



FACULTY HANDBOOK & BYLAWS

May, 2016

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This Faculty Handbook was reviewed, discussed, and revised in May 2016 by the faculty of the School. During final drafts and subsequent to approval, the document was re-organized, as approved, for better flow. Actions of faculty committees and the faculty after May 2016 have been inserted, for completeness, with the date of approval.

1 VISION, MISSION, AND CORE VALUES

VISION

To improve access to quality health care and enhance the health status of the residents of the communities served by our graduates.

MISSION

To educate physicians to meet all health care needs of patients within both current and future health care systems.

CORE MISSION AREAS

TEACHING: Educational programs that graduate caring, compassionate, competent physicians.

RESEARCH: Embracing research as an integral component of our mission including its importance to medical practice and science-based care, the nature, objectives, processes, and scientific evaluation of research in medical education and practice, teaching, patient care, and community service.

COMMUNITY SERVICE: Reaching out and partnering with neighborhoods and communities and public health clinics.

CORE VALUES

INTEGRITY: Unwavering adherence to a professional and ethical code of conduct.

RESPECT AND HONESTY: Conducting ourselves in a manner that demonstrates the value of an individual.

COMPETENCE: Demonstrating mastery of skills on one's profession or vocation.

COMPASSION: Showing empathy and concern for the well-being of others.

COLLABORATION: Working together and respecting each other's contributions.

STRIVING FOR SUCCESS: Performing at the highest level possible.

SERVICE: Offering our talents and skill toward betterment of our communities.

2 ORGANIZATION AND ADMINISTRATION OF THE SCHOOL

2.1 OVERVIEW

2.1.1 Trinity School of Medicine (TSOM) was established to improve health care and access to health care. TSOM meets that mission by offering educational programs in medicine and in pre-medicine. The School of Medicine, hereinafter called the School, is delegated by the Board of Trustees the responsibility to conduct programs leading to the awarding of the degree of Doctor of Medicine.

- 2.1.2 With approval of the Board of Trustees, the School shall have the fullest measure of autonomy consistent with general educational policy. In Questions of doubt concerning the proper limits of this autonomy, the Chancellor shall be entitled to appeal to the Board of Trustees for a ruling.
- 2.1.3 The educational activities of TSOM receive oversight by the faculty governance structures of the programs and School, and by the administration of the School. The Dean is appointed by and serves under the authority of the Chancellor, which authorizes the Dean to appoint faculty and staff and organize the School.
- 2.1.4 Trinity School of Medicine is organized into administrative departments, or units, and academic programs approved by the Dean. Each department or program has a discipline director, or chair, or director who is responsible for the administration of that unit.

2.2 ADMINISTRATIVE STAFF

The Administrative Staff of TSOM consists of the Dean, Associate and Assistant Deans, and support staff.

2.3 FUNCTIONS OF THE DEAN

The Dean is the chief academic and executive officer of TSOM and is responsible with the Chancellor and Board of Trustees for all aspects of the School. The Dean reports to the Chancellor. The Chancellor may conduct an evaluation of the Dean at any time.

- 2.3.1 Other academic and administrative officers are employed to assist the Dean in the performance of his or her duties. Their duties are assigned by the Dean and are subject to change, as circumstances require.
- 2.3.2 The Dean exercises supervision over all School personnel. Any grievances and appeals must be made through the Dean. The primary responsibility for the selection of new faculty and staff for the School resides with the Dean. The Dean makes and authorizes the offer of appointment. All appointments must be in accordance with the policies and procedures of TSOM.
- 2.3.3 The Dean will conduct an evaluation of each Administrative Dean, Department Chair, and Unit Director or program once a year. The evaluations may be written or verbal and must be documented.
- 2.3.4 The Dean is responsible for assuring adherence to the approved budget of the School. The administration of the budget must occur within the framework and limits of School fiscal policies.

2.4 FACULTY

- 2.4.1 The Faculty of the School includes the Dean and all persons with full or part-time appointments with academic rank. Faculty ranks are Professor, Associate Professor, Assistant Professor, Preceptor, and Instructor and may be prefaced by clinical, visiting, or adjunct when appropriate.
- 2.4.2 The Dean is an ex officio voting member of the Faculty of the School.
- 2.4.3 Faculty are expected to subscribe to the highest standards of teaching, research, and service in support of the School's academic mission, as well as the highest standards of conduct and professional behavior.

- 2.4.4 The Faculty, with approval of the Dean, has the authority to establish academic policies. This includes admissions standards, standards for the evaluation of the academic performance of faculty (peer review) and of students, certifying students for graduation from the programs of the School and making recommendations to the Dean concerning internal administration and the implementation of programs.
- 2.4.5 The Faculty, subject to approval by the Dean, shall have jurisdiction in educational matters falling within the scope of its programs, including the determination of its curricula. Faculty proposals that involve budgetary decisions require approval by the administration of the School.
- 2.4.6 Standards for promotion shall be determined by the Faculty and approved by the Dean.
- 2.4.7 All full-time faculty members of the School shall be evaluated annually by the chair of their respective department, unit or program administrator, and the results of such evaluations shall be shared with the individual faculty member being evaluated. Evaluations may be written or verbal and must be documented.
- 2.4.8 All members of the Faculty are entitled to academic freedom. It is thus the policy of TSOM to maintain and encourage full freedom, within the law, of inquiry, discourse, teaching, research and publication and to protect any member of the academic staff against influences, from within or outside of the School, which would restrict faculty members in the exercise of freedoms in their area of scholarly interest.

2.5 VACATION AND LEAVE POLICY¹

- 2.5.1 Vacation Leave. Vacation days are defined as days scheduled to be off-campus during the scheduled 15-week term and do not include weekends, Vincentian holidays, or official days declared by the school as closed.
- 2.5.2 Each faculty member will receive 20 days of paid vacation per academic year that may be taken during any term. Vacation leave may not interfere with teaching assignments or obligations and in meeting these expectations. However, a faculty member may request a colleague to cover their assignments in order to take vacation leave.
- 2.5.3 In the case of examinations, another faculty member or the administration may be requested to deliver the examination and proceed with delivering grades to students or finalizing grades as necessary.
- 2.5.4 Any vacation leave carried forward into a new calendar year requires the advance approval by the Dean in writing.
- 2.5.5 Requests for vacation leave should be made at least 2 months in advance to facilitate other scheduling needs.
- 2.5.6 To the extent possible before schedules are finalized, faculty may request courses end early or start late to facilitate vacation leave.

¹ Approved by the Faculty 070616

- 2.5.7 The administration may deny a vacation leave request in order to maintain adequate delivery of the academic programs or when scheduling becomes problematic for students or courses. A modification in the request may also be requested or proposed.
- 2.5.8 Between Terms. The academic calendar is composed of three terms of 15 weeks in length. The beginning and ending dates of the term are posted. The School is open between terms for business of the School, except as noted below. However, vacation leave is not required to be off-campus during these periods.
- 2.5.9 Between the end of the fall term and the beginning of the spring term, the school will be closed for a period of approximately two weeks following the finalization and posting of term grades. Staff will be affected differently than faculty during this period due to the nature of their responsibilities.
- 2.5.10 Between spring and summer terms and summer and fall terms, faculty are not required to declare vacation leave.
- 2.5.11 In the event of committee or other School obligations scheduled between terms when the School is open, such as preparing for the next term, these may be completed remotely as needed. A request to attend a meeting through a conference or video call should be made through IT for these arrangements.

2.6 PROFESSIONAL DEVELOPMENT AND TRAINING POLICY²

- Trinity School of Medicine recognizes the importance of encouraging and supporting employees in professional development activities that are related to their employment. This extends to work related professional development opportunities including, but not exclusive of eLearning, workshops, seminars, courses, classes, and professional conferences.
- 2.6.1 The purpose of this policy is to provide guidelines for administering professional development and training at Trinity School of Medicine.
- 2.6.2 The goal of the policy is 1) to foster and sustain a collegial community of lifelong learners capable of meeting the present and future challenges of academic medicine and 2) to identify opportunities for development for faculty and staff committed to the long term success of the institution.
- 2.6.3 Professional development and training is defined as learning undertaken by employees (faculty and staff) to maintain and advance their skills, knowledge and competencies, specifically as they relate and add value to the job and institution. It is a dynamic process and may be achieved through professional experience, collaboration, mentoring, participation in activities of professional organizations, independent study and research, and coursework.
- 2.6.4 Responsibility for professional training and development extends to all levels of the organization:
- The institution is responsible for identifying, creating, and providing opportunities for professional development and training to enhance and build the capacity, skills, excellence, and professionalism of employees to enable them to contribute effectively and creatively to the institution's mission.

² Created following NAB meeting; 071316 Faculty Minute Minutes

- Staff supervisors are responsible for assessing development and training needs of individual employees in their direct reporting line and encourage and support appropriate learning experiences.
- Faculty are responsible for assessing their job related skills and knowledge, for maintaining a high level of performance and seek appropriate professional development and training opportunities.

2.6.5 The responsibility of implementing this policy extends to the following:

- Institution leadership and administration: Trinity leadership is responsible for identifying and communicating priorities and goals as well as relevant developments and trends affecting the School's mission of teaching, research, and community service.
- Staff: Staff are responsible for communicating to their supervisor needs for training programs to enhance the effectiveness and efficiency of the School's operations.
- Faculty: Faculty are responsible for engaging in the development of plans in partnership with the administration, such as through needs assessment surveys, and for participating in the learning experiences.

