representative (Elected by AYAM)

Students (6)<sup>5</sup> – (1 representative elected from each year plus one MD/PhD)

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<sup>1</sup> Integrated Course Director representative must be a YSM curriculum course director and can be nominated by department chairs, directors of medical studies (DMS), fellow integrated course directors and central curriculum directors. Election of nominated candidates is done by vote of all integrated course directors.

<sup>2</sup> Clerkship Director representative must be a YSM curriculum clerkship director and can be nominated by department chairs, directors of medical studies (DMS), fellow clerkship directors and central curriculum directors. Election of nominated candidates is done by vote of all clerkship directors.

<sup>3</sup> Elective Director representative must be a YSM curriculum Elective director and can be nominated by department chairs, directors of medical studies (DMS), fellow elective directors and central curriculum directors. Election of nominated candidates is done by vote of all elective directors.

<sup>4</sup> The at-large positions are chosen by the Faculty Advisory Committee using their selection process.

<sup>5</sup> Students are selected by the student body using their election process. These are 1-year terms with re-election permitted.



## **CURRICULUM REVIEW COMMITTEES**

- *Pre-Clerkship Review Committee*
- *Clerkship Review Committee*
- *Elective Review Committee*

### Purpose

The Curriculum Review Committees work collaboratively with departments, faculty and students to review and improve individual integrated courses, clerkships and electives. This includes gathering information, reviewing and analyzing data and making recommendations that promote:

- use of student evaluations and performance outcome data to improve the curriculum
- use of reliable outcome measures to evaluate student achievement of the learning objectives
- congruence of integrated course, clerkship, and elective objectives with the overarching goals of the curriculum
- use of the most effective teaching methods to achieve the learning objectives
- effective use of formative and summative assessment methods

The Curriculum Review Committees, through their directors, report the results of curricular reviews to the Educational Policy and Curriculum Committee on a regular basis. Recommendations of the Curriculum Review Committees for changes in the content or teaching methodology within an integrated course, clerkship or elective based on these reviews can be directly implemented by the integrated course, clerkship or elective director. However, changes that have broader impact across the curriculum must be brought to the Educational Policy and Curriculum Committee for consideration and implementation.

## **PRE-CLERKSHIP REVIEW COMMITTEE**

### Purpose

The Pre-Clerkship Review Committee is charged with assessing each course in the curriculum at least once every three years and more frequently when deemed necessary by the committee. The reviews provide the integrated course leaders with an evaluation of their course based on student feedback, analysis of course material and instructional sessions, alignment of assessment questions with learning objectives and comparison of course goals with Yale's overarching goals of the curriculum, and with national standards. The committee also examines integration of course content with other courses within the curriculum and ensures that we are meeting LCME Standards for accreditation.

The pre-clerkship review is a constructive process to help stimulate discussion between courses topics of intended and unintended content overlap and any omissions in content areas that may not be apparent when viewing courses in isolation. The process will also identify methods of curriculum delivery that are particularly effective and to provide information on these practices to other courses.

### Membership

#### Appointed (5)<sup>1</sup>

- Co-Directors of Courses, Co-Chairs (2)
- Manager of Courses, Administrator (1)
- Teaching and Learning Center Representative (1)
- Medical School Librarian (1)

#### Elected (17)

- Course Directors<sup>2</sup> (4)
- Basic Science Faculty<sup>2</sup> (1)
- Clinical Faculty<sup>2</sup> (1)
- Ad-Hoc Faculty<sup>2</sup> (1)
- Elected Students<sup>3</sup> (10 - 2 per class)

### Frequency of meetings

The committee meets twice a month

<sup>1</sup>Appointed members are selected based on their role in medical education, with no term limit.

<sup>2</sup>Course directors, basic science faculty, clinical faculty and ad-hoc faculty are nominated by department chairs, directors of medical studies, and course directors. Candidates can also self-nominate. Election of nominated candidates is done by vote of course directors and appointed pre-clerkship review committee members. Elected faculty positions serve a four-year term with re-election permitted.

<sup>3</sup>Students are selected by the student body using their election process. These are one-year terms with re-election permitted.

