

# **Medical Education Program Governance**

## **Overview of Governance and Reporting Lines**

The governance of the medical education program is vested in several committees comprised of students and faculty that operate within several areas of purview related to student life from matriculation through graduation: admissions; curriculum and student policies; continuous quality improvement; the learning environment and academic advancement and graduation. All medical education committees derive their faculty members principally from the general faculty and student members from the student body. The Dean of the Medical College serves as the Chief Academic Officer and may delegate some functions that pertain to medical education, when relevant, to the Senior Associate Dean, Education. The specific charge, membership and operating procedures of the committees are described later in this document. The next paragraphs describe the overall reporting lines of authority of the governance committees.

The medical education governance committees interact with three major institution-wide committees: the Executive Faculty Council [EFC] (chaired by the Dean) and the General Faculty Council [GFC] (chaired by an elected faculty member), both of which review and approve major policy decisions of the Medical College AND the Continuous Quality Improvement Steering Committee [WCM-CQISC] (chaired by the Senior Associate Dean, Education) which monitors all elements pertaining to the LCME accreditation standards and relevant action items and outcomes.

The Executive Medical Education Committee (EMEC) is the principal governing and policy making committee regarding the curriculum and student policies. It hears reports on outcomes and recommendations from its subsidiary subcommittees (the Longitudinal Science Curriculum Sub-Committee [LSC-SC]; Longitudinal Clinical Curriculum Sub-Committee [LCC-SC] and Continuous Quality Improvement Curriculum Review Sub-Committee [CCR-SC]) as well medical education offices such Student Affairs, Academic Affairs, Registrar, Financial Aid, etc. regarding curricular and student policies, procedures, or new initiatives and then makes policy directives to these committees or offices for implementation. In addition, EMEC hears reports on aggregate data from the Committee on Admissions, the Promotions and Graduation Committee and the Teacher Learner Committee, each of which may consult it on matters of policy changes within their respective purviews.

All matters specific to the curriculum (e.g., setting learning objectives, curriculum content, assessment methods, scheduling, standards of achievement and curricular policies) are decided by the EMEC and its curriculum committees. This curricular program, once established by the curriculum committees, is operationalized under the aegis of the faculty of the Medical College. Curricular operations are implemented by course directors under the oversight of curriculum

deans and their respective offices. Course directors, associate directors and/or learning unit leaders, are appointed by the Senior Associate Dean, Education.

The EMEC may report on educational policies, outcomes, and curricular changes to the Faculty Councils at the councils' request. GFC and EFC maintain final authority on major decisions impacting overall medical education policy or structure, especially those that may involve a major allocation of institutional resources (e.g., major capital requests, increased faculty time, etc.).

The Continuous Quality Improvement Curriculum Review Sub-Committee (CCR-SC), which reports to EMEC, reviews the educational program on several levels: individual course, phases, overall curriculum and makes recommendations to EMEC. The Office of Research, Outcomes, and Innovation provides data reports to all medical education committees and to the CQI Steering Committee with aggregate reports for some LCME standards identified for ongoing monitoring by the CQI Steering Committee.

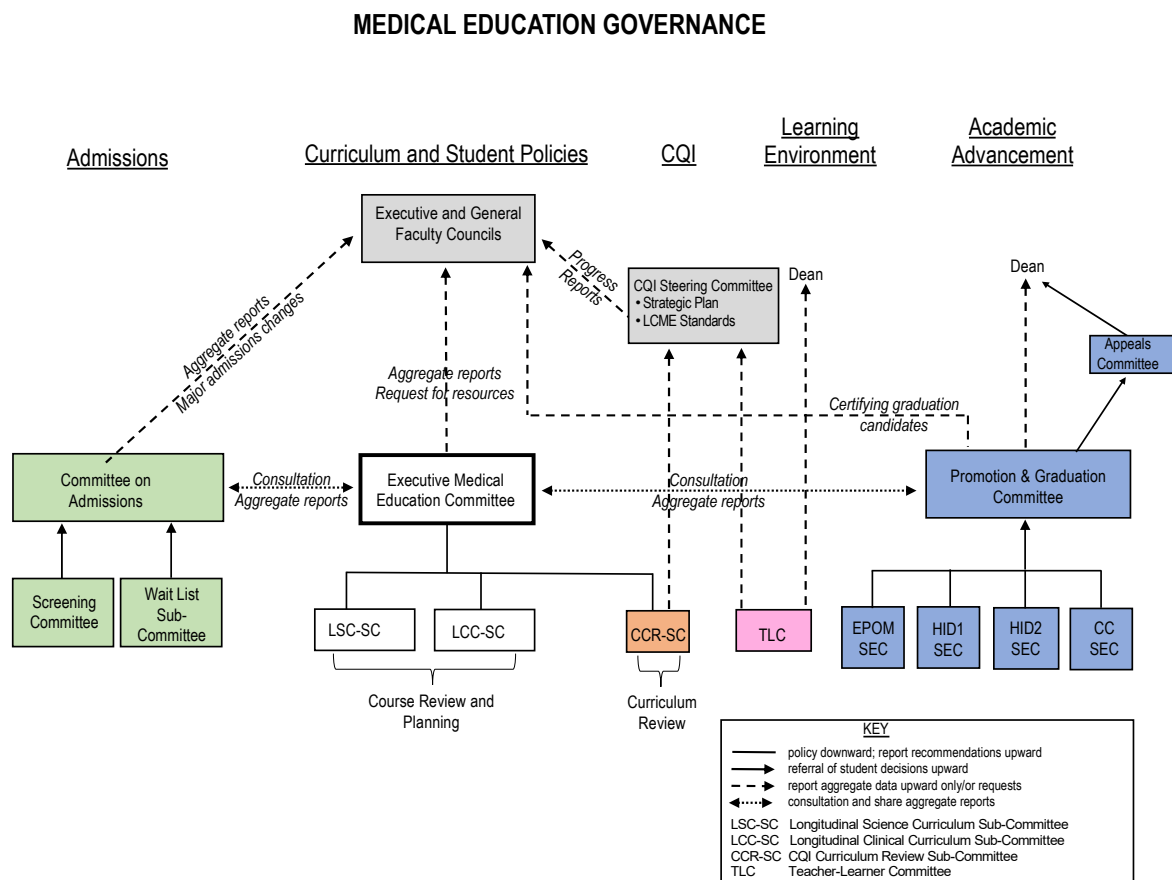
The Committee on Admissions [Admissions Purview] operating in conjunction with its two subsidiary committees (the Screening Committee and Waitlist Subcommittee) has full and final authority on all decisions related to the admission of students. It may consult on matters of policy or procedure with EMEC and provide both EMEC and the Faculty Council with aggregate (de-identified) data reports on its activities and outcomes. Major changes to the admissions criteria would require that the Committee on Admissions consult with EMEC and obtain approval from the Faculty Councils (EFC and GFC).

The Promotions and Graduation Committee (P&G) [Academic Advancement Purview], operating in conjunction with subsidiary course-related Student Evaluations Committees (SECs) has full authority on all decisions related to the academic advancement and graduation of students. Students may appeal adverse decisions to the Appeals Committee.