2.6.6 Types of professional development and training opportunities:

- Programming may be in many formats including but not exclusive to seminars, workshops, and webinars.
- Development is also available through coordinated community activities with partners in professional development such as Milton Cato Memorial Hospital and the Rotary International.
- Faculty may have opportunities for faculty development through professional organizations.
- Specific courses may be available to enhance skills needed by the institution.

2.6.7 Scheduling of professional development and training opportunities:

- Scheduling of faculty development opportunities on campus will avoid other educational conflicts to the extent possible.
- Notification of planned events will be posted electronically and announced in faculty meetings.
- Faculty are encouraged to participate in off-campus continuing medical education opportunities as time permits.

3 STANDING COMMITTEES

3.1 GENERAL RULES OF ORGANIZATION

3.1.1 The Dean shall appoint all Standing Committee members and is an ex officio, voting member of all Standing Committees and subcommittees. The Dean may designate a voting representative to attend in absentia. Standing Committee members serve at the pleasure of the Dean.

3.1.2 All Standing Committees begin their activities with the appointment of members.

- 3.1.3 All Standing Committee chairs shall be appointed by the Dean. Committee chairs serve until replaced.
- 3.1.4 All Standing Committee chairs report to the Dean. Whenever a Standing Committee recommendation contradicts policies established by the School, the Dean either shall revise the recommendation or shall return the recommendation to the committee for further action.
- 3.1.5 Robert's Rules of Order (most current revision) shall govern the general conduct of all Standing Committee meetings unless otherwise noted.
- 3.1.6 Issues requiring approval by a simple majority that receive a tie vote are neither approved nor rejected. The chair of the committee may exercise a vote on issues without a majority vote.
- 3.1.7 Each Standing Committee may develop those procedures necessary to guide its specific conduct.
- 3.1.8 Unless otherwise stated in these Bylaws, all Standing Committee meetings are open to the Faculty of the School. However, Standing Committees may enter into executive session in accordance with Robert's Rules of Order.
- 3.1.9 With the exception of confidential information (i.e., faculty or student personal matters) approved minutes of committee meetings shall be submitted by the Committee chairs to the Dean who may provide a copy to the Medical Library where they are available for review.
- 3.1.10 Only faculty with primary responsibilities within the School may serve on Standing Committees.
- 3.1.11 Whenever a vacancy occurs in the membership of a Standing Committee, the Dean may appoint a new member.
- 3.1.12 New members of all Standing Committees shall assume office at the time of appointment.

3.2 ADMISSIONS COMMITTEE

- 3.2.1 The Admissions Committee shall consist of three or more faculty members appointed by the Dean, who shall serve ex-officio with a vote.
- 3.2.2 Meeting of the Admissions Committee are scheduled by the Associate Dean of Admissions and Student Affairs. Proceedings of the meeting are confidential.
- 3.2.3 The Admissions Committee, in the fulfillment of its duties and responsibilities, may be assisted by non-committee members as needed.
- 3.2.4 The duties and responsibilities of the Admissions Committee are to make decisions on the admission of all applicants to the School in adherence with the academic mission of the School and with the admissions policies and criteria established by the School, to explore and review admissions criteria on an ongoing basis, and to submit recommendations to the Dean.

3.3 CURRICULUM COMMITTEE

- 3.3.1 The Curriculum Committee shall consist of all faculty who hold responsibilities as discipline directors and up to three students appointed by the Dean.
- 3.3.2 The Curriculum Committee, in fulfillment of its duties and responsibilities, may be assisted by ad hoc subcommittees constituted to address different segments of the curriculum.

3.3.3 The Curriculum Committee has the following duties and responsibilities: To evaluate the curriculum and make recommendations to the Dean to ensure that:

- a. The overall educational program fulfils the mission of the School.
- b. The school has defined its educational objectives/student competencies and the methods for assuring that those objectives/competencies have been achieved for both the educational program as a whole and the component programs, courses and clerkships that comprise the overall program.
- c. Curriculum content in programs, courses, clerkships, electives and the curriculum as a whole are sufficient to meet the education objectives/student competencies of the program as a whole.
- d. All those who teach or supervise students are familiar with the educational objectives of their respective course or clerkship.
- e. Students have mastered on direct observation the core skills that are specified in the School's objectives and competencies.
- f. All programs, courses and clerkships provide formative and/or summative feedback to students in a timely manner.
- g. Policies and procedures for the educational program as a whole and its components are administered in a manner consistent with policies of the School.
- h. Comparable educational experiences are maintained to the highest extent possible during geographically distributed core clerkships.
- i. Equivalent methods and standards for evaluation are maintained within each course or core clerkship.
- j. The educational program as a whole and the component programs, courses and clerkships, are monitored so that evaluation and improvement cycles occur.
- k. Student workload is monitored and conflicting curricular demands are managed within the academic calendar.
- l. The content provided in each discipline is monitored in the context of achieving the educational objectives of the curriculum and student competencies and to make recommendations for revisions where needed.
- m. The following evaluations occur:
 - Competencies, objectives, content, and pedagogy of each component of the curriculum, as well as the curriculum as a whole, making recommendations for revisions as needed.
 - Entrustable Professional Activities
 - The performance of students and graduates in the framework of CAAM-HP standards of accomplishment.
- n. Recommendations on student performance criteria and standards are made to the Dean, with a copy to the Academic Progress Committee.
- o. The Curriculum Committee will meet at least once per academic term to review and update the teaching process and to attend to its responsibilities.

3.4 FACULTY PROMOTIONS AND TENURE COMMITTEE

3.4.1 The Faculty Promotion and Tenure Committee shall be composed of four faculty members appointed by the Dean following the receipt of an application for promotion.

- 3.4.2 The duties and responsibilities of the Faculty Promotions Committee shall be as follows:
- a. To review applications submitted by faculty members for promotion.
 - b. To make recommendations to the Dean on applicants for promotion.
 - Recommendations must be from Committee members who are at a higher rank than that of the candidate.
 - Committee deliberations shall be confidential and reported only to the Dean.
 - c. To receive additional application material from a candidate after the submission deadline and prior to committee review if the new material reflects a change in status of items in the application.
 - d. To consider only the candidate's application in making recommendations on the candidate's promotion.
 - e. To assure that faculty promotions meet the qualifications of the proposed academic rank and that the criteria are consistently applied.
- 3.4.3 The Chair of the Committee prepares a written summary of the Committee's deliberations, conclusions and final vote, which is sent to the Dean.
- 3.4.4 The Dean makes the final decision and notifies the applicant. All promotions become effective at the beginning of the next budget year. Budget years begin on January 1.
- 3.4.5 Committees appointed to consider applications for promotion to Professor or Clinical Professor will include an external member appointed from the candidate's area of specialty.
- 3.4.6 All promotions to the rank of Professor shall be with tenure. The expectations of the tenured professor will be detailed at the time of advancement along with post-tenure review.
- 3.4.7 Tenure is conferred to full-time faculty members only.
- 3.4.8 Full-time faculty already holding the rank of Professor may request tenure by submitting a request to the Dean demonstrating the contributions as a professor to the educational initiatives, scholarly activity and publications in peer-reviewed media, a national and/or international reputation, participation in professional societies, and leadership in the School, community, or professional organization. (See 4.3.4 c-g)
- 3.4.9 Full-time faculty already holding the rank of Clinical Professor may request tenure by submitting a request to the Dean demonstrating the contributions as a professor to clinical leadership, national and/or international recognition in their area of expertise, and sustained productivity. (See 4.4.4 a-c)
- 3.4.10 If an application for Promotion and/or Tenure is denied, the Dean provides the applicant and the sponsoring chair with written justification for the decision.

3.5 LIBRARY AND LEARNING RESOURCES COMMITTEE

- 3.5.1 The Library and Learning Resources Committee shall consist of the Chief Librarian, the Assistant Librarian, two faculty members, two students, and the Associate Dean of Admissions and Student Affairs, ex officio, appointed by the Dean.
- 3.5.2 The duties and responsibilities of the Library and Learning Resources Committee are as follows:

- a. To make recommendations on the development of the collection for the Library.
- b. To make recommendations on user policies for the Library.
- c. To assist the Chief Librarian in developing procedures and priorities for acquisitions.
- d. To serve as liaison between all units in the School and Library.

3.5.3 A chair shall be appointed from the membership by the Dean.

3.6 APPEALS AND GRIEVANCES COMMITTEE

3.6.1 Appeals and Grievances follow the failure of an informal resolution between aggrieved parties when the petitioner files a formal appeal or grievance in writing to the Dean with a Copy to his or her department or unit chair. The Committee shall forward its recommendation(s) to all parties concerned with the petition as well as to administrative officers at appropriate levels of the School.

3.6.2 In the consideration of any appeal or grievance filed by a member of the Faculty of the School, the concept of “due process of law” shall at all times guide the members of the Appeals and Grievances Committee in their deliberations, which shall be conducted so as to assure a fair hearing to both parties.

3.6.3 An Appeals and Grievances Committee is formed following receipt by the Dean of an appeal or grievance and petition and consists of two senior faculty members appointed by the Dean, who shall appoint one as chair. The two committee members and a third faculty member selected by both parties in the appeal or grievance will review the appeal or grievance. Administrative Deans shall not be eligible for membership.

3.6.4 The duties and responsibilities of the Appeals and Grievance Committee shall be to consider petitions related to academic or personnel matters.

3.6.5 Hearings shall be held in closed session unless both parties agree to an open session, and faculty members may be represented by legal counsel or a faculty colleague at any hearing of an appeal or grievance.

3.6.6 Whenever one of the aggrieved parties is the Dean of the School, the Chancellor will appoint two senior faculty members. The two committee members and a third faculty member selected by both parties in the appeal or grievance will review the appeal or grievance. The committee shall forward its recommendation(s) to all parties concerned and to the Chancellor.

