

# **GUIDELINES FOR THE CONDUCT OF ACCREDITATION SURVEY VISITS**

2006-2007

## **LIAISON COMMITTEE ON MEDICAL EDUCATION**

[www.lcme.org](http://www.lcme.org)

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*Guidelines for the Conduct of Accreditation Survey Visits*  
Liaison Committee on Medical Education

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## GENERAL INFORMATION

### INTRODUCTION

The accreditation process assures that medical schools meet accepted national standards of structure, function, and performance. It assures society and the medical profession that graduates of accredited schools are appropriately prepared for the next stage of their professional training.

The Liaison Committee on Medical Education (LCME) is recognized by the physician licensure boards of all U.S. states and territories and the Canadian provinces, and by the U.S. Department of Education as the agency for accreditation of educational programs culminating in the Doctor of Medicine degree. The LCME is sponsored by the American Medical Association (AMA) Council on Medical Education and the Association of American Medical Colleges (AAMC). The sponsors approve accreditation standards but empower the LCME to make its own final decisions about accreditation status. The LCME accredits Canadian medical schools in conjunction with the Committee on Accreditation of Canadian Medical Schools (CACMS).

### THE LCME SECRETARIAT

There are LCME Secretariat offices in Chicago and Washington, D.C. Primary responsibility for coordinating survey visits, hosting meetings, and representing the LCME during the 2006-2007 academic year rests with the Secretariat office in Washington, DC. Inquiries should be sent to the LCME at:

Association of American Medical Colleges  
2450 N Street, NW  
Washington, D.C. 20037  
Telephone: 202-828-0596  
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Inquiries to the Secretariat office in Chicago, IL should be sent to the LCME at:

American Medical Association  
515 North State Street  
Chicago, IL 60610  
Telephone: 312-464-4933  
Fax: 312-464-5830

E-mail communication to the LCME can be sent to the LCME electronic mailbox, [lcme@aamc.org](mailto:lcme@aamc.org).

The LCME staff welcomes the opportunity to respond to questions and comments. For the latest information on medical school accreditation, visit our Web site at: [www.lcme.org](http://www.lcme.org)

## **PURPOSES OF THE SURVEY**

Accreditation serves two purposes: 1) to determine if an institution or program is in substantial compliance with accreditation standards and 2) to promote institutional improvement and renewal. The accreditation process is characterized by:

1. Self-analysis (the institutional self-study) by the school,
2. On-site review by a team of evaluators, and
3. Review of the survey team's written report by the LCME.

At the completion of the survey visit, the team provides an oral report to institutional executives on the program's strengths, items of partial or substantial noncompliance with accreditation standards, and transition issues, if any. The LCME (and the CACMS, if applicable) decides the status of accreditation and any requirements for follow-up reports or site visits, on the basis of the survey team's final written report and any related information.

## **COMPOSITION OF THE SURVEY TEAM**

The principal LCME Secretary is responsible for appointing survey teams. The team for a full accreditation survey of a U.S. school typically consists of five members drawn from a pool of experienced medical educators, practitioners, administrators, and professional members or staff of the LCME and CACMS. An LCME public or student member also may serve on the team. Occasionally, the survey team is joined by a representative from the appropriate regional accreditation agency or state department of education, or an official of the U.S. Department of Education.

For full surveys of Canadian medical schools the team composition is similar, with one team member being from the United States. The CACMS and LCME Secretaries are responsible for appointing team members from their respective countries.

For a limited survey, the team generally consists of three members.

For full surveys, an individual with extensive experience in the accreditation process is designated as chair and leads the team's on-site activities. The team secretary is responsible for developing the visit agenda, coordinating visit arrangements, and producing the survey report. Of the remaining three members, one is generally designated as a "faculty fellow." The faculty fellow is a newcomer to the accreditation process who has been designated by his or her school to gain hands-on experience before the school begins its own self-study. A member of the LCME or its professional staff is present on each full survey team to assure consistency in the assessment process.

## **FULL SURVEY VISITS**

The LCME Secretary establishes the survey dates, and sends pre-survey documents (including the medical education database and instructions for the self-study) to schools approximately fifteen months before the visit. The school should send its completed medical education database, self-study summary report, and other materials to survey team members and the LCME/CACMS offices three months before the site visit.

**Visit Structure.** Full survey visits begin on late Sunday afternoon with a team caucus, followed by a meeting with the dean. During the visit, the team will meet with those persons or groups needed to obtain or verify necessary information, including faculty, students, and administrators. Meetings with faculty members and students should take place without the presence of institutional leaders, unless requested by the team. The team will successively develop and refine its list of summary findings, beginning at the arrival caucus and continuing during work sessions each evening and prior to the exit conferences.

Visits conclude on Wednesday afternoon after oral exit conferences with the dean and then with the university chief executive. Generally, the visitors meet privately with the dean at both the entrance and exit conferences. At the exit conferences with the dean and university executive (president, vice-president, chancellor, or provost), the team chair should make clear that the survey team's oral report is a preliminary statement of findings and conclusions and not a recommendation or decision on accreditation. The chair should also note that the oral exit report and draft survey reports are strictly confidential.

**Team Chair.** During the survey visit, the chair makes introductions and explains the purpose of the survey. He or she leads the discussions as the survey team works to develop its findings about the program's compliance with accreditation standards. The chair reports the team's findings and conclusions to institutional executives at the conclusion of the site visit.

**Team Secretary.** In the two or three months before the visit, the team secretary finalizes the visit arrangements, including the survey visit schedule, and ensures that team members have their specific assignments for the visit and all necessary materials. The secretary handles oral and written communication with the school, other team members, and the two LCME Secretaries. All team contact with the school should be through the team secretary. The secretary is responsible for completing the survey report from the written findings and evaluations prepared by team members.

**Team Members.** Team members, including the faculty fellow, should prepare for their assigned areas by reviewing the database and self-study in depth. They should contact the team secretary if they believe that pertinent information is missing or ambiguous. During the survey visit, team members will be responsible for leading the discussion in the sessions devoted to their assigned areas. Team members are encouraged to bring portable computers to facilitate report preparation. It is essential that all team members participate in the exit conferences on the final day.

**School Feedback.** After the site visit, the school will have the opportunity to evaluate the survey team and the accreditation process. The results are sent to the office of the principal Secretary and are not available to the LCME when it makes its decision about the school's accreditation status. Information obtained from the evaluations is used for ongoing review, assessment, and improvement of the accreditation process.

