I. Policy Summary
This Policy sets improvement standards for promoting opportunities for active learning methodologies at UCR SOM.

II. Definitions
Active-learning - An approach to instruction in which students engage with material by doing things that directly enable them to reflect on, synthesize, and apply the concepts being taught. Active learning can occur in a variety of settings, including the classroom, the clinical environment and/or on-line. Active learning is not defined by the number of students involved and can be used to engage students individually and within small or large group environments. Use of audience response system technology during what is primarily a lecture does not make the lecture “active learning”.

LCME definition of self-directed learning: Includes all of the following components as a single unified sequence that occurs over a relatively short time: 1) the medical student’s self-assessment of his/her learning needs; 2) the medical student’s independent identification, analysis, and synthesis of relevant information; and 3) the medical student’s appraisal of the credibility of information sources; and 4) the facilitator’s assessment of and feedback to the student on his/her information seeking skills. (Element 6.3 as of DCI AY2024-25).

III. Policy Text
A. UCR SOM promotes opportunities for students to engage in more active and self-directed learning in courses. Self-directed Learning (SDL) is one form of active learning.

B. Desired Benchmark Values for Active Learning Hours:
1. Benchmark 1: A minimum of 50% of course instructional time must be allocated for active learning methodologies in each pre-clerkship block course.
2. Benchmark 2: A minimum of 50% of instructional time must be allocated for active learning methodologies in the pre-clerkship curricular phase years.
3. The full list of instructional methods that are classified as “active learning” and “not active learning” are found in the policy “Nomenclature System for Instructional Methods and Identification of Instructional Methods Considered Active Learning (950-06-014).”
4. The following equation will be used to calculate the percentage of active learning for each course:

<table>
<thead>
<tr>
<th>Total Number of Hours Active Learning in a Course</th>
<th>=</th>
<th>% of hours of active learning time in a course</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Number of Course Hours</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. Optional pre-examination review sessions are not counted as part of the total number of course hours and no instructional method will be assigned.

6. Post-quiz and examination review sessions are not counted as part of the total number of course hours and no instructional method will be assigned.
IV. Procedures
   A. The Office of Assessment and Evaluation annually provides data to block course directors that are presented and discussed at the Pre-clerkship Curriculum Subcommittee (PCCS) for preliminary review and approval together with the Block course directors’ action plan for program improvements. The draft reports and associated action plans are then presented at the MEC for final review and approval. The plans will also address any gaps in achieving the minimum of 50% of instructional time for active learning for the course. Hence, monitoring and oversight of this CQI program evaluation will be shared between the PCCS, the Assessment and Evaluation Team, and MEC.

V. Related Information
   Policy - Nomenclature System for Instructional Methods and Identification of Instructional Methods Considered Active Learning (950-06-014)

Approvals:
MEDICAL EDUCATION COMMITTEE
(07/21/2022)

DocuSigned by:
Pablo Joo
PABLO JOO, MD,
SENIOR ASSOCIATE DEAN, MEDICAL EDUCATION
SCHOOL OF MEDICINE

1/10/2024 | 12:01 PM PST  
DATE

DocuSigned by:
Paul Hackman
PAUL HACKMAN, J.D., L.LM.
CHIEF COMPLIANCE AND PRIVACY OFFICER,
SCHOOL OF MEDICINE

1/9/2024 | 5:08 PM PST  
DATE

DocuSigned by:
Deborah Deas
DEBORAH DEAS, M.D., M.P.H
VICE CHANCELLOR, HEALTH SCIENCES
DEAN, SCHOOL OF MEDICINE

1/10/2024 | 3:18 PM PST  
DATE