3.7 RESEARCH COMMITTEE

3.7.1 Membership of the Research Committee shall consist of four voting faculty members appointed by the Dean.

3.7.2 The Research Committee shall serve as a liaison between persons engaged in research and the administration of the School, including appropriate liaisons for animal care and use, radiation safety, bio-safety, hazardous materials, and human subjects when appropriate.

3.7.3 The duties and responsibilities of the Research Committee are as follows:

- a. Advise the Dean on the implementation of administrative programs and policies for the support of research.
- b. Receive and disseminate information from the Dean’s office on issues that impact research.

- c. Serve as a forum for the discussion improvement and expansion of research activity.
- d. Communicate needs or problems related to research and the research environment to the Dean.
- e. Review all research for signs of conflicts of interest and report any concerns to the Dean.
- f. Make recommendations for the coordination of programs to enhance research and the research environment.
- g. Make recommendations for the coordination of activities with other committees involved with research.
- h. Promote the dissemination of information regarding research at the School.
- i. Promote collaborative research.

3.8 ACADEMIC PROGRESS COMMITTEE (APC)

3.8.1 Pre-Medicine Program. The members of the APC are the following:

- a. Faculty members with teaching responsibilities in the Pre-Medicine program
- b. Director of Operations

The Pre-Medicine APC meets at the end of each term. The Director of the Pre-Medical program or designee chairs the meetings.

3.8.2 Medicine Program – Terms 1-5. The members of the APC are the following:

- a. Faculty members with teaching responsibilities in the Pre-Medicine program
- b. Associate Dean of Admissions and Student Affairs, or designee
- c. Dean, or designee
- d. Director of Operations

The APC for Terms 1-5 meets after each unified exam and at the end of the term.

3.8.3 Medicine Program – Terms 6-10. The members of the APC are the following:

- a. Associate Dean of Clinical Clerkships, who serves as chair
- b. Dean, or designee
- c. Clerkship Administrator
- d. Other Deans as needed

The APC for Terms 6-10 meets at the call of the chair to review any student who fails a clerkship for academic or non-cognitive issues and/or to review the academic progress of any student or groups of students.

3.8.4 The APC for Terms 1-5 and Terms 6-10 meet together to approve students for graduation and honors recognition.

3.8.5 Responsibilities and procedures of the Academic Progress Committees are bound by the pertinent academic and administrative TSOM policies, particularly including those determined by:

- a. Dean
- b. Curriculum Committee
- c. Other Faculty committees

- 3.8.6 The APCs deliberate and approve Grade Rosters submitted by course directors or the clerkship administrator, as described in the TSOM Grading Policy. With the consent of the Course Director, factual correction may be made when necessary.
- a. APCs report to the Dean
 - b. APCs meet in executive sessions with recorded minutes at regular intervals, including end of term. All recommendations and decisions of APCs may be appealed according to the TSOM Appeals Policy.
 - c. APCs may consider special circumstances (if any) in the academic performance spectrum of individual students, and discuss any pertinent non-cognitive issues. This is done exercising due diligence to maintain privacy of student information and to avoid any conflicts of interest for the faculty student advisor or other faculty consultant who are also APC members.
 - d. For successful students, the APC issues a successive series of academic promotions and finally recommends graduation from TSOM to the Dean.
 - e. In problematic cases, APCs can issue warning letters, withhold academic promotions, or ultimately recommend the dismissal of the student from TSOM for academic and/or non-cognitive reasons.
 - f. The Associate Dean of Admissions and Student Affairs will inform individual students of the recommendations of the APCs.
 - g. The APC chairs will publish minutes and pertinent data sheets to relevant stakeholders.
 - h. Final grades, once approved by the APC, can only be modified by the respective Course Direction through the Change of Grade procedure.

3.9 INFORMATION TECHNOLOGY (IT) AND MEDICAL INFORMATICS COMMITTEE

The IT Committee serves as a liaison between faculty, students, and the administration in order to enhance communication about information technology needs and support.

3.9.1 The IT Committee shall consist of the following members:

- a. Director of Information Technology and Medical Informatics who shall serve as chair
- b. Chief Librarian
- c. One basic sciences faculty member
- d. One clinical sciences faculty member
- e. Two students, to be nominated by the Dean
- f. Director of Operations, ex officio

3.9.2 The primary duties and responsibilities of the IT Committee are as follows:

- a. Serve as a liaison between the student body and the IT and Medical Informatics Department
- b. Collect and access feedback from the student body about existing IT services and infrastructure offered to students as part of continual quality improvement.
- c. Collect and access feedback from the student body about new IT services and infrastructure intended for student use in order to ensure high effectiveness.
- d. Highlight and discuss changing student IT needs and make appropriate recommendations.
- e. Identify and discuss ways to optimize the IT support provided to TSOM staff and faculty.

- f. Make recommendations in IT strategic planning regarding the use of novel technologies (software and hardware) which improves educational methods.
- g. Provide statistical performance data and make recommendations regarding IT Support for the TSOM administration.
- h. Provide necessary budgetary requirements for any recommended solutions to the Director of IT and Medical Informatics for assistance in budgetary planning.

3.9.3 Committee meetings will take place at least twice per term.

3.9.4 Actions and recommendations will be documented and forwarded to the Dean.

3.9.5 An Annual IT Report will be submitted to the faculty and the Dean at the end of the year.

3.10 ACCOMMODATIONS AND ACCESSIBILITY COMMITTEE³

The Accommodations and Accessibility Committee shall receive requests and documentation for special accommodations from any student requesting such accommodations. The committee reviews the documentation and provides reasonable support and accommodations for qualified disabled students who are admitted.

3.10.1 The committee shall consist of at least three members:

- a. Associate Dean for Admissions and Student Affairs who shall serve as chair
- b. Physician responsible for maintaining student health records
- c. Dean

3.10.2 The primary duties and responsibilities of the Accommodations and Accessibility Committee are as follows:

- a. Receive requests from students for accommodations
- b. Receive documentation of prior accommodations and supporting documentation
- c. Provide reasonable support and accommodations within the scope of the curriculum
- d. Review annually, or as needed, the effectiveness of any support or accommodation
- e. Maintain confidentiality of student health records and information

3.10.3 Meetings will occur as needed to review requests.

3.10.4 Decisions of the committee for support and accommodations will be shared with those faculty or support staff as needed.

4 FACULTY APPOINTMENT

4.1 OVERVIEW

The following describes the criteria for faculty appointments by the Dean of TSOM.

4.1.1 The Dean is charged with ensuring that faculty appointments meet the qualifications of the proposed academic rank and that the criteria for appointment are consistently applied. The Dean

³ Approved by faculty 110216

may also consider work experience in fields related to medical education when considering an applicant's qualification for a given rank. The Dean may waive certain qualifications if doing so is judged to be in the best interest of the School.

4.1.2 Faculty ranks are Professor, Associate Professor, Assistant Professor, Preceptor, and Instructor and may be prefaced by clinical, adjunct, or visiting when appropriate. Appointments may be full or part-time, volunteer, or honorary.

4.1.3 All faculty must be proficient in conversation and written English.

4.2 PROCEDURE

4.2.1 With the approval of a department chair, the Dean reviews credentials of a faculty applicant for appointment, consulting with others as appropriate. If the Dean does not find that the credentials of the applicant support the rank requested, the appointment is denied. If the Dean supports the appointment, the terms of appointment and faculty rank are defined in an employment agreement or letter of appointment. The following criteria are general guidelines, but are not binding on the Dean.

4.2.2 The credentialing process shall include a review of a complete curriculum vitae, receipt and confirmation of letters of reference, background check, and verification of academic degree. Copies will be maintained for accreditation purposes.⁴

4.3 CRITERIA FOR APPOINTMENT: FULL-TIME AND PART-TIME FACULTY

4.3.1 Instructor (Basic Medical Sciences)

- a. The credentials and criteria will vary among departments depending on departmental needs.
- b. Candidate's specific skills, experience, and knowledge may in some cases replace specific degrees.

4.3.2 Assistant Professor

- a. PhD, MD or equivalent, and specific academic experience or qualifications
- b. Three years post-degree training in discipline
- c. Potential for contributions to teaching, scholarly activity, and service.