**Visit Expenses.** Costs of LCME surveys and related administrative expenses, including reimbursement of site visitors (excluding faculty fellows), are borne by the LCME via its sponsoring organizations. Survey team members receive reimbursement forms from one or the other sponsoring organization. Canadian site visitors are reimbursed by the CACMS. Schools being surveyed are not responsible for expenses related to the site visit, with the exception of visits for preliminary or provisional accreditation.

## LIMITED SURVEY VISITS

Limited survey visits, usually involving three team members, are focused on specific issues and, therefore, are shorter in duration. Team members generally arrive on Sunday for a team caucus and entrance conference with the dean, as in a full survey. Visits typically conclude on Tuesday afternoon or

Wednesday morning, depending on the number and breadth of areas to be reviewed, following exit conferences with the dean and the senior university official. Instead of the medical education database and institutional self-study prepared for full surveys, a customized limited database is developed by the school. Instructions for preparing this “mini-database” are sent to the school by the LCME Secretariat about 6-8 months before the visit. The school is expected to send the completed materials to survey team members and the LCME Secretariat offices at least a month before the visit. The limited visit will involve meetings with institutional administrators, faculty members, and students as needed to address the issues being explored during the survey. The final report of a limited survey is brief and focused, conveying the team’s conclusions regarding compliance with accreditation standards and progress on areas in transition.

## CONFIDENTIALITY OF SURVEY MATERIALS AND TEAM FINDINGS

Information about the school, whether contained in the pre-survey documents or obtained on site, is considered confidential and should not be disclosed to other parties. A confidentiality statement is included in the LCME Secretariat’s mailing to team members, and must be signed and returned before the survey visit. Either at the end of the site visit or after reviewing the draft report, survey team members should dispose of materials related to the survey. Previous reports can be returned to the LCME Secretariat. Other documents or correspondence not needed for writing the survey report can be left with the school at the conclusion of the site visit. After reviewing the draft survey report, team members should destroy any remaining documents (including the draft report) related to the accreditation survey.

The team's oral report of findings and conclusions also is confidential. There should be no public release by the team members or by the school of any of the findings. The dean and chief executive (president or chancellor) should wait until receipt of the final survey report and accompanying letter of accreditation before making any public comments on the site survey. The dean and university executive are provided with final copies of the survey report for public disclosure as they deem appropriate.

## THE SURVEY REPORT

**Timeline for completing the survey report.** The following chart gives the important deadlines for completion of the survey report. Detailed explanations follow immediately afterward.

7-10 days following survey	Deadline for team members to submit their write-ups to the team secretary.
3-4 weeks following survey	Team secretary first sends the DRAFT report to both LCME Secretaries (and CACMS Secretary for Canadian surveys)
4-6 weeks following survey	Team secretary then sends the draft to each team member and to the dean of school for comment.
2 months following survey	Team secretary submits final report to LCME Secretary responsible for printing.
At least 2 weeks prior to LCME meeting	LCME Secretary sends report to members of the LCME for review prior to meeting.
2 weeks following LCME meeting	LCME Secretariat notifies school of accreditation decision and includes a copy of the final report.
4-8 weeks following LCME meeting	LCME Secretariat notifies team members of

accreditation decision.
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**Content and construction of the survey report.** The report should be organized according to the *Survey Report Guide*, available on the LCME Web site [www.lcme.org/pubs.htm]. Appropriate references should be made to the institutional self-study and medical education database. The survey team's summary findings should be amply supported by documentation in the body of the report and the appendix.

**Preparing the draft report.** To assure prompt consideration of the school's accreditation status, it is essential to complete the survey report as quickly as possible. Team members should submit their sections to the team secretary within seven to ten days after the site visit, if not by the conclusion of the survey visit. The draft report should be completed within four to six weeks after the visit. The team secretary should stamp it DRAFT and send a copy (including the appendices) simultaneously to both LCME offices (and to the CACMS Secretary for Canadian surveys). The LCME Secretariat will review the draft report and communicate with the team secretary about organization, format, internal consistency, and thoroughness of the draft report.

Upon receiving the comments of the Secretariat, the team secretary should make any needed revisions and send the revised draft to the survey team members and to the medical school dean. The cover memo accompanying the draft report should request each recipient to review it within seven to ten working days, returning the marked-up version or comments to the team secretary for final revision. Team members should assure that the report faithfully represents their findings and consensus assessments. The dean should be instructed to check the draft for factual errors. If the dean disputes the tone, findings, or conclusions of the report, and cannot reconcile disputed issues with the team chair and secretary, he or she may write a letter to the LCME Secretariat for inclusion in the LCME's consideration of the school's accreditation status.

**Preparing the final report.** After revisions by the team secretary, the final report should be sent to the LCME office assigned to print it. One-sided originals should be provided. The team secretary should sign the report's cover memo to the LCME before sending the final report. Final survey reports must be received by the LCME Secretariat no later than two months after the survey visit, to allow adequate time for printing and review by LCME members. In addition to providing a printed copy of the final team report, the team secretary should send an electronic copy of the report's narrative section to the LCME Secretariat. The LCME Secretariat should be promptly notified if the team secretary anticipates any delays in providing the final report.

**Printing and distribution of the final report.** Responsibility for printing reports is divided equally between the two LCME offices throughout the course of the year. The team secretary will be notified of the printing assignment in a memo included in the package of background materials sent to team members three months prior to the survey. After the report is printed, it is distributed to each member of the LCME for review prior to the next scheduled meeting. File copies of the report are kept at both LCME offices.

## NOTICE OF LCME ACTION

LCME meetings are held in October, February, and June. When the LCME meets, it reviews the survey report and makes a decision about the accreditation status of the medical education program. After the meeting, the school is notified of the LCME's action in a letter from the principal Secretary to the president of the university (or the equivalent chief executive of the academic institution) with a copy to the dean of the medical school. A copy of this letter of accreditation conveying the LCME decision is bound into the final copy of the survey report. The accreditation status determined by the LCME is considered public information, but the LCME holds the survey report and its findings confidential. The

surveyed institution is at liberty to make public the survey report and the details of the LCME decision as it deems appropriate.

## FEEDBACK TO SURVEY TEAM MEMBERS

Following notification to the school, the LCME Secretariat will send each member of the survey team a copy of the letter transmitting the accreditation decision. Any team member who wants to see the final report should contact the principal Secretariat office.