The Teacher Learner Committee (TLC) [Learning Environment Purview], working closely with the Office of Institutional Equity, serves as the principal entity that receives, investigates, adjudicates, and archives complaints of students about mistreatment of students and breaches that may compromise the learning environment. It is appointed by and responsible to the Dean. It also provides aggregate (de-identified) summary data reports to the Faculty Councils, EMEC, and the CQI Steering Committee and, on request, to other departments and committees.

The medical education program's policies and operations are implemented under the oversight of the Senior Associate Dean, Education; the associate and assistant deans in Medical Education and their offices; the office of the Registrar; and other offices of the Medical College the purview of which involve students, e.g., the library, information technology, student housing, financial aid, etc.

## Diagram of Committees and Their Reporting Lines



**Note:** Some committees *report upward* to higher committees for approval of their recommendations as well as *adhering to* policies ("policy downward") set by the higher committee (e.g., LSC-SC and LCC-SC in relation to EMEC) [solid line]. Other committees *refer actions upward* or information on individual students to another committee (e.g., SECs referring actions on students to the Promotion and Graduation Committee) [solid line with arrow]. Some committees share aggregate reports with each other or consult with each other on policies they would like to enact (e.g., Committee on Admissions and the Promotion and Graduate Committee may consult with EMEC) [dotted line with double arrow]. Some committees (i.e., Committee on Admissions, EMEC, Promotion and Graduation, and the CQI Steering Committee) [dash line with arrow] report aggregate information, request resources, or require ratification of major changes to the medical education program with the Executive and General Faculty Councils.

### Classification of Membership and Terms

1. **Overview of Types of Participants:** Committees shall be comprised of voting members; ex-officio, nonvoting members; administrative staff; and administrative support.
2. **Types of Voting Members:** These include (1) faculty who are selected by the Executive Faculty Council (i.e., department chairs) and General Faculty Council to a three-year, one-time renewable term, unless the term is specified differently below under a specific committee (2) students nominated by the Medical Student Executive Council (MSEC) who are approved and appointed by the Senior Associate Dean, Education to a one-year term (3) faculty or administrators with faculty appointments who by virtue of their administrative role are statutory members of the committee and serve on the

committee as long as they retain their administrative or leadership role; [i.e., ex-officio voting member]. An individual cannot serve on a committee in two or more statutory roles (e.g., as course director and unit leader on the same committee). A course director who is also a co-unit leader serves in the voting role of a course director and the co-unit leader serves in the voting role of a unit leader.

3. Nomination and Selection of Term Voting Members: Faculty who are interested in serving on committees may self-nominate, be peer-nominated, or be nominated by their department chair for consideration by the General Faculty Council. After nomination, faculty term members are elected by the General Faculty Council. The Executive Faculty Council elects its own members to serve as faculty representatives to the medical education committees. Student term members are chosen by the Medical Student Executive Council by MSEC's processes.
4. Chair and Vice Chair: On some committees these may be faculty administrators who serve as chair or vice chair typically by virtue of their statutory role. They remain as chair while they maintain their official administrative position. In some cases, the Chair or Vice Chair may be a senior faculty member appointed to the committee's leadership by the Dean for a specified term, e.g., one-year etc. The Chair and Vice Chair have voting rights unless specified otherwise in the committee descriptions below. All Committee Chairs are responsible for updating committee membership and relevant list serves annually.
5. Ex-officio, Nonvoting members: These include faculty or faculty-administrators who are statutory members of the committee by virtue of their role, serving on the committee while they remain in their role. The members are nonvoting and not counted for quorum; thus, they may attend the meeting at their discretion or when requested by the Chair of the committee.
6. Administrative Staff: These are administrative staff who do not hold faculty appointments, but by virtue of their administrative role and purview are considered important for the functioning of the committee in executing its charge. They are nonvoting participants who remain on the committee while they remain in their administrative role.
7. Administrative Support: This is an office whose staff provide administrative support to the committee chair, vice chair and members.
8. Guests: These include individuals who are invited by the chair or vice chair on an ad hoc basis to provide information to the committee needed in the execution of the committee's charge.
9. Attestations: In some committees, particularly those involving discussion of applicants or enrolled students, members may be asked to complete annual disclosures of conflict

of interest and/or attestations as to having read certain policies or procedural documents.

10. Recusal from Meetings and/or Voting: Members or participants in committees are required to recuse themselves from all meetings, or parts of meetings, and/or voting procedures if they perceive a conflict of interest that may interfere with their ability to render a fair, unbiased decision or which may compromise their relationship with a person or entity under discussion. The chair reserves the right to ask members to recuse themselves from deliberations and votes per the policies of the Medical College or operating policies of the committee itself. Some committees, e.g., the Admissions Committee and the Promotions and Graduation Committee have more stringent recusal policies that are specified below in the relevant sections.
11. Orientation to the Committee for New Members: Either at the time of selection for membership or at the start of a member's term, the chair of the committee shall provide the new members with the purview and charge of the committee. For some committees that include several procedures or committee processes, the chair may choose to provide additional orientation materials or sessions.
12. Removal and Replacement Before Term End: Members are expected to attend meetings, be familiar with documents under review in the committee, perform committee work that is assigned by the Chair or the committee's operational procedures, and contribute to the voting process. In addition, members are expected to follow rules regarding recusal, to maintain confidentiality of documents or proceedings when confidentiality is invoked and to otherwise maintain professional comportment. If the chair believes a member of the committee is not maintaining the standard of participation expected, the chair should meet privately with the member to discuss the issue and possible pathways to resolution. In the case of a term-holding member, if the issue seems insoluble, the chair may request that the term-holding member step down from the committee. If the member disagrees, he or she may appeal the request to continue in service on the committee to the Senior Associate Dean, Education (student members)/General Faculty Council Chair (faculty members). The decision by the Senior Associate Dean and General Faculty Council Chair is final. In the case of a statutory member, the chair should consult with the Senior Associate Dean, Education as to what action should be taken. Vacancies involving term-holding members may be filled through the normal selection mechanism at any point during the academic year, i.e., immediately if the vacancy occurs early in the term or, if late in term, at the next round of term appointments. In the case that a faculty member comes under investigation by the Medical College for an infraction of College policies or a student member is alleged to have committed a serious breach of professionalism, the Senior Associate Dean may suspend the member from the committee, pending the outcome of the investigation.

## **Procedural Rules**

1. Attendance: Voting members and administrative staff are expected to attend committee meetings regularly, ideally in person, or if necessary, by teleconference/video (e.g., Zoom) call-in to the meeting. Ex-officio members are not expected to attend every meeting but may be requested to attend a specific meeting by the chair or the vice chair depending on the content of the committee's agenda.
2. Frequency of Meetings: The minimum expected average frequency for each committee is specified in this document under each committee's description.
3. Definition of a Quorum: A quorum is comprised of a simple majority of voting members present either physically or by telephone/video conference unless specified otherwise.
4. Conduct of Voting: A quorum is required to conduct a valid vote. When a vote is conducted during a committee meeting, it is open to all eligible voting members in attendance either in the room or by teleconference call. Members may not designate others to vote for them. Voting is conducted by secret ballot for those physically present or Zoom private chat for remote attendees. Voting members may opt to cast a vote of "abstain." After a vote closure is called, voting members who have failed to cast a ballot will be considered to have voted to abstain. After the chair has redetermined that a voting quorum is present, a motion passes by a simple majority of the quorum voting in the affirmative.