4.3.3 Associate Professor

- a. Qualifications for Assistant Professor plus at least three years of satisfactory teaching experience at the rank of Assistant Professor or equivalent.
- b. Satisfactory teaching evaluations
- c. Documentation of evidence in at least 2 of the following:
 - Development of new teaching materials (e.g., computer assisted instruction, alternative teaching approaches)
 - Recognition by peers for scholarly activity
 - Continued educational self-improvement

⁴ Policy created following the NAB visit; 071316 Faculty Minute Minutes

- Membership and participation in professional societies

4.3.4 Professor

- Qualifications for Associate Professor plus at least five years of teaching experience at the rank of Associate professor or equivalent.
- Experience in teaching, advising students and mentoring faculty.
- Developed or implemented major educational initiatives.
- Continued scholarly activity and publications in peer-reviewed media
- National and/or international recognition
- Participation in activities of professional societies
- Demonstrable leadership abilities
- All faculty seeking the rank of professor shall have an external reviewer appointed to the ad hoc committee by the Dean
- All promotions to the rank of professor shall be with tenure

4.4 CRITERIA FOR APPOINTMENT: CLINICAL FACULTY

4.4.1 Clinical Instructor or Preceptor

- MD or equivalent degree
- Licensee to practice medicine in good standing or a clinical degree in a health profession

4.4.2 Clinical Assistant Professor

- MD or equivalent degree
- Registered, certified in a field of specialty, and be in good standing in the medical profession
- Participation in continuing medical education
- Potential for developing educational skills (e.g., participation in faculty development activities and attending clinical conferences)

4.4.3 Clinical Associate Professor

- Qualification for Clinical Assistant Professor
- Teaching experience (e.g., teaching medical students in clinical rotations and/or medical residents)
- Demonstrated excellence in teaching through experience
- Development of educational skills at a local or regional level (e.g., facilitating faculty development activities, organizing or presenting CPCs, attending national and regional conferences)
- Research demonstrated in publications/presentations or boarded in two or more specialties

4.4.4 Clinical Professor

- Qualifications for Clinical Associate Professor
- Demonstrated leadership (e.g., program or clinic director, department head, department chair, medical staff leader)

- c. National and/or international recognition in an area of expertise such as presenting at national and international conferences
- d. Sustained productivity potential

4.5 TENURE

- 4.5.1 All promotions to the rank of Professor shall be with tenure. The expectations of the tenured professor will be detailed at the time of advancement along with post-tenure review expectations.
- 4.5.2 Tenure may be requested by Professors and Clinical Professors or with the submission of promotion to the rank of Professor or Clinical Professor
- 4.5.3 Full-time faculty already holding the rank of professor may request tenure by submitting a request to the Dean demonstrating the contributions as professor to educational initiatives, scholarly activity and publications in peer-reviewed media, a national and/or international reputation, participation in professional societies, and leadership in the School, community, or professional organization (See 4.3.4 c-g).
- 4.5.4 Tenure is conferred to full-time faculty members only.
- 4.5.5 Tenure does not extend to situations of negligence by the faculty member or financial exigency.

5 FACULTY PROMOTIONS

5.1 OVERVIEW

The following describes the criteria for faculty promotion at TSOM. Faculty ranks are Professor, Associate Professor, Assistant Professor, and Preceptor and may be prefaced by clinical or visiting when appropriate.

5.2 PROCEDURE

- 5.2.1 The procedure for promotion to the rank of Assistant Professor, Associate Professor or Professor applies to both full-time and part-time salaried faculty. Clinical, non-paid faculty may be promoted by the Dean on the recommendation of the Associate Dean of Clinical Clerkships or the chair of Clinical Sciences.
- 5.2.2 Application for promotion is usually initiated by the chair of the applicant's department, but may also be initiated by the applicant.
- 5.2.3 Completed applications for promotion are brought to the Dean for consideration by July 1st for the promotion to take effect in the following fiscal year. Any applications received after July 1st will be considered for the subsequent fiscal year.
- 5.2.4 Collection, preparation and submission of all necessary materials for promotion are the responsibility of the applicant and the applicant's chair with a majority of the responsibility residing with the applicant.
- 5.2.5 Promotion is based on the demonstrated ability of the applicant in the areas of teaching, scholarly activity, and service.

5.2.6 All applications for promotion will be submitted in digital form. Applications must contain the following:

- a. A letter of support from the applicant's chair describing why the promotion is being sought at this time which can be supported by applicable Annual Activity Reports.
- b. At least two letters of support from the applicant's peers. For Associate Professor, one letter must be from an individual outside the applicant's institution and must speak to the candidate's national/regional reputation as an educator or researcher.
- c. An up-to-date Curriculum Vitae.
- d. An up-to-date Teaching Portfolio.
 - Teaching Portfolios are factual descriptions of the applicant's teaching accomplishments supported by relevant data and analyzed by the applicant to show the thinking process behind the material included.
 - Portfolios are selected samples that illustrate how that individual's teaching is carried out.
 - A portfolio should include documents and materials which collectively suggest the scope and quality of the applicant's teaching performance. It presents selected information on teaching activities and solid evidence of their effectiveness.
 - Each elements of the portfolio must be accompanied by a statement describing how it fits in the overall evaluation of the applicant as an educator.
- e. The candidate should prepare a reflective analysis of his/her teaching effectiveness and strategies for future growth.
- f. Evidence of course planning and preparation. Examples include:
 - Syllabi
 - Handouts
 - PowerPoint slides
 - Other aids to learning
 - Examples of assessment tools
- g. Documentation of excellence in teaching. Examples include:
 - Student feedback
 - Peer review
 - Teaching awards or recognitions
- h. Evidence of one-on-one evaluation of students and giving feedback. Examples include:
 - Problem-based learning evaluations
 - One-on-one encounters with students
- i. Evidence of continual education improvement. Examples include:
 - Utilization of information obtained from meetings attended
 - Changes made to educational materials, approaches or style in response to feedback from students and peers
 - Participation in additional training on or off campus

5.3 CRITERIA FOR PROMOTION: BASIC SCIENCE FULL-TIME AND PART-TIME FACULTY

5.3.1 Assistant Professor

- a. Earned PhD, MD or equivalent
- b. At least three years of professional experience/post-graduate training.
- c. Evidence of proficiency in teaching
- d. Evidence of an intention to improve educational skills
- e. Evidence of participation in departmental or School committee work

5.3.2 Associate Professor

- a. Qualifications for Assistant Professor and at least 5-7 years satisfactory teaching experience at the rank of Assistant Professor or equivalent
- b. Evidence of excellence in teaching
- c. Evidence of continuing commitment to department and institutional goals
- d. Applicants should also have evidence of at least 2 of the following:
 - Development of new teaching materials that could include writing and publishing new teaching (PBL) cases, development of computer assisted instruction and alternative teaching approaches
 - Recognition by peers for scholarly activity
 - Continued educational self-improvement
 - Membership and participation in professional societies

5.3.3 Professor

- a. Qualifications for Associate Professor and at least 5 years satisfactory teaching experience at the rank of Associate Professor or equivalent
- b. Excellence in teaching, advising students, and mentoring faculty
- c. Evidence of continuing commitment to department and/or institutional goals
- d. Evidence of at least 3 of the following:
 - Developed or implemented major education initiatives or made significant contribution to major educational initiatives
 - Continued scholarly activity and publication in peer-reviewed media
 - National and/or regional recognition as an educator or for scholarly activity
 - Participation in the activities of professional societies through committee service, membership on editorial boards of journals and other activities
 - Demonstrable leadership abilities
- e. Faculty seeking the rank of Professor shall have an external reviewer appointed to the ad hoc committee by the Dean

5.4 CRITERIA FOR PROMOTION: CLINICAL FACULTY

5.4.1 Clinical Preceptor

- a. MD or equivalent degree
- b. Licensed to practice medicine and in good standing
- c. Special interest in clinical teaching

5.4.2 Clinical Instructor

- a. MD or equivalent degree

- b. Licensed to practice medicine and in good standing
- c. At least 3 years of clinical teaching experience

5.4.3 Clinical Assistant Professor

- a. MD or equivalent with certification in field of specialty
- b. Licensed to practice medicine and in good standing
- c. Board eligible or practicing clinical medicine for at least two years
- d. Continuing medical education credits
- e. Demonstrates enthusiasm in developing educational skills (e.g., participation in faculty development activities and attending clinical conferences)

5.4.4 Clinical Associate Professor

- a. Qualification for Clinical Assistant Professor
- b. Four years of teaching experience (e.g., teaching medical students and/or residents in clinical rotations)
- c. Further development of educational skills (e.g., facilitating faculty development activities, organizing or presenting at CPCs, attending national, regional, or international conferences)

5.4.5 Clinical Professor

- a. Qualification for Clinical Associate Professor
- d. An additional 4 years of demonstrable structured teaching experience (e.g., teaching medical students and/or residents in clinical rotations)
- e. Demonstrable leadership role (e.g., program or clinic director, department head, department chair)
- f. National or international recognition in their area of expertise such as presenting at national or international conferences
- g. Sustained productivity potential
- b. Faculty seeking the rank of Clinical Professor shall have an external reviewer appointed to the ad hoc committee by the Dean

6 CONFLICTS OF INTEREST

6.1 CONFLICTS OF INTEREST GENERAL CONSIDERATIONS

6.1.1 Faculty activities shall be conducted in a manner that avoids inappropriate conflicts of interest and commitment. The goal of the School is to establish boundaries within which conflicts of interest are tolerable and beyond which there are intolerable, processes for review of actual and apparent conflicts of interest and appropriate mechanisms for the management of tolerable conflicts of interest.

6.1.2 Faculty shall have a primary responsibility of devoting their time, thought, and energy to the service of the School. Of no less importance is a faculty member's responsibility to further his or her own professional development and the goals of his or her professional discipline. Normally, faculty

participation in activities of governmental, industrial and professional institutions is consistent with the academic interest of the School and the faculty member.

- 6.1.3 Faculty activities shall be conducted in a manner that avoids conflicts of interest. The following conflicts of interest are to be avoided:
- a. The School is deprived of appropriate time and efforts of the faculty due to external commitments or obligations that conflict with scheduled class or other responsibilities.
 - b. Substantial use is made of School resources for non-school purposes.
 - c. The faculty member's extra-School financial involvements affect, or reasonably appear to have a significant potential to affect, his or her academic responsibilities, or compromise basic scholarly activity or freedom of action.

6.2 CONFLICTS OF INTEREST IN RESEARCH⁵

- 6.2.1 The purpose of this policy is to define the process for identifying, evaluating, managing and reporting investigators' financial relationships that have, or may appear to have, an impact on the objectivity and integrity of research conducted at TSOM.
- 6.2.2 This policy is informed by ethical practice regarding the identification and management of conflicts of interest in research and other projects.
- 6.2.3 Conflicts of interest exist when financial or other personal interests or considerations of the investigation may directly and significantly affect, or have the appearance of directly or significantly affecting, an investigator's professional judgement in exercising any School duty or responsibility, including the design, conduct or reporting of research. Financial conflicts of interest in research occur when the investigator or other member of the research team possess significant financial interests that is in conflict with School responsibilities.
- 6.2.4 The Research Committee shall review all research for signs of conflicts of interest and report any concerns to the Dean.
- 6.2.5 Noncompliance with this policy may result in an unapproved research protocol or requests from the Research Committee and administration for revisions to avoid apparent conflicts.

