School of Medicine
Operating Policy and Procedure

SOM OP: 80.01, School of Medicine Continuous Quality Improvement and

Strategic Plan

**PURPOSE:** The purpose of this School of Medicine (SOM) Policy and Procedure is to

outline systematic efforts for the continuous improvement of the quality of the undergraduate medical education program and their relationship to

the SOM strategic plan.

**REVIEW:** This SOM Policy and Procedure shall be reviewed within each odd-

numbered fiscal year by the Dean.

## POLICY/PROCEDURE:

 General. This policy outlines activities managed by the SOM to ensure that the medical education program meets Liaison Committee for Medical Education (LCME) accreditation Element 1.1, Strategic Planning and Continuous Quality Improvement (CQI):

"A medical school engages in ongoing planning and continuous quality improvement processes that establish short and long-term programmatic goals, result in the achievement of measurable outcomes used to improve programmatic quality, and ensure effective monitoring of the medical education program's compliance with accreditation standards."

- 2. Strategic Planning. The Office of the Dean and the Dean's Executive Council will lead the development and implementation of the SOM Strategic Plan with the involvement and input of faculty and staff. The Strategic Plan will be updated every five years.
  - All goals of the strategic plan will be reviewed by the Dean's Executive Council
    on a regular basis and achievements/challenges will be disseminated at faculty
    meetings.
  - b. The charge, composition and functions of the Dean's Executive Council are described in SOMOP 80.03.
- 3. Continuous Quality Improvement. The Office of the Dean and the Continuous Quality Improvement Committee (CQIC) will lead the development of an effective CQI process that performs regular reviews of LCME standards.
  - a. The CQI Process. CQI areas directly related to current LCME Standards and Elements will be reviewed regularly. Although all elements will be reviewed at least once annually, particular attention will be paid to elements identified based on the following criteria:
    - Citations of Standards and Elements of prior LCME accreditation visits or interactions, until completely resolved.
    - 2) SOM strategic plan objectives that intersect with the medical education program.
    - 3) Monitoring of elements that require continuous monitoring.
    - 4) New or updated LCME Standards and Elements.

5) LCME Status reports, AAMC Graduation and Year Two Questionnaires, Independent Student Analyses, and other internal data sources.

CQI processes will include quantifiable goals and outcome measures that will be defined, assessed, and refined as needed by the CQI Committee.

**4. CQI Committee.** The CQI committee will meet on a monthly basis. The CQIC is charged with the review of all LCME accreditation standards each year.

## a. Membership

- 1) Dean, School of Medicine
- 2) Executive Associate Dean for Administration
- 3) Executive Associate Dean and Executive Director of Medical Practice/Executive Vice President for Clinical Practice
- 4) Regional Dean, Amarillo Campus
- 5) Regional Dean, Odessa Campus
- 6) Vice Dean for Medical Education, Covenant Campus
- 7) Regional Assistant Dean for Medical Education, Odessa
- 8) Senior Associate Dean for Academic Affairs
- 9) Associate Dean for Student Affairs
- 10) Assistant Dean for Student Affairs
- 11) Assistant Dean for Student Wellness and Advancement
- 12) Assistant Vice Dean for Student Affairs, Covenant
- 13) Associate Dean for Faculty Recruitment, Affairs and Development
- 14) Associate Dean for Clinical Education
- 15) Associate Dean for Medical Education and Accreditation
- 16) Chair Dept of Medical Education
- 17) Assistant Dean for Educational Technology
- 18) Associate Dean for Admissions
- 19) Assistant Dean for Phase 3 Curriculum
- 20) Associate Dean for Research
- 21) Assistant Regional Dean for Medical Education, Amarillo
- 22) Associate Dean for Graduate Medical Education and Resident Affairs

## Appendix A: CQI Committee Annual Review Schedule

January		Presenter
1.1	Strategic Planning and Continuous Quality Improvement	McGregor
1.2	Conflict of Interest Policies	McGregor
2.2	Dean's Qualifications	McGregor
2.3	Access and Authority of the Dean	McGregor
2.5	Responsibility of and to the Dean	McGregor
10.1	Premedical Education/Required Coursework	Morales
12.5	Non-Involvement of Providers of Student Health Services in Student	Cobbs
	Assessment/Location of Student Health Records	
12.6	Student Health and Disability Insurance	Cobbs

February		Presenter
3.1	Resident Participation in Medical Student Education	Williams
3.2	Community of Scholars/Research Opportunities	Shen
5.10	Resources Used by Transfer/Visiting Students	Cobbs
6.2	Required Clinical Experiences	Williams
6.7	Academic Environments	Williams
8.6	Monitoring of Completion of Required Clinical Experiences	Islam
9.1	Preparation of Resident and Non-Faculty Instructors	Islam
12.7	Immunization Requirements and Monitoring	Cobbs

