

**UC Riverside, School of Medicine Policies and Procedures****Policy Title:** Required Mid-clerkship Feedback**Policy Number:** 950-06-018

<b>Responsible Officer:</b>	Senior Associate Dean for Medical Education
<b>Responsible Office:</b>	Office of Medical Education
<b>Origination Date:</b>	05/20/2021
<b>Date of Revision:</b>	05/18/2023, 04/18/2024
<b>Review Date:</b>	08/2022, 05/18/23 (Reviewed by CCS & MEC), 12/21/2023
<b>Scope:</b>	All Medical Students on Required Clerkship Rotations

**I. Policy Summary**

**Purpose:** To set standards for a mandatory mid-clerkship feedback session at UCR School of Medicine for third-year medical students on required clinical clerkships and for first-, second- and third-year medical students on the required Longitudinal Ambulatory Care Experience (LACE 1, 2 and 3).

**Overview:** The Liaison Committee on Medical Education requires that:

“The medical school's curricular governance committee ensures that each medical student is assessed and provided with formal formative feedback early enough during each required course or clerkship to allow sufficient time for remediation. Formal feedback occurs at least at the midpoint of the course or clerkship. A course or clerkship less than four weeks in length provides alternate means by which medical students can measure their progress in learning.” [LCME Element 9.7 – Formative Assessment and Feedback]

**II. Definitions**

- A. CCS = Clinical Curriculum Subcommittee
- B. LACE = Longitudinal Ambulatory Care Experience
- C. MEC = Medical Education Committee
- D. OAE = Office of Assessment and Evaluation
- E. PCCS = Pre-clerkship Curriculum Subcommittee

**III. Policy Text**

- A. Students on required first-, second- and third-year clinical rotations must receive individual mid-clerkship feedback:
  - 1. MS1 Year – LACE 1 – mid-year
  - 2. MS2 Year – LACE 2 – mid-year
  - 3. MS3 Year
    - a. Family Medicine, Emergency Medicine, Neurology, Psychiatry – mid-clerkship rotation
    - b. LACE 3 – mid-year
    - c. Integrated Block Clerkships: Internal Medicine / Surgery and Obstetrics and Gynecology / Pediatrics – prior to the end of each clerkship rotation in the first half of the integrated block
- B. Fourth-year students and faculty on required clinical selectives (e.g., Critical Care Medicine, Sub-internship) that can be satisfied in different departments (e.g., pediatrics, medicine, critical care or surgery for the sub-internship selective) or on away rotations (the critical care medicine rotation are strongly encouraged to hold a formal midway feedback session.

- C. Community-based Experiences (CBE), Transition to Residency, Radiology – are third- and fourth-year courses that provide feedback during their program in the form of formative quizzes, self-reflection exercises and/or debriefing discussions.
- D. The mid-clerkship feedback session is purely formative and will not be indicative of or incorporated into the student's final grade and narrative assessment. Mid-clerkship formative assessment is for constructive feedback only and should not contribute to students' clerkship grades. Faculty mentors meeting with students to provide mid-clerkship feedback are not to discuss students' grades during these sessions.
- E. Mid-clerkship feedback must be given either by the clerkship director, faculty site director or another faculty mentor designated by the clerkship director or faculty site director. The clerkship director or faculty site director will inform the student in advance of who will conduct the meeting, and where and when it will take place.
- F. Mid-clerkship feedback sessions must include the following components:
  - 1. Review of progress in completion of required elements of the rotation
  - 2. Review of required clinical encounter (RCE) patient logs.
  - 3. Discussion of the completion or plan for completion of the Observed Clinical Encounter (OCE).
  - 4. Review of the student work hours.
  - 5. Meaningful review of clinical performance.
    - a. If the designated faculty giving feedback does not have direct knowledge of student's performance, they must obtain it through written or verbal reports from those who do.
    - b. Students must complete a self-assessment of their performance for review with the faculty member at the meeting.
    - c. The designated faculty and student must identify areas of strength and areas needing improvement.
  - 6. Setting of learning goals for remainder of rotation.
- G. The mid-clerkship feedback session must be documented in each student's central clerkship file:
  - 1. The student and assigned site director (or designee) must use the UCR School of Medicine's Mid-Rotation Formative Assessment of Medical Student form.
  - 2. This mid- rotation feedback form requires a student and faculty signature.
  - 3. The student must return the form to the central clerkship coordinator.
  - 4. Students can email a scanned copy or photo of the signed form to the central clerkship coordinator.
  - 5. Assignment of a grade will be delayed for cases in which the dually signed form is not returned to the clerkship coordinator by 11:59 pm on the last Sunday of the clerkship. In these cases, clerkship grades will be released upon completion of this requisite or by six weeks after the conclusion of the clerkship rotation (whichever comes first).
  - 6. Clerkship directors and coordinators must verify completion of the mid-cycle feedback meetings for all students.

#### IV. Responsibilities

- A. Clerkship Coordinators are responsible for monitoring the completion of the mid-clerkship feedback requisite by each individual student each rotation cycle.
- B. The OAE is responsible for providing a mid-clerkship feedback session completion data to each clerkship director, clerkship coordinator, and the Associate Dean for Clinical Medical Education according to the following schedule:

1. Every six months for required clerkships that occur twice a year:
  - Clerkships in family medicine, emergency medicine, neuroscience, internal medicine, surgery, obstetrics and gynecology, pediatrics and psychiatry
2. Every 12 months for clerkships that occur once a year:
  - LACE 1, 2, and 3OAE data analysts export the data for these completion reports from the mid-clerkship feedback items on the Student Evaluation of Clerkships (SEC) form.
- C. The CCS and the Associate Dean for Clinical Medical Education monitor the completion rate of formal mid-clerkship feedback for every UCR medical student. Feedback to every student must be completed in a timely manner to allow sufficient time for personal growth and remediation.

#### V. Procedures

The CCS reviews students' completion rate of mid-clerkship feedback every six months for learning units that occur biannually, and every 12 months for learning units that occur annually. When the OAE identifies any gaps in the completion rates for mid-clerkship feedback, the clerkship director is required to complete a written strategic action plan for closing the gap, then to present this strategic plan to the CCS. The MEC provides final review and ratification of the plans to close gaps.

#### VI. Forms/Instructions

Mid Rotation Formative Assessment of Medical Student form

Policy Number: 950-06-018

**Approvals:**

**CLINICAL CURRICULUM SUBCOMMITTEE (05/16/2023)**

**MEDICAL EDUCATION COMMITTEE (04/18/2024)**

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