6.3. CONFLICTS OF INTEREST IN CONTINUING MEDICAL EDUCATION (CME)

- 6.3.1 The policy of the School is to ensure balance, independence, objectivity and scientific rigor in all CME activities. The desired outcome of this policy is to conduct CME activities that are free of the appearance of or actual conflicts of interest by introduction/demonstration of bias in favor or against a commercial product, service, or device in return for known or unknown personal and professional gain. The intent is to ensure that potential conflicts are identified openly so that participants may form their own judgements about the presentation with the full disclosure of facts.
- 6.3.2 All individuals in a position to influence the content of a CME activity must disclose any relevant financial relationship that might affect independent involvement in the proposed CME activity.

⁵ Revised by the Research Committee, 100516

- 6.3.3 Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services with which he/she has a financial relationship.
- 6.3.4 Financial benefit that the person involve in the CME activity, spouse, or an immediate member of that person’s family has gained within the past twelve months is relevant. This pertains to salaries, royalties, intellectual property rights, consulting fees, or other corporations whose products or services are related to the subject matter of the presentation topic.
- 6.3.5 Required elements of avoiding conflict include:
- a. Thoughtful review of the planning and content of CME activities.
 - b. Full disclosure of relevant financial relations to CME participants.
 - c. Audience evaluation of potential bias in CME presentations.
- 6.3.6 Planning committee:
- a. Members of an activity planning committee must disclose any relevant financial relationships with any commercial interest to the CME provider.
 - b. Members with financial relationships and those without should be documented in the committee meeting minutes.
- 6.3.7 Speakers:
- a. Speakers in an approved CME activity must disclose any relevant financial relationships with any commercial interest to the CME provider.
 - b. When a speaker accepts the invitation to present at a CME activity, the planning committee must obtain disclosure of any relevant financial relationship.
 - c. Acceptable alternatives for a speaker with a conflict of interest:
 - Speaker may withdraw from the activity.
 - The content of the presentation may be reviewed by the committee to ensure an absence of bias in its content.
 - Evaluation of the literature to ensure the content of the presentation is consistent with the current literature.
 - The presentation may be submitted for peer review to the Dean.

7 MEDICAL EDUCATION PROGRAM: COMPETENCY-BASED OBJECTIVES

7.1 MEDICAL EDUCATION PROGRAM

The medical education program is a competency based curriculum based encompassing medical knowledge, patient care, communication, practice based learning, and systems-based learning. Within in these are specific skills that student progressively master during the training. Known as entrustable professional attributes, these are described in Section 8.

7.2 MEDICAL KNOWLEDGE

7.2.1 Goal Statement: Medical students are expected to master a foundation of clinical knowledge with integration of basic sciences and the translation of that knowledge to the clinical setting.

7.2.2 Graduates from the Trinity School of Medicine will be able to:

- a. Demonstrate knowledge of normal and abnormal structure and function of the human body on the macroscopic, microscopic, and molecular levels.
- b. Identify the pathology and pathophysiology of various diseases and correlate them with clinical signs and symptoms.
- c. Demonstrate knowledge of common, significant, acute and chronic clinical problems.
- d. Differentiate between normal and abnormal development and age-related changes across the life span.
- e. Demonstrate comprehension of clinical interventions and agents including pharmaceutical, surgical, genetic, complementary and alternative medicines and other therapies.
- f. Demonstrate knowledge and ability to interpret epidemiological and public health contributions to understanding health and disease.
- g. Demonstrate knowledge of preventive medicine and current guidelines for health promotion and disease screening.

7.3 PATIENT CARE

7.3.1 Goal statement: Medical students, as members of the healthcare team, are expected to provide patient and family centered care that is compassionate and effective for the promotion of health and the management of illness.

7.3.2 Graduates from the Trinity School of Medicine will be able to:

- a. Treat patients using a patient and family-centered care approach.
- b. Obtain a complete and accurate medical history that covers essential aspects. Also addressing issues related to age, gender, and culture, use of complementary medicine, family dynamics and socioeconomic status.
- c. Perform both complete and symptom-focused physical examinations, including the mental status examination.
- d. Perform or participate in routine technical procedures. (Procedures determined by core clerkships)
- e. Construct a differential diagnosis for common clinical presentations.
- f. Identify and interpret the most useful clinical, laboratory, imaging, and pathologic testing for common clinical presentations
- g. Construct appropriate and efficient therapeutic management and prevention strategies for patients with common conditions, both acute and chronic, including medical, psychiatric and surgical conditions, and those requiring short and long term rehabilitation.

7.4 COMMUNICATION

7.4.1 Goal statement: Medical students are expected to demonstrate skills that result in effective communication and collaboration with patients, families, and professional associates.

7.4.2 Graduates from the Trinity School of Medicine will be able to:

- a. Demonstrate the ability to establish a positive patient-doctor relationship based on mutual trust and respect for patients' privacy, dignity, individual integrity and culture.
- b. Communicate with others in a respectful, professional and non-judgmental manner and demonstrate effective listening skills (e.g., maintaining eye contact, body posture, verbal and non-verbal facilitation skills).

- c. Demonstrate the ability to give a clear, concise, and organized oral presentation and written documentation of a history and physical exam with basic elements of assessment and plan that addresses the psychosocial and biomedical needs of the patient for a focused and complete patient encounter.
- d. Conduct an interview with a limited English-speaking patient through appropriate use of an interpreter.
- e. Recognize barriers to effective communication and implement strategies to overcome these barriers (e.g., health literacy, vision or hearing impairment, disabled, pediatric and geriatric patients).
- f. Educate patients on preventive strategies and medial risks and benefits in medical decision making.

7.5 PRACTICE-BASED LEARNING

7.5.1 Goal statement: Medical students are expected to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence and improve their practice of medicine.

7.5.2 Graduates from the Trinity School of Medicine will be able to:

- a. Develop strategies for continuous individual improvement through monitoring performances, reflection, engaging in new learning, applying new learning, and monitoring impact of learning.
- b. Accept constructive criticism and modify behavior based on feedback.
- c. Develop clinical questions related to patients' problems and demonstrate skills to find evidence that is relevant and valid information to answer clinical questions using medical information technology.

7.5.3 Graduates from the Trinity School of Medicine will be able to demonstrate honesty, integrity, and ethical behavior in all interactions with patients and other health care professionals, including:

- a. Describing the importance of protecting patient privacy and identifying personal health information, including when and when not to share information.
- b. Identifying the ethical hazard and respond appropriately in situations such as:
 - Acceptance of gifts
 - Collaboration with industry when courted to prescribe/use their products
 - Being asked to practice beyond legal limits or personal comfort (e.g., when asked to provide medical care to friends or relative; use of "doctor" title)
- c. Fulfill professional commitments in a timely and responsible manner.
- d. Maintain appropriate professional appearance and composure.
- e. Recognize and address personal limitations, attributes or behaviors that might limit one's effectiveness as a physician and seek help when needed. This includes being able to describe personal responses to stress and project appropriate stress reduction interventions as needed.
- f. Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, race, religious, disabilities and sexual orientation and investigate impact of those on clinical care and medical decisions.

7.6 SYSTEM-BASED PRACTICE

- 7.6.1 Goal statement: Medical students are expected to develop an awareness of available health care system resources and demonstrate an ability to use them appropriately to provide optimal quality patient care.
- 7.6.2 Graduates from the Trinity School of Medicine will be able to:
- a. Demonstrate the ability to work within a multidisciplinary patient team with an understanding of the physician's role as a team leader and the importance of ancillary staff.
 - b. Identify and examine medical errors and quality problems using a health care systems approach and describe available methods to minimize them.

8 ENTRUSTABLE PROFESSIONAL ACTIVITIES

8.1 OVERVIEW

It is the expectation that students progressing to clinical clerkship training will have achieved an appropriate level of preparation to enter clerkships and further their level of achievement through clinical training to enter residency training. This level will be determined through assessment of Entrustable Professional Activities (EPAs).

8.2 EXPECTATIONS

- 8.1.1 The minimum expectation is that students will be able to do the following at the beginning of clerkship training:
- a. Gather information from a medically stable patient with a common chief complaint.
 - b. Integrate information gathered about a patient to construct a differential diagnosis and a preliminary plan.
 - c. Communicate information relevant to patient care to other members of the health care team.
 - d. Communicate information about patient care (diagnosis and care) with patient in no physical or emotional distress.
 - e. Provide the health care team with resources to improve individual patient care or collective patient care.
- 8.1.2 The minimum expectation is that students will be able to do the following at the time of graduation:
- a. Gather a history and perform a physical exam.
 - b. Prioritize a differential diagnosis following a clinical encounter.
 - c. Recommend and interpret common diagnostic and screening tests.
 - d. Enter and discuss orders and prescriptions.
 - e. Document a clinical encounter in the patient record.
 - f. Provide an oral presentation of a clinical encounter.
 - g. Form clinical questions and retrieve evidence to advance patient care.
 - h. Give or receive a patient handover to transition care responsibility.

