

Connections

Institutional Setting (IS) Standard

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IS-1

IS-1. An institution that offers a medical education program must engage in a planning process that sets the direction for its program and results in measurable outcomes.

To ensure the ongoing vitality and successful adaptation of its medical education program to the rapidly changing environment of academic medicine, the institution needs to establish periodic or cyclical institutional planning processes and activities. Planning efforts that have proven successful typically involve the definition and periodic reassessment of both short-term and long-term goals for the successful accomplishment of institutional missions. By framing goals in terms of measurable outcomes wherever circumstances permit, the institution can more readily track progress toward their achievement. The manner in which the institution engages in planning will vary according to available resources and local circumstances, but it should be able to document its vision, mission, and goals; evidence indicating their achievement; and strategies for periodic or ongoing reassessment of successes and unmet challenges.

DATABASE QUESTIONS

- a. Provide a brief statement of the mission and goals of the medical school. When were these last reviewed and/or revised?
- b. Provide an executive summary of the medical school's current strategic plan, if any. Note if the strategic plan was developed independently of or in collaboration with the parent university or the health system.
- c. Date of most recent review and/or revision of the strategic plan:

- d. How often is the strategic plan reviewed and/or revised?
 - e. Briefly summarize or outline the planning process for the strategic plan, including the main participants and the names or titles of individuals or groups whose approval is required to finalize and approve it.
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SELF-STUDY QUESTIONS

Describe how institutional priorities are set. Evaluate the utility and success of institutional planning efforts, and discuss how planning has contributed to the accomplishment of the program's educational, research, and clinical services missions.

SURVEY REPORT GUIDE

In an introductory paragraph, briefly summarize the institution's mission and goals. Comment on the school's planning process in relation to its mission and goals. Report on whether the

strategic plan has been updated recently and whether school has developed a timetable and appropriate outcome measures to judge progress in achieving its aims.

Note: The survey team report will have, as an appendix, a summary of the medical school strategic plan, provided by the school.

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IS-2

IS-2. A medical education program should be, or be part of, a not-for-profit institution legally authorized under applicable law to provide medical education leading to the M.D. degree.

DATABASE QUESTIONS

a. Year of formation:

b. State (province) of organization or incorporation:

c. Type of entity (check one):

<input type="checkbox"/>	Not-for-profit corporation
<input type="checkbox"/>	For-profit corporation
<input type="checkbox"/>	Limited liability company
<input type="checkbox"/>	Other, describe below

If the medical school is part of a for-profit/investor-owned company, provide the name and location of the parent company; a copy of its most recent audited financial statement; and copies of its three most recent Form 10-Ks filed with the Security and Exchange Commission, if publicly traded. Also provide a copy of its most recent annual report.

SELF-STUDY QUESTIONS

Evaluate the role of the governance structure in the administrative functioning of the medical school. Is the governance structure appropriate for an institution of this size and these organizational and other characteristics?

SURVEY REPORT GUIDE

Describe whether the medical school is a part of a not-for-profit institution and the type of charter held by the institution.

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IS-3

IS-3. If a U.S. medical education program is not a component of a regionally accredited institution, the parent institution for the program must achieve institutional accreditation from the appropriate regional accrediting body.

The LCME is recognized by the U.S. Department of Education as an accrediting agency for medical education programs leading to the M.D. degree. Because the LCME is not recognized as an institutional accrediting agency, it lacks standing to accredit stand-alone medical schools as institutions of higher education.

Institutional accreditation is granted by regional accrediting agencies and is required to qualify for federal financial assistance programs authorized under Title IV of the Higher Education Act. Some regional accrediting bodies grant "pre-accreditation" as a first step to achieving full accreditation. In such circumstances the attainment of pre-accreditation status would meet the requirements of this standard.

DATABASE QUESTIONS

a. Accredited by the following regional accrediting body (check one):

<input type="checkbox"/>	Middle States Association of Colleges and Schools
<input type="checkbox"/>	New England Association of Schools and Colleges
<input type="checkbox"/>	North Central Association of Colleges and Schools
<input type="checkbox"/>	Northwest Commission on Colleges and Universities
<input type="checkbox"/>	Southern Association of Colleges and Schools
<input type="checkbox"/>	Western Association of Schools and Colleges

b. Current institutional accreditation status:

c. Year of next regional accreditation survey:

SELF-STUDY QUESTIONS

Is the governance structure appropriate for an institution of this size and these organizational and other characteristics?

