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November 1, 2016

Joseph I. Shapiro, MD Dean Marshall University Joan C. Edwards School of Medicine 1600 Medical Center Drive, Suite 3400 Huntington, WV 25755-3655

RE: Status Report dated August 16, 2016

Dear Dr. Shapiro:

At its October 18-19, 2016 meeting, the Liaison Committee on Medical Education (LCME) reviewed the status report submitted on August 16, 2016 on behalf of the medical education program leading to the MD degree at the Marshall University Joan C. Edwards School of Medicine.

The current LCME accreditation standards and elements went into effect July 1, 2015. As a consequence, references to old standards have been excluded. The status report addressed the program's performance in the following elements: Element 3.3 (diversity/pipeline programs and partnerships), Element 4.2 (scholarly productivity), Element 5.10 (resources used by transfer/visiting students), and Element 12.1 (financial aid/debt management counseling/student educational debt).

Based on the information provided, the LCME voted as follows:

Required Follow-Up:	Status report due by August 15, 2017
<b>Next Full Survey Visit:</b>	2018-19 academic year

Section I of this letter summarizes the medical education program's compliance with each of the 12 LCME standards, based on performance in the elements that collectively constitute each standard. Section II of this letter summarizes the LCME's determinations for accreditation elements addressed in the status report. Section III of this letter summarizes the required follow-up. Section IV contains additional information important for the medical education program.

#### I. LCME DETERMINATIONS OF COMPLIANCE WITH ACCREDITATION STANDARDS

LCME determinations of compliance with standards that were not addressed in the status report were taken from the most recent LCME review of the school's compliance with those standards.

Standard	LCME Determination
Standard 1: Mission, Planning, Organization, and Integrity	C
Standard 2: Leadership and Administration	C
Standard 3: Academic and Learning Environments	CM
Standard 4: Faculty Preparation, Productivity, Participation, and Policies	C
Standard 5: Educational Resources and Infrastructure	NC*
Standard 6: Competencies, Curricular Objectives, and Curricular Design	C
Standard 7: Curricular Content	C
Standard 8: Curricular Management, Evaluation, and Enhancement	C
Standard 9: Teaching, Supervision, Assessment, and Student and Patient Safety	С
Standard 10: Medical Student Selection, Assignment, and Progress	С
Standard 11: Medical Student Academic Support, Career Advising, and Educational Records	С
Standard 12: Medical Student Health Services, Personal Counseling, and Financial Aid Services	CM

C = Compliance, CM = Compliance with a Need for Monitoring, NC = Noncompliance

### II. LCME DETERMINATIONS FOR ACCREDITATION ELEMENTS

Element	LCME Determination
Element 3.3 (diversity/pipeline programs and partnerships)	SM
Element 4.2 (scholarly productivity)	S
Element 5.5 (resources for clinical instruction)	U
Element 5.10 (resources used by transfer/visiting students)	U
Element 12.1 (financial aid/debt management counseling/student educational debt)	SM

S = Satisfactory, SM = Satisfactory with a Need for Monitoring, U = Unsatisfactory

## III. REQUIRED FOLLOW-UP

The LCME requests a status report due by **August 15, 2017** containing the information listed below. Please include a dated and signed cover letter addressed to both LCME Co-Secretaries. Email the status report to <a href="lemesubmissions@aamc.org">lcmesubmissions@aamc.org</a> as a single PDF file. Do not mail a paper copy of the status report. It is advised that you do not include hyperlinks within the document(s) of the submission. If a reference to a website is necessary, create an appendix with a table of contents and include PDFs of the webpages and/or screenshots. Contact the LCME Co-Secretaries for clarification on a specific request. Email <a href="lemesubmissions@aamc.org">lcmesubmissions@aamc.org</a> for questions regarding the submission or formatting of materials.

<sup>\*</sup> United States Department of Education regulations require that the LCME document compliance with all LCME accreditation standards within two years of the LCME sending the program its initial notification of noncompliance determinations. Therefore, the LCME requires timely follow-up on all determinations of noncompliance.

In your status report, please specify your program's current performance in each element (i.e., unsatisfactory or satisfactory with a need for monitoring).

# Element 3.3 (diversity/pipeline programs and partnerships) – Satisfactory with a Need for Monitoring

1. Complete the following table with offers made to applicants for faculty positions from the school's diversity categories and total applicants (diversity and non-diversity). Add rows for diversity categories.