- i. Collaborate as a member of an interprofessional team.
 - j. Recognize a patient requiring urgent or emergent care and initiate evaluation and management.
 - k. Obtain informed consent for tests and/or procedures.
 - l. Perform general procedures of a physician.
 - m. Identify systems failures and contribute to a culture of safety and improvement.
- 8.1.3 Student behaviors will be documented as those of a pre-entrusted learner progressing to the level of entrusted learner.
- 8.1.4 The pre-entrusted learner will enter clerkships capable of performing EPAs progressing from direct supervision to indirect supervision during training. Entrustment at the level of indirect supervision will be with direct supervision immediately available.
- 8.1.5 The entrusted learner will enter residency training capable of performing EPAs with indirect supervision. Indirect supervision may be with direct supervision immediately available or with direct supervision available but not necessarily immediately.

9 POLICIES AND PROCEDURES RELATED TO INSTRUCTION

9.1 RIGHTS AND FREEDOMS OF STUDENTS

Trinity School of Medicine is dedicated to the promotion of learning in a nurturing learning atmosphere that is free of all forms of harassment, exploitation, or intimidation. In so doing, TSOM provides principles and procedures bearing upon medical student rights and responsibilities and reciprocal medical faculty rights and responsibilities essential to the realization of this institutional commitment. Application of the TSOM core values is paramount in this endeavor.

9.2 ACADEMIC AND PROFESSIONAL RIGHTS AND RESPONSIBILITIES

- 9.2.1 Academic Requirements. The School will publish the requirements for the medical degree, including curriculum, time limits, grading system employed, and other clearly stated information relative to establishing and maintaining an acceptable academic standing in the School.
- 9.2.2 Standards of Professional Conduct. Wherever expected and/or required, standards of professional behavior will be published and made available to medical students. Where such professional codes of conduct are imposed and accountability is anticipated, expectations shall be expressed in specific terms.
- 9.2.3 The student, by virtue of his/her voluntary association with TSOM acquires certain rights and responsibilities as a member of the School. These rights and responsibilities are delineated in approved School policies, rules and regulations.

9.3 ESTABLISHING REQUIREMENTS, STANDARDS, AND EVALUATIONS

- 9.3.1 The Curriculum Committee of the faculty is vested with the responsibility of recommending academic and professional requirements, standards of curriculum and programs, and evaluation criteria consistent with the mission of the School.

- 9.3.2 With respect to individual units of the curriculum, the faculty shall have the authority and responsibility for procedures and evaluation methods, subject to review and recommendation of the Curriculum Committee approved by the Dean. The faculty of the individual curricular units shall determine student grades based on published evaluation methods and standards.
- 9.3.3 Determination of a student's overall progress, performance, and standing in the Pre-Medical and Medical programs shall be the responsibility of the Academic Progress Committees.
- 9.3.4 Determination of a student's completion of academic requirements for graduation shall be the responsibility of the faculty.

10 LEARNING ENVIRONMENT

10.1 OVERVIEW

TSOM seeks to maintain an educational and clinical community that fosters learning, nurtures learners and is a learning environment in which students, faculty and staff can work together in an atmosphere free of all forms of harassment, exploitation, or intimidation. For the purpose of this statement, relationships in the educational and clinical community include unequal influence as well as equal power relationships between faculty and students.

- 10.1.1 The School recognizes the professional training of its faculty and encourages positive role-modeling for students, other faculty, and staff.
- 10.1.2 Faculty demonstrate respect for students as individuals and adhere to their proper roles as instructors and counselors
- 10.1.3 Faculty invest their time and energy to develop and improve scholarly competency. In doing this, they perform the following for students:
 - a. Exercise critical judgment in using and transmitting knowledge
 - b. Practice intellectual honesty
 - c. Foster honest academic conduct
 - d. Respect the confidential nature of the faculty – student relationship
 - e. Share responsibility for governance of the School
- 10.1.1 The School recognizes and demonstrates reactive and constructive feedback/criticism as a part of the learning process. The following behaviors are prohibited in the learning environment:
 - a. Demeaning or derogatory comments that are belittling, insensitive, and/or crude
 - b. Destructive criticism
 - c. Humiliation or dehumanization
 - d. Rejection or alienation
- 10.1.2 Examples of inappropriate and unacceptable behaviors in the learning environment are:
 - a. Sexual relationships between faculty and students
 - b. Physical punishment or physical threats
 - c. Sexual harassment

- d. Discrimination based on race, sexual orientation, religion, ethnicity, gender, age, or disability
- e. Repeated episodes of psychological punishment of a student by a particular superior or peer (e.g., public humiliation, dehumanization, belittlement or derogatory comments, threats, intimidation, rejection, alienation, and removal of privileges)
- f. Grading or attention used to show favoritism or to punish a student rather than to evaluate performance objectively
- g. Assigning tasks for punishment rather than educational purposes
- h. Requiring the performance of personal tasks
- i. Taking credit for another individual's work
- j. Repeated annoying or humiliating conduct which would offend a reasonable person to who the conduct was directed, including but not limited to gestures, facial expressions, speech or physical contact or repeated inappropriate telephone or email messages
- k. Substance abuse

10.1.3 A concerted effort is made to provide faculty, staff, and students with an environment free of all forms of mistreatment and harassment. Accusations of violations of this policy are serious and can have far reaching effects on the careers and lives of individuals. Allegations must be made in good faith and not out of malice. Any retaliatory action will be a violation of this policy.

11 CALENDAR AND CLASS SCHEDULE

- 9.1 The School calendar and class schedules are approved each term by the administration and provided to faculty, students, and staff online.
- 9.2 Attendance is encouraged in all required courses, but may be mandated by a course director or the Academic Progress Committee. The Associate Dean of Admissions and Student Affairs may excuse students for appropriate reasons.
- 9.3 Clinical terms during the core clerkship year (Terms 6-8) and the electives year (Terms 9-10) are governed by a flexible sequence of rotations and bridge weeks. Bridge weeks constitute an integral part of the academic curriculum. In addition to self-directed study, they must be used by students to organize for, sit, and pass the major licensure exams (USMLE Step 1 in Term 6; USMLE Step 2CK and 2CS in Terms 8, 9, or 10), prepare for rotations, prepare for residency match, and interview for residency programs. Students must be registered in Independent Study (IDIS 600) during these periods.
- 9.4 The time frame is 48 weeks for the core clerkships (Terms 6-8) and 27 weeks for the approved electives (Terms 9-10). The administrative roster for Terms 6-10 is by calendar and directly bears on the decisions taken by APC. The total duration of clinical studies is 75 weeks plus 4 weeks of holidays.

12 GRADING AND EVALUATION OF ACADEMIC AND PROFESSIONAL PERFORMANCE

12.1 OVERVIEW

- 12.1.1 The pre-medical student or medical student has a right to a grade that represents the faculty's objective judgement of student's performance.
- 12.1.2 At the beginning of the course, the student will have the right to know course requirements, including grading criteria and procedures and any special requirements of attendance or participation for satisfactory completion of the course.
- 12.1.3 If an assessment of a student's professional conduct and performance is included in the determination of the grade, the assessment criteria shall be clearly identified and stated in the course description and evaluation methodologies at the beginning of the course. In addition, a description of the methods employed for the evaluation of such professional performance and conduct shall be provided.
- 12.1.4 The evaluation of a student's overall standing in the medical program by the APC, and the current membership of the Committee, shall be available to students along with a description of the academic functions and methods of the Committee. At the end of the term, results of evaluations carried out by the APC shall be made known to each involved student in a written form.

12.2 GRADING CRITERIA

- 12.2.1 The TSOM Pre-Medical and Medical curricula provide courses, including premedical courses, basic medical sciences courses (Terms 1-5) and clinical clerkships (Terms 6-10), that are graded either in the Pass/Fail system or in a letter grade system. Both systems are based on a percentage score, setting 100% as the best possible performance in a course and less than 70% as failing.
- 12.2.2 The grading scale for the Pre-Medical and Medical Program in Terms 1-5 is as follows:

Letter Grade	Performance	Grade Point Value	Remarks
A(h)	≥95%	4.0	
A	90%-94%	4.0	
B+	85%-89%	3.5	
B	80%-84%	3.0	
C+	75%-79%	2.5	
C	70%-74%	2.0	
F	<70%	0	
P	70%-100%	0	Pass/Fail System
I		0	Incomplete Coursework
W		0	Withdrawn from Coursework

- 12.2.3 The results of the NBME subject exams used in Terms 1-5 of the Medical curriculum are evaluated by the data provided by NBME as percentile performance of an individual student compared to the respective reference group.

12.3 DETERMINATION AND APPROVAL OF GRADES: PRE-MEDICAL AND BASIC MEDICAL SCIENCES

12.3.1 Common rules of grading:

- a. Courses may have tests, quizzes, and other assignments of varying weights toward a final grade. In such cases, final grades are calculated with weight means.
- b. In courses with an NBME discipline exam, it will be weighted 20% of the final grade.
- c. All courses will be adjusted to a class mean of 80.00%
- d. Students must pass all NBME discipline exams, prior to taking the Comprehensive Basic Science Exam.

12.3.2 Pre-Medical Program

- a. Course grades in the Pre-Medical program are issued by the course director based on any or all of the following:
 - Written exams
 - Assigned work
 - Performance of the student in class discussions
- b. Data pertaining to such performance evaluations become part of the course record and the academic course grade roster, to be reviewed and approved by the APC for Pre-Medicine.

12.3.3 Medical Program: Details of the individual course grading policy for Terms 1-5 are in the course syllabi, published before the start of the term as approved by the Curriculum Committee. Course grades in Terms 1-5 are issued by the course directors. After verification, grades are posted to the transcript.