Voting members who are presenting a proposal that requires a vote must recuse themselves from the voting on that proposition.

For a vote by e-mail, the chair provides all eligible voting members with the relevant voting materials, including the proposition and relevant background information, and sets a deadline by which votes must be emailed to the administrative support staff. In order for the e-vote to be considered valid, a quorum for that committee has to have cast a vote on the proposition.

In some committees (i.e., admissions committees and academic advancement committees) votes must be conducted during the meeting.

5. Minutes and Official Documents: The chair of the committee is responsible for reviewing the minutes to ensure their accuracy and completeness. Minutes are presented at the subsequent committee meeting for members' review and approval before being officially archived along with any other materials relevant to the committee's deliberations. The minutes must contain a record of the date of the meeting, all those in attendance, whether quorum was met, results of any votes held, and describe the general discussion in committee of the agenda items. Meeting minutes and documents are archived by administrative support staff.

6. Confidentiality of Documents or Proceedings: Participants are bound by honor to maintain the confidentiality of documents or proceedings when these are labelled or stated by the chair to be “confidential.” Confidential documents are provided either at the meeting and then are collected by the administrative support staff or are delivered through a confidential electronic folder. If confidential documents are provided electronically, members are honor-bound to maintain confidentiality. Likewise, in some meetings confidentiality of all proceedings is assumed (e.g., Promotions and Graduation, Admissions, etc.) or may be invoked by the chair in other meetings for special topics. Ex-officio, non-voting members are ordinarily entitled to receive all documents that are relevant to the committee’s proceedings, unless the Chair decides that for reasons of recusal or other concerns that only voting members are permitted to view these documents.
7. Recording of Proceedings: Ordinarily, meetings are not videotaped or recorded. In some committees, per procedural policies, meetings may be recorded by the administrative support staff and the chair will inform all members at the outset of the meeting. Attendees at the committee are strictly forbidden from recording the meetings.
8. Formation of Ad Hoc Subcommittee/Task Force: Standing medical education subcommittees may, under certain circumstances, form a subcommittee of their own members to review and investigate a particular item that had come before the parent committee. In addition, the standing committees may form a Task Force of faculty and/or students who are not members of the parent committee but who hold expertise on a particular topic. Both Ad Hoc Subcommittees and Task Forces are charged and given a timeline by which to submit a report that is reviewed by the parent committee or other standing committees for further action.

## **Medical Education Formal Governance Committees**

### **Medical Education Policy and Curriculum Purview**

#### **Executive Medical Education Committee (EMEC)**

Purview and Charge: The purview of this committee extends to all aspects of the medical education program leading to the MD degree; specifically, the establishment and/or modification of all major policies and procedures in the areas of admissions, curriculum, student life, academic advancement, and the learning environment/student mistreatment. This committee has responsibility for the overall design, integration, management, evaluation, and enhancement of the medical curriculum. The EMEC directly oversees the operations and functions of the Longitudinal Science Curriculum Sub-Committee, the Longitudinal Clinical Curriculum Sub-Committee and the CQI Curriculum Review Sub-Committee, which are described below.

For the purviews of student life and the learning environment/student mistreatment, EMEC reviews aggregate data reports and reviews policy recommendations and then sets curricular and student-facing policies for committees or administrative offices operating in these purviews.

The Committee on Admissions and the Promotion and Graduation Committee will ordinarily consult with EMEC on important matters of changes in policies and procedures or a need for additional resources before these committees seek approval of the Executive and General Faculty Councils. Of note, EMEC does not inform or make decisions about individual applicants, students, faculty, or others under the jurisdiction of these two committees.

The Chair of EMEC will ordinarily present to the Executive and General Faculty Councils on important matters or outcomes involving the medical education program either at the Chair's discretion or at the request of the Councils. In addition, the Chair will also present to these Councils, for their approval, major changes in medical education policies especially those that require additional resources.

The charge to this committee is:

- To ensure that the curricular objectives, structure, outcomes, and policies and procedures related to curriculum and student life align with the institutional educational mission
- To conduct a regular cyclical review of the medical education program and its learning objectives/methods of assessment including the selection, placement, sequencing, and integration (horizontal/vertical) of curricular content; the linkage between program objectives and course/clerkship objectives; and the outcomes of the curriculum phases and the curriculum as a whole
- To review aggregate summative data of reports of student mistreatment as well as recommendations from the TLC about policies/procedures that would improve the reporting, adjudication, and resolution process regarding mistreatment of students
- To ensure that other Medical Education committees under its purview execute their current charges and to establish of new policies and/or procedures across the purviews of curriculum, student life, and the learning environment
- To hear the recommendations of the Medical Education committees under its purview regarding the curriculum including the evaluation of proposals for new curricular or student life programs, initiatives or innovations, or major changes to existing programs.
- To authorize the formation of specific task forces or workgroups (i.e., periodic review of technical standards) or research projects, as needed, to investigate matters pertaining to the educational program with the goal of enhancing the curriculum or the medical education program as a whole
- To consult with the Committee on Admissions and the Promotions and Graduation Committee on any on important matters of changes in policies and procedures within



the Admissions and Student Advancement purviews and/or their need for additional institutional resources relevant to their purviews.

### Membership

*Voting Members:* TWELVE general faculty members, who are chosen by the General Faculty Council, and THREE members from the Executive Faculty Council; TWO student representatives (MSEC president, student Board of Fellows representative); Associate Dean, Curriculum; Associate Dean, Admissions; Associate Dean, Continuing Medical Education; Associate Dean, Student Affairs and Student Life; Assistant Dean, Diversity and Student Life

*Ex-officio Nonvoting Members:* Senior Associate Dean, Education (Chair); Associate Dean, Academic Affairs (Vice Chair); Assistant Dean, Foundational Curriculum, Assistant Dean Clinical Curriculum, Assistant Deans, Student Affairs and Student Life; Senior Advisor to the Senior Associate Dean, Education; Dean, WCM; Dean WCMC-Qatar; Associate Dean, Medical Education at WCMC-Qatar; Director, Tri-Institutional MD-PhD program; Associate Dean, Affiliations; Assistant Dean for Medical Education Operations and Accreditation; Assistant Dean, Academic Advising; ONE representative from the Council of Affiliated Deans; ONE representative from Graduate Medical Education (DIO); Director of the Library

*Administrative Staff:* Administrative Director, Medical Education; Education Technology Group representative; Registrar; Director, Financial Aid; Director, Student Accounts, Director, Student Health and, Director Student Housing

*Administrative Support for Committee:* Program and Accreditation Manager

Definition of a Quorum: A quorum to conduct a vote consists of a majority of the voting members present, the majority of whom must be faculty members.

Frequency of Meetings: monthly

Reports to: Dean as Chief Academic Officer of WCM.

### **Longitudinal Science Curriculum Sub-Committee (LSC-SC)**

Purview and Charge: The purview of this sub-committee extends to all required courses in the foundational years of the medical education program however they are constituted (currently consisting of Essential Principles of Medicine courses; Health Illness and Disease Parts 1 and 2 courses), the Area of Concentration Course (all four years); and any science courses in the post clerkship Phase 3 (currently consisting of Translational Science). The purview also includes any WCM research electives.