School-identified diversity categories	AY 2015-16			AY 2016-17		
	Declined	Hired	Total Offers	Declined	Hired	Total Offers
				T	T	
All applicants for faculty positions						
(total diversity and non-diversity)						

2. Complete the following table with the requested data for the indicated academic years, adding rows as needed.

School-	No. (%) o	f first-year	No. (%) of All Students		No (%) of Faculty			
identified	Stuc	lents			Basic Science		Clinical	
Diversity	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18	2016-17	2017-18
Categories								

3. Describe any new activities undertaken or resources added during the 2016-17 academic year to support diversity initiatives.

## Element 5.5 (resources for clinical instruction) – Unsatisfactory

- 1. Provide the results of a survey of students who completed required clinical clerkships during the 2016-17 academic year (graduating class of 2018) on satisfaction with the following in each required third-year clerkship:
  - a. Adequacy of patients for the required clinical encounters and procedures
  - b. Adequacy of the patient mix for the required clinical encounters and procedures
  - c. Availability of faculty clinical supervision
  - d. Availability of resident clinical supervision
  - e. Adequacy of didactic teaching
  - f. Overall clerkship quality

Provide the data by clerkship and clinical site and include the response rate.

2. Note whether the addition of new sites has resulted in enhanced clinical resources for enrolled students. For example, describe the status of implementing clinical teaching for Marshall medical students the Huntington Internal Medicine Group.

### Element 5.10 (resources used by transfer/visiting students) – Unsatisfactory

- 1. Describe the role(s) of the Director of International Programs and the Program Coordinator. How do these individuals interact with visiting students from St. George's University of London and other external institutions?
- 2. For the 2015-16 and 2016-17 academic years, provide the number of visiting medical students completing each required clinical clerkship:
  - a. At the sites used by Marshall medical students
  - b. At other Marshall clinical sites

# Element 12.1 (financial aid/debt management counseling/student educational debt) – Satisfactory with a Need for Monitoring

- 1. Provide a copy of the most recent LCME Part I-B Financial Aid Questionnaire.
- 2. Complete the following table for the indicted years. Data on median debt and national benchmark data should be derived from the AAMC Medical School Graduation Questionnaire (GQ).

	GQ 2	2016	GQ 2017	
	School %	National %	School %	National %
Median medical school debt				
Percent of graduates with				
debt <b>equal to or</b> greater than \$200,000				
Median overall educational				
debt*				
Percent of graduates with				
overall educational debt*				
equal to or greater than				
\$200,000				

<sup>\*</sup> Includes undergraduate college/university debt

3. Describe the efforts during the 2016-17 academic year to enhance the availability of scholarship funding. Note successes to date. Provide the total amount of scholarship support currently available for medical students.

#### IV. IMPORTANT INFORMATION FOR THE MEDICAL EDUCATION PROGRAM

#### ACCREDITATION STANDARDS

To review the current list of LCME accreditation standards and elements, please refer to the most recent version of the *Functions and Structure of a Medical School* document, available on the LCME website, <a href="http://lcme.org/publications/">http://lcme.org/publications/</a>. Programs that have status reports due to the LCME are responsible for aligning the follow-up items in the reports with the *Functions and Structure of a Medical School* document whose effective academic year corresponds with the academic year in which each status report is due.

### CHANGES THAT REQUIRE NOTIFICATION TO THE LCME

The LCME awards accreditation to a medical education program based on a judgment that there exists an appropriate balance between student enrollment and the total resources of the institution, including faculty, facilities, and operating budget. If there are plans to significantly modify the educational program, or if there is to be a substantial change in either student enrollment or in the resources of the institution such that the balance becomes distorted, the LCME expects to receive advance notice of the proposed change. Substantial changes may lead the LCME to re-evaluate a program's accreditation status. More specific information about notification requirements is available on the LCME website, <a href="http://lcme.org/about/accreditation-process-overview/#maintaining-accreditation">http://lcme.org/about/accreditation-process-overview/#maintaining-accreditation</a>.

Sincerely,

Barbara Barzansky, PhD, MHPE

LCME Co-Secretary

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Veronica M. Catanese, MD, MBA

Veronica M. Catanese

LCME Co-Secretary