## CLERKSHIP REVIEW COMMITTEE

### Purpose:

The Clerkship Review Committee is charged with assessing each clerkship in the curriculum at least once every four years. The goals of the review committee are threefold: 1) to ensure educational quality, innovation, and a supportive learning environment in each of the core clerkships, 2) to provide the clerkship director information regarding themes of student feedback and the integration of clerkship content with other components of the curriculum, and 3) to ensure compliance with LCME Educational Directives for accreditation.

The clerkship review is a constructive process that aims to stimulate productive discussion among clerkship directors, faculty, staff, students, and the leadership in order to support the highest quality educational experience. The review covers multiple aspects of the clerkship: organization, clinical and didactic teaching, patient care, the learning environment, and the clerkship director's analysis and outlook. The process also identifies methods of curriculum delivery that are particularly effective, which can then be provided to other clerkship directors for continuous clerkship improvement.

### Membership:

#### Appointed Members (6)<sup>1</sup>:

- Director of Clerkships, Chair (1)
- Manager of Clerkships, Administrator (1)
- Teaching and Learning Center Representative (1)
- Physician Associate Program Faculty (1)
- Medical Curriculum Administrator (1)
- Curriculum Support Librarian (1)

#### Elected Members (15):

- Clerkship Director/Associate Director<sup>2</sup> (1)
- Clerkship Administrator/Coordinator<sup>2</sup> (1)
- Clinical Faculty<sup>2</sup> (2)
- Basic Science Faculty<sup>2</sup> (1)
- Medical Students<sup>3</sup> (10) {2 per class should include at least 1 MD/PhD Student}

### Frequency of Meetings:

At least once a month or more frequently as needed

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<sup>1</sup>Appointed members are selected based on their role in medical education, with no term limit.

<sup>2</sup>Clerkship director/associate director, clinical faculty, basic science faculty, and the clerkship coordinator may self-nominate or be nominated by department chairs, directors of medical studies, clerkship directors, and clerkship coordinators. Election of nominated candidates is done by vote of the clerkship directors and appointed clerkship review committee members. Elected faculty positions have a 4-year term with re-election permitted. If there are no nominees or nominations, the Chair will identify and recruit candidates.

<sup>3</sup>Students are selected by the student body using their election process. These are 1-year terms with re-election permitted.



## ELECTIVE REVIEW COMMITTEE

### Purpose:

The Elective Review Committee is charged with assessing each elective and subinternship in the curriculum at least once every four years. The goals of the review committee are threefold: 1) to ensure educational quality, innovation, and a supportive learning environment in each of the core electives, 2) to provide the elective director information regarding themes of student feedback and the integration of elective content with other components of the curriculum, and 3) to ensure compliance with LCME Educational Directives for accreditation.

The elective review is a constructive process which aims to stimulate productive discussion among elective directors, faculty, staff, students, and the leadership in order to support the highest quality educational experience. The review covers multiple aspects of the elective: organization, clinical and didactic teaching, patient care, the learning environment, and the elective director's analysis and outlook. The process also identifies methods of curriculum delivery that are particularly effective, which can then be provided to other elective directors for continuous elective improvement.

### Membership:

#### Appointed Members' (6):

- Director of Electives, Chair (1)
- Manager of Electives, Administrator (1)
- Teaching and Learning Center Representative (1)
- Medical Curriculum Administrator (2)
- Registrar (1)

#### Elected Members (20):

- Elective/Subinternship Director<sup>2</sup> (5)
- Elective/Subinternship Coordinator<sup>2</sup> (3)
- Clinical Faculty<sup>2</sup> (2)
- Elected Students<sup>3</sup> - 2 per class (10)

### Frequency of Meetings:

At least once a month or more frequently as needed. Some discussions via email as needed.

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<sup>1</sup> Appointed members are selected based on their role in medical education, with no term limit. <sup>2</sup> Elected members self-nominate or be nominated by department chairs, directors of medical studies, elective/subinternship directors, elective coordinators, and central curriculum directors/administrators. Election of nominated candidates is done by vote of the elective directors and appointed elective review committee members. Elected positions have a 4-year term with re-election permitted. If there are no nominees or nominations, the Chair will identify and recruit candidates.