This sub-committee receives policy directives from EMEC and makes recommendations and reports aggregate data to EMEC.

The charge to this sub-committee is:

- To review and approve the course learning objectives, and their mapping to program objectives and the content of courses under its purview (gaps/redundancies/sequencing of content and units within a course) AND associated unit and session level learning objectives, based on content recommended by national organizations (e.g. academic specialty or discipline societies) and licensure examination bodies (e.g., National Board of Medical Examiners); mandated by LCME, or federal or state law; or resulting from changes in biomedical or social science, disease epidemiology, health care delivery, population diversity and evidence-based medical practice
- To determine, review and approve the learning formats including the balance between inpatient and ambulatory experiences, instructional methods, and educational resources
- To ensure that the assessment methods used in the courses allow the faculty to determine that students have met the learning objectives and that students receive timely and fair formative and summative assessment/feedback
- To conduct ongoing CQI review of the quality of the overall courses, units, instruction, educational outcomes including meeting of current requirements as specified by LCME accreditation standards (e.g., instructional hours, student time/workload) of courses under its purview, and to recommend action plans to course leaders to address problems identified
- To ensure the smooth implementation of courses under its purview principally through the oversight of course leaders, including hearing reports from course directors about the quality and outcomes of their course and suggested modifications for improvement
- To review aggregate summative data of reports of student mistreatment as prepared by the TLC and to hear recommendations from the TLC about strategies that would improve the learning environment
- To make recommendations to EMEC regarding any significant changes in the curriculum including but not limited to program level learning objectives, course length and sequence, time spent (hours) in required didactic and clinical activities, methods of assessment, standards of achievement, new courses, curricular programs, or longitudinal themes that affect content in courses and curricular policies.

#### Membership

*Voting Members:* Course Director(s) of Essential Principles of Medicine course (Part A & B); Course Director(s) of Health, Illness and Disease 1 course (Part A & B); Course Director(s) of Health, Illness and Disease 2 course (Part A & B); Director, Longitudinal Patient Program (LEAP); Director of Step Course; Director, Area of Concentration (AOC) program; Course Director, Translational Science course; TWO student representatives

from second year class in Phase 1 curriculum; Assistant Dean, Foundational Curriculum (Chair); Associate Dean, Curricular Affairs (Vice Chair); Assistant Dean, Clinical Curriculum

*Ex-officio Nonvoting Members:* Senior Associate Dean, Education; Assistant Dean, Foundational Curriculum WCM-Q; Director, Clinical Skills Center; Director, Tri-Institutional MD-PhD Program; HID PCP Unit Director; EPOM PCP Unit Director

*Administrative Staff:* Education Technology Group Representative, CQI Manager, Library Representative

*Administrative Support for Committee:* Foundational Curriculum Manager, Administrative Coordinator for the Office of Curriculum

Frequency of Meetings: monthly

Reports to: Executive Medical Education Committee for policy directives and approval of major curriculum decisions

### **Longitudinal Clinical Curriculum Sub-Committee (LCC-SC)**

Purview and Charge: The purview of this sub-committee extends to all courses of the clerkship phase 2 curriculum (currently consisting of clerkships in Medicine, Surgery, Pediatrics, Obstetrics and Gynecology, Ambulatory Care, Psychiatry, Neurology, Anesthesia and Critical Care, and Emergency Medicine) and any courses in the post-clerkship curriculum phase 3 that focus on care affecting individual patients or patient communities (currently consisting of Advanced Clinical Ethics, Healthcare Policy, and Transition to Residency). The purview also includes WCM electives with a primary focus on clinical patient care.

This sub-committee receives policy directives from EMEC and makes recommendations and reports aggregate data to EMEC.

The charge to this sub-committee is:

- To review and approve the course learning objectives, and their mapping to program objectives and the content of courses under its purview (gaps/redundancies/sequencing of content and units within a course) AND associated unit and session level learning objectives, based on content recommended by national organizations (e.g. academic specialty or discipline societies) and licensure examination bodies (e.g., National Board of Medical Examiners); mandated by LCME, or federal or state law; or resulting from changes in biomedical or social science, disease epidemiology, health care delivery, population diversity and evidence-based medical practice

- To determine, review and approve the learning formats including the balance between inpatient and ambulatory experiences, instructional methods, and educational resources
- To ensure that the assessment methods used in the courses allow the faculty to determine that students have met the learning objectives and that students receive timely and fair formative and summative assessment/feedback
- To conduct ongoing CQI review of the quality of the overall courses, units, instruction, educational outcomes including meeting of current requirements as specified by LCME accreditation standards (e.g., duty hours policy; preparation of residents to teach; observation of clinical skills) of courses under its purview, and to recommend action plans to course leaders to address problems identified
- To review the adequacy of patient volume/case mix in the clerkships, the types of patients/clinical conditions (“clinical encounters” including alternate methods) and clinical skills needed to meet the learning objectives. This includes a review of aggregate data on student completion of these required encounters and clinical skills
- To review the comparability of sites of instruction including case mix, instructional quality, and performance outcomes
- To ensure the smooth implementation of courses under its purview principally through the oversight of course leaders, including hearing reports from course directors about the quality and outcomes of their course and suggested modifications for improvement
- To review aggregate summative data of reports of student mistreatment as prepared by the TLC and to hear recommendations from the TLC about strategies that would improve the learning environment
- To make recommendations to EMEC regarding any significant changes in the curriculum including but not limited to program level learning objectives, types of clinical encounters and level of responsibility, course length and sequence, time spent (hours) in required didactic and clinical activities, methods of assessment, standards of achievement, new courses, curricular programs, or longitudinal themes that affect content in courses and curricular policies.

### Membership

*Voting Members:* Directors of each of the required clerkships (Medicine, Surgery, Pediatrics, Obstetrics/Gynecology, Ambulatory Care, Psychiatry, Neurology, Anesthesia/Critical Care, Emergency Medicine); the Directors of all sub-internships (Medicine, Surgery, Emergency Medicine, Pediatrics, Neurology); Course Director(s), (Transition to Residency, Advanced Clinical Ethics, Health Care Policy course); Director of USMLE Step Course; Director, Electives; TWO students from Phase 3 curriculum; Assistant Dean, Clinical Curriculum (Chair); Associate Dean, Curricular Affairs (Vice Chair); Assistant Dean, Foundational Curriculum

*Ex-officio Nonvoting Members:* Senior Associate Dean, Education; Assistant Dean, Clinical Curriculum, WCM-Q; Director, Clinical Skills Center; Director, Tri-Institutional MD-PhD Program; Director, Physician Assistant Program

*Administrative Staff:* Education Technology Group Representative, CQI Manager, Library Representative

Administrative Support for Committee: Clinical Curriculum Manager, Administrative Coordinator for the Office of Curriculum

Frequency of Meetings: monthly

Reports to: Executive Medical Education Committee for policy directives and approval of major curriculum decisions

### **Medical Education Program Quality Improvement Purview**

#### **Continuous Quality Improvement Curriculum Review Sub-Committee (CCR-SC)**

Purview and Charge: The purview of this sub-committee extends to the provision of regular continuous quality improvement at three levels: all required courses, the three curricular phases (formerly “annual segments”), and the curriculum-as-a-whole. The purview also includes longitudinal experiences in clinical or scientific activities that may transcend course or phase boundaries (e.g., longitudinal content themes, clinical skills development, longitudinal patient experiences, etc.) and instructional quality at all teaching sites. The membership of the committee is constituted to provide an assessment of curricular quality and outcomes that is independent of that of course or clerkship directors.

