

UC Riverside, School of Medicine Policies and Procedures**Policy Title:** Policy on Designated Emphases Operations at UCR School of Medicine**Policy Number:** 950-06-047

Responsible Officer:	Senior Associate Dean, Medical Education
Responsible Office:	Office of Medical Education
Origination Date:	09/01/2023
Date of Revision:	N/A; New Policy
Scope:	All medical students, faculty and administration

I. Policy Summary

This policy outlines the policies and operational procedures for all designated emphases (DEs) approved by the Medical Education Committee (MEC) at UCR SOM.

II. Definitions

Designated Emphasis (DE) denotes a broadening of training that comes from adding course work, training, and/or research work from an external department, degree-granting program, or cross-departmental grouping of faculty who together offer a designated emphasis.

DE Activities – these are instructional or assessment sessions and/or research work solely for students that are approved to be in the DE. This work counts toward DE credit but does not lead to separate elective credit.

DE Electives - these are instructional or assessment sessions that may be open to all medical students or only to students in the DE in good academic standing and lead to transcript credit as an elective.

TECT – Team on Emphases, Concentrations and Threads

III. Policy Text**A. Eligibility Requirements for Students****1. Before Enrollment**

- a. Before a student can enroll in a DE, the student must be in good academic standing as determined by the Office of Student Affairs (OSA).
 - i. First-year students may not enroll or begin any designated emphasis activities until November 1st of the student's first year.
- b. If a DE has any additional specific criteria for students to be able to enroll, this must be stated to students at annual informational sessions about the DE and stated in the DE's syllabus in the learning management system (e.g., Canvas).

2. Ongoing Participation

- a. If a student does not remain in academic good standing, the student will be notified by OSA that the student must suspend their participation in the DE.
- b. The Registrar notifies the DE director that the student will be removed from the DE roster and must cease all DE activities. The Registrar does not furnish the reason for the removal to the DE director.
- c. The Registrar notifies the DE director if and when the student will return to the DE.
 - i. The DE director will coordinate with the Office of Academic Success to develop an individualized plan for completing the DE requisites that may have been missed.

B. Enrollment

1. First, all students must be academically cleared before they can be considered for enrollment.
2. Second, if there are merit-based criteria for the student to participate, the DE director must determine if the student qualifies for enrollment.
3. Third, the DE director must make explicit any capacity limits in advance on the number of students that can be admitted into their program each year. If there is a capacity limit, the registrar will conduct a lottery. The Registrar will also keep a waitlist if requests for enrollment exceeds capacity.
4. **The Office of the Registrar will confirm the final roster.**
5. It is a joint responsibility of each DE director and the Registrars' Office to establish an official shared record of enrollment of students in the DE at the start of each academic year **and** to also keep track of students who are completing the DE.
6. **A student in good academic status can enroll in a maximum of two concurrent DEs with approval of the Office for Student Affairs.**

C. DE Curriculum

1. Each DE must define in advance whether medical students must complete all DE activities and DE electives or only specified parts to successfully complete the DE.
 - a. At a minimum, DE students must document attendance and/or participation of 80% of the required DE sessions in order to receive credit for the DE.
 - i. A DE reserves the right to make the minimum attendance requirements that supersedes 80% however this must be stated to students in advance.
 - b. Students follow the same policies for attendance and absence requests as for the compulsory curriculum.
2. Approved Hours for DE
 - a. Justification for the total number of hours required of students for the overall DE must be presented by the DE director to the TECT who determines appropriateness. **Once approved the hours are fixed.**
 - i. Any request for an increase or decrease the set DE hours must be vetted and approved by the TECT.
3. Learning Objectives
 - a. Each DE must have measurable learning objectives defined for the following three temporal segments in alignment with one another:
 - i. The longitudinal curriculum
 - ii. At the end of each academic year
 - iii. For each approved DE elective
4. Clinical Components in DEs
 - a. Any clinical experiences within the DE must be vetted and approved first by the Senior Associate Dean for Medical Education, Compliance Office and UCR SOM Legal Office and the UCR SOM Clinical Affiliate Relationship Manager regarding affiliation agreements. Students cannot participate in clinical activities without this clearance.
5. Travel Abroad Experiences in DEs
 - a. Any travel abroad experiences that are proposed by the DE director either as part of the DE; offered as a UCR SOM DE-sponsored elective; or DE credit that is accepted from sponsors outside UCR SOM (e.g., VSLO, etc.) must be first approved by the Senior Associate Dean for Medical Education, the Executive Dean of Student Affairs and the UCR International Affairs Office. Refer to *Policy 950-07-020 - International Co-and Extra Curricular Travel*.

