

Clerkship Review Guidelines

All clerkships within the 3rd year shall be reviewed periodically. Clerkships will be reviewed at four (4) year intervals.

When a clerkship is selected for review, the Chair of the Clinical Curriculum Subcommittee will alert the Chair of the Department and the Clerkships Directors. The Chair of the CCSC in discussion with the senior associate dean for clinical studies appoint a Chair of the Review Committee.

It will be the responsibility of the Chair of the Review Committee to ensure that the Chair of the Department, the Clerkships Directors and other members of the faculty participate in the review process.

The goal of the clerkship review is to ensure that instructional methodology and content of the clerkship is academically sound and supports the educational mission of the SGU SOM.. The review will include the gathering of data including student feedback, assessment data, faculty reflections, learning objectives and mapping, required clinical experiences, remediation plans, resources as well as reflecting on the improvement plan generated from the previous review.

It is important to emphasize that the review process is not intended to be threatening but rather to be helpful and constructive. Confidentiality must also be maintained throughout the process. All deliberations and reports must be kept confidential. The review would accompany only Curriculum related issues, objectives, teaching methods and evaluation. Faculty Evaluation and administration matters of the department are not included.

CLERKSHIP REVIEW PROCESS

Clerkship reviews will be organized and will proceed according to a schedule as follows:

1. The Curriculum Committee decides on the schedule for the clerkship reviews as part of their annual calendar.
2. The Chair of the Clinical Curriculum Subcommittee and the senior associate dean for clinical studies meet to select the Chair of the Review Committee (see also Appendix 1). The Chair must not be a faculty member that is responsible for teaching in the clerkship that is being reviewed. Following the selection of the Chair, the members of the Review Committee are selected. The members are selected by the Chair of the Review Committee. A recommended minimum of four members that do not teach in the clerkship that is being reviewed should participate. The Review Committee should consist of members from all levels (Instructors, Assistant, Associate and Full Professors) and from a range of disciplines. Once all the Review Committee members have been selected the names are passed to the Chair of the Department for approval. The Chair of the review committee and the Chair of the Department have the opportunity to appeal any of the members if there is a perceived conflict of interest.
3. It is the responsibility of the Chair of the Review Committee to establish clear expectations for each of the members at the outset.
4. The Chair of the Review Committee should consult the Chair of the Department and the clerkship directors about the criteria, expectations and timetable of the review process.
5. The Chair and the clerkship directors are required to submit a report on the current status of the clerkship that should include:
 1. Course objectives and goals
 2. List of faculty
 3. Description of how the clerkship is run
 4. Description of the changes that have been adopted since the last review if appropriate.
6. The Chair and the clerkship directors should also make the following materials available to the review team:

1. Full access to course Sakai site
2. Clinical Training Manual section detailing the clerkship
3. Access to summative and formative assessments for the past four years
4. Access to Firecracker
5. Textbooks/supplemental materials
6. Student evaluations of the clerkship for the last four years
7. Clerkship grades for the last four years, including NBME grades
8. Any other data (e.g., minutes of meetings) pertaining to the clerkship
7. A sample of teaching faculty of the clerkship under review will be asked to submit a written SWOT report to the Chair of the review Committee. This report will remain confidential.
8. The Review Committee will select a sample of faculty to meet for live/virtual interviews during the review process. These faculty will include:
 1. Chair of the Department
 2. clerkship directors
 3. DMEs
 4. A random selection of faculty that teach on the clerkship.
9. The Review Committee will also interview students (selected by SGA) who are:
 1. currently taking the clerkship
 2. have recently (within the last 12 months) taken the clerkship
10. The main review process will be conducted over a period of 1-2 weeks where all the live interviews will be conducted and the resources provided by the Chair of the Department and the clerkship directors are reviewed.
11. Each member of the review team will submit a provisional individual written report to the Chair of Review Committee within a week of the final live meeting.
12. The Chair of the Review Committee will compose a final report (see Appendix 1) using the individual team members reports as guidance. This report will be presented to Clinical Curriculum Subcommittee for review.
13. The Clinical Curriculum Subcommittee then work with the Chair of the Department and the clerkship directors to propose an improvement plan based on the recommendations of the Review Committee.
14. The improvement plan is presented to the Curriculum Committee along with the data from the Review Committee.
15. Once the improvement plan has been approved by the Curriculum Committee it is forwarded (along with the data) to the dean for approval.
16. The improvement plan is then implemented.
17. The Chair of the Department and the clerkship directors will send to the Chair of the Clinical Curriculum Subcommittee an interim report within twelve months after the review of the course and a final report within 24 months after the review. The interim report should include an update on the implementation and results of the improvement plan.