SURVEY REPORT GUIDE

Note whether the school or university holds regional accreditation, the name of the accrediting body, and the year of the next survey for regional accreditation.

Note: The survey team report will have, as appendices, the current entry in AAMC *Directory of American Medical Education*, and any necessary changes, as well as, organizational chart(s) showing the relationship of the medical school to university and clinical affiliates, provided by the school.

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IS-4

IS-4. The manner in which an institution that offers a medical education program is organized, including the responsibilities and privileges of administrative officers, faculty, medical students, and committees must be promulgated in programmatic or institutional bylaws.

DATABASE QUESTIONS

- a. Provide a copy of the faculty bylaws that apply to the medical school or the URL of the Web site at which they can be viewed.
 - b. Date of the most recent bylaws revision:
 - c. Describe the process for approval of bylaws changes.
 - d. Briefly describe how the bylaws are made available to the faculty.
-

SELF-STUDY QUESTIONS

Are the medical school or institutional bylaws clear and comprehensive?

SURVEY REPORT GUIDE

Note if there are medical school or university bylaws and describe how these are made available to the faculty.

Note: The survey team report will have, as an appendix, organizational chart(s) showing the relationship of the medical school to university and clinical affiliates, provided by the school.

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IS-5

IS-5. The governing board responsible for oversight of an institution that offers a medical education program must have and follow formal policies and procedures to avoid the impact of conflicts of interest of members in the operation of the institution and its associated clinical facilities and any related enterprises.

There must be formal policies and procedures at the institution to avoid the impact of conflicts of interest (e.g., the requirement that a board member recuse him or herself from any discussion and vote relating to a matter where there is the potential for a conflict of interest to exist). The institution also must provide evidence (e.g., from board minutes, annual signed disclosure statements from board members) that these policies and procedures actually are being followed. Some conflicts related to personal or pecuniary interests in the operation of the institution may be so pervasive as to preclude service on the governing board.

DATABASE QUESTIONS

- a. Provide the name of the governing board with responsibility for the medical school.

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- b. Check all units for which this governing board is directly responsible:

<input type="checkbox"/>	Parent University
<input type="checkbox"/>	Health Science Center
<input type="checkbox"/>	Medical School
<input type="checkbox"/>	Other (describe below)

- c. Provide the names and the occupations/affiliations of the current governing board members, along with their dates of initial appointment. If the medical school is, or is part of, a for-profit/investor-owned company, identify any board members who are shareholders/investors in the holding company for the medical school. If the medical school is part of a for-profit/investor-owned company, does it have a subsidiary board whose members are not shareholders/investors in order to reduce opportunities for conflicts of interest? Provide the names and occupations/affiliations of the members of the subsidiary board.
- d. Year of the governing board chair's initial appointment as chair and length of the board chair's term(s) of office.

Year of initial appointment:
Length of term(s) of office:

- e. Summarize the procedures for the appointment and renewal of governing board members, including the procedures for the chair. Describe the length of members' terms, the number of times that a member can be reappointed, and the system for staggering of appointments, if appropriate.
 - f. Provide copies of the policies and procedures intended to prevent or address financial and other conflicts of interest among governing board members (including recusal from discussions or decisions if a potential conflict occurs) and describe the strategies for dealing with actual or perceived conflicts of interest if they arise. Provide examples to illustrate that these policies are being followed.
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SELF-STUDY QUESTIONS

Are there appropriate structures, policies, and other safeguards in place to prevent conflict of interest at the level of the governing board, are these safeguards being followed, and are these safeguards effective? Describe any situations that require review by or approval of the governing board (board of trustees, regents) of the school or university prior to action being taken.

SURVEY REPORT GUIDE

Note any policies addressing potential conflicts of interest in the appointment of board members, and include any evidence that existing policies are being followed.

Note: The survey team report will have, as an appendix, organizational chart(s) showing the relationship of the medical school to university and clinical affiliates, provided by the school.

