

ACCREDITATION ISSUES RELATED TO DISTANCE LEARNING: THE PERSPECTIVE OF THE LIAISON COMMITTEE ON MEDICAL EDUCATION

The growth of technology has increased the options for how instruction can be delivered in medical schools. Traditionally students and teachers interacted together about content at the same time and in the same place, as in a lecture or small group discussion. This is no longer the only available approach to instruction. Now, through distance learning, students can be separated from instructors, and from each other, and still be part of the same educational program. The purpose of this paper is to describe accreditation issues related to “distance learning.” We define distance learning as a structured educational process in which there is a spatial and/or temporal distance between teachers and learners.

SCOPE OF DISTANCE LEARNING

The concept of distance learning encompasses a wide range of possibilities. The following are examples of the spectrum of distance learning activities.

- Use of online instructional modules that supplement or replace in-person instruction in a course or multiple courses (temporal distance)
- Use of videoconferencing or teleconferencing for instruction during clinical clerkships where students are located at dispersed clinical sites or a branch campus (spatial distance)
- Use of online instruction to replace other instructional methods for individual students who are dispersed regionally, nationally, or internationally, as part of a “virtual” medical school (spatial and temporal distance)

Each of these possibilities is reflected in some form of distance learning now in use to educate medical students in the United States or internationally.

An additional factor is the breadth of distance learning activities that are included in the curriculum. For example, students could use online instruction (temporal distance learning) to replace classroom teaching in a single basic science course or clerkship, in multiple basic science courses or clinical clerkships, in the whole preclinical or clinical curriculum, or in all didactic instruction across the entire curriculum. Although the LCME does not set a pre-determined limit on the extent of distance learning that is permitted under its standards, a medical education program using a curriculum taught substantially or completely by distance learning could not be accredited. This is because many of the standards for accreditation of medical education programs require direct interaction between faculty members and students, which cannot occur in a distance-learning context.

DISTANCE LEARNING AND LCME ACCREDITATION STANDARDS

Core Principles

Regardless of the learning format used, a medical school must be in compliance with all standards for accreditation of educational programs leading to the MD degree. The LCME has created the following core principles as a way to conceptually categorize accreditation standards relevant to distance learning. The core principles have been adapted by the LCME from the *Best*

Practices for Electronically-Offered Degree and Certificate Programs, a document developed by the eight regional accrediting bodies.* It is expected that the core principles, and the relevant standards, will be considered by an educational program incorporating distance learning.

1. Medical education should occur in a community of learning and scholarship where students experience the continuum of medical education -- including graduate and continuing education -- and research, and where faculty are collaboratively involved in planning, implementing, and evaluating the educational program.
2. Educational programs leading to the MD degree should be organized around defined objectives and have coherent curricula and assessment methods that contribute to students attaining specified learning outcomes.
3. Medical schools should provide opportunities for experiential learning and dynamic face-to-face interaction between students and faculty, in support of students' acquisition of knowledge, skills, and attitudes/values specified in the programs' educational objectives.
4. Medical school faculty and administrators should be responsible for the education provided to their students.
5. Medical schools should evaluate the outcomes of their educational programs and the attainment of their educational program objectives, and should work to improve educational program quality with particular emphasis on student learning.
6. Medical schools should accept the obligation to provide services to meet student needs and the resources to support student academic success.

Implications of Core Principles for Distance Learning in the Medical Curriculum

The following describe the LCME's interpretation of how the core principles apply to medical education programs and indicate which accreditation standards relate to each core principle. Medical schools should consider this analysis in planning distance learning activities and should be prepared to document compliance with the relevant accreditation standards.

The full citations for the LCME standards are contained in *Functions and Structure of a Medical School*, located on the LCME web site (<http://www.lcme.org>). Please note that the list of relevant standards is meant to be illustrative, not exhaustive.

1. Medical Education in a Community of Learning

The LCME expects that there be close collaboration, mechanisms for communication, and functional integration among faculty in planning, implementing, and evaluating the curriculum, as well as in research and patient care. In addition, medical education should occur in an environment where there are other graduate and professional degree programs and where graduate and continuing medical education and research are present, in order to enhance the academic environment and the breadth of the students' experience.

Relevant Accreditation Standards: IS-12, IS-12A, IS-14, IS-15, ED-41, FA-13

Implications for Distance Learning: An educational program which is not developed and implemented through collaborative faculty effort and where student education occurs in isolation would not be in compliance with accreditation standards.