This sub-committee may receive procedural directives from EMEC and makes recommendations and reports aggregate data to both EMEC and the CQI Steering Committee.

The charge to this sub-committee is:

- To review the curriculum as a whole along with other aspects of the medical program that impact on the student’s ability to meet the program learning objectives and all graduation requirements
- To review the phases of the curriculum using outcome-based metrics, specifically as to how each phase integrates science and patient care and prepares the student to enter the next phase
- To review the quality and outcomes of specific courses and clerkships, including the evaluation of instructional quality of the faculty and resident teachers
- To evaluate the effectiveness of learning formats, availability of formative feedback to students, and the overall quality of the learning environment, including the learning settings and affiliate sites to ensure students meet the learning objectives of the courses and the curriculum as a whole

- To identify strengths and areas needing improvement, based on trends in the quality of the curriculum and make recommendations for improvement and/or enhancement in the educational program.

### Membership

*Voting Members:* FOURTEEN faculty, two of whom are chosen by the EFC representing basic science departments, and four chosen by the GFC, one of whom shall be nominated by the GFC to serve as Chair subject to approval by EMEC, and eight of whom, with the approval of the CCR-SC Chair, are faculty representatives chosen by the Vice Chairs of Education from departments that sponsor a required clerkship (Medicine, Surgery, Pediatrics, Obstetrics and Gynecology; Psychiatry, Neurology, Anesthesiology, Emergency Medicine); EIGHT student representatives from the fourth year class; Assistant Dean for Medical Education Operations and Accreditation (Vice Chair)

*Ex-officio Nonvoting Members who can be present only for response and not for review or deliberations:* Senior Associate Dean, Education; Associate Dean, Curricular Affairs; Assistant Dean, Foundational Curriculum; Assistant Dean, Clinical Curriculum

*Administrative Staff:* Manager, Programs and Accreditation

*Administrative Support for Committee:* Manager, Evaluation and Compliance; CQI Coordinator

Conflict of Interest and Recusal: Voting members are required to recuse themselves from discussions of courses or curricular programs that extensively involve their departments; ex-officio, non-voting members may be present to provide information and to answer questions but are not ordinarily present for deliberations or discussions.

Frequency of Meetings: monthly

Reports to: Executive Medical Education Committee (i.e., provides aggregate outcomes reports on a regular basis and makes recommendations for curricular directives)

### **CQI Steering Committee**

#### Purview and Charge:

The purview of this committee extends to monitoring compliance with LCME accreditation standards, the ongoing evaluation and improvement of the MD program, and progress in monitoring action items and outcomes that were prioritized by this committee. The committee reviews all LCME standards on a regular basis and determines the frequency of review of individual standards. It prioritizes review of specific standards such as those that are explicitly

required by the LCME to be monitored regularly, new LCME elements or standards, elements previously cited in the LCME site visits, and areas known to be of concern. The committee also implements systematic processes to collect, review, and triangulate internal data from a variety of sources. As part of the analysis, the committee compares these data with relevant national benchmark outcomes. It then routinely disseminates these internal data and national outcomes along with its analyses to members of the appropriate institutional administrative offices, departments, and committees for their review and action. For those LCME standards for which outcomes data suggest suboptimal results, the committee, working through the “CQI point persons,” directs the appropriate institutional entities (e.g., offices, committees, departments, or individuals) to take timely action to initiate improvements and/or collect additional outcomes data.

The charge to this committee is:

- To ensure that CQI methods are implemented across the medical education program to meet accreditations standards
- To regularly review the LCME accreditation standards to ensure compliance and determine the frequency of ongoing monitoring for each standard
- To ensure that systematic processes for the collection, organization, and analysis of existing internal data from a variety of sources have been implemented
- To identify gaps in existing data elements needed for LCME accrediting reporting and charge the appropriate administrative entity with collecting these data for review by the committee.
- To hear requests from institutional entities (e.g., offices, committees, and individuals) about the need for additional resources for the collection, storage, collation, and reporting of CQI data
- To hear progress reports about the WCM Strategic Plan
- To review periodically the types and sources of national data used to benchmark WCM’s own internal data
- To triangulate WCM’s internal data and analyze it against national benchmark measures
- To disseminate WCM’s internal data benchmarked against national outcomes along with the committee’s analyses to members of the appropriate institutional administrative offices, departments, and committees for their review and action
- To monitor the effect of interventions that were implemented in the areas that had been identified as needing improvement
- To propose updates to policies and guidelines when needed to reflect changes in best educational practices for accreditation requirements.

### Membership:

*Voting Members:* Senior Associate Dean, Education (Chair); Assistant Dean for Medical Education Operations and Accreditation (Vice Chair); Senior Associate Dean, Clinical Affairs; Senior Associate Dean, Research; Senior Associate Dean, Faculty Affairs; Senior Associate Dean, Diversity; TWO members from the Executive Faculty Council; the Chair of the General Faculty Council; TWO members chosen by the GFC; Board of Fellows Student Representative, TWO student representatives from the fourth-year class, and ONE MD-PhD student

*Ex-Officio Nonvoting Members:* Dean, WCM; Chief Executive Officer, WCM Physician Organization; Chief Operating Officer, NYP-WCM; Deputy University Counsel, WCM; Associate Dean, Affiliations; Tri-Institutional MD-PhD Director; NewYork-Presbyterian Designated Institutional Official; Chief Medical Officer, NYP-WCM, Brooklyn; Associate Dean, Curricular Affairs; Associate Dean, Admissions; Associate Dean, Student Affairs; Associate Dean, Academic Affairs

*Guests:* Chairs of committees, specific departments, or other institutional offices are invited as guests based on review of data and outcomes relevant to their administrative role.

*Administrative Staff:* Accreditation Staff

*Administrative Support for Committee:* Office of Medical Education

Frequency of Meetings: Quarterly with Ad Hoc subcommittees appointed as needed to address priority areas

Reports to: Executive and General Faculty Councils

### **Medical Student Admissions Purview**

The purview of the admissions committees extends to the selection of applicants for admission as medical students to WCM's educational program leading to the MD degree. Within their individual charges and respective purviews, the admissions committees seek to conduct a holistic review of applications. Admissions processes are need-blind and not influenced by financial or political factors.

The Committee on Admissions has full and final authority to select applicants for admission or Waitlist to Weill Cornell Medical College, including all applicants to the Tri-Institutional MD-PhD Program. Decisions of the committee on individual applicants are final and not subject to appeal, nor review by other WCM committees, nor by the Dean. The Committee on Admissions consults with the Executive Medical Education Committee and the Promotion and Graduation



Committee on major changes in admission policies prior to presenting these changes to the Executive and General Faculty Councils for approval.

### **Committee on Admissions (AC) and *Waitlist Subcommittee***

Purview and Charge: The purview of this committee extends to all admissions policies and the committee's own operational procedures and those policies and procedures of its Waitlist Subcommittee and the subsidiary Admissions Screening Committee. The committee's specific purview involves individual admission decisions on all applicants to the Medical College who have been referred to this committee by the Admissions Screening Committee.