12.3.4 The determination of course grades is the sole academic responsibility of the respective course directors, or elective coordinators. Clerkship grades are the responsibility of the Associate Dean for Clinical Clerkships and designated staff. The course grade rosters and the statistics of all grading data are reviewed and approved at the meetings of the Academic Progress Committee.

12.3.5 Grades describe individual academic performance, development, and progress. They represent a major and indispensable component for the formal determination of academic promotions and ultimately graduation.

12.3.6 Honors grades:

- a. Grade A with Honors, A(h), is awarded for exceptional performance exceeding the criteria for an "A" grade in academic distinction. Criteria are published in the course syllabi as approved by the APC and Curriculum Committee.
- b. The grade A(h) cannot be obtained for repeat courses or through an academic appeals process.

12.3.7 Approval of grades:

- a. All course grades are compiled by the course director and presented to the APC meeting for approval. Following approval, they are published to the students and entered onto the student's transcript.

- b. A student has the right to appeal a course grade on an individual basis within two weeks after the finalization of grades. After this two week period, grades may not be appealed.

12.3.8 All courses must be successfully passed or remediated to progress in the curriculum.

12.3.9 Final grades, but not interim grades can be appealed as prescribed in the TSOM Academic Appeals Policy.

12.3.10 CBSE and USMLE Step 1

- a. Scheduling of the USMLE Step 1 may occur after satisfactory completion of the NBME Comprehensive Basic Science Examination (CBSE).
- b. The CBSE is scheduled during Term 5. Students must earn the minimal passing score by the end of Term 6 to schedule the USMLE Step 1.
- c. Students failing a USMLE exam must meet with the Associate Dean of Student Affairs or the Associate Dean of Clinical Clerkships, and the Dean to review the score report and develop a plan for re-taking the exam. A student must pass each USMLE exam in three attempts to progress in the medical program.
- d. Following successful Completion of USMLE Step 1, the Clerkship Administrator will arrange core clerkships for students.

12.4 REMEDIATION

12.4.1 A student who fails a single course during a term may be allowed to take a second (new comprehensive final exam for this course during the first week of the next Term.⁶

12.4.2 Any student failing more than one course in a given term for any medical curriculum will not be eligible for this remediation. In courses with NBME discipline exams as part of the grade, a student must have scored no less than 6th percentile to be eligible, students with lower NBME percentile scores must repeat the course.

12.4.3 If the student passes the remediation exam, the grade earned will be a C in the course. If the student fails the exam, the course is failed, and the student will repeat the course the next term. A student failing a repeated course will be recommended for academic dismissal without an opportunity to re-take a new final exam of the repeated course.

12.5 DETERMINATION AND APPROVAL OF GRADES: CLINICAL CLERKSHIPS

12.5.1 Successful completion of core clerkships includes the following:

- a. Completion of all required assignments specified in the syllabus within two days of the completion of the clerkship.
- b. Completion of all case logs within two days of the completion of the clerkship
- c. Completion of the preceptor evaluation within two days of completion of the clerkship
- d. Completion of the NBME subject exam at the end of the clerkship as scheduled.

12.5.2 Grades and individual evaluation sheets for core rotations and electives are issued by the Clerkship Administrator.

⁶ Remediation Policy Approved by CC 040116; revised 102716

12.5.3 A student has the right to appeal a course grade on an individual basis within two weeks after the finalization of grades. After this two week period, grades may not be appealed.

12.5.4 Grading for core clerkships. A student may earn the following grades in core clerkships:

- a. Pass (P) – the student has satisfactorily met all required components of the clerkship and passed the NBME subject exam.
- b. High Pass (HP) – the student has satisfactorily met all required components of the clerkship on time and scored a minimum score, on a first attempt, established for the discipline on the NBME subject exam.
- c. Honors (H) - the student has satisfactorily met all required components of the clerkship on time and scored a minimum score, on a first attempt, established for the discipline on the NBME subject exam.
- d. Failure (F) – the student has not satisfactorily met the requirements of the clerkship.
- e. Incomplete (I) – a student has not met all components required for a clerkship and may be granted an extension to complete the requirements. Students receiving an incomplete may not be eligible for High Pass or Honors.

12.5.5 Students scoring High Pass and Honors on the NBME subject exam will earn clerkship grades of High Pass and Honors if all other required components of the clerkship are completed on time and no deficiencies are noted on the preceptor evaluation.

Clerkship	Failure	Pass	High Pass	Honors
Family Medicine	≤58	59	74	78
Internal Medicine	≤57	58	74	78
Obstetrics and Gynecology	≤58	59	76	80
Pediatrics	≤58	59	73	77
Psychiatry	≤61	62	62	76
80Surgery	≤56	57	72	76

12.5.6 Students earn one credit hour per clerkship week completed. During each 6- and 12-week clerkship, students will earn 6 and 12 credits, respectively.

Grade	Grade Point Value
Pass	3.0
High Pass	3.5
Honors	4.0
Fail	0
Incomplete	0

12.5.7 Students are required to take elective clerkships. Electives are graded as follows:

- a. Pass (P) – the student has satisfactorily met all required components of the clerkship. These typically include attendance, completing evaluations on time, and receiving a satisfactory preceptor evaluation.
- b. Failure (F) – the student has not satisfactorily met the requirements of the clerkship.

- c. Incomplete (I) – a student has not met all components required for a clerkship and may be granted an extension to complete the requirements.
- d. Grade Point Value: Students will earn no grade point value for electives unless an NBME subject exam is available and the student chooses to take the exam.
- e. Honors and High Pass: There are a few advanced clerkships that have an NBME subject exam. A student may choose to take one or more of these exams following the appropriate clerkship if interested in earning High Pass or Honors. Grade point values will be applied with these grades. These exams include Emergency Medicine, Neurology, Ambulatory Medicine, and Advanced Surgery. A failure on these optional exams will not impact a Passing grade in the elective. Students interested in these options should contact the Associate Dean for Clinical Clerkships or the Clerkship Administration. Early registration is required.

12.5.8 Clerkship Incomplete Grade

- a. Failed NBME subject exam. Following the first failed NBME subject exam for a clerkship, an Incomplete grade will be recorded. The Associate Dean for Clinical Clerkships will review the failure with the student to determine the best course of action to help the student become successful. A retake of the exam will be scheduled during the next elective clerkship – not requiring an end-of-clerkship exam. A second failure of the same exam will result in the requirement of an additional clerkship in the same discipline. The third exam will be scheduled at the end of the additional clerkship. Passing of the exam will result in a Passing score in both the original and the second clerkship. Students are not eligible for High Pass or Honors.
- b. Failure to complete required assignments on time. Students are encouraged to demonstrate good organizational skills and work ethic. Two days after the completion of a clerkship is permitted for timely submission of most required elements. Patient Notes have special dates during the clerkship. Failure to meet these will result in an Incomplete grade. The student has one month to complete the assignment. Completion of the required components within that month will result in a Passing grade. Failure to complete the requirement within a month will result in either a Failing grade or assignment of an additional clerkship for further training.

12.5.9 Clerkship Failure

- a. Core clerkship failure. Students failing a core clerkship will be notified by the Clerkship Administrator. Failures may occur for the following reasons:
 - Poor evaluation: The Associate Dean for Clinical Clerkships will arrange a meeting with the student to discuss the situation from the student's perspective. An additional conversation may occur with the preceptor to gather additional information. The outcome of the review is dependent upon the review and dispensation is individual to the student.
 - Subject exam performance: Failure on a third attempt of a NBME subject exam will result in a Failing grade for the first clerkship. Performance in all other aspects of the additional elective will determine that grade.

- b. Unexcused absence for an NBME subject exam. Students who fail to take the NBME subject exam as scheduled will forfeit the fee for the exam and fail the clerkship. The exam will be rescheduled during an elective clerkship or an additional clerkship in the same discipline.

12.5.10 USMLE Step 2 CK and CS

- a. Students must scheduling USMLE Step 2 CK and Step 2 CS at least 2 months after the successful completion of their last core clerkship. This includes any additional time required to pass the subject exam.
- b. Students may be allowed to schedule Step 2 before completion of core clerkships. A strong USMLE Step 1 score, strong core clerkship performance, and permission of the Associate Dean of Clinical Clerkships are required.
- c. Students must complete USMLE Step 2 CK and Step 2 CS by the end of 6 months after successful completion of the last core clerkship.
- d. Students are required to release all USMLE scores to the school when the exam is taken. Failure to do so will delay the student's progression in the program.
- e. Trinity requires students to take appropriate measures to properly prepare for these important exams including, but not limited to, Kaplan Step 2 preparation course, seeking guidance from students that have completed the exam(s), and completing practice exams. Students are required to complete the Kaplan Step 2 CK review materials and question bank. Trinity will invoice students \$300.00 each term for Terms 7-9 respectively, to cover the cost of this program. A preparation manual of cases is provided to students to prepare for Step 2 CS and will be the focus of review workshops.
- f. USMLE Step 2 CK is the second of four exams required for licensure. Trinity SOM introduces students to the rigor of the exam through the NBME subject exams taken at the end of each required clerkship. Students are encouraged to prepare diligently for the exams to enhance their preparedness for USMLE Step 2 CK. Students may request, or in certain situations be required, to take the NBME Comprehensive Clinical Science Exam prior to their first attempt. There is an additional charge for this exam.
- g. During 2 core clerkships, students will be required to complete 6 Patient Notes that will be critiqued. The format for these will be the same as that used during the USMLE Step 2 CS exam. One-on-one consultation will occur after submission of the Patient Notes to enhance student performance on the Step 2 CS exam. A 2- to 3-day workshop is being planned to fully prepare students for successful performance on the exam using the review manual provided to students for Step 2 CS preparation. Students are encouraged to know these cases, differential diagnoses, significant labs and lab findings, and be able to support final diagnoses.

