UC Riverside, School of Medicine Policies and Procedures

Policy Title: Grading Scales, Grading Criteria and Grade Reporting

Policy Number: 950-06-012

Responsible Officer:	Senior Associate Dean, Medical Education
Responsible Office:	Office of Medical Education
Origination Date:	04/17/2014
Date of Revision:	01/26/2017; 05/20/2021; 07/15/2021; 05/2022; 08/18/2022; 07/20/23; 09/21/23; 01/04/2024
Scope:	UCR SOM Undergraduate Students

I. Policy Summary

UCR SOM will ensure that students pursuing the MD degree maintain an acceptable rate of academic progress toward the completion of that degree and meet the expected academic standards.

II. Definitions

LACE: Longitudinal Ambulatory Care Experience

CBL: Case-Based Learning

LCME Element 9.4 (Assessment System) required that "A medical school ensures that, throughout its medical education program, there is a centralized system in place that employs a variety of measures (including direct observation) for the assessment of student achievement, including students' acquisition of the knowledge, core clinical skills (e.g., medical history-taking, physical examination), behaviors, and attitudes specified in medical education program objectives, and that ensures that all medical students achieve the same medical education program objectives."

III. Policy Text

Block Directors, Clerkship Directors and Faculty members with appropriate knowledge and expertise set the standards of achievement in each required learning experience in the UCR SOM education program. The Medical Education Committee and its subcommittees routinely review and approve the standards of achievement for courses and clerkships and for the overall curriculum.

IV. Procedures

A. MS1 and MS2 Years

- 1. Each block will conclude with the following:
 - a. A comprehensive final exam integrating all aspects of the course. This may include a laboratory practical component that is appropriate to the objectives of the course.
 - b. Individual clinical skills assessment (e.g., patient interviewing and/or physical examination). It is expected that the students' skills will grow throughout the year. Criteria for acceptable performance in each course will be published in advance.
 - c. During the course of each block, students are required to participate in case-based learning (CBL) sessions. Their performance in these CBLs will be evaluated by the faculty/clinician facilitator. In addition, students must complete the assigned number of required assignments.

- d. Longitudinal Ambulatory Care Experience (LACE) Students must complete the assigned number of office sessions and assigned deliverables.
- 2. In addition, there will be weekly in person "self-assessments." Their primary purpose is to provide a "low stakes" method that will allow students to evaluate progress and will allow faculty to identify students who may need individual assistance. In order to accomplish these purposes, students are expected to complete each quiz in the prescribed timeframe (see also Policy of Generating Reports of Program Learning Outcomes from Institutionally Written Multiple Choice Questions (MCQ) Exam and Quizzes. Policy Number: 950-06-043).
 - a. In years 1 and 2, weekly assessments count for 25% of the final grade. The quiz with the lowest score is dropped in formulating the final grade.
 - b. The Office of Student Affairs will be provided these scores weekly in order to monitor the feedback process and student progress throughout the year.
 - c. The final exam counts for 75% of the final grade.
- 3. The UCR School of Medicine grading policy has been established using competency-based criteria.
- 4. In Years 1 and 2, the minimum passing score for Block Course final and Lab exams is 70% or two standard deviations below the class mean (whichever is lower), and the minimum passing scores for Clinical Skills, Doctoring, CBL and LACE is 70%.
- 5. Students who do not achieve the minimum passing score will be tracked using an internal failing grade. Unsatisfactory performance in one block will result in an end-of-year remediation period of a minimum of two weeks followed by re-examination. Unsatisfactory performance on the re-examination will require repetition of the entire academic year. Two unsatisfactory block performances in one academic year will necessitate repetition of the entire academic year. Students will not be allowed to advance to the next instructional year until all blocks have been successfully completed.
- 6. A comprehensive Objective Structured Clinical Examinations (OSCE) will be held at the end of the first and second years. Students must pass each of these tests with an overall examination score of 70%. If a failure occurs in the Doctoring and Clinical Skills OSCE, remediation will occur in the proximate period after the failure.
- 7. Only two grades are possible in each pre-clinical block: Pass (Satisfactory) or Fail (No Credit). All block grades will be recorded internally as in progress (IP) until the end of the academic year. If a student fails one block, it will be recorded as IP-F. The student will be allowed to complete the academic year provided no additional failures occur. If more than one IP-F occurs within the academic year, student will receive the grade of Fail and the student must repeat the entire year, including all blocks previously passed.
- 8. In order to receive a Pass for each block, students must complete each of its components in all modules in a satisfactory manner. In order to advance to the next year of instruction, students must satisfactorily complete all blocks during the academic year. Grades and corresponding narrative summative assessment must be completed within 6 weeks of the end of the block.