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IS-6

IS-6. Terms of governing board members of an institution that offers a medical education program should be overlapping and sufficiently long to permit them to gain an understanding of its program.

DATABASE QUESTIONS

- a. Provide the name of the governing board with responsibility for the medical school.

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- b. Check all units for which this governing board is directly responsible:

<input type="checkbox"/>	Parent University
<input type="checkbox"/>	Health Science Center
<input type="checkbox"/>	Medical School
<input type="checkbox"/>	Other (describe below)

- c. Provide the names and the occupations/affiliations of the current governing board members, along with their dates of initial appointment. If the medical school is, or is part of, a for-profit/investor-owned company, identify any board members who are shareholders/investors in the holding company for the medical school. If the medical school is part of a for-profit/investor-owned company, does it have a subsidiary board whose members are not shareholders/investors in order to reduce opportunities for conflicts of interest? Provide the names and occupations/affiliations of the members of the subsidiary board.
- d. Year of the governing board chair's initial appointment as chair and length of the board chair's term(s) of office.

Year of initial appointment:
Length of term(s) of office:

- e. Summarize the procedures for the appointment and renewal of governing board members, including the procedures for the chair. Describe the length of members' terms, the number of times that a member can be reappointed, and the system for staggering of appointments, if appropriate.
- f. Provide copies of the policies and procedures intended to prevent or address financial and other conflicts of interest among governing board members (including recusal from discussions or decisions if a potential conflict occurs) and describe the strategies for dealing with actual or perceived conflicts of interest if they arise. Provide examples to illustrate that these policies are being followed.

SELF-STUDY QUESTIONS

Are there appropriate structures, policies, and other safeguards in place to prevent conflict of interest at the level of the governing board, are these safeguards being followed, and are these safeguards effective? Describe any situations that require review by or approval of the governing board (board of trustees, regents) of the school or university prior to action being taken.

SURVEY REPORT GUIDE

Briefly describe the procedure for appointing or renewing members of the oversight board for the medical school.

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IS-7

IS-7. Administrative officers and members of the faculty must be appointed by, or on the authority of, the governing board of the medical education program or its parent institution.

DATABASE QUESTIONS

Briefly describe the role of the governing board in the appointment of the administrative officers and the faculty of the medical school.

SELF-STUDY QUESTIONS

Are there appropriate structures, policies, and other safeguards in place to prevent conflict of interest at the level of the governing board, are these safeguards being followed, and are these safeguards effective? Describe any situations that require review by or approval of the governing board (board of trustees, regents) of the school or university prior to action being taken.

SURVEY REPORT GUIDE

Summarize the role of the board in reviewing or approving medical school policies and procedures, including administrative and faculty appointments.

Note: The survey team report will have, as an appendix, organizational chart(s) showing relationship of medical school to university and clinical affiliates, provided by the school.

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IS-8

IS-8. The chief official of a medical education program, who usually holds the title "dean," must have ready access to the university president or other official of the parent institution who is charged with final responsibility for the program and to other institutional officials as are necessary to fulfill the responsibilities of the dean's office.

DATABASE QUESTIONS

Provide the position description for the dean and, if applicable, the vice president for health affairs or equivalent.

SELF-STUDY QUESTIONS

Evaluate the relationship of the medical school to the university and its clinical affiliates with respect to:

- a. The effectiveness of the interactions between medical school administration and university administration.
 - b. The cohesiveness of the leadership among medical school administration, health sciences center administration, and the administration of major clinical affiliates.
-

SURVEY REPORT GUIDE

Summarize the dean's responsibilities and relationship to university officials. Indicate the administrative mechanisms that link the dean with the heads of major teaching hospitals owned or operated by the medical school.

Succinctly describe the credentials of the dean and the date of his or her appointment.

Note: The survey team report will have, as an appendix, the dean's position description and brief résumé and the organizational chart for the dean's office and information on the dean's staff (from Standard [IS-11](#)), provided by the school.

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IS-9

IS-9. There must be clear understanding of the authority and responsibility for matters related to the medical education program among the vice president for health affairs, the chief official of the medical education program, the faculty, and the directors of the other components of the medical center and the parent institution.