<sup>3</sup> Students are selected by the student body using their election process. These are 1-year terms with re-election permitted.

## **THESIS COMMITTEE**

### Purpose

The Thesis Committee provides oversight of and recommends policy for all aspects of the medical student thesis program. This includes:

- setting rules and regulations for the thesis requirement
- establishing thesis deadlines
- determining the guidelines and processes for the awarding of thesis honors and graduation prizes, and choosing the recipients
- determining the selection of oral presentations given on Student Research Day

The Thesis Committee regularly reviews the curriculum to assure that there is adequate time available for thesis research, evaluates the participation and effectiveness of faculty mentors, assesses the quality of the student's research experience, and makes stipend-supported research fellowships available.

### Membership

The Thesis Committee is chaired by the director of student research, and includes approximately eighteen faculty from both basic science and clinical departments as well as the section of the history of medicine. There are no term limits. Changes in membership of the committee are made by the chair in consultation with the other members of the committee.

### Frequency of Meetings

The committee meets at least once a year and may meet more often as needed.

## **CLINICAL SKILLS ASSESSMENT COMMITTEE**

### Purpose

This Clinical Skills Assessment (CSA) Committee considers issues related to assessment of students in the clinical skills program. In particular, the committee develops, pilots, implements, and evaluates assessments related to internal course objectives, graduation requirements, and other requirements (such as the AAMC entrustable professional activity pilot). For particular assessments, the committee sets passing standards, reviews results, revises items (if necessary), and determines administrative actions (as directed in YMS policies) for students who perform poorly. The committee currently sponsors two OSCE examinations at the University of Connecticut Clinical Skills Assessment Center. Particular members of the CSA committee remediate students who fail or perform poorly on these examinations.

### Membership

Director of Clinical Skills Assessment, Chair (1)  
Director of Clinical Skills Program (1)  
Manager of Clinical Skills Program (1)  
Director of Clinical Tutor Program (1)  
Director of Communication Skills (1)  
Director of Physical Examination (1)  
Director of Standardized Patient Program (1)  
Director of MD-PhD re-entry program (1)  
Additional voluntary members, representing various educational programs (5)

### Frequency of Meetings

The committee meets once a month.

## **CLINICAL SKILLS INSTRUCTION COMMITTEE**

### Purpose

This Clinical Skills Instruction (CSI) Committee considers issues related to clinical skills instruction in the four year curriculum. The committee identifies, develops, and reviews elements in the curriculum that relate to communication with patients, families, and other members of the care team; physical examination of patients; development of clinical reasoning skills; and understanding the role of a student-doctor in a patient's care. Additionally, the CSI committee addresses issues related to small group faculty recruitment, training, and evaluation. Specific emphasis is placed on the Clinical Skills Course, Interprofessional Longitudinal Clinical Experience, Clinical Tutor Program, and all of which take place in the first 18 months of school. Content from these parts of the pre-clerkship curriculum is formally reinforced through collaboration with clerkship and elective directors. The CSI committee works closely with the Clinical Skills Assessment Committee to ensure alignment of instructional and assessment goals.

### Membership

Director of Clinical Skills Program, Chair (1)  
Manager of Clinical Skills Program (1)  
Director of Clinical Skills Assessment (1)  
Executive Director of Interprofessional Longitudinal Clinical Experience (1)  
Associate Director of Interprofessional Longitudinal Clinical Experience (med school) (1)  
Director of Communication Skills (1)  
Director of End of Life and Palliative Care Skills Training (1)  
Director of Physical Examination (1)  
Director of Standardized Patient Program (1)  
Director of Psychosocial Communication (1)  
Director of Clinical Reasoning (1)  
Director of Primary Care Clerkship (1)  
Director of Point of Care Ultrasound (1)

### Frequency of Meetings

The committee meets once a month.

## **PROGRESS COMMITTEE**

### Purpose

The Progress Committee reviews the academic performance of each student to determine suitability for continued advancement in the curriculum and for graduation. This review includes decisions about graduation, promotion, leaves of absence, special study, remediation, academic probation, suspension, and dismissal. The Progress Committee uses a single and uniform standard for the promotion and graduation of students.