6. Research Components in DEs
 - a. Any research experiences or scholarly activity within the DE must be vetted and approved first by the Senior Associate Dean for Medical Education and the Director of Student Scholarly Activities. Students cannot participate in research activities without this clearance.
7. Assessments of learners
 - a. Assessments should always be in line with the learning objectives explicitly stated in the syllabus in the learning management system (e.g., Canvas).
 - b. Throughout the DE curriculum there may be different types of assessments (e.g., multiple choice tests, essays, creative projects, public presentations, research projects and clinical skills. For each year this must be made explicit to students in the DE checklist and the syllabi in Canvas.
8. Grading
 - a. DE grading is pass/fail.
 - b. If a DE prefers to offer a different grading system, the DE director would have to get an exemption from the Medical Education Committee (MEC).
9. DE Withdrawal.
 - a. A student must inform the DE director and Registrar that they are withdrawing as soon as possible.
 - b. The DE director and Registrar will communicate in real time if there is a change in the DE roster during the year.
10. Student Evaluations of the DE
 - a. Students must complete evaluations of the DE and its teachers in order to receive their passing grades, any transcript notation and DE designation on their graduation certificate. This must be completed no later than two weeks after the end of the DE or the student will receive an "I" (incomplete) on their transcript. If they do not complete evaluations by graduation, the student will not receive a DE designation on their graduation certificate.
- D. Completion Date, Transcript and DE Designation on Graduation Certificate**
 1. Each DE should establish a date between March and May each year to submit the lists of students who are graduating who have successfully completed the DE. The DE director will submit one email with the list of students attached to the Registrar Office.
 2. Students receive a grade of Pass on their transcripts if they fulfill all requirements as outlined by the DE and approved by the TECT and the MEC.
 3. **As per UC policy, student may not receive designation of their DE until their graduation is conferred.**

IV. Responsibilities

- A.** The faculty director of the DE is responsible for:
 1. **OPERATIONS:** Overseeing the scheduling of program activity, curriculum activity, and communicating with the Registrar and administration.
 - a. See Procedures section for scheduling issues.
 2. **BUDGET:** The DE faculty is also responsible for the budget. This involves regular meetings with UME Financial Analyst Officer (FAO) and obtaining approval from the FAO of any proposed changes to the annual budget.
 3. **ADMINISTRATIVE PROCESSES.**
 - a. update the DE syllabi in Canvas.
 - b. communicate with UME to obtain student assessment.
 - c. collaborate with community and institutional partners.

- d. coordinate with the Registrar on the enrollment of students into the program.
- e. complete any grading activities.
- f. **must attend all meetings of the TECT.**
- g. **Must follow all aspect of the posted DE Director job responsibilities.**

V. Procedures

A. Scheduling

1. Y1 and Y2: Scheduling of DE activities must be done in collaboration with the pre-clerkship curriculum coordinators and the Executive Associate Dean for Preclerkship Medical Education. Sessions cannot be scheduled during the requisite main curriculum. Alloted time must occur during 'self study hours' which is shared by elective directors and DE directors.
2. Y3 and Y4: Scheduling of DE activities must be done in collaboration with the Director of Medical Education and Associate Dean for Clinical Medical Education (and the Director of Y4 Year if relevant). Sessions cannot be scheduled during the requisite clerkship, courses or clinical rotations.

