

POLICY FOR PRE-INFORMATION ON STUDENTS ENCOUNTERING SERIOUS DIFFICULTIES WHICH ADVERSELY AFFECT ACADEMIC/CLINICAL PERFORMANCE

Introduction: An extensive survey of clinical faculty members and residents in North American medical schools indicates that one of the most frequently noted serious problem in evaluation systems is the lack of information about problems with knowledge, skills and attitudes that students may have had in previous rotations. (Journal of Medical Education, 1986, 61:83-88) On the other hand, there is tremendous variability regarding policies that address the struggling medical student. (Acad Med, 2008;83(9):876-881) There is evidence to suggest that using a common format for forward feeding about student progress will be fair to the student and society (Acad Med. 2008;83(9):802-803) . After extensive discussion at UMEC in 1990, it was proposed that a formal pre-information system be established for serious problems identified at Progress Committee level. This policy has recently been reevaluated at the Curriculum Committee in 2009. Students would be notified and informed as to what the perceived difficulties are. They will be aware of what information is being forwarded and to whom. There are two important reasons for this policy.

Of most importance is the opportunity for faculty to work with the student in remediation or other resolution of identified serious problems. Secondly, in those rare circumstances where indicated, the public would be protected from potential harm.

Process:

1. The student(s) is/are identified as having serious difficulties which adversely affect academic/clinical performance at the Progress Committee level. The Progress Committee is charged with reviewing the particular circumstances of the student and determining what actions should be taken to deal with the perceived difficulties.
2. On behalf of the Progress Committee, the Associate Dean of Undergraduate Medical Education will meet with the student in order to specify with the student the particular problem(s) and explore options and any available opportunities for remediation.
3. Subsequent to the meeting, the Associate Dean of Undergraduate Medical Education may, on behalf of the Progress Committee, write a confidential letter to selected course chairs/co-chairs outlining the perceived problems, the recommended remediation or other resolution, and any additional information/instructions deemed appropriate. This letter may be shared with specific preceptors in the selected course at the discretion of the course chair in consultation with the Associate Dean. The student will be given a copy of this correspondence which would also be placed in his/her file. If a student objects to the

content of the letter, the student may submit a letter stating his/her position on the matter which shall be placed in the student's file.

4. Course chairs/co-chairs so informed will be required to document in writing the performance of the student on their rotation. Degree of success of remediation and/or other options pursued and/or other performance difficulties will be documented in the student's file.

Approved by the COPS Curriculum Committee; Nov 26, 2009

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