DATABASE QUESTIONS

- a. Supply a chart showing the relationships among the members of the medical school and university administrations and the administrations of other schools and colleges, institutes, centers, etc. Include, if appropriate, information about the reporting relationships for the director(s) of any teaching hospitals owned or operated by the medical school or university and of the medical faculty practice plan. If the medical school is part of a for-profit/investor-owned company, the chart should describe the reporting relationship that the dean or other senior academic officers have with the board of directors or officers of the corporation.
 - b. Describe any compensation or other arrangements (including, but not limited to, shareholder status) that the dean or other senior academic officers have which are dependent upon the financial success of the medical education program.
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SELF-STUDY QUESTIONS

Evaluate the relationship of the medical school to the university and its clinical affiliates with respect to:

- a. The effectiveness of the interactions between medical school administration and university administration.
 - b. The cohesiveness of the leadership among medical school administration, health sciences center administration, and the administration of major clinical affiliates.
-

SURVEY REPORT GUIDE

If the dean does not hold the title of vice president for health affairs (or equivalent), identify the person who holds that title and describe the dean's reporting relationship to that individual. Evaluate the effectiveness of these relationships and note any problems.

Note: The survey team report will have, as an appendix, the organizational chart for the dean's office and information on the dean's staff (from Standard [IS-11](#)), provided by the school

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IS-10

IS-10. The chief official of a medical education program must be qualified by education and experience to provide leadership in medical education, scholarly activity, and patient care.

DATABASE QUESTIONS

Provide a brief résumé of the dean's academic and administrative experience. In the Appendix, provide the dean's full *curriculum vitae*.

SELF-STUDY QUESTIONS

Assess the organizational stability and effectiveness of the medical school administration (dean, dean's staff). Has any turnover in central administration staff affected medical school planning or operations? Are the number and types of medical school administrators (assistant/associate deans, other dean's staff) appropriate for efficient and effective medical school administration? Is departmental leadership stable? If there has been turnover in departmental leadership, are vacancies filled in a timely manner without detriment to departmental functioning? Note any concerns arising from leadership turnover in the school's central or departmental administration.

SURVEY REPORT GUIDE

Succinctly describe the credentials of the dean and the date of his or her appointment.

Note: The survey team report will have, as an appendix, the Dean's position description and brief résumé, provided by the school.

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IS-11

IS-11. The administration of an institution that offers a medical education program should include such associate or assistant deans, department chairs, leaders of other organizational units, and staff as are necessary to accomplish its mission(s).

There should not be excessive turnover or long-standing vacancies in the leadership of the institution. Areas that commonly require administrative support include admissions, student affairs, academic affairs, educational affairs/curriculum, faculty affairs, graduate education, continuing education, relationships with clinical affiliates, research, business and planning, and fund-raising.

DATABASE QUESTIONS

- a. Attach a chart showing the organizational structure of the dean's office.
- b. List the percent of effort contributed by each associate and assistant dean to the administrative support of the medical school and, for each, indicate his or her date of appointment to the administrative position. Indicate if any associate/assistant dean position is being filled on an interim basis. If there are interim appointments for positions in the dean's office, describe the status of recruitment to fill the positions on a permanent basis.
- c. Indicate the term of appointment for department chairs and the number of times that the appointment can be renewed.
- d. Indicate the date of appointment for each currently sitting department chair.
- e. List the departments that are currently without a permanent chair and the date on which the last permanent chair left office. Describe the status and timelines of recruitments to fill vacant chair positions.
- f. Briefly describe how, how often, and by whom the performance of chairs is reviewed.
- g. Briefly describe the budgetary authority of department chairs and the sources of funding for departmental budgets.

See also Part A, item (a.) in this section of the database.

SELF-STUDY QUESTIONS

Assess the organizational stability and effectiveness of the medical school administration (dean, dean's staff). Has any turnover in central administration staff affected medical school planning or operations? Are the number and types of medical school administrators (assistant/associate deans, other dean's staff) appropriate for efficient and effective medical school administration? Is departmental leadership stable? If there has been turnover in departmental leadership, are

vacancies filled in a timely manner without detriment to departmental functioning? Note any concerns arising from leadership turnover in the school's central or departmental administration.