## DOCUMENTS RELATED TO THE ACCREDITATION SURVEY

Approximately 15-24 months before the visit, the school will receive printed and electronic copies of the medical education database, instructions for its completion, and materials for assembling the print version. The mailing will also include a printed copy of the LCME standards document *Functions and Structure of a Medical School*.

Other publications useful in preparing for an accreditation survey can be obtained from the LCME web site [[www.lcme.org/pubs.htm](http://www.lcme.org/pubs.htm)]. Both school representatives and survey team members should download or print the materials appropriate for their responsibilities in the accreditation process. The additional available information includes:

- ***Rules of Procedure.*** This document describes LCME organization and function, the survey process, accreditation decisions and reporting, development and revision of standards, complaint and appeal procedures, and other policies and procedures of the LCME.
- ***Survey Report Guide.*** This document describes the content and format of reports for full and limited surveys, including the specific topics that should be addressed in a full survey report. Each team member should refer to this document when writing sections of the survey report. Schools undergoing accreditation review may also find it helpful, since it includes the specific questions that team members are expected to answer in their evaluation of the medical education program.
- ***The Role of Students in the Accreditation of Medical Education Programs in the U.S. and Canada.*** This outlines the roles and responsibilities of students in the accreditation process, and provides guidelines for topics to be covered in the student-prepared analysis of the medical school. The school should be sure that student leaders entrusted with responsibility for managing the student analysis have access to this document.
- ***Guide to the Institutional Self-study.*** This is provided to medical schools as a tool for conducting an institutional self-study and compiling a summary report of self-study findings. This document frames issues for the leaders of the self-study groups, and the individuals participating in the self-study committees.

About three months prior to the survey visit, the school and survey team members will receive a list of team members with names, titles, postal and e-mail addresses, and phone/fax numbers. All contact regarding the LCME accreditation survey should be coordinated through the team secretary or the principal LCME Secretary.

Survey team members also receive a copy of the prior survey report (and any limited survey reports, if applicable), copies of any progress reports submitted to the LCME or CACMS by the school since its last

full accreditation survey, and the publications *Functions and Structure of a Medical School* and *Rules of Procedure*. Also included is a copy of all correspondence from the LCME and/or CACMS officially transmitting accreditation decisions subsequent to the last full accreditation survey. In the case of a limited survey, a copy of the letter to the school describing elements of the mini-database to be submitted prior to the survey will be appended.

The medical school dean's office should send a copy of the completed medical education database and institutional self-study summary report to each member of the survey team and to both LCME Secretariat offices (and to the CACMS Secretary, if applicable) about three months before the site visit. The school also should provide team members with a school bulletin or catalog, a campus map, and information about lodging and ground transportation during the site visit

PLEASE NOTE: If a member of the LCME Secretariat staff is assigned as the survey team secretary, the school must send two complete sets to that address (one for use by the team secretary during the survey, and one for the LCME permanent files.)

### **SUGGESTED SCHEDULE FOR A FULL ACCREDITATION SURVEY**

The following prototype schedule serves as a guide to the topics customarily reviewed during a full accreditation survey. Team secretaries should feel free to modify the prototype schedule as necessary to accommodate the distinctive characteristics of the school being visited, being mindful of the need to assess compliance with all accreditation standards during the visit. Sessions may be expanded, shortened, or altered where appropriate to assure that all topics to be addressed in the survey report are reviewed; when necessary, the team should divide into two groups to provide sufficient coverage of all issues. Any schedule revisions that would result in a visit ending later than Wednesday afternoon should be cleared with the principal LCME Secretary and communicated to the school so that appropriate lodging arrangements can be made.

The school, in consultation with the team secretary, should select the most relevant individuals to participate in each session. The number of participants in any session should be limited to those who are most directly involved or knowledgeable about the topic at hand.

### **TEMPLATE: SITE VISIT FOR FULL ACCREDITATION SURVEYS<sup>1</sup>**

#### **Accreditation Survey Visit to (School Name) by ad hoc Team Representing the Liaison Committee on Medical Education, (Visit Date)**

Ad hoc survey team representing the LCME:

John Brown, M.D. (Chair) Dean, Francis Key Medical School,  
Baltimore, M.D. (Internal Medicine)  
Samuel Smith, Ph.D. (Secretary) Associate Dean for Curriculum, Robert E. Lee  
Medical School, Arlington, VA (Microbiology)  
Jane Jones, M.D. (Member) Associate Dean for Student Affairs, Alexander Hamilton  
School of Medicine, Trenton, NJ (Pediatrics)  
Daniel Green, Ph.D. (Member) Vice Dean, University of Idaho School of Medicine,  
Boise, ID (Anatomy)  
Irene Booth, M.D. (Fellow) Assistant Dean for Basic Sciences, Mt. Sinai Medical

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<sup>1</sup> The team secretary in collaboration with the visit coordinator can adjust the topics and time allotted for individual sessions, as well as the necessity for team splitting, in order to accommodate the distinctive characteristics of the school being visited.

## School of the City College of Pittsburgh, PA (Pathology)

Sunday: Background, Governance, Administration and Overview

5:00 Team caucus

6:00 Dean's perspective: Accomplishments, goals, challenges

Discussion items include:

- Strengths and weaknesses of the school; changes since last LCME survey, if appropriate; major current issues
- School's goals and directions; principal findings of institutional self-study
- Organizational relationships of college with university and teaching hospital(s); organization of dean's staff; interaction of dean with college's governance organization, councils, committees and academic departments
- Financial status and projections
- Research programs and funding
- The status of facilities for education, research and patient care
- Faculty development: appointment tracks, promotion, tenure

Monday: Educational Program

7:45 Team is collected at hotel (time tentative based on distance to school)

8:30 Educational program design, implementation, management, and evaluation

Discussion of the following topics:

- Educational objectives, outcome measures and how they are integrated throughout the curriculum
- General design of the curriculum; coverage of disciplines and subject areas required by accreditation standards
- Appropriateness of instructional methods and student evaluation strategies for the achievement of the school's objectives
- Resident preparation for teaching and evaluating students
- System for implementation and management of the curriculum; adequacy of resources and authority for the educational program and its management
- Methods for evaluating the effectiveness of the educational program and evidence of success in achieving objectives; comparability of educational experiences at all sites

10:30 Break

10:45 Library and information services

Role of the library and information services in the educational program; adequacy of resources and services for the achievement of institutional goals

11:15 Tour of educational and support facilities (led by student guides)

Inspection of lecture halls, small group classrooms, labs, and study areas used for pre-clerkship education of medical students. Visit to library and computer learning facilities. If time allows, team

may also review clinical skills labs, student lounge and relaxation areas, or student services offices. The team may be divided or tour as a group.

