Overview

There are clear assessment and evaluation guidelines for each course in the undergraduate medical education (UME) curriculum. Students are made aware of these guidelines at the onset of each course. This document outlines the system by which the MD Program identifies a student having academic difficulty (failing to meet predefined minimum requirements) and/or lapses in professionalism during undergraduate training and the subsequent remediation process.

Purpose

To ensure the MD Program meets or exceeds the Committee on Accreditation of Canadian Medical Schools (CACMS) and Liaison Committee on Medical Education (LCME) accreditation standards.

MS-31-A. A medical education program must ensure that its learning environment promotes the development of explicit and appropriate professional attributes in its medical students (i.e., attitudes, behaviors, and identity).

GUIDELINE

1. OVERVIEW

   a. Academic performance of every learner in all 4 years of undergraduate medical education is monitored proactively by the coordinator of academic mentoring and remediation on a monthly basis via MedSIS reports (course and/or components).

   b. Any student noted to receive a grade of less than 70% and/or performing in the bottom 10th percentile in any component, or any student who has not completed 2 or more components, will be flagged and contacted by the coordinator of academic mentoring and remediation to have an in person meeting to explore potential issues.

   c. In the event that a student fails a course, rotation or OSCE due to overall standing of less than 70% and/or bottom 10th percentile, remediation will be mandatory and the procedure outlined below will apply (3.a).

   d. Should the student be deemed as having “borderline requiring extra work,” a different remediation procedure outlined below will apply (3.b).

2. PERFORMANCE BELOW EXPECTATIONS

   a. Categories of weak performance that may be grounds for failing to achieve credit in any component deemed mandatory and/or a need for extra work and remediation.

      i. In order to achieve credit in a mandatory component, a student must demonstrate satisfactory performance in two separate, but related, domains: he/she must achieve a satisfactory minimum grade in the course/rotation/OSCE and must also demonstrate professional and ethical behaviour in relation to patient care.

      ii. Students must meet all required criteria in order to receive credit. Criteria consists of
- a grade that is >70%
- no evidence of recurrent professionalism lapses (major or more than 2 minor) after academic mentoring for professionalism has been provided
- any other course/component specific criteria

iii. If a student falls short of the expected standards in one or both of these domains, the academic standing committee will be notified.

iv. If the concern pertains to a lapse in professionalism, the director of professionalism will be notified. The director of professionalism will notify the coordinator of academic mentoring and remediation as needed.

b. Failure requiring remediation
i. The criterion grade for automatic notification of the academic standing committee is a grade below 70% and/or bottom 10th percentile.

ii. Course directors and/or clerkship rotation will bring the student forward for review at the academic standing committee where it will be determined if the students should receive a grade of "no credit" (failure).

iii. After the committee reviews and approves the recommendation of the course/clerkship director, the assistant dean of academic will inform the student that he/she will be required to complete remedial academic curriculum.

iv. The student and file will then be referred to the coordinator of academic mentoring and remediation.

v. The coordinator of academic mentoring and remediation and course/clerkship director will develop an academic remediation plan.

vi. The coordinator of academic mentoring and remediation will meet with the student to discuss the plan, obtain student input and discuss implementation and completion.

vii. The coordinator of academic mentoring and remediation will communicate with the course coordinator throughout the process.

c. Borderline requiring extra work
i. Even if a student achieves a grade of 70% or higher in a component, he/she may be required to carry out extra work in that component.

ii. Furthermore, weaknesses in several different components, which by themselves might not be deemed to merit a grade of "No Credit" in any one of them, may still lead to a student either carrying out extra academic work and/or be reported to the academic standing committee under the procedure specified below (3.b).

iii. If a student demonstrates a single major lapse in professionalism or 3 minor lapses, this may be considered “borderline” performance and lead to a requirement for further study in professionalism.

3. ACADEMIC DIFFICULTY
a. Failure of a course, rotation or OSCE due to overall standing of less than 70% (and/or bottom 10th percentile) requiring academic remediation:

i. The course director will design the content of the remedial work and determine the level of performance expected in supplemental evaluations such that the student may meet the standard for successful completion of the course.

ii. The student will be required to meet with the assistant dean of academic and the coordinator of academic mentoring and remediation.

iii. The student will be informed both orally and in writing (electronic email to UAlberta account) that their performance is below expectations, that the academic standing committee has been informed of this fact and that their performance requires remedial work.

The student will be informed that the consequences of not successfully completing the required remediation may include needing to repeat the course in the following academic year and therefore delaying their progress in the undergraduate medical education program.
The student will be informed that they have the opportunity to respond to this report of failure of a course. The student must be fully informed of his/her rights by the assistant dean of academic, including the right to provide a written submission to the academic standing committee when their performance is being reviewed.

iv. Referral of the student to the Office of Learner Advocacy & Wellness (LAW) will be offered.

v. Specific performance criteria that may differ from those normally used in a course or rotation may be required for successful completion of academic remedial work.

vi. Upon successful completion of the academic remedial program, the course director will provide a recommendation to the coordinator of academic mentoring and remediation and the assistant dean of academic who will present the outcome to the academic standing committee.

vii. The academic standing committee will make the final decision as to whether to grant the student credit for the course and that the mark be raised to 70%.

In the case of professionalism issues, the matter will be referred to the director of professionalism, who, in consultation with the coordinator of academic mentoring and remediation, will make recommendations to the assistant dean of academic to be brought forward to the academic standing committee.