The charge to this committee is:

- To determine the criteria, process, and procedures for admissions to the Medical College including those that will be used by the Committee on Admissions, the Screening Committee and the Waitlist Subcommittee
- To review all applicants for the MD program and make final admissions decisions
- To review the following on a regular basis:
  - Criteria for admission to the Weill Cornell Medical College, including pre-medical course requirements and personal attributes deemed necessary to become a competent physician (*substantive changes require that this committee consult with EMEC and P&G and obtain approval from the Faculty Councils*)
  - Process for holistic review and operational procedures used to select applicants for acceptance
  - Any recommendations from the Admissions Screening Committee regarding adjustments in screening criteria and its operational procedures.

Selection of Members: Five-year term membership (renewable once also with the approval of the GFC) is open to all full-time members of the WCM faculty both at NYPH and the affiliate hospitals. E-mail solicitations are sent out under the aegis of the GFC when vacancies arise, and faculty may self-nominate. The nominations, with the advice of the Associate Dean, Admissions, are sent to the GFC for approval.

One-year, one term membership is open to students in good academic and professional standing who are enrolled in Phase 3 of the curriculum. Email solicitations are sent out to the Phase 3 classes and students may self-nominate for selection by the Associate Dean, Admissions, with approval by the Senior Associate Dean, Education.

### Membership

*Voting Members*: FORTY faculty elected by GFC to terms; ten students (term-appointed); Associate Dean, Admissions (Chair) [Votes only in the case of a tie]

*Ex-officio Nonvoting Members:* Assistant Dean, Admissions (vice chair); Director, Admissions; Assistant Director, Admissions; Director, Tri-Institutional MD/PHD Program

*Administrative Staff:* None

*Administrative Support for Committee:* Interviewer coordinator and other program assistants, Office of Admissions

Conflict of Interest and Recusal: Voting members are required to recuse themselves from an entire admissions cycle if they have had a familial relationship with an applicant (defined as a first or second degree relative). Voting members who have a professional relationship with an applicant, e.g., doctor/patient, mentor/mentee, employee/employee should inform the Associate Dean, Admissions immediately upon learning of this conflict and recuse themselves from evaluation and discussion of that applicant. In addition, committee members must also recuse themselves from deliberations on a particular applicant if they believe they cannot render a fair and unbiased decision for whatever reason on that applicant.

Voting can only occur at meetings and a quorum is required to conduct a valid vote.

Definition of a quorum: A quorum is defined as a majority of the voting members of the committee, the majority of whom must be faculty members.

Frequency of Meetings: Biweekly to monthly, on average, during admissions cycle (September to March), then as needed at other times.

Reports: Aggregate data on admissions results to EMEC and faculty councils upon their request, not individual admissions decisions

### ***Waitlist Subcommittee***

Purview and Charge: The purview of this sub-committee, which is comprised of the members from the Committee on Admissions, extends to all applicants who have been deemed acceptable for admission to WCM and who have been placed by the Committee on Admissions on the Waitlist. This committee is delegated to make final decisions on applications on the Waitlist but is required to inform the Committee on Admissions of its decisions.

The charge to this committee is:

- To determine which applicants from the waitlist may be accepted at each point in time as class slots open up, using the criteria and procedures established by the Committee on Admissions.

Selection of Members: Faculty members of the Committee on Admissions self-nominate themselves for a three-year, renewable term as vacancies become available. The voting faculty members of the Committee on Admissions then select the members of the Waitlist Committee.

Membership:

*Voting Members:* 7 faculty members who are members of the Committee on Admissions

*Ex-officio Nonvoting Members:* Associate Dean, Admissions (Chair) [Votes only in the case of a tie]

*Nonvoting Administrative Staff:* Director, Admissions; Assistant Director, Admissions

*Administrative Support for Committee:* Program Assistant, Office of Admissions

Conflict of Interest and Recusal: Committee members must also recuse themselves from deliberations on a particular applicant if they believe they cannot render a fair and unbiased decision for whatever reason on that applicant.

Definition of a Quorum: A simple majority of the voting members of the committee

Frequency of Meetings: During May through August, as needed, until final class selected

Reports to: Committee on Admissions for policy directives.

## **Admissions Screening Committee**

Purview and Charge: The purview of this committee extends to all applicants applying for admission to the MD program who have completed their applications and all supporting documentation.

The charge to this committee is:

- To screen all completed applications for the MD program utilizing the standard guidelines established by the Committee on Admissions
- To review the screening criteria and the committee's operational procedures regularly and if needed, make recommendations to the Committee on Admissions for review.

Selection: Three year, one-term membership (renewable once also with the approval of the GFC) is open to all full-time members of the WCM faculty both at NYPH and the affiliate hospitals. E-mail solicitations are sent out under the aegis of the GFC when vacancies arise, and

faculty may self-nominate or be nominated by their Department Chair. The nominations, with the advice of the Associate Dean, Admissions, are sent to the GFC for approval.

### Membership

*Members:* 30-50 faculty elected to three-year terms by the GFC, the number determined by the Associate Dean, Admissions based on application volume; Associate Dean, Admissions (Chair); Assistant Dean, Admissions (Vice Chair); Director, Admissions; Assistant Director, Admissions; Executive Director of the Tri-Institutional MD-PhD program; Assistant Director of the Tri-Institutional MD-PhD program

*Ex-officio Members:* None

*Administrative Staff:* None

*Administrative Support for Committee:* Program Assistants, Office of Admissions

Conflict of Interest and Recusal: Members are required to recuse themselves from an entire admissions cycle if they have had a familial relationship with an applicant (defined as a first or second degree relative). Members who have a professional relationship with an applicant, e.g., doctor/patient, mentor/mentee, employer/employee should inform the Associate Dean, Admissions immediately upon learning of this conflict and recuse themselves from evaluation and discussion of that applicant. In addition, members must also recuse themselves from deliberations on a particular applicant if they believe they cannot render a fair and unbiased decision for whatever reason on that applicant.

Frequency of Meetings: Two established meetings, one in the summer prior to start of application cycle for orientation to screening criteria and the second at the end of the cycle to review the effectiveness of the screening process during the most recent cycle.

Reports to: Committee on Admissions to obtain the guidelines for screening applicants and make recommendations to the Committee on Admissions regarding screening procedures for their approval

### Academic Advancement Purview

The committees listed under Academic Advancement Purview are charged with ensuring that students comply with all standards set forth by WCM to receive the MD degree. Students must meet all academic, professionalism, technical, and policy standards as set forth in the Student Handbook to successfully complete the educational program. Compliance with all policies of the Medical College, and where relevant, with affiliated hospitals of the Medical College, is also expected throughout the duration of the educational program. Failure to meet academic and professional standards, and failure to comply with Medical College policies may be grounds for disciplinary action, including dismissal, from the Medical College.

The Student Evaluation Committees are primarily charged with monitoring the academic progress and professional conduct of individual students while they are in specific courses or curricular phases. These committees may make recommendations to course leaders or medical education administrators to provide additional academic or non-academic support to students with the goal of assisting them to successfully complete a course. In addition, they automatically refer the matter of students who may fail to meet the academic and professional standards based on specific guidelines to the Promotion and Graduation (P&G) Committee for additional evaluation and decision. Students may appeal decisions of the P&G Committee that resulted in serious adverse actions for the student.