SURVEY REPORT GUIDE

Comment on the stability and on the consistency of the school's leadership and direction since the last full survey. Describe the staffing and organization of the dean's office. Assess whether the staffing is adequate and whether the division of responsibility is reasonable, effective, and understood by the faculty and students. Report on whether the students and faculty perceive the dean's staff to be accessible and able to solve problems; include relevant data documenting these findings.

Indicate whether department chairs are appointed for a fixed period. Describe the mechanisms that exist for the periodic review of departments and their chairs. Note current department chair vacancies or long-standing acting/interim arrangements. Comment on the extent of budgetary authority and the adequacy of departmental budgets to achieve institutional goals

Note: The survey team report will have, as an appendix, the organizational chart for the dean's office and information on the dean's staff (from this Standard [IS-11](#)), provided by the school.

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IS-12

IS-12. Medical students should have opportunities to learn in academic environments that permit interaction with students enrolled in other health professions, graduate, and professional degree programs and in clinical environments that provide opportunities for interaction with physicians in graduate medical education and continuing medical education programs.

These academic, graduate medical education, and continuing medical education programs should contribute to the learning environment of the medical education program. Periodic and formal review of these programs culminating in their accreditation by the appropriate accrediting bodies would provide evidence of their adherence to high standards of quality in education, research, and scholarship. Whenever appropriate, medical students would be able to participate in selected activities associated with these programs in order to facilitate achievement of their personal and professional goals.

DATABASE QUESTIONS

Graduate Education

- a. Indicate the number of students enrolled in Master's and doctoral programs taught by medical school faculty. Include degree programs in the biomedical sciences and other programs (e.g., biomedical engineering, public health) that are taught by medical school faculty.

Department or Program	Master's Students	Doctoral Students

- b. Are there university or medical school policies that require regular review of graduate education (Master's, doctoral) programs? If so, include a copy of the policy or related documents in the Appendix.

c. Describe the process used for review of doctoral programs in the biomedical sciences.

Graduate Medical Education

a. For each clinical facility at which one or more medical students take a required core clerkship rotation (except ambulatory, community-based sites), mark a “+” if residents in an ACGME-accredited program (for U.S. medical schools) or in an RCPSC or CFPC-accredited program (for Canadian medical schools) are involved in medical student education in that clerkship rotation at that site; place a “–” for any clerkship rotation offered at that site in which there are no residents.

Clinical Facility Name	Family Medicine	Internal Medicine	Obstetrics/ Gynecology	Pediatrics	Psychiatry	Surgery

b. If the medical curriculum does not include a separate required clerkship rotation in one or more of the above disciplines (e.g., when the curriculum includes an integrated experience for some medical students), describe these students’ interactions with residents, including the residents’ specialties and the settings in which these interactions occur.

c. Provide the number of residents who are the responsibility of the medical school’s faculty, by training program, including those programs at affiliated hospitals at which residents are taught by medical school faculty. (Note: If the medical school operates geographically separate clinical instructional sites/campuses, provide a separate table for each site.)

Specialty of Training Program	# of PGY-1 Residents	Total # of Residents	# of Clinical Fellows (in ACGME/RCPSC/CFPC-accredited programs)	# of Clinical Fellows (in Non-ACGME/RCPSC/CFPC-accredited programs)

- d. Describe the mechanism(s) used for oversight and coordination of graduate medical education, including the evaluation and allocation of training positions. Note any programs currently on probation, as well as any programs whose size is being substantially expanded or reduced.
- e. For each accredited institution, provide the following information regarding ACGME/RCPSC/CFPC institutional review of graduate medical education programs sponsored by the medical school or its major teaching hospital(s):

Date of Last ACGME/RCPSC/CFPC Institutional Review	Status	Date of Next Review

Continuing Medical Education

- a. If the medical school or its clinical affiliates are accredited by the ACCME/RCPSC to sponsor continuing medical education for physicians, indicate each sponsoring organization's current accreditation status, the length of accreditation granted, and the year of the next accreditation review.

