



TEXAS TECH UNIVERSITY  
HEALTH SCIENCES CENTER  
EL PASO

Paul L. Foster School of Medicine  
Medical Education Program Policy

<b>Policy Name:</b>	<b>Curriculum review cycle (and triggers for off-cycle reviews)</b>			
	<ul style="list-style-type: none"> <li>- Pre-clerkship phase (Years 1 and 2) and components</li> <li>- Clerkship phase (Years 3 and 4) and components</li> <li>- Curriculum as a whole</li> </ul>			
<b>Policy Domain:</b>	Curriculum management	<b>Refers to LCME Element(s):</b>	8.1, 8.2, 8.3	
<b>Approval Authority:</b>	Curriculum and Educational Policy Committee	<b>Adopted:</b>	9/19/2016	<b>Date Last Reviewed:</b>
<b>Responsible Executive:</b>	Associate Dean for Medical Education	<b>Date Last Revised:</b>	December 2023	
<b>Responsible Office:</b>	Office of Medical Education	<b>Contact:</b>	Mirjana Babic, M.P.A. <a href="mailto:mbabic@ttuhsc.edu">mbabic@ttuhsc.edu</a>	

1. **Policy Statement:** The Curriculum and Educational Policy Committee (CEPC) shall systematically review the curriculum in a continuous 3-year cycle in the following order:
  - Year 1 – curriculum as a whole (including the fulfillment and adequacy of the medical education program goals and objectives)
  - Year 2 – pre-clerkship phase and components (courses and other requirements)
  - Year 3 – clerkship phase and components (clerkships and other requirements)

Additionally, the CEPC will review any curriculum component, either phase, or the curriculum as a whole, on an ‘off-cycle’ basis as necessary due to any of the circumstances listed below.

2. **Reason for Policy:**
  - To describe a systematic approach to curricular revision and program evaluation activities to ensure that program quality is maintained and enhanced
  - To monitor the overall quality and outcomes of individual curriculum components (courses and clerkships) and other requirements
  - To monitor the outcomes of the curriculum as a whole, and its fulfillment of the medical education program goals and objectives
  - To ensure that medical students achieve all medical education program objectives and participate in all required clinical experiences and settings
  - To review and ensure the adequacy of the medical education program goals and objectives
3. **Who Should Read this Policy:**
  - All course, SPM unit, and clerkship directors

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- All members of the Curriculum and Educational Policy Committee
  - All educational program administrators
4. **Resources:** The Office of Medical Education, the Curriculum and Educational Policy Committee, and the Year 1-2 and Year 3-4 Committees.
5. **Definitions:**
- **Pre-clerkship phase:** Years 1 and 2 of the PLFSOM medical education program
  - **Clerkship phase:** Years 3 and 4 of the PLFSOM medical education program
  - **Courses:** the required pre-clerkship phase courses
  - **SPM unit:** a physiological system-based unit of the Scientific Principles of Medicine Course
  - **Clerkships:** For the purposes of this policy, all references to the clerkships refer to the required Year 3 clerkships, the required Year 4 clinical rotations, boot camp, and the required Year 4 selectives (critical care and sub-internship). It also refers collectively to the Year 4 electives as a curricular component.
  - **Annual Educational Program Evaluation Report:** This is an annual report of educational program evaluation and outcomes data prepared by the Office of Medical Education. The specification for this report are outlined in a separate educational program policy.
  - **Systematic review:**
    - For the purposes of this policy, 'systematic review' refers to a deliberate and documented process of combining and reviewing all available institutional data (including academic outcomes and program evaluations), as well as relevant and representative national benchmark data, to assess the quality and resilience of the medical education program as a whole, or of any of its phases or individual components.
    - In addition, for the purposes of this policy, 'systemic review' refers to the use of this process to identify program weaknesses and opportunities for improvement, and to develop and assert initiatives to address and monitor these findings
6. **The Policy:** The Curriculum and Educational Policy Committee (CEPC) shall systematically review the curriculum in a continuous 3-year cycle in the following order:
- Year 1 – curriculum as a whole (including the fulfillment and adequacy of the medical education program goals and objectives)
    - Resources:
      - Educational Program Goals and Objectives (EPGOs)
      - The Annual Educational Program Evaluation Report
      - Academic Catalog
      - Course and Clerkship Syllabi
      - Table of course, clerkship, and assessment linkages to the EPGOs
      - Year 1-2 and Year 3-4 Committees, Evaluation Committee, and Student Curriculum and Evaluation Committee

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- Any other educational program data as deemed necessary by members of the CEPC
- Process:
  - The CEPC has discretion to determine and modify the processes for systematic review of the curriculum as a whole.
  - Beginning in the fall semester the CEPC will determine and document the processes for systematic review of the curriculum as a whole. The process shall be completed prior to the beginning of the next academic year.
  - The process shall include:
    - Critical review of the resources listed above
    - Assessment of the program's fulfillment of each of the EPGOs
    - Specific identification of program strengths and weakness relative to its EPGOs
    - Directives for corrective actions and monitoring as indicated/necessary
  - The outcomes of the review shall be included in the minutes of the CEPC and be reported to the Faculty Council.
- Year 2 – pre-clerkship phase and components (courses and other requirements)
  - Resources:

The resources will be essentially the same as listed above for the systematic review of the curriculum as a whole, but with specific attention to the structure and functions of the pre-clerkship phase (years 1 and 2) and its curricular components.
  - Process:
    - The CEPC has discretion to determine and modify the processes for systematic review of the pre-clerkship phase and its curricular components.
    - Beginning in the fall semester the CEPC will determine and document the processes to be followed. The process shall be completed prior to the beginning of the next academic year.
    - The outcomes of the review shall be included in the minutes of the CEPC and be reported to the Faculty Council.
- Year 3 – clerkship phase and components (year 3-4 clerkships and other requirements)
  - Resources:
    - The resources will be essentially the same as listed above for the systematic review of the curriculum as a whole, but with specific attention to the structure and functions of the clerkship phase (years 3 and 4) curriculum components.
  - Process:

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- The CEPC has discretion to determine and modify the processes for systematic review of the clerkship phase and its curricular components.
  - Beginning in the fall semester the CEPC will determine and document the processes to be followed. The process shall be completed prior to the beginning of the next academic year.
  - The outcomes of the review shall be included in the minutes of the CEPC and be reported to the Faculty Council.
- Quality improvement initiatives identified during the phase review process will be tracked centrally and progress will be reported back to the CEPC according to the identified timeline.

Between curriculum phase reviews and prior to the start of each academic year, the CEPC shall receive interim reports from the assistant dean for basic science instruction (for the pre-clerkship phase), and the assistant dean for clinical instruction (for the clerkship phase), describing proposed modifications to the courses and clerkships, and the CEPC may conduct additional problem-focused reviews on an 'off-cycle' basis as it deems necessary due to any of the following circumstances:

- For courses/clerkships/other graduation requirements:
  - A change is made in curricular content or assessment plan affecting one or more course or clerkship.
    - *For example: A new faculty member proposes to the Year 1-2 Committee that content related to a particular basic science topic is reduced, simplified, or eliminated, and other faculty members and/or the assistant dean for medical education for basic science instruction identifies this as a significant risk to the course's fulfillment of its approved syllabus.*
  - A change is made in the sequencing of curricular content affecting one or more course or clerkship.
    - *For example: An SPM course unit director proposes that a unit of the SPM course, or a clinical presentation within a unit of the SPM course, be shifted elsewhere in the unit – or to another unit (affecting the instructional plans for the other pre-clerkship courses).*
    - The availability or function of the educational spaces or other resources regularly utilized by one or more course or clerkship changes to the extent that modification of its approved instructional methods or assessment plan is required. *For example: A major affiliated hospital decides to close a unit or program upon which a required clerkship is reliant.*
  - As requested by the dean, the associate dean for medical education, or the CEPC as a whole, based on a change in a curricular component's outcomes/performance.
    - *For example: There is an abrupt drop in student performance on one or more SPM course end-of-unit exams, or on one or more*

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Clerkship-associated NBME subject exams.

- *For example: There is an abrupt drop in student satisfaction with a particular curriculum component based on internal program evaluations and/or the AAMC Graduate Questionnaire*
- Phase (pre-clerkship, clerkship):
  - A change is made in curricular content or assessment plan affecting the structure and outcome measures of either the pre-clerkship or clerkship phase.
  - A change is made in the sequencing of curricular content affecting the structure and outcome measures of either the pre-clerkship or clerkship phase.
    - *For example: A change is proposed in the sequence of the units in year 1 or material covered in a unit is moved from year 1 to year 2.*
  - The availability or function of the educational spaces or other resources regularly utilized by one or more course or clerkship changes to the extent that modification of the structure of the curricular phase (including the relationships between its components) is required.
    - *For example: There is a fire in the anatomy lab, instruction must be relocated and reconfigured for 1-2 years.*
  - As requested by the dean, the associate dean for medical education, or the CEPC as a whole, based on changes in the outcomes associated with the phase.
    - *For example: There is an abrupt change or developing trend in student performance on USMLE Step 1 that suggests inadequate performance of the pre-clerkship curriculum.*
    - *For example: AAMC GQ data suggests a precipitous decline in the clerkship phase learning environment and/or clinical instruction.*
- Curriculum as a whole:
  - The PLFSOM educational program goals and objectives are modified.
    - *For example: A new educational program objective is proposed to specifically address the acquisition of skills in the performance of common clinical procedures.*
  - A change in a course, clerkship, other graduation requirement, or curriculum phase, reduces or eliminates content and/or assessment elements identified as essential to fulfillment of an educational program objective.
  - As requested by the dean, the associate dean for medical education, or the CEPC as a whole, based on changes in the outcomes associated with the performance of the curriculum as a whole.
    - *For example: The PLFSOM graduation rate trends downward and/or becomes inconsistent with national benchmark data.*
    - *For example: Poor performance by PLFSOM graduates as evidenced by USMLE Step 3 and/or feedback from GME program directors.*

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