12.5.11 Failure of USMLE Step 2 CK and Step 2 CS

- a. Failure of USMLE Step 2 CK on the first attempt will be reviewed by the Associate Dean for Clinical Clerkships and a study plan will be developed and approved. The student may be required to take additional tests, including the NBME Comprehensive Clinical Science Exam prior to retaking the Step 2 CK.

- b. Failure of USMLE Step 2 CS on the first attempt will require that the student attend a 5-day training session with the designated faculty member prior to retaking the exam. There will be a charge for travel and lodging for this training.

13 COURSE/INSTRUCTIONAL EVALUATION

Course evaluation and feedback is solicited from faculty and students at the end of each course and clerkship. This information is provided in an anonymous format to the course director and to the Curriculum Committee for appropriate response. Clerkship information is provided to clinical preceptors and department chairs by the Associate Dean of Clinical Clerkships. Faculty shall use written student course evaluation and instructional rating reports to assess the quality of their instructions.

14 ACADEMIC ADVISING

- 14.1 Faculty members are assigned as academic advisors by the Associate Dean of Admissions and Student Affairs. The objective of the academic advising program is for the faculty advisor to become acquainted with the student, their academic background and any academic or personal issues that may impede the academic performance, and to provide counseling as appropriate to assist the student.
- 14.2 Meetings are to be scheduled by the faculty advisor at least once a term and more frequently if a student is not performing well. Discussions are confidential and no information obtained in an advisor-student discussion should be shared without the student's consent. The only exception is concern for the life of the student or concern for danger to another student. Immediate referral to the Associate Dean of Admissions and Student Affairs is appropriate in those instances.

15 ACADEMIC PROGRESS

15.1 OVERVIEW

The academic and professional progress of TSOM students in the Pre-Medicine and Medicine programs is monitored, evaluated, and formally determined by the respective APCs at regular intervals. This policy describes the structures, functions, and rules involved in the process.

15.2 PROMOTIONS IN PRE-MEDICINE

- 15.2.1 For students in interim coursework, there is no formal promotion but an individual recognition of "good academic standing."
- 15.2.2 Upon completion of the Pre-Medical coursework, the Pre-Medical APC will consider for promotion to the TSOM Medical program any student with the following minimum criteria:
 - a. Successful completion of all stipulated coursework
 - b. GPA of 3.0 or better

- c. Documented proficiency in English (e.g., English native speaker, pertinent Pre-Medical course work, TOEFL or HELTS)
- d. Absence of non-cognitive issues or professionalism issues
- e. Documentation of good fiscal standing by the TSOM administration
- f. No legal or visa issues

15.2.3 If the Pre-Medical APC is unable to recommend promotion to TSOM Medical program, it may recommend dismissal of the student or suitable alternatives, which must be completed within an exclusion period on one additional term, or five months, whichever is longer.

15.2.4 All Pre-Medical course work must be completed within a maximum timeline of 3 years after enrollment, including leaves of absence or repeated courses.

15.3 PROMOTIONS IN MEDICINE: TERMS 1-5

15.3.1 Medical students in Terms 1-5 will be promoted to the respective next term based on overall academic performance, completion of the preceding terms course work, a positive prognosis on their overall professional/non-cognitive capabilities, and financial clearance from administration.

15.3.2 Academic promotion (promotion, remediation/deceleration of course work, recommendation for academic or non-academic dismissal) is usually determined at the APC meeting at the end of the term.

15.3.3 In certain cases of single failed courses, the APC may recommend a failed course remediation be administered prior to the start of the subsequent term and postpone a decision to decelerate the student's study track accordingly. (See Remediation Policy)

15.4 PROMOTION IN MEDICINE: TERM 6

15.4.1 Promotion to Term 6 follows successful completion of Term 5 and clearance of all academic or financial issues in Terms 1-5.

15.4.2 Students who successfully complete all course work in Terms 1-5 but, who fail to obtain the established minimum passing score on the CBSE exam by the end of Term 6 may petition to apply course work to the Master of Health Sciences degree or are dismissed from Trinity School of Medicine with no right to appeal.

15.4.3 Students who pass the NBME CBSE at the established minimum score are certified to the Educational Commission for Foreign Medical Graduates (ECFMG) for scheduling USMLE Step 1. Students must sit for the Step 1 exam within two months after certification. Failure to pass Step 1 in three attempts will be dismissed with no right to appeal.

15.4.4 A passing score on USMLE Step 1 is required to begin clerkships in Terms 6 or 7.

15.4.5 Students who fail to pass USMLE Step 1 in 3 attempts may petition to apply Terms 1-5 course work to the Master of Health Sciences degree or are dismissed from Trinity School of Medicine with no right to appeal.

15.5 PROMOTION IN MEDICINE: TERMS 6-10

15.5.1 To be academically promoted during the clinical clerkships, students must meet the following criteria:

- a. Successfully complete clerkships within the given time period.
 - b. Successfully complete the NBME subject exams at the end of each core clerkship
 - c. Successfully complete USMLE Step 2 CK and Step 2 CS within 6 months after completion of core clerkships unless granted an extension by the Associate Dean of Clerkships.
 - d. Provided that a student obtains passing grades in clerkships and complies with administrative requirements, promotions to Terms 7-10 occur automatically.
- 15.5.2 Students who have failing grades or major non-cognitive issues in any clerkship will be brought to the attention of the APC by the Associate Dean of Clerkships along with a proposed Individual Learning Plan (ILP) or a recommendation for dismissal from TSOM.
- 15.5.3 Each student has to be actively enrolled for 95 weeks and must be in good academic standing to graduate from TSOM.
- 15.5.4 Students who repeat a clerkship due to extenuating non-academic circumstances (e.g., medical leave of absence), will be reinstated into the respective term based on a recommendation of the Associate Dean of Clinical Clerkships.
- 15.5.5 Students who have completed all course work through Term 10, but do not qualify for graduation because they did not pass one or more components of the USMLE 2 exams, are allowed an extended enrollment in TSOM for an additional period of 26 weeks. The regular tuition for Term 10 applies if additional elective rotations are taken. If no additional elective rotations are taken, students must be registered in Independent Study (IDIS 600). An administrative fee is charged for any extended enrollment.
- 15.5.6 Students who fail to comply with administrative registration procedures for any given clinical term and who are placed on Administrative Leave of Absence will be reinstated into the respective term upon compliance with requirements. The respective term will start at the date determined by the TSOM Director of Student Services and Associate Dean of Clinical Clerkships.

16 GRADUATION

Graduation follows successful completion of all course work and receipt of detailed passing reports for the USMLE Step 2 CK and USMLE Step 2 CS by the Associate Dean of Admissions and Student Affairs. The Faculty recommend students in good academic and administrative standing to the Dean for graduation.

17 POLICY ON SECURITY OF STUDENT RESOURCES

- 17.1 Student records are considered private documents and the information contained therein is released only to authorized persons.
- 17.2 Access to academic information is restricted as follows:

- a. A student has the right to see his or her permanent educational records and is entitled to an explanation of any information recorded in it. The student may also inspect confidential letters and statements placed in the files.
 - b. Parents may only see the academic records of a son and/or daughter with the written consent of the student.
 - c. Teachers or administrators at the School may look at academic records on a “need to know” basis for legitimate educational reasons.
- 17.3 The Deans of Academic Affairs and/or Student Affairs will make the determination of “legitimate educational reasons.”
- 17.4 Other than the exception listed above, TSOM will not release academic information about a student nor allow anyone access to academic records unless the student has given written consent. The School will honor a court order or subpoena for information or documents about a student but will attempt to notify the student in advance of compliance.
- 17.5 In cases of “health or safety emergencies”, the School may determine the disclosure of certain information to appropriate persons is appropriate. The storage, transmission, and/or release of any student protected health information, as defined by the Health Insurance Portability and Accountability Act (HIPAA), shall be conducted in accordance with the School’s HIPAA compliance policies.
- 17.6 The student may request the Associate Dean of Admissions and Student Affairs to release a copy of the Medical Student Performance Evaluation letter (MSPE) to other schools, employers, government agencies or other “third persons.”
- 17.7 Letters of reference provided to the student for one purpose, i.e. MSPE, may be released to other parties or for other purposes, if it is clear the letter was not submitted for a single purpose, or if the student provides written consent.
- 17.8 A transcript of the student’s permanent academic records is a photocopy of the academic record affixed with the School’s official seal, date and registrar’s signature (except for student copies). The School reserves the right to withhold release of transcripts when a student has outstanding indebtedness to the School. A record is made of transcripts sent and responses to inquiries about student information.

18 MEDICAL LIBRARY

18.1 VISION AND MISSION STATEMENT

- 18.1.1 Vision Statement: The provision of cutting-edge medical library services for our users.
- 18.1.2 Mission Statement: The Trinity School of Medicine Library advances the education, scholarship, and professional practice goals of Trinity School of Medicine through the provision and efficient management of knowledge-based information services and resources.
- 18.1.3 The Library will accomplish its mission by:

- a. Providing, developing and maintaining access to relevant health science information resources.
- b. Providing guidance in the access and use of the aforementioned information.
- c. Maintaining an environment which promotes effective information use and study.
- d. Respecting a diversity of cultures, thinking, and learning styles.

18.2 OPERATING PROCEDURES

18.2.1 The Library policies govern the use of the facility, the material within, acceptable standards of behavior, and actions to be taken in the event that these policies are not complied with. Details are found on the Library website at library.trinityschoolofmedicine.org and in separated printed documents.