March		Presenter
2.4	Sufficiency of Administrative Staff	McGregor
5.1	Adequacy of Financial Resources	McGregor
5.2	Dean's Authority/Resources	McGregor
5.3	Pressures for Self-Financing	McGregor
6.8	Education Program Duration	Jansen
10.2	Final Authority of Admission Committee	Morales
11.2	Career Advising	Cobbs
12.8	Student Exposure Policies/Procedures	Cobbs

April		Presenter
1.4	Affiliation Agreements	McGregor
2.6	Functional Integration of the Faculty	McGregor
6.3	Self-Directed and Life-Long Learning	Williams
7.8	Communication Skills	Jones, Ward, Trotter
7.9	Interprofessional Collaborative Skills	Jones
10.3	Policies Regarding Student Selection/Progress and Their Dissemination	Morales
11.1	Academic Advising and Academic Counseling	Cobbs
11.3	Oversight of Extramural Electives	Cobbs

May		Presenter
3.4	Anti-Discrimination Policy	McGregor
4.2	Faculty Appointment Policies	Haynes
6.5	Elective Opportunities	Williams
8.1	Curricular Management	Jansen
9.6	Setting Standards of Achievement	Jansen
9.7	Formative Assessment and Feedback	Islam
11.4	Provision of MSPE	Cobbs

June		Presenter
3.3	Diversity Programs and Partnerships	Morales
3.5	Learning Environment/Professionalism	Williams
3.6	Student Mistreatment	Williams
4.4	Feedback to Faculty	Haynes
8.2	Use of Medical Educational Program Objectives	Williams
9.4	Assessment System	Jansen
9.5	Narrative Assessment	Islam
11.5	Confidentiality of Student Educational Records	Cobbs

July		Presenter
5.4	Sufficiency of Buildings and Equipment	McGregor
5.5	Resources for Clinical Instruction	Islam
5.6	Clinical Instructional Facilities/Information Resources	Islam
5.7	Security, Student Safety, and Disaster Preparedness	McGregor
6.4	Inpatient/Outpatient Experiences	Williams
8.7	Comparability of Education/Assessment	Williams
11.6	Student Access to Educational Records	Cobbs

August		Presenter
1.5	Bylaws	McGregor
5.11	Study/Lounge/Storage Space/Call Rooms	McGregor/Cobbs
6.6	Service-Learning/Community Service	Jones
8.3	Curricular Design, Review, Revision/Content Monitoring	Jansen
8.8	Monitoring Student Time	Islam
10.4	Characteristics of Accepted Applicants	Morales
10.6	Content of Informational Materials	Morales

September		Presenter
1.6	Eligibility Requirements	McGregor
2.1	Administrative Officer and Faculty Appointments	McGregor
4.6	Responsibility for Medical School Policies	McGregor/Haynes
8.4	Evaluation of Educational Program Outcomes	Jansen
8.5	Medical Student Feedback	Jansen
10.5	Technical Standards	Williams
12.1	Financial Aid/Debt Management Counseling/Student Educational	Cobbs
	Debt	

October		Presenter
1.3	Mechanisms for Faculty Participation	McGregor
5.8	Library Resources/Staff	Williams
5.9	Information Technology Resources/Staff	Kim
7.5	Societal Problems	Jones
7.6	Structural Competence, Cultural Competence and Health Inequities	Jones
7.7	Medical Ethics	Jones
10.7	Transfer Students	Morales
12.2	Tuition Refund Policy	Cobbs

November		Presenter
4.1	Sufficiency of Faculty	Haynes
6.1	Program and Learning Objectives	Williams/Jansen
7.1	Biomedical, Behavioral, Social Sciences	Jansen
7.2	Organ Systems/Life	Jansen
	Cycle/Prevention/Symptoms/Signs/Differential Diagnosis,	
	Treatment Planning	
9.2	Faculty Appointments	Haynes
9.9	Student Advancement and Appeal Process	Jansen, Cobbs,
		Islam, Williams
10.8	Visiting Students	Conser
12.3	Personal Counseling/Mental Health/Well-Being Programs	Conser

December		Presenter
4.3	Scholarly Productivity	Haynes
4.5	Faculty Professional Development	Haynes
7.3	Scientific Method/Clinical/Translational Research	Jansen
7.4	Critical Judgment/Problem-Solving Skills	Jansen
9.3	Clinical Supervision of Medical Students	Islam
9.8	Fair and Timely Summative Assessment	Williams
10.9	Student Assignment	Cobbs
12.4	Student Access to Health Care Services	Cobbs