B. DE Elective Policy.

1. The policy for DE electives is the same as for all electives for the rest of the medical school
2. For students: Each cleared student is subject to the School of Medicine Elective policy. Please refer to the current Policy 950-06-044 - Y1 and Y2 Electives: Vetting and Approving Electives, Scheduling, Student Enrollment, Academic Credit, Student and Faculty Director Responsibilities
 - a. A student can take a maximum of two concurrent electives in one elective period if capacity and space allow.
 - b. If a student is approved to be in a designated emphasis, they can only take one additional elective if the designated emphasis has scheduled instruction during that same elective period.
 - c. If a student is approved to be in two designated emphases, they cannot take an elective if both designated emphases have scheduled instruction during that same elective period.
3. **For DE directors:** DE directors must submit any proposal for Y1, 2, 3, or 4 electives for academic credit to the Electives Team (ET) for review and preliminary approval. Final approval is via the MEC.
 - a. This is required for DE-sponsored electives offered to an entire medical school class or for electives offered specifically for DE students only.
 - b. Academic credit is only given for Y1 and Y2 electives approved by the Electives Subcommittee and the Medical Education Committee within the UCR SOM. Research activities and service-learning activities will not qualify for Y1 and Y2 elective credits (except for approved Summer Research activities) at UCR SOM.
 - c. See the Travel Abroad, Clinical Components and Research Components listed above in "C. DE Curriculum" as those regulations also apply to both the DE-sponsored electives in all academic years and the DE overall.
 - d. Medical students cannot audit DE-sponsored Y1 and Y2 ELECTIVES as this is against Y1 and Y2 policies.

C. Advertisement. All students are informed by email or posted on the DE website of the upcoming DE enrolment policy prior to the start by the DE director or designated personnel.

D. Proposals to Offer a New DE

1. DE leaders must have a faculty appointment at UCR SOM or UCR.
2. Proposal for a new DE begins by the UCR/UCR SOM faculty completing a *“New DE Proposal Form”*. Proposals from students without a faculty lead are not accepted.
 - a. Those wishing to establish/offer a DE should submit the required documents to Senior Associate Dean for Medical Education (SADME) and the FAO for Medical Education for initial review.
 - b. The proposal for a DE should include a single set of requirements for all students.
 - c. The proposal form should be accompanied by a cover letter stating the rationale for offering the DE, and addressing the issue of resources required to run the DE. If no additional resources are required, this should be stated. If additional resources are required, they should be described. Please direct any questions, comments, or requests to establish a DE to the SADME.
 - d. The SADME will approve the proposal to go to the TECT for full review and discussion.
 - e. If the proposal receives preliminary approval in TECT, the TECT Co-chairs will refer the proposal for final review and approval by the MEC.
 - f. **Changes can NOT be made to the DE curriculum after it is approved by the MEC (e.g., added instructional hours, changes in enrollment criteria, changes in grading rubrics, addition of clinical/research/international experiences, etc.) without vetting through the SADME, the SECT and MEC again.**

VI. Forms/Instructions

- A. Cover letter
- B. DE Student Checklist
- C. DE Curriculum Implementation
- D. New Funding Request

Policy Number: 950-06-047

Approvals:

MEDICAL EDUCATION COMMITTEE 10/19/2023
COMPLIANCE COMMITTEE: (NA PER MEC APPROVAL)

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PABLO JOO., MD,
SENIOR ASSOCIATE DEAN, MEDICAL EDUCATION
SCHOOL OF MEDICINE

DATE

DocuSigned by:


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PAUL HACKMAN, J.D., L.L.M.
CHIEF COMPLIANCE AND PRIVACY OFFICER,
SCHOOL OF MEDICINE

DATE

DocuSigned by:


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11/13/2023 | 8:47 PM PST

DEBORAH DEAS, M.D., M.P.H
VICE CHANCELLOR, HEALTH SCIENCES
DEAN, SCHOOL OF MEDICINE

DATE