### Membership

The Progress Committee is chaired by a senior faculty member, and includes approximately twelve faculty from both basic science and clinical departments. The associate dean for students affairs, senior registrar and registrar are ex-officio (non-voting) members. Faculty serving on the committee are familiar with the curriculum and graduation requirements and have demonstrated a deep interest in the well-being of the students. There are no term limits. Recommendations for changes in membership of the committee are made by the chair in consultation with the deputy dean for education and other members of the Progress Committee. Those recommendations are submitted to the dean who has final authority for committee membership.

### Frequency of Meetings

The Progress Committee meets approximately monthly. When a question arises which cannot wait for the next full meeting of the Progress Committee, the chair may call an emergency meeting, convene a subcommittee, or poll the members of the Progress Committee for their opinions by phone or email.

### Review of Students

Each student's academic progress is reviewed annually, or more frequently as needed, as specified in the Yale School of Medicine Satisfactory Academic Progress Policy. In addition, the Progress Committee considers other relevant information in order to determine if the student is developing the professional attributes needed to become a safe and effective physician, including moral and ethical character, professional behavior, good judgment, sense of responsibility, sensitivity, and compassion for individual needs and emotional stability. In making its decisions, the committee takes into account the academic record of the student, including but not limited to information such as qualifier performance, standardized skills assessments, course commentaries, clerkship evaluations, performance on board exams, as well as letters and reports regarding incidents of unprofessional behavior, personal testimony and special circumstances.

## Committee Decisions and Notification

In reviewing the academic progress of students, the Progress Committee makes one of the following determinations:

- meeting the requirements for satisfactory academic progress
- not meeting the requirements for satisfactory academic progress, whereby actions may include one of the following:
  - remediation
  - academic Probation
  - suspension
  - dismissal

Students who are making satisfactory progress will not hear directly from the Progress Committee.

If the Progress Committee determines that a student has not demonstrated satisfactory progress or performance in any aspect of the medical school curriculum, remediation will be required. This remediation is designed to provide the student with a structure to address any deficits with the goal of helping the student improve his or her performance to a satisfactory level. When remediation is required, the student will be notified in writing, including the specifics of the required remediation and of the consequences of not successfully completing the remediation according to a specified timeline.

If there is a pattern of poor performance or serious violation of the school's code of conduct or professionalism standards, the student may be placed on academic probation concurrent with the remediation, or suspended. The student will be notified in writing of the terms of the academic probation or suspension, including the requirements for having the academic probation or suspension removed, as well as the consequences of not meeting these requirements according to a specified timeline.

If a student is unable to meet the academic requirements of the School despite remediation efforts, he or she may be dismissed. Additionally, if at any time a student behaves in a manner that is considered incompatible with the ideals of a physician, he or she may be dismissed. If dismissal occurs, the student will be notified in writing of the decision.

A summary of the actions taken by the Progress Committee may appear in the student's dean's letter and the student will be notified of this in writing.

### Appeal Process

A student may appeal the decision of the Progress Committee. The appeal process includes 2 steps;

#### *Step 1:*

To begin the appeal process, the student must notify the chair of the Progress Committee

in writing of his or her intention to appeal within seven (7) days from the date the student

receives notification of the Progress Committee's decision. The student has the right to appear before the committee, and for support may bring an advisor who is a member of the school of medicine community. The student may not bring legal representation. The committee will consider any additional information brought to its attention by the student in reaching a final decision.

*Step 2:*

Final decisions of the Progress Committee may be appealed to the dean of the school of medicine. A student wishing to take this step in the appeal process must submit to the dean (or the dean's designate) a written request describing the basis of the appeal within seven (7) days from the date the student receives notification of the Progress Committee's final decision. Appeals may be based on a claim that some pertinent evidence was not taken into account or that the Progress Committee's consideration was unfair, and must describe the basis for such a claim.

The dean (or the dean's designate) will review the appeal, and at his/her discretion may invite the student to meet. The dean (or the dean's designate) may either issue a final decision, or may remand the case back to the Progress Committee for reconsideration. The dean (or the dean's designate) shall communicate his/her decision in writing to the student and to the Progress Committee. The dean's decision is final.