### **Student Evaluation Committee for Essential Principles of Medicine (SEC-EPOM)**

Purview and Charge: The purview of this committee extends to students who are or have been enrolled in the Essential Principles of Medicine course.

The charge to this committee is:

- To monitor the academic progress and professional conduct of individual students while in the course; specifically, that the student is meeting all academic, professional, technical, and policy standards as set forth in the Student Handbook
- To make recommendations for additional academic and non-academic support with the goal of assisting the student to successfully complete the course and to develop professionally
- To refer the matter of students who fail to meet academic and professional standards to the P&G for additional evaluation and decision about academic advancement. The referral is based on specific guidelines outlined in the Student Handbook.

### Membership

*Members:* Course Director(s) of EPOM; ONE unit leader representative from EACH of the units comprising EPOM; Director, AOC program; Associate Dean, Academic Affairs (Chair)

*Ex-officio Members:* Senior Associate Dean, Education; Associate Dean, Curricular Affairs; Assistant Dean, Foundational Curriculum; (Vice Chair); Associate Dean, Student Affairs and Student Life; Assistant Dean, Diversity and Student Life; Director, Tri-institutional MD-PhD Program

*Administrative Staff:* Registrar or Assistant Registrar; Administrative Director, Tri-institutional MD-PhD Program; Manager, Foundational Curriculum

*Administrative Support for Committee:* Program Coordinator, Academic Affairs

Frequency of Meetings: twice per year, at the approximate mid-point and end of the course

Referrals: refers individual student cases as appropriate to Promotions and Graduation Committee based on specific criteria as outlined in the Student Handbook

### **Student Evaluation Committee for Health, Illness and Disease (SEC-HID 1)**

Purview and Charge: The purview of this committee extends to students who are or have been enrolled in the Health Illness and Disease Part 1 course. The charge of this committee is:

- To monitor the academic progress and professional conduct of individual students while in the course; specifically, that the student is meeting all academic, professional, technical, and policy standards as set forth in the Student Handbook
- To make recommendations for additional academic and non-academic support with the goal of assisting the student to successfully complete the course and to develop professionally
- To refer the matter of students who fail to meet academic and professional standards to the P&G for additional evaluation and decision about academic advancement. The referral is based on specific guidelines outlined in the Student Handbook.

#### Membership

*Members:* Course Director(s) of HID 1; ONE unit leader representative from EACH of the units comprising HID 1; Director, AOC program; Associate Dean, Academic Affairs (Chair)

*Ex-officio Members:* Senior Associate Dean, Education; Associate Dean, Curricular Affairs; Assistant Dean, Foundational Curriculum (Vice Chair); Associate Dean, Student Affairs and Student Life; Assistant Dean, Diversity and Student Life; Director, Tri-institutional MD-PhD Program

*Administrative Staff:* Registrar or Assistant Registrar; Administrative Director, Tri-institutional MD-PhD Program; Manager, Foundational Curriculum

*Administrative Support for Committee:* Program Coordinator, Academic Affairs

Frequency of Meetings: twice per year, at the approximate mid-point and end of the course

Referrals: refers individual student cases as appropriate to Promotions and Graduation Committee based on specific criteria as outlined in the Student Handbook

### **Student Evaluation Committee for Health, Illness and Disease Part 2 (SEC-HID2)**

Purview and Charge: The purview of this committee extends to students who are or have been enrolled in the Health Illness and Disease Part 2 course. The charge of this committee is:

- To monitor the academic progress and professional conduct of individual students while in the course; specifically, that the student is meeting all academic, professional, technical, and policy standards as set forth in the Student Handbook
- To make recommendations for additional academic and non-academic support with the goal of assisting the student to successfully complete the course and to develop professionally
- To refer the matter of students who fail to meet academic and professional standards to the P&G for additional evaluation and decision about academic advancement. The referral is based on specific guidelines outlined in the Student Handbook.

#### Membership

*Members*: Course Director(s) of HID 2; ONE unit leader representative from each of the units comprising HID 2; Director, AOC program; Associate Dean, Academic Affairs (Chair)

*Ex-officio Members*: Senior Associate Dean, Education; Associate Dean, Curricular Affairs; Assistant Dean, Foundational Curriculum (Vice Chair); Associate Dean, Student Affairs and Student Life; Assistant Dean, Diversity and Student Life; Director, Tri-institutional MD-PhD Program

*Administrative Staff*: Registrar or Assistant Registrar; Administrative Director, Tri-institutional MD-PhD Program; Manager, Foundational Curriculum

*Administrative Support for Committee*: Program Coordinator, Academic Affairs

Frequency of Meetings: twice per year, at the approximate mid-point and end of the course

Referrals: refers individual student cases as appropriate to Promotions and Graduation Committee based on specific criteria as outlined in the Student Handbook

### **Student Evaluation Committee for Clinical Curriculum (SEC-CC)**

Purview and Charge: The purview of this committee extends to students who are or have been enrolled in courses in Phase 2 (i.e., clerkships) and phase 3 courses (i.e., all post clerkship courses).

The charge to this committee is:

- To monitor the academic progress and professional conduct of individual students while in required phase 2 and 3 courses; specifically, that the student is meeting all academic, professional, technical, and policy standards as set forth in the Student Handbook
- To make recommendations for additional academic and non-academic support with the goal of assisting the student to successfully complete the course and to develop professionally
- To refer the matter of students who fail to meet academic and professional standards to the P&G for additional evaluation and decision about academic advancement. The referral is based on specific guidelines outlined in the Student Handbook.

### Membership

*Members*: Director for EACH of the required clerkships (Anesthesia/Critical Care; Medicine; Surgery; Pediatrics; Obstetrics and Gynecology; Psychiatry; Neurology; Ambulatory Care; Emergency Medicine); Director, Health Care Policy; Director; Translational Science; Director, Advanced Clinical Ethics; Director, Transition to Residency; Director of EACH sub-internship (Medicine; Pediatrics; Neurology; Surgery; Emergency Medicine); Director, AOC program; Director, Electives; Associate Dean, Academic Affairs (Chair)

*Ex-officio Members*: Senior Associate Dean, Education; Associate Dean, Curricular Affairs; Assistant Dean, Foundational Curriculum; Assistant Dean, Clinical Curriculum (Vice Chair); Associate Dean, Student Affairs and Student Life; Assistant Dean, Diversity and Student Life; Director, Tri-institutional MD-PhD Program



*Administrative Staff:* Registrar or Assistant Registrar; AOC Program Coordinator; LEAP coordinator; Administrative Director, Tri-institutional MD-PhD Program; Manager, Clinical Curriculum

*Administrative Support for Committee:* Program Coordinator, Academic Affairs

Frequency of Meetings: approximately every two months

Referrals: refers individual student cases as appropriate to Promotions and Graduation Committee based on specific criteria as outlined in the Student Handbook

### **Promotions and Graduation Committee (P&G)**

Purview and Charge: The purview of this committee extends to the monitoring of student advancement through the educational program leading to the MD degree both in the aggregate and at the level of individual students. The purview also includes making decisions about the academic advancement, suspension, and dismissal of students.