Noon Lunch with pre-clerkship students

Discussion of student life; personal, academic, career and financial counseling, financial aid; health services; infection control education and counseling; the learning environment and student mistreatment policies; student perspective of the curriculum, teaching, and evaluation/grading; students' role and perceived value of student input in institutional planning, implementation, evaluation

1:30<sup>2</sup> Required Courses and Clerkships

Discussion of notable achievements and ongoing challenges in individual courses and clerkships; contributions of individual courses and clerkships in achieving institutional educational objectives; adequacy of resources for education, including availability of faculty to participate in teaching; preparation of residents and graduate students for their roles in medical student teaching and evaluation

1:30 (Split team) First-year Courses

2:30 (Split team) Second-year Courses

3:30 Break

3:45 (Split team) Required Clerkships

#### Tuesday: Students, Educational Resources, Finances, Departments

7:45 Team is collected at hotel

8:30 (Split team) Group A: Academic counseling & learning environment (including student promotion and dismissal policies and due process issues)

Effectiveness of academic counseling, policies and procedures for student advancement and graduation and for disciplinary actions; review standards of conduct and policies for addressing student mistreatment,

Group B: Career counseling; Electives; Fourth-year courses

Career guidance strategies; advanced and subspecialty clerkships and electives for rounding out clinical education of medical students

9:15 (Split team) Group A: Admissions; Financial aid & debt management counseling and services

Discussion of admissions process, selection criteria, quality of applicant pool and matriculants; policies and goals for diversity; financial aid services and debt counseling;

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<sup>2</sup> All of the Monday afternoon sessions are reserved for review of required courses and clerkships. The team secretary has full discretion to determine if that review should be organized by academic year or some other organizing principle, and whether the team needs to split to cover all of the required course and clerkship offerings.

Group B: Personal counseling, Health services

Review of student health services, health and disability insurance; personal counseling and mental health services; immunizations and policies regarding exposure to infectious diseases and environmental hazards

10:15 Break

10:30 Special programs, MD/PhD, joint degree programs, research for medical students or educational innovations<sup>3</sup>

Discussion of special educational opportunities, MD/PhD and other joint degrees, research opportunities

11:00 Hospital tour<sup>4</sup> (led by student guides)

Inspection of clinical educational and student support facilities

Noon<sup>5</sup> Lunch with junior and senior students

Discussion of student life; personal, academic, career and financial counseling, financial aid; health services; infection control education and counseling; the learning environment and student mistreatment policies; student perspective of the curriculum, teaching, and evaluation/grading; students' role and perceived value of student input in institutional planning, implementation, evaluation

1:30 Finances<sup>6</sup>

Adequacy of finances for the achievement of the school's missions; recent financial trends and projections for various revenue sources; financial health of and market conditions for the clinical enterprise

2:15 Resources for clinical education

Meeting with the leadership of major clinical education facilities, focused on the adequacy of resources for medical student education (physical facilities, patient numbers and variety, regulatory or compliance constraints, etc.). The team may split to allow for individual meetings or the team may meet with all affiliates as a group.

3:00 Break

3:15 Basic science departments

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<sup>3</sup> This session may be used to cover special educational opportunities (e.g., community service programs, rural health education programs, etc.), or educational topics or strategies of which the school is particularly proud

<sup>4</sup> Team members should NOT review student write-ups of patients or patient charts during the hospital tour. The tour should focus on the areas of student learning and support (conference rooms, library, on-call rooms, etc.).

<sup>5</sup> If a visit to a geographically remote site is needed, half of the team should use the Tuesday afternoon block for that purpose while the remaining half reviews departments and institutional finances.

<sup>6</sup> If the major teaching hospital is owned by the school/university, finances and clinical affiliates may be combined.

Successes and ongoing challenges in administrative functioning of departments; adequacy of resources for all missions (research, scholarship, teaching); departmental support for faculty and graduate programs, balancing of research and other academic demands on faculty

4:15 Clinical departments<sup>7</sup>

Successes and ongoing challenges in administrative functioning of departments; adequacy of resources for all missions (clinical, research, scholarship, teaching); departmental support for faculty and residents; balancing of clinical and academic demands on faculty

Wednesday: Faculty, Academic Environment, Exit Conferences

7:30 Team is collected at hotel

8:00 Light breakfast with junior faculty

Discussion of faculty development and mentoring; positioning for promotion and tenure; teaching and evaluation skills; perceptions of curriculum and students; understanding of institutional goals; role in faculty governance; faculty life

9:00 Institutional faculty issues (Tenure and promotion, faculty governance, faculty development, etc.)

Discussion of faculty appointment, promotion, and tenure policies; faculty development opportunities; effectiveness of faculty governance; faculty compensation and incentives; opportunities for collegial interaction among faculty

10:00 Break

10:15 Graduate program in basic sciences; Basic science and clinical research

Discussion of funding, quality, and review of graduate training programs in basic sciences; levels of scholarly productivity and health of the research enterprise

11:00 Team Caucus and Lunch (Private Session)

1:00 Exit Conference with Dean

1:45 Exit Conference with University Leadership and the Dean

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<sup>7</sup> The team secretary and chair and the school should determine if it is necessary to meet all of the clinical department chairs, or only those whose departments offer the major required clerkships. In the former case, the team may need to split to provide adequate coverage.

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Additional notes on the prototype visit schedule:

- a. Because of the limited time available for the initial team caucus on Sunday evening, team members may be asked to submit their preliminary assessments of strengths and potential problems to the secretary in advance of their arrival. The secretary can then assemble a preliminary list of findings for discussion during the initial caucus.
  - b. If a visit to one or more geographically remote sites is required, the meeting to discuss finances should be conducted late in the morning on Tuesday (where the hospital tour is indicated in the schedule). The team can then divide to visit the remote campus before or after lunch with third-year and fourth-year students.
  - c. If the visit takes place very early in the academic year it may be more sensible in the Monday lunch meeting to substitute two or three third-year students for a corresponding number of first-year students, since the latter group will have had very limited exposure to the school, its educational program, and most student services. For similar reasons, two or three residents who are recent graduates of the school can be included in the Tuesday lunch.
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### **SUGGESTED SCHEDULE FOR A LIMITED ACCREDITATION SURVEY**

The Sunday meetings preceding the first full day of a limited visit should be structured in a format similar to that of a full survey -- team caucus and entrance conference with the dean, with a team dinner after the latter. The organization of each day during the visit will depend on the issues to be addressed. The team secretary should work closely with the school to determine the content of individual sessions and the participants in them. The survey will conclude in the same manner as a full survey, at consecutive exit conferences with the dean and the university executive.