Program Sponsor	Accreditation Status	Length of Accreditation Term	Year of Next Review

- b. Describe the opportunities available to medical students for participation in continuing medical education programs. Is student participation in any continuing medical education programs expected or required?

See also Part A, items (b.) and (c.) in this section of the database.

SELF-STUDY QUESTIONS

Evaluate the graduate program(s) in basic sciences and other disciplines, including their overall contribution to the missions and goals of the medical school. Describe the mechanisms for reviewing the quality of the graduate program(s) in basic sciences and comment on their effectiveness. Assess whether the graduate programs have an impact (positive or negative) on medical student education. Describe opportunities for interaction between medical and graduate students and the frequency of those interactions.

Evaluate the availability and impact of residency training programs and continuing medical education activities on the education of medical students. Describe any anticipated changes in graduate medical education programs (numbers of residents, shifts in sites used for training) that may affect the education of medical students.

SURVEY REPORT GUIDE

Describe the graduate program(s) in the biomedical sciences, including their total enrollment and funding sources. Note if other degree programs (e.g., M.P.H, Masters of clinical science) also are the responsibility of medical school faculty. Indicate whether the institution conducts a regular and systematic review of its graduate programs and the content and process of these reviews. Describe the participation of medical students in graduate programs, such as in joint MD/PhD programs. Evaluate the appropriateness of the size, adequacy of funding, and value of the graduate programs to research and education in the medical school, including medical education.

Briefly describe the number of residents and the specialties in which residency programs exist (refer to the Appendix for details). Report on whether the medical school or some other unit provides central oversight of the quality of the graduate medical education programs. Comment on whether the institutions that sponsor graduate medical education programs meet the Institutional Requirements of the Accreditation Council for Graduate Medical Education (ACGME) or the corresponding requirements in Canada. Note whether the institution or any graduate medical education programs are on probation or are in danger of losing their accreditation. Identify any major disciplines with required clerkships or clerkship sites, such as distributed campuses) in which students have little or no contact with residents. Briefly summarize opportunities for medical students to participate in or learn about continuing medical education programs sponsored by the school or its clinical affiliates.

Note: The survey team report will have, as appendices, the table showing enrollment in graduate programs in basic sciences, and the table(s) showing the number of residents by specialty, provided by the school.

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IS-13

IS-13. A medical education program must be conducted in an environment that fosters the intellectual challenge and spirit of inquiry appropriate to a community of scholars.

DATABASE QUESTIONS

None.

SELF-STUDY QUESTIONS

Evaluate the research activities of the faculty as a whole, including areas of emphasis and level of commitment, quality, and quantity in the context of the school's missions and goals. Note any limitations that may be affecting the research enterprise.

Assess the adequacy of the resources (equipment, space, graduate students) for research.

Evaluate any trends in the amount of intramural support for research and the level of assistance available to faculty members in securing extramural support.

SURVEY REPORT GUIDE

Describe the extent to which research is an institutional priority. Indicate whether there is sufficient funding and an appropriate infrastructure to support research, as well as whether an explicit strategy has been defined to pursue specific research directions or to accomplish a specific level of research productivity. Report on the presence or absence of departmental or individual research incentives. Comment on the breadth of research involvement in basic science and clinical departments.

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IS-14

IS-14. An institution that offers a medical education program should make available sufficient opportunities for medical students to participate in research and other scholarly activities of its faculty and encourage and support medical student participation.

The institution is expected to provide an appropriate number and variety of research opportunities to accommodate those medical students desiring to participate. To encourage medical student participation, the institution could, for example, provide information about available opportunities, offer elective credit for research, hold research days, or include research as a required part of the curriculum. Support for medical student participation could include offering or providing information about financial support for student research (e.g., stipends).

DATABASE QUESTIONS

- a. If not already described in the response to standard IS-1, briefly summarize institutional goals and priorities relating to research and scholarship.
- b. Briefly describe the opportunities available for medical student participation in research, including the time periods when students may do so, the average number of students in the base year who were involved in each type of program (e.g., M.D./Ph.D., M.D./M.S., summer research, year-out research), and the funding sources that are available to support student participation. Note if there is a research requirement for all medical students (e.g., a thesis or required research/scholarly project).
- c. Describe how medical students are informed about opportunities for participation in research.