4. LAPSES IN PROFESSIONALISM

Professionalism lapses by learners are identified in several ways:

- Via the MedSIS “Professionalism Accolades and Incident Reporting” system
- Through course and rotation evaluations via MedSIS
- Direct reporting to the undergraduate medical education office
- Absence review via MedSIS

The coordinator of academic mentoring and remediation and director of professionalism are made aware of all assessments with professionalism lapses.
a. Multiple minor lapses or one major lapse
   i. The initial response to a single or multiple evaluations with a total of more than 2 minor or 1 major professionalism lapse is by the coordinator of academic mentoring and remediation, who will email the student and arrange to meet with the student to discuss the issues identified and obtain the student viewpoint. The purpose of this meeting is educational coaching, and the student will be made aware that a consultation with the director of professionalism may be beneficial for seeking advice.
   ii. After this initial conversation between the coordinator of academic mentoring and remediation and student, the coordinator of academic mentoring and remediation will contact the faculty or course director as necessary.
      - If the coordinator of academic mentoring and remediation determines that any lapse did not occur, the record may be adjusted.
      - If lapses are deemed to have occurred, continued monitoring and documentation of process will occur with a follow-up meeting with the coordinator of academic mentoring and remediation in 1-2 months to review how the student is progressing.
   iii. If minor lapses continue to be identified and are confirmed by the course/rotation directors to have reached a total of 3, then the student will be considered to have the equivalent of a major lapse in professionalism.

b. Repeat lapses after remediation OR lapses that lead to consideration of failure of a rotation
   i. A recurrence of major lapse or recurrent multiple minor lapses in professionalism will be confirmed by the coordinator of academic mentoring and remediation and director of professionalism, in discussion with the course/rotation director.
   ii. If confirmed, the student file will be brought to the academic standing committee for discussion.
   iii. The student will meet with the coordinator of academic mentoring and remediation and/or assistant dean of academic to be informed of need for remediation in professionalism.
   iv. The student may be referred to the College of Physicians and Surgeons of Alberta, as required by the College of Physicians and Surgeons of Alberta Code of Conduct guidelines.
   v. Specific performance criteria that may differ from those normally used in a course or rotation may be imposed for successful completion of remedial work.
   vi. The student will complete remediation course work and meet with the coordinator of academic mentoring and remediation at least twice during the remediation process to review progress.
   vii. At the completion of the additional work, the coordinator of academic mentoring and remediation, in conjunction with the director of professionalism, will make a recommendation to the assistant dean of academic which will be brought forward to the academic standing committee for final deliberation.
   viii. In the event that remediation in professionalism is not successful, the academic standing committee may determine that the student cannot proceed to the next year of the program, and/or may take other action according to its terms of reference.

5. COMMUNICATION REGARDING STUDENT PERFORMANCE
   a. Once identified, any concerns related to academic performance or professionalism should be communicated to the coordinator of academic mentoring and remediation and/or assistant dean of academic (and the director of professionalism, if the issue is a professionalism lapse) within two weeks of the assessment that triggers the concern.
   b. The student should be informed of the concern within a week of the concern being identified to the coordinator of academic mentoring and remediation, and/or director of professionalism and/or assistant dean of academic.
   c. The student should have the opportunity to respond to any reports of academic difficulty or lapses of professionalism. The students must be fully informed of their rights, including their right to provide a written submission to the academic standing committee in the event that their performance is being reviewed by the committee.
   d. In the event that program modifications are proposed:
i. Every effort should be made by all faculty involved in the remediation process to ensure a confidential process and an environment of positive expectation among those responsible for the supplemental supervision, teaching and evaluation.

ii. If appropriate, the student should have input in planning program modifications.

DEFINITIONS

Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use.

<table>
<thead>
<tr>
<th>Committee on Accreditation of Canadian Medical Schools (CACMS)</th>
<th>The Committee on Accreditation of Canadian Medical Schools (CACMS), working with the Liaison Committee on Medical Education (LCME) in the United States, ensures that Canadian medical faculties’ MD programs meet the quality expected when producing tomorrow’s doctors. Medical schools demonstrating compliance are afforded accreditation, a necessary condition for a program’s graduates to be licensed as physicians.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liaison Committee on Medical Education (LCME)</td>
<td>The Liaison Committee on Medical Education (LCME) is the nationally recognized accrediting authority for medical education programs leading to the M.D. degree in the U.S. and Canadian medical schools. The LCME is sponsored by the Association of American Medical Colleges and the American Medical Association.</td>
</tr>
<tr>
<td>MedSIS</td>
<td>Learning management system used by MD program students, staff and faculty.</td>
</tr>
<tr>
<td>Component(s)</td>
<td>A part or section of the course.</td>
</tr>
<tr>
<td>OSCE</td>
<td>Objective Structured Clinical Examination</td>
</tr>
<tr>
<td>Academic Standing Committee</td>
<td>Under the authority of the Faculty of Medicine &amp; Dentistry, reporting to the dean through Faculty Council, the academic standing committee makes decisions regarding the academic standing of students.</td>
</tr>
</tbody>
</table>

FORMS

No forms for this guideline.

RELATED LINKS

[College of Physicians and Surgeons of Alberta Code of Conduct](#)

<table>
<thead>
<tr>
<th>APPROVER</th>
<th>STATUS</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kent Stobart, Associate Dean</td>
<td>Approved</td>
<td>24 February 2014</td>
</tr>
</tbody>
</table>