

Application Phase Committee Meeting 5/6/19

LCME Re-Accreditation Survey

Application phase = top 5 areas of strength throughout the survey

- Surgery = worst
- Medicine = best

Clarity of clinical grading / academic honors policies = areas in need of improvement

- Transparency of AOA = biggest dissatisfaction
- Subjectivity of grading = also mostly dissatisfied

Clinical Feedback

- Medical school responsiveness to student feedback on courses/clerkships

Solutions committees

- Dean of Medical Education
- Clarity of Grading/Honors Policies - created in February to address dissatisfaction

Course Reviews

HISC Course:

- Wilmington surgery: lower than others
- Few mistreatments, fallen from previous years
- Incorporating palliative care
- Challenge of telecommunication to away campuses
- Some orientations are not as clear
- More interprofessional education
- Trouble getting fresh admissions for students, floating evening resident
- High rated lectures, interactive sessions - maybe too much?

CBLC:

- Good comparability amongst campuses
- Good learning environment
- Accomplished: more direct observation, reorganized sakai, more didactics/small group/interactive learning, clarity in orientation/expectations
- Goals: recruiting more preceptors, sessions more interactive, shelf preparation, reduce clinic interruptions, leadership transitions

CSP:

- All clinical logs completed, developed feed-forward throughout the block
- Shelf scores above national average
- Objectives clearly communicated
- OB needs improvement: mistreatment, appropriate level of care, clarity of expectations, observation of H&P
- Improved interactivity, interaction with/teaching from residents, transitioning site directors
- Goals: consistency in didactics, evaluation, onboarding more personnel