### **EXPENDITURE REPORT PROCESSING**

Team chairs, secretaries, and members will be reimbursed for all reasonable out-of-pocket expenses incurred during the trip, in accordance with LCME travel policies (see below). The two LCME offices divide responsibility for expense reimbursement. When team members receive their mailing from the LCME Secretariat three months prior to the survey, the cover letter will indicate which sponsoring organization (AAMC or AMA) will reimburse expenses for that particular visit, and the appropriate reimbursement form will be included as an enclosure. Any questions regarding reimbursable expenses should be directed to the LCME office responsible for the reimbursement. Canadian surveyors are reimbursed by the CACMS.

All participants are expected to arrange their own (coach) air travel. In order to obtain the most economical fare, reservations should be made well in advance of the visit. If a discount fare requires staying over an extra night, the LCME will reimburse the participant for the additional hotel and meal expenditures, if the savings warrant. The school should reserve hotel accommodations for survey team members, but the team members are responsible for all hotel charges. Team members should use a credit card for hotel and food expenses, and obtain receipts for cab fares or any other applicable expense incurred. Team members must pay their hotel bill upon check-out, as the medical school is not allowed to pay these expenses for the team.

Hotel and travel expenses for faculty fellows and observers are the responsibility of their own institutions or agencies and will not be reimbursed by the AAMC, AMA, or CACMS.

## LCME TRAVEL REIMBURSEMENT POLICY

*In order to quickly process reimbursement, original receipts must be provided, particularly for hotel charges and airfare.*

### General

The LCME travel/reimbursement policy conforms with the policy of its AAMC and AMA sponsors. The general policy of both sponsors is that arrangements should provide the most economical combination of expense, time and convenience. The LCME expects its representatives to travel in reasonable comfort and assumes that everyone will use good judgment in distinguishing between comfort and extravagance.

While it is understood that strict adherence to these regulations will not always be possible, significant departures from the regulations must be justified and approved by the principal LCME Secretary before travel reimbursement will be made.

### Reimbursable Travel Expenses

Travelers on LCME business may be reimbursed for all actual travel expenses that are reasonable and necessary. Claims for reimbursement of travel expense should be submitted as soon as possible after the completion of the travel on the form provided by the LCME Secretariat.

**Air and train travel.** Air and train travel must be by coach or economy class transportation whenever available. If this class of transportation is not available, notation to this effect must be made on the copy of the ticket.

Reimbursement for air and train travel cannot be made unless the original ticket stub accompanies the claim for reimbursement. If electronic tickets were used, stamped boarding passes and the flight itinerary should be submitted in place of a ticket stub. Tickets issued using free mileage coupons cannot be reimbursed.

**Travel by private car.** Travel by personal car is authorized when this mode of travel is preferred by the traveler and is less expensive than air or train fare. Reimbursement will be at the rate determined by the AMA or the AAMC, not to exceed the cost of economy airfare between the points traveled.

**Rental cars.** The rental of cars is discouraged, and its use should be limited to those circumstances which make other transportation modes impractical or unsatisfactory. The Secretariat office should be consulted prior to making arrangements for a rental car.

**Taxi cabs.** Taxi cabs should generally be used for relatively short distances. For transportation to and from airports, if airport limousine or bus is available and convenient, it should be used in lieu of a taxi. Charges should be described on the expense reimbursement form.

**Hotel accommodations.** The dean's staff of the school being surveyed should make hotel reservations for survey team members, including a suite for the chair or a conference room for team use (whichever is less expensive), guaranteed for late arrival. Each surveyor is expected to pay his or her hotel bill upon departure. **The school being surveyed cannot pay for the surveyors' hotel costs.** The school should check with the principal Secretariat office if there any questions regarding reasonable room rates, especially in expensive cities.

**Restaurant expenses.** Restaurant expenses are fully reimbursable, as long as reasonable judgment is exercised about costs. In general, it should be rare for dinner expenses, including beverages, to exceed \$100 per person.

**Telephone, e-mail, and faxing.** Reimbursement for telephone charges and electronic communication is appropriate for the conduct of business activities. Whenever possible, advantage should be taken of the reduced rates available at certain hours.

**Tipping.** Appropriate tips (for example, waiters, taxi, housekeeping services) are an allowable expense.

**Non-reimbursable expenses.** The following personal charges are not reimbursable:

- a. Laundry and valet services
- b. Travel insurance
- c. Exercise facilities
- d. Entertainment (i.e., hotel in-room movies)

**Prorating expenses.** If the traveler combines business for another organization with travel for the LCME, expenses should be prorated between the organizations. Photocopies of receipts are acceptable in this case. Submitted documentation should include a brief note stating that the expenses were shared with another trip.

### **Required Receipts**

- Requests for reimbursement must be accompanied by the following original receipts:
- The ticket stub for all commercial transportation, or stamped boarding passes and itinerary when electronic tickets are used.
- Hotel charges.
- Car rental charges.
- Any other expenditure of \$25 or more, including taxi fares.

## SCHOOL RESPONSIBILITIES

**Please read the General Information section for important information.**

### Visit Coordinator

When the school receives pre-survey materials from the LCME about 15 months prior to the date of the site visit, the dean should select a person to coordinate the visit. The site visit coordinator need not be the coordinator of the school's self-study process, although the two roles can be combined. The visit coordinator designated by the school will serve as the liaison with the team secretary about scheduling and visit arrangements.

### Survey Team Membership

A list of team members, with titles and contact information, will be sent to the dean at least three months prior to the survey. The dean should contact the LCME Secretary promptly if any team member is deemed to be inappropriate due to conflict of interest or other valid reasons.

### Hotel Arrangements

The dean's office should make hotel reservations for each member of the survey team, obtaining an institutional or educational discount if available. The school should instruct the hotel to guarantee the rooms for late arrival and to send a reservation confirmation directly to each team member. **The hotel also should be notified that team members will be paying their own bills.** Each team member will need a single room, with either a suite for the chair or a conference room for the team to work in during the evenings of the visit (Sunday, Monday, and Tuesday).