See also Part A, item (d.) in this section of the database.

SELF-STUDY QUESTIONS

Assess the impact of research activities on the education of medical students, including the availability and ease of medical student access to opportunities for participation in research.

SURVEY REPORT GUIDE

Describe the extent of medical student participation in research and whether participation in research is required or optional. Summarize the research options available to students, such as summer programs and/or dual degrees. Describe how medical students are informed about research opportunities.

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IS-14-A

IS-14-A. An institution that offers a medical education program should make available sufficient opportunities for medical students to participate in service-learning activities and should encourage and support medical student participation.

"Service-learning" is defined as a structured learning experience that combines community service with preparation and reflection. Medical students engaged in service-learning provide community service in response to community-identified concerns and learn about the context in which service is provided, the connection between their service and their academic coursework, and their roles as citizens and professionals.

"Sufficient opportunities" means that medical students who wish to participate in a service-learning activity will have the opportunity to do so. To encourage medical student participation, institutions could, for example, develop opportunities in conjunction with relevant communities or partnerships, provide information about available opportunities, offer elective credit for participation, or hold public presentations or public forums. Support for medical student participation could include offering or providing information about financial and social support for medical student service-learning (e.g., stipends, faculty preceptors, community partnerships).

DATABASE QUESTIONS

- a. Is there a school requirement that medical students participate in a service-learning experience, either as part of a regular course or clerkship rotation or as a selective? If so, describe the opportunities for participation and reflection on the experience.
- b. Briefly describe the opportunities for medical student participation in voluntary service-learning activities. Include the types of service-learning opportunities that are available and the general level of student involvement.
- c. Describe how medical students are informed about opportunities to participate in service-learning activities.
- d. Describe how student participation in service-learning activities is encouraged, supported, and acknowledged. Include information about the sources and levels of funding available for such activities.

SELF-STUDY QUESTIONS

Assess the availability of opportunities for medical students to engage in service learning, including the adequacy of support for medical student participation. Describe how students would learn about these opportunities.

SURVEY REPORT GUIDE

Describe the opportunities for medical students to participate in service-learning activities. Indicate whether service-learning is required or optional. Describe how medical students are informed about opportunities for service-learning and how participation is supported and encouraged.

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IS-16

IS-16. An institution that offers a medical education program must have policies and practices to achieve appropriate diversity among its students, faculty, staff, and other members of its academic community, and must engage in ongoing, systematic, and focused efforts to attract and retain students, faculty, staff, and others from demographically diverse backgrounds.

The LCME and the CACMS believe that aspiring future physicians will be best prepared for medical practice in a diverse society if they learn in an environment characterized by, and supportive of, diversity and inclusion. Such an environment will facilitate physician training in:

- Basic principles of culturally competent health care.
- Recognition of health care disparities and the development of solutions to such burdens.
- The importance of meeting the health care needs of medically underserved populations.
- The development of core professional attributes (e.g., altruism, social accountability) needed to provide effective care in a multidimensionally diverse society.

The institution should articulate its expectations regarding diversity across its academic community in the context of local and national responsibilities, and regularly assess how well such expectations are being achieved. The institution should consider in its planning elements of diversity including, but not limited to, gender, racial, cultural, and economic factors. The institution should establish focused, significant, and sustained programs to recruit and retain suitably diverse students, faculty members, staff, and others.

DATABASE QUESTIONS

- a. Provide a copy of all current institutional (medical school and/or university) mission statement(s) and policies that are related to assuring a diverse student body, faculty, and staff.
 - i. Describe the process by which these statements and policies were developed, approved, and implemented at the institution.
 - ii. Describe how these statements and policies are made known to current and prospective applicants, students, employees, faculty, and staff.
- b. Describe how the institution defines or characterizes diversity for its students, faculty, and staff. What dimensions of diversity are considered? If different definitions apply to any of these institutional constituencies, provide each relevant definition. In the context of the definition of diversity, describe how institutional policies related to diversity are put into practice in each of the following areas:
 - i. Student recruitment, selection, and retention
 - ii. Financial aid
 - iii. Educational program
 - iv. Faculty/staff recruitment, employment, and retention
 - v. Faculty development

vi. Liaison activities with community organizations

- c. Based on the institution’s definition of diversity and the LCME standard that “medical schools should consider in their planning elements of diversity including, but not limited to, gender, racial, cultural and economic diversity,” report in the table below information regarding the percentage of enrolled students and employed faculty and staff in each of the categories included in the institution’s definition of diversity.