B. MS3 Year

During the third and fourth clinical years, students may receive an Honors grade or a High Pass in addition to the Pass/Fail designation.

1. MS3 Clerkships

The grading scale for MS3 clerkships is Honors, High Pass, Pass and Fail.

- a. Grading in all third-year clerkships is comprised of the same three components with the same weighting:
 - i. Knowledge 35% of the final grade
 - ii. Clinical Performance 45% of the final grade
 - iii. Professionalism 20% of the final grade
- Each clerkship director determines the appropriate assessment methods for each of the three components (e.g., Knowledge – SHELF exam, oral exam; Clinical Performance – Faculty rating of the student performance, oral presentation; Professionalism – Small group participation, timely completion of requisites, attendance)
- c. Grading in all third-year clerkships is criterion-referenced.
 - i. The ideal grading distribution in clerkships is 20%Honors / 30% High Pass / 50% Pass however this is not a (norm-referenced) quota.
- d. For Clinical Performance Component (45%): Mean Summative Clinical Assessment Scores from Faculty and Residents of <2.00 is a failing score
- e. For a SHELF exam:
 - i. Passing: The minimum acceptable SHELF exam score is the 6th percentile (nationally normed) as set by the National Board of Medical Examiners.
 - The NBME reports the passing percentage threshold tied to the 6th percentile for each quarter during the academic year ("the SHELF norm table").
 - Clerkships using SHELF exams will grade this assessment using the 6th percentile and the corresponding passing percentage threshold that applies to the quarter when the examination was administered.
 - In the event the NBME does not report the 6th percentile and corresponding percentage for a quarter, the clerkship will use the next highest percentile / percentage cut off.

ii. Failure:

- A failure of the SHELF examination will require a satisfactory repeat of the shelf examination.
- If the student fails the SHELF examination during the first six months of the academic year, the student must repeat administration of the SHELF during the first six months of the academic year. If the student fails the SHELF examination during the second six months of the academic year, the student must repeat administration of the SHELF during the second six months of the academic year.
- iii. The student can retake the SHELF during:
 - the next available MS3 Elective period(s) along the student's third year track but during the corresponding first or second half of the academic year.
 - the Community-based Experience course if still forthcoming along the student's third year track but during the corresponding first or second half of the academic year.

- additional proposed remediations dates identified by the Office of Medical Education
- The timing for repeat administration may be modified with prior approval of both the Clerkship Director and the Associate Dean for Clinical Medical Education.
- A student who fails the SHELF on the second attempt constitutes an INCOMPLETE
 grade for the clerkship and must successfully repeat the entire clerkship experience
 and requisites again which includes repeating and successfully passing the SHELF on
 the third attempt. A failure of the SHELF on the third attempt will constitute a failure
 of the clerkship and referral to Progress and Promotions Committee.

f. For the Emergency Medicine (EM) final exam:

- i. Passing: The minimum acceptable exam score is a passing percentage threshold of 70%.
- ii. Failure:
 - A failure of the EM examination will require a satisfactory repeat of the EM
 examination. A student who fails the EM examination on the first attempt is ineligible
 to receive an honors grade regardless of the total accumulated points for the whole
 EM clerkship grade.
 - If the student fails the EM examination during the first six months of the academic
 year, the student must repeat administration of the EM during the first six months of
 the academic year. If the student fails the EM examination during the second six
 months of the academic year, the student must repeat administration of the EM
 during the second six months of the academic year.
- iii. The student can retake the EM exam during:
 - the next available MS3 Elective period(s) along the student's third year track but during the corresponding first or second half of the academic year.
 - the Community-based Experience course if still forthcoming along the student's third year track but during the corresponding first or second half of the academic year.
 - additional proposed remediations dates identified by the Office of Medical Education.
- iv. The timing for repeat administration may be modified with prior approval of both the Clerkship Director and the Associate Dean for Clinical Medical Education.
- v. A student who fails the EM exam on the second attempt constitutes an INCOMPLETE grade for the clerkship and must successfully repeat the entire clerkship experience and requisites again which includes repeating and successfully passing the EM Exam on the third attempt. A failure of the SHELF on the third attempt will constitute a failure of the clerkship and referral to Progress and Promotions Committee.