The team will arrive during the day on Sunday, staying three nights for a full survey and two or three nights for a limited survey. The team should use a quality, full-service hotel, preferably near the campus and convenient to restaurants, taxi service, etc. The hotel should be of appropriate quality, but not extravagant in cost.

### Ground Transportation

LCME site visitors will make their own travel arrangements. Instructions about transportation options from airport to hotel should be provided. In cases where the airport is a substantial distance from the medical school--or if taxicabs are not readily available at the airport--it may be necessary for the dean's office to arrange ground transportation between the airport and hotel. If so, these arrangements should be coordinated with the survey team secretary.

The dean's office should decide how to transport team members between their hotel and the medical school and to any healthcare facilities they will visit. The team secretary and visit coordinator should determine where and when the team will be picked up or met at the hotel, and this information should be included in the survey visit schedule.

### The Team's "Home Room" at the School

The team will need a home room at the school equipped with a computer and printer compatible with the operating system used by the team secretary, or access to these things in an adjacent area. The home room should have a large conference table and be close to the dean's office, so that staff can control access and adjust the schedule as needed. The dean's office should provide any additional material the team may need in the home room, including copies of self-study subcommittee reports and any other documents requested by the team, such as course evaluations, syllabi, etc. Continental breakfast and beverages should be available each morning so that the team can leave the hotel each day without taking time for breakfast.

It is helpful to provide tent cards for each team member and those with whom they will meet, to assist with introductions as they converse around the conference table. Team members should also have name tags that clip on or hang from a neck chain.

### Completion and Mailing of Pre-Survey Materials

About three months prior to the site visit, the dean's office should send a copy of (a) the medical education database, (b) the summary report of the institutional self-study task force, and (c) copies of all bulletins and catalogs **to each team member and to both LCME Secretariat offices:**

Robert H. Eaglen, Ph.D.  
Interim LCME Secretary, 2006-2007  
Association of American Medical Colleges  
2450 N Street N.W.  
Washington, DC 20037

Frank A. Simon, M.D.  
LCME Secretary, 2007-2008, and  
Director, Division of Undergraduate Medical Education  
American Medical Association  
515 North State Street  
Chicago, IL 60610

Canadian schools also should send a copy of these materials to:

Nicholas Busing, M.D.  
President and CEO  
Association of Faculties of Medicine of Canada  
774 Echo Drive  
Ottawa, Ontario, Canada K1S 5P2

At this time, the school also should provide the team secretary with the name and contact information for the visit coordinator. The visit coordinator is the main point of contact between the school and the survey team.

Both the survey team members and the LCME Secretariat will review the database and self-study summary as soon as practical after receipt, to ensure that the materials are complete and up-to-date. If any updating is required prior to the site visit, the principal LCME Secretary or the team secretary will communicate the details to the visit coordinator; updated materials can usually be sent to the team and the LCME Secretaries in a single mailing with the finalized visit schedule.

## Maps

Along with the database, self-study report, and school bulletin or catalog, the dean's office should mail to the team members and LCME Secretaries a map of the city or state marked with the location of the medical school and principal teaching hospitals, and a campus guide.

## Student Involvement

A well-conducted student survey, with high response rate, provides important information for the deliberations of the survey team (see *Role of Students in the Accreditation of Medical Education Programs in the U.S. and Canada*, found on the LCME Web site). All full survey teams and almost all limited survey teams meet with students. Students should be selected and briefed well in advance of the survey so they may provide truly representative student input. The survey team will seek student opinions about a variety of topics, including the quality and adequacy of the educational program, student academic and personal counseling, health service, financial aid, and the role of students in institutional policy and feedback. Students should serve as guides in the visits to the library, classrooms, laboratories, learning centers, and clinical facilities.

## The Visit Schedule

Shortly after receiving the database and self-study, the team secretary will contact the visit coordinator about the schedule, planned along the lines of the example in this document but customized for the characteristics of the institution. Some team secretaries prefer that the school develop the preliminary schedule, while others will choose to do so themselves.

The schedule should be finalized with the team secretary three weeks before the team arrives, so that a copy can be sent in advance to each member. The starting time of the visit and the concluding conference with the university chief executive (president, provost, or chancellor) should be scheduled as soon as possible, so that team members may plan their travel itineraries. When the schedule is finalized, the school should send a copy to each member of the survey team.

The administrators of clinical facilities should be advised that surveyors may be visiting patient care units. The team will not be meeting with the directors of facilities during the tours, unless the team secretary agrees to such meetings as part of the visit schedule. Student guides will conduct the tours. Please note that survey teams will not view or inspect patient records while touring clinical facilities.

## Entrance Conference

The team secretary should contact the dean before the visit to review the team's expectations and needs for the entrance conference, and to decide if any other parties will accompany the dean.

## Exit Conference/Draft Survey Report

Before departing, the team chair will give the dean and the university chief executive (president, chancellor, etc.) an oral report of summary findings that will be incorporated into the written survey report to the LCME (and for Canadian schools, the CACMS). Within four to six weeks, a draft report will be sent to the LCME Secretariat, to survey team members, and to the dean. The dean will be asked to correct errors of fact, and should convey the school's response in writing (even if there are no corrections) to the team secretary. Any disagreement with the tone or conclusions of the report should be discussed with the team secretary, who will inform the team chair of the issues and report back to the dean on the outcome. If any items in the draft survey report remain in contention after informal discussions with the

team secretary and chair, the dean may submit written comment directly to the LCME Secretariat for inclusion in the LCME's review of the school.

The draft report does not necessarily represent the final report from the LCME/CACMS. This will be transmitted subsequent to action by the LCME/CACMS. The draft report must be held in confidence and not released to anyone unless authorized by the principal LCME Secretary. The dean and university chief executive (president or chancellor) should wait until receipt of the final survey report and accompanying letter of accreditation before making any public comments on the site survey. The dean and university executive are provided with final copies of the survey report for public disclosure as they deem appropriate.

### **Site Visit Evaluation**

After the site visit has concluded, the dean should obtain feedback from school representatives about the visit and, if desired, about the accreditation process itself. An evaluation form for that purpose is sent to the dean around the time the site visit takes place. Completed evaluation forms should be returned to the LCME's electronic mailbox ([lcme@aamc.org](mailto:lcme@aamc.org)). The evaluation data will not be made available to the LCME when it reviews the school's accreditation status.