Category	First-Year Students	All Students	Faculty	Staff* (define)

* Note that “staff” can include residents and other health professionals.

See also information for standard ED-21 and standard MS-8 in Section III: Medical Students.

SELF-STUDY QUESTIONS

Describe programmatic and institutional goals for diversity. Evaluate the clarity of the medical school’s definition of the specific groups whose representation in the student body and faculty would add value to the learning environment. Evaluate the success of the medical school in developing programs to support the achievement of its goals for appropriate diversity among its students, faculty, and staff. Describe recruitment and support programs related to the school’s diversity goals and assess their effectiveness. Assess how well institutional diversity contributes to the educational environment and prepares students for meeting the health care needs of a diverse society.

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Note if diversity is explicitly referenced in medical school policies and/or reflected in the policies of its parent university. Describe whether and how the medical school has characterized diversity for its students, faculty, and staff. Briefly describe how the policies related to diversity

are reflected in: 1) student recruitment, selection, and retention; 2) financial aid; 3) the educational program; 4) faculty and staff recruitment, employment, and retention; 5) faculty development; and 6) community liaison activities. Summarize, by referencing the table on institutional diversity, the school's success in achieving diversity in the categories that it has defined for medical students, faculty, and staff (describe how the school has defined staff).

Note: The survey team report will have, as an appendix, the table on institutional diversity (if not included in the narrative), provided by the school

LCME EXPERIENCE

This standard was cited 10 times during the review of the 15 full survey visits that were acted upon at CACMS/LCME meetings during 2010-2011.

SECRETARIAT COMMENTS

Standard IS-16, one of two relatively new standards related to diversity (see also standard MS-8), is modeled on, among other sources of information, the AAMC publication entitled, *Roadmap to Diversity: Key Legal and Educational Policy Foundations for Medical Schools* (2008). IS-16, introduced in 2009, requires that a medical education program have a policy that explicitly defines the specific groups whose members the institution seeks to employ among its faculty and staff and to enroll in its student body because representation from those groups would bring "added value" to the learning environment for all participants. Some schools mistakenly provide their affirmative action policy when asked for their diversity policy; this approach is not sufficient and will lead to a non-compliance citation. An affirmative action policy protects against unlawful discrimination in hiring and student selection; a diversity policy is positive in its approach to hiring and selection.

Please note that, in the table in database question c for standard IS-16, the school is asked to report data "regarding the percentage of enrolled students and employed faculty and staff in each of the categories included in the institution's definition of diversity." If the school's policy is not explicit regarding which groups would bring added value to the learning environment, then the school would be unable to complete this table.

This approach replaces prior attempts to address diversity based on remediating historic discrimination against specific societal groups, and it is certainly not about establishing a quota-based system of enrollment or faculty or staff hiring. Both of these approaches are legally untenable. In addition, the fact that IS-19 is located in the Institutional Standards section of the *Functions and Structure of a Medical School* document reflects the fact that this standard is not solely about student diversity, but rather that it requires a school-wide policy defining the desired elements of diversity among students, faculty, and staff. Different types of diversity can be defined for faculty, staff, and students. Exemplary policies will specifically refer to the presence of individuals from these designated groups because their presence will enhance the learning environment for all participants and enhance the potential for physician graduates to choose to address health care inequities in today's society.

The designated groups may well include persons from groups that are currently underrepresented in medicine, but IS-19 also permits schools to include other groups in its diversity definition (e.g., first-generation college students, financially disadvantaged students,

students from rural backgrounds, GLBT students, members of specific racial and ethnic groups, etc.).

This standard does not specifically define “staff”; this is also left up to the school. “Staff” could include residents and house staff and/or members of the support/administrative staff. Standard MS-8 standard extends this concept by requiring that the school engage in partnerships or pipeline programs to increase the national pool of applicants from these “value added” groups.

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