2. Defined Objectives and Coherent Curricula

The medical curriculum should be based in a comprehensive set of educational program objectives that lead to students' acquisition of defined learning outcomes (competencies) and professional characteristics. The curriculum must permit students to acquire the desired knowledge, skills, and attitudes/values specified in the objectives and should be designed to address all the subject areas required for accreditation. Limitations on resources, either of personnel or facilities, should not result in the creation of a suboptimal educational program with gaps in coverage of any area deemed important in the objectives. All students, regardless of their location, should be able to acquire the desired knowledge, skills, attitudes/values as a result of the educational program that is available to them. The assessment methods utilized should evaluate students' attainment of the knowledge, skills, and attitudes/values specified in the educational program objectives.

Relevant Accreditation Standards: ED-1, ED-1A, ED-5, ED-10 to ED-23, ED-26, ER-3

Implications for Distance Learning: An educational program that is not based in defined and agreed-upon objectives and which does not provide all students with effective opportunities to acquire the required knowledge, skills, and attitudes/values is not in compliance with accreditation standards.

3. Opportunities for In-person Interaction Between Students and Faculty

Medical schools should provide opportunities for students to interact in person with members of the medical school faculty and, under faculty supervision, with patients. It is expected that opportunities for active learning in the classroom and in clinical settings will occur. The LCME believes that teaching and assessment of skills and attitudes/values requires in-person contact with faculty over time. For example, student attainment of core clinical skills must be assessed through direct faculty observation. In addition, the acquisition of professionalism and ethical principles is facilitated by having students interact with appropriate faculty role models on an ongoing basis.

Relevant Accreditation Standards: IS-13, ED-23, ED-25, ED-27

Implications for Distance Learning: A medical education program in which there is not direct interaction between faculty and students that is appropriate to the objectives of the program and to the desired learning outcomes is not in compliance with accreditation standards.

4. Responsibility for the Educational Program

The medical school administration and faculty are responsible for the entire educational program, regardless of the sites where students and faculty are located. Faculty responsibility for the educational program also includes assuring that educational materials that are used, wherever produced, address the school's own educational program objectives. Faculty, therefore, must have opportunities to participate in medical school decision-making about the educational program and about such matters as student admission, promotion, and graduation.

Relevant Accreditation Standards: ED-34, ED-36, ED-39, ED-41, FA-6, FA-12, FA-13, ER-10

Implications for Distance Learning: A medical school where the chief academic officer and the faculty are not responsible for the educational program or for medical school policies related to the educational program is not in compliance with accreditation standards.

5. Assessment and Improvement of Program Quality

Regardless of how education is structured, the curriculum should be a coherent and coordinated whole. There should be evaluation of educational quality and assessment of whether students are attaining the educational program objectives. The results of evaluations should contribute, through a centralized process, to educational program improvement.

Relevant Accreditation Standards: ED-33, ED-35, ED-46

Implications for Distance Learning: A medical school where there is inadequate formalized and coordinated evaluation of educational program quality and where the results are not used to improve program quality so as to enhance student learning is not in compliance with accreditation standards.

6. Obligation to Meet Student Needs

Medical schools are expected to ensure that students have access to appropriate support, such as health and personal counseling services, financial aid services, and academic/career counseling. This applies regardless of where students are located. Mechanisms for communication between the medical school and student body also need to exist, so that students can provide input into the school's decision-making processes, for example, by providing feedback on courses and clerkships. Regardless of student location, there should be a single standard for promotion and graduation, and students should not be penalized in their learning or in the services that they receive based on their location.

Relevant Accreditation Standards: ED-42, MS-18, MS-19, MS-23, MS-26, MS-27, MS-27A

Implications for Distance Learning: A medical school that does not provide access to the full range of student services, allow students to have input into the educational decision-making process, and use a single standard for decisions about student academic progress are not in compliance with accreditation standards.

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* Best Practices for Degree and Certificate Programs: Commission on Higher Education, Middle States Association of Colleges and Schools; Commission on Institutions of Higher Education, New England Association of Schools and Colleges; Commission on Technical and Career Institutions, New England Association of Schools and Colleges; Commission on Institutions of Higher Education, North Central Association of Colleges and Schools; Commission on Colleges, The Northwest Association of Schools and Colleges; Commission on Colleges, Southern Association of Colleges and Schools; Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges; Accrediting Commission for Senior Colleges and Universities, Western Association of Schools and Colleges