## **TEAM CHAIR'S DUTIES**

**Please read the General Information section for additional information.**

### **The Role of the Team Chair**

The chair should consult with the team secretary prior to the survey about organization of the site visit and development of the visit schedule. The chair serves as the leader of the team's activities on site and speaks for the team during the survey visit. The chair should see that the team paces its work, consolidating its observations and findings at the end of each day so that the identification of strengths and problems is refined each evening. The chair should make sure that team members are introduced at meetings with various groups and that the purpose and focus of the accreditation visit are stated briefly.

The chair gives the dean and university executive the final oral report summarizing the team's findings and conclusions. The chair's exit report should contain all summary findings (strengths, noncompliance and transition issues) to be embodied in the final written report prepared by the team secretary. No written information is presented to the school at the time of the exit interview. The dean and university executive should be advised that the team findings are subject to possible modification in the completed survey report and LCME/CACMS action, and that the findings should be kept confidential until finalized by the LCME/CACMS.

### **Review of Pre-Survey Materials**

The chair should, as soon as possible, review the school's database and self-study summary report. Any potential strengths, noncompliance issues, or transition areas should be communicated to the team secretary before the site visit begins, so that they can be compiled into a preliminary set of summary findings to be discussed at the initial team caucus. The chair should also note any areas where additional information is needed, and communicate this to the team secretary.

### **The Visit Schedule**

The team chair should review the draft schedule with the team secretary to assure that all relevant issues reflected in the database and self-study summary report are appropriately explored on site. When the team is divided, the chair should lead one group and the secretary the other.

### **The Survey Report**

Like other team members, the chair is responsible for writing sections of the draft survey report. Report sections should address the questions posed in the *Survey Report Guide*, available from the LCME web site. The team chair should closely review the completed draft survey report to confirm that summary findings are sufficiently documented and supported in the report narrative and appendices.

If the school's dean objects to the tone or conclusions of the report, the secretary should review the objections with the team chair. The secretary may then communicate the outcome of that discussion to the dean and/or the LCME Secretariat as needed.

## TEAM SECRETARY'S DUTIES

**Please read the General Information section for additional information.**

### Pre-Survey Materials

The school will send a copy of the database and the summary report of the self-study task force directly to each team member about three months prior to the survey. The team secretary should review the database for completeness and currency; if important omissions are discovered, the secretary should ask the school's visit coordinator to supply the missing materials. The LCME Secretariat will also screen databases and self-study reports for general completeness and currency, but will not review these materials in detail.

The secretary should be familiar with the major findings of the self-study report and student opinion of the school, its programs, and its services. Reference to the previous survey report and accreditation history, and study of the current materials, will allow the secretary to adjust the schedule to focus attention on important issues.

### Visit Logistics

**Visit coordinator.** Immediately after receipt of the pre-survey material, the secretary should contact the visit coordinator to discuss the visit logistics. The dean should have designated a staff member to be the contact person (visit coordinator) regarding arrangements for the visit, and the team secretary should obtain this person's direct telephone and fax numbers and e-mail address.

**Survey schedule.** The team secretary should work with the visit coordinator to develop a draft schedule, soon after reviewing the database and self-study summary report. Early study of the pre-survey materials will assist in modifying the sample schedule outlined in the included "Suggested Schedule for an LCME Accreditation Survey." Schools with geographically remote campuses may require a longer visit than the sample schedule indicates; if that is the case, the team secretary should contact the principal LCME Secretary to see if the length of the visit should be extended. The team secretary should review the draft schedule with the team chair, who may wish to propose changes to reflect appropriate emphasis of the survey visit. Once the final schedule is established, the secretary should ask the visit coordinator to send copies to all team members.

**Hotel reservations.** The secretary should confirm that the dean's office has booked a hotel reservation for each member of the team, with reservations guaranteed for late arrival. A suite for the chair, or a conference room, should have been reserved as well for daily team meetings. The hotel should have been instructed to send reservation confirmations directly to each team member. Any questions or concerns about the appropriateness of lodging costs should be conveyed to the principal LCME Secretary for resolution early in the planning for the visit.

**Ground transportation.** The school's visit coordinator will arrange for the team's transportation during the survey, including transportation between the hotel and the campus each day. The secretary should ask team members for their travel itineraries. After reviewing the surveyors' travel arrangements, it may be possible to arrange for group transportation to or from the airport.

### **Contacting Team Members**

**Logistics.** The secretary should contact the members of the team soon after receiving the database and other materials to inform them about arrival and departure times, writing assignments, and any other preparations required for the visit. The secretary should assure that members have received hotel confirmations. It is helpful to know the planned arrival time of the team members.

The secretary should furnish his or her telephone number and e-mail address to the team members, and communicate any special travel instructions or unusual arrangements necessary for reaching the hotel. The secretary should also coordinate the activities of any observer(s).

**Writing Assignments.** The secretary should examine the pre-survey materials and divide up the items to be written in the report among the team members, asking each to concentrate on specified areas and to write a concise section on each topic for inclusion in the final survey report. Team members also should be responsible for leading discussion of their assigned content areas during meetings with school representatives.

It sometimes will be necessary to divide the team into two groups in order to cover more subject areas. Each group should be led either by the team chair or team secretary. Team writing assignments should take into account the splits in team meetings, to make sure that a team member is not assigned any topics where he or she is not present.

**Preliminary Findings.** The secretary should ask each team member to identify any potential strengths, areas of partial or substantial noncompliance, and transition areas for his/her assigned topics. Such preliminary findings should be communicated to the secretary at least a week in advance of the site visit to allow the secretary to assemble an initial list of summary findings for discussion during the initial team caucus on Sunday evening.

### **Contacting the LCME Secretariat**

The team secretary may want to call the principal LCME Secretariat before the visit to confer on the status of the database and the self-study report, the visit arrangements, or the role of an observer from a regional accrediting agency or state education department (if applicable). Any problems arising during the visit that cannot be resolved by the team chair and secretary should be communicated immediately to the principal LCME Secretary.