g. Failure of Clerkship(s)

- . A final grade of "Fail" in two third-year clerkships will result in the medical student not progressing to the fourth-year curriculum and having to successfully repeat the entire third-year curriculum before moving on.
- ii. A fail of one clerkship will result in the student working with the Director of Academic Success to customize a remediation plan. Remediation may not be possible depending on timing of fail during the academic year.

h. Third Year LACE

 The grading scale is Honors, High Pass, Pass, or Fail. For the third and final year of LACE (LACE 3), students must complete the assigned number of clinical sessions and required deliverables within each thread.

- ii. Transition to Clerkship Course (T2C2) No grade is assigned for T2C2.
- iii. Community-Based Learning Experiences (CBE) No grade is assigned for CBE.
- iv. MS3 Electives

All third year electives are graded pass/fail.

C. MS4 Year

1. MS4 Subinternship and Electives

The grading scale is Honors, High Pass, Pass, or Fail. The grade is a composite grade based upon clinical performance assessments completed by clinical supervisors during the rotation. The final grade is calculated by the UCR SOM 4th Year Director, which includes local and away rotations.

The following criteria are used to determine the composite grade.

Honors = 4.5 High Pass = 4.0-4.4

Pass = 3.9-1.5

Fail = < 1.5

The SLOE is a standardized letter of evaluation requested by some emergency medicine and other residency programs as part of the application process in ERAS. The SLOE may not replace the official UCR SOM standardized assessment of student clinical performance form used to submit a summative grade for a fourth year UCR student.

2. Radiology

The grading scale is Honors, High Pass, Pass, or Fail. The grade will be a composite grade based upon pre-quizzes, post-quizzes, exams, cases, class attendance and participation. The Radiology course director will provide the final grade for students.

Grade distribution per block

Honors: Top 20% of the class High pass: top 50% of the class Pass: above 70% absolute score

3. Transition to Residency Course

The grading scale is Pass/Fail. Students must attend assigned activities including lectures, patient simulations, small group sessions, and self-directed online learning. A grade of passing will be earned by a student after they have successfully attended and completed all required activities assigned to them OR after they have been excused from any activities not completed OR after they have completed an appropriate make up for any activity, they neither attended nor were excused from. The decision to excuse a student from an activity, as well as the nature of any make up assignment, will be at the discretion of the course director.

4. Critical Care Medicine Selectives

The grading scale is Honors, High Pass, Pass, or Fail. The grade will be a composite grade based upon the following: clinical performance (50%) using end of rotation assessment forms, non-clinical performance that includes participation in small groups, completion of online learning modules, completion of critical care procedure and diagnosis log and duty hour logs, and a final presentation. The ICU course director will provide the final grade for students.

V. Related Information

Medical Student Handbook

DocuSign Envelope ID: 28D4966E-8BB9-462B-9068-2C2802565E37 **Policy Number:** 950-06-012 Approvals: MEDICAL EDUCATION COMMITTEE (09/21/2023) DocuSigned by: Pablo Joo 1/10/2024 | 12:01 PM PST PABLO JOO., MD, DATE SENIOR ASSOCIATE DEAN, MEDICAL EDUCATION SCHOOL OF MEDICINE DocuSigned by: Paul Hackman 1/9/2024 | 5:08 PM PST PAUL HACKMAN, J.D., L.LM. DATE CHIEF COMPLIANCE AND PRIVACY OFFICER, SCHOOL OF MEDICINE

DocuSigned by:

Deborale Deas 1/10/2024 | 3:18 PM PST

DEBORAH DEAS, M.D., M.P.H DATE VICE CHANCELLOR, HEALTH SCIENCES

DEAN, SCHOOL OF MEDICINE