### **Work with Faculty Fellows and Inexperienced Team Members**

Full survey teams usually include an LCME faculty fellow or others who may be new to the role of team member. The team secretary should contact such members prior to the survey to provide a briefing about expectations and assignments. Inexperienced members should be informed about what materials to bring along to the survey visit. As with regular members, faculty fellows should be given responsibility for writing sections of the survey report. During the survey, the team secretary should provide mentoring and constructive feedback to the fellow. Following the survey, the team secretary should provide feedback to LCME Secretariat staff on the fellow's performance.

### **Conduct of the Survey**

**Team caucus/entrance conference.** The team should assemble before meeting the dean on the first evening of the visit, to make any adjustments in the schedule, confirm responsibilities and review ground rules, and prioritize areas needing particular attention over the course of the visit (for example, potential

areas of noncompliance with accreditation standards, or common questions to be asked for all required clerkships). At this initial caucus the team should review the preliminary findings developed by members based on the review of pre-survey materials.

**Collecting Information.** The team secretary should inform team members of the timetable for preparing their sections of the survey report. Members should write the narratives for their assigned areas while on site or submit them within seven to ten days of the survey. The team secretary should bring a copy of the *Survey Report Guide* (available on the LCME web site) to the visit.

The most immediate priority of the visit is development of the list of institutional strengths, noncompliance issues, and transition areas to be presented by the chair at the exit conferences with the dean and university executives. The preferred practice is for the team to successively develop and refine its summary findings, beginning with the arrival caucus and continuing at work sessions each evening after returning from the school and before dining.

### **The Survey Report and Deadlines**

A table showing the timetable for completing the survey report can be found in the General Information section of this document. Team members should submit their assigned write-ups to the team secretary no later than 7-10 days following the completion of the survey.

The team secretary should send the draft report and accompanying appendices to both LCME Secretariat Offices (and CACMS Secretary, if applicable) within three to four weeks after the visit. After receiving comments from the LCME Secretariat and making needed changes, the secretary should send the draft report to the team and to the medical school dean, within four to six weeks after the visit. The dean should be instructed to send written comments to the team secretary, even if there are no suggested changes to the draft report. In each case, comments and corrections on the draft should be returned to the team secretary within a week after receipt.

If feedback from team members requires changes in findings, tone or content that the dean has not had an opportunity to review, the secretary should call the dean or send revised pages for decanal review before finalizing the report. If the dean objects to the tone or conclusions of the draft report, the secretary should review the issues with the team chair and communicate the outcome to the dean or, if necessary, the LCME Secretariat. The dean should be informed electronically or in writing if any of the factual corrections were not incorporated in the report. The dean should also be informed electronically or in writing regarding the disposition of any objections to the tone or conclusions of the report after they have been discussed with the team chair.

The secretary should send a clean copy of the final report, in one-sided printed format, to the LCME Secretary responsible for its printing; an electronic copy of the narrative (without appendices) should be sent to both LCME Secretaries. The team secretary should send the principal LCME Secretary a copy of the dean's response to the draft report, and any communications from the team secretary in response to the dean's comments.

## TEAM MEMBER'S DUTIES

Please read the General Information section for additional information.

### Logistics and Schedule

The team secretary will provide information about the arrangements, visit schedule, and writing assignments. Participants should arrive in time for the team caucus and entrance conference with the dean, and remain through the exit conference with the dean and university president on the last day of the visit. For full surveys, the team usually arrives on a Sunday afternoon and holds exit conferences on Wednesday afternoon.

### Review of Pre-Survey Materials

All team members should review the school's database and self-study summary report, as soon as possible, in the areas for which each is responsible. Any potential strengths, noncompliance issues, or transition areas should be communicated to the team secretary before the site visit begins, so that they can be compiled into a preliminary set of summary findings to be discussed at the initial team caucus. If there are any notable omissions or inconsistencies in the database or self-study report, the team member should inform the team secretary about them, so that the secretary can ask for additional information from the school. **Team members should not communicate directly with the school for any reason.**

### Main Responsibilities

Team members are expected to evaluate the educational program and the resources supporting it, leading to an assessment of the level of compliance with LCME's standards set out in *Functions and Structure of a Medical School*. The team members:

- Review the medical education database and self-study report provided by the school, noting deficiencies or ambiguities in the information and forming preliminary judgments about institutional strengths and possible noncompliance or transition issues.
- Collect and record additional data and impressions during the visit.
- Contribute to development of the list of institutional strengths, areas of partial or substantial noncompliance with standards, and areas in transition. These findings are presented orally by the team chair to the dean and university chief executive at the end of the site visit.
- Provide to the team secretary the assigned, written sections of the survey report, either at the conclusion of the site visit or within seven to ten days thereafter. The *Survey Report Guide* (available on the LCME Web site) should be used as a template for evaluation and reporting.
- Review and correct the draft survey report prepared by the team secretary as expeditiously as possible, so that the final report can be formatted and forwarded to LCME members.

## **FACULTY FELLOW'S DUTIES**

**Please read the General Information and Team Member's Duties sections for additional information.**

The LCME Faculty Fellow program was established in 1988 to stimulate faculty interest and involvement in medical education and the accreditation process and to develop future leadership in this area. Fellows gain understanding of the functions and structure of a medical school, learn how experts evaluate the quality of educational programs, and gain valuable insights applicable to their own institutions. Faculty fellows are selected from institutions with upcoming survey visits, so that they can serve as resources during their own school's accreditation process.

Faculty fellows participate fully as members of the survey team and are assigned areas of responsibility during the survey visit and in the preparation of the survey report. Fellow responsibilities are similar to those enumerated for regular team members. **(See section labeled "Team Member's Duties.")** Prior to the survey visit, fellows will be contacted by the team secretary to review expectations and assignments. Fellows also should receive guidance and feedback from the team secretary or chair during the site visit.

**Please note that hotel and travel expenses incurred by faculty fellows are the responsibility of their medical school or of the fellows themselves.**

**OBSERVERS ON SITE VISITS**

At times the survey team may include an observer, who may represent a regional or state accreditation agency or oversight body, a staff member of one of the LCME's sponsoring organizations, or a medical education leader from a foreign country interested in developing an accreditation system. The dean of the school being visited must authorize the participation of any observers.

Generally, observers are there to see the process and not to participate in it. Under some circumstances the team secretary may assign limited areas of responsibility to an observer. If that is the case, the observer will participate in discussions with school representatives in the assigned area(s) of responsibility. Representatives of other accrediting agencies or oversight bodies will not participate in the team's evening work sessions, although they may be invited to join the team for dinner. Such representatives are not authorized to participate in the exit conferences with the dean and university executive.