The charge to this committee is:

- To regularly review the rates of student advancement through all phases of the curriculum
- To certify the eligibility of final-year students as candidates for graduation based on their meeting all graduation requirements prior to the date of graduation
- To review information on all students who take or return from personal, medical, and academic leaves of absence or who voluntarily withdraw or have been withdrawn from the medical college
- To review information on students who incur new Fail grades or incur an accumulation of three or more Marginal or Fail grades
- To review, recommend, and take action on all students who incur an egregious incident of unprofessional behavior and/or pattern of professionalism breaches
- To recommend procedures to be implemented for remediation and/or counselling, additional support and/or warnings for students incurring serious difficulties in academic performance, including professionalism
- To determine a student's suitability for the practice of medicine in accordance with the Guidelines for Promotion and Graduation and/or commission the appointment of an ad hoc advisory committee to conduct additional investigations and make recommendations. The actions taken by the P&G Committee may include allowing the student to remain enrolled in the educational program with or without stipulations, suspension, or dismissal from the Medical College
- To provide information to the Appeals Committee, when relevant.

## Membership

*Voting Members:* SEVEN faculty members chosen by the GFC, THREE of whom are from departments with residency programs; FOUR faculty members chosen by the EFC

*Ex-officio Nonvoting Members:* Associate Dean, Academic Affairs (Chair, presides over entire meeting and may designate a voting member to serve as Chair during an emergent absence); Others (*present only for information-gathering and not during deliberations*): Senior Associate Dean, Education; Associate Dean, Curricular Affairs; Associate Dean, Student Affairs and Student Life; Associate Dean, Admissions; Assistant Dean; Diversity and Student Life; Director, Tri-Institutional MD-PhD Program; Other administrative officials invited at the request of the Chair when relevant

*Administrative Staff:* None

*Administrative Support for Committee:* Program Coordinator, Academic Affairs

Conflict of Interest and Recusal: A voting member may not participate if they have had an assessment relationship with the student or have participated in the clinical care of the student. Voting members are required to recuse themselves from discussions of students if they believe they cannot render a fair and unbiased decision for whatever reason; ex-officio, non-voting members (chair excepted) may be present to provide information and to answer questions but are not ordinarily present for deliberations or discussions on individual students.

Voting can only occur at the meeting, not subsequently, and a quorum is required to conduct a valid vote.

Frequency of Meetings: six times per year and ad hoc as necessary

Relationship to Appeals Committee provides materials and documents related to students who have filed an appeal to the Appeals Committee

***Ad Hoc Advisory Committee to the P&G Committee:*** This is not a formal standing committee but is commissioned at the request of the Promotions and Graduation Committee, based on its deliberations. This committee is issued a specific charge that centers on the determination of a student's suitability for the practice of medicine. The committee membership ordinarily consists of senior faculty from WCM who are chosen by the Senior Associate Dean, Education. The number of members is not specified, but is ordinarily 2-3, including a chair designated by the Senior Associate Dean. Prior to selection, the faculty member must disclose to the Senior Associate Dean, Education any conflicts of interest prior or current (academic, personal, or professional) which would preclude membership on this committee. The ad hoc committee reviews all relevant documents, may interview the student under investigation and other

faculty or staff according to the Guidelines for Promotion and Graduation. The committee issues a written report and recommendation(s) to the P&G committee. This committee's recommendations are not binding.

### **Appeals Committee (AC)**

Purview and Charge: The purview of this committee is to hear all student appeals of a decision by the P&G Committee that result in a serious adverse action such as a required leave of absence, suspension, or dismissal.

The charge to this committee is:

- To review all relevant documents that the P&G committee used in its deliberations.
- To hear and/or review the statements of the student who has filed an official appeal according to the rules for filing, including any additional written information and or in-person statements from witnesses deemed admissible according to WCM policies that had not been known to the P&G at the time of its initial decision
- To verify that the P&G correctly followed the policies and procedures of Weill Cornell Medical College related to its decision regarding the student
- To determine if the prior decision of the P&G is to be upheld or overturned
- To report the committee's decision and its rationale to the Dean of the Medical College who will make a final decision in the matter and, except for extraordinary circumstances involving new information and /or procedural concerns, will implement the decision of the Appeals Committee.

### Membership

*Voting Members:* THREE faculty members chosen by the GFC one of whom serves as chair; THREE faculty members chosen by the EFC who represent departments that sponsor residency training programs; TWO faculty members chosen by the EFC-who represent basic science departments or centers

The Chair is elected by the members of the committee and serves a three-year (one time renewable) term.

*Ex-officio Nonvoting Members:* NONE

*Administrative Staff:* NONE

Administrative Support: Manager, Accreditation and Medical Education Programs

Conflict of Interest and Recusal: A voting member may not participate if they have had an assessment relationship with the student. Voting members are required to recuse themselves from discussions of students if they believe they cannot render a fair and unbiased decision for any reason.

Voting can only occur at the meeting, not subsequently, and a quorum is required to conduct a valid vote.

Frequency of Meetings: as needed, based on the filing of a formal appeal by a student

Reports to refers decisions on student appeals to Dean, Weill Cornell Medicine, for final action and implementation

### **Learning Environment Purview**

The learning environment refers to all settings in which medical students learn, including the classroom, clinical and research work settings, and campus buildings, including student housing.

### **Teacher Learner Committee (TLC)**

Purview and Charge: The purview of the TLC pertains to the mistreatment of WCM medical and physician assistant students and visiting medical and physician assistant students enrolled in the College and extends to all locations of the learning environment including the classroom, the hospital and its clinics, the clinical practices and or/offices of the faculty, research labs, the College's campus, and housing, and includes all the same venues at affiliate sites.

The charge to this committee is:

- To foster a learning environment of respect across the academic medical center and to educate members of the WCM community about best practice behaviors and attributes that contribute to a healthy climate for learning and the free exchange of ideas.
- To accept and monitor reports of perceived or actual mistreatment from all sources including direct reports or through the Course Evaluation System or other methods that are established for reporting.
- To ensure a timely investigation and resolution of cases that qualify as mistreatment and that fall within its jurisdiction.
- To conduct a regular review of aggregate summative data of all available sources on the frequency of medical students who report experiencing mistreatment and to share that data with curriculum committees and the Faculty Councils, and when relevant, with specific departments.

### **Membership**

1. *Voting Members:* ONE faculty member from each department that sponsors a clerkship (Medicine; Surgery; Psychiatry; Neurology; Pediatrics; Obstetrics and Gynecology; Anesthesiology; Emergency Medicine); ONE practicing physician assistant from either

WCM or New York-Presbyterian Hospital; TWO faculty members, each from a different basic science department; and ONE faculty member from an affiliated hospital that serves as a clerkship site; TWO medical students who are in Phase 3 of the clerkship; ONE student enrolled in the WCM physician assistant training program.

Upon the recommendation of the Senior Associate Dean, Education, faculty members including the Chair are appointed by the Dean to two-year renewable terms; students are appointed by the Dean, to one-year non-renewable terms.

*Ex-officio Nonvoting Members:* None

*Administrative Staff:* Manager, Student Life

*Administrative Support:* Manager, Student Life

Frequency of Meetings: Quarterly and at chair's and committee's discretion, as needed

Relationship to Other Policies and Offices: TLC provides complainant data to the Office of Institutional Equity (OIE) for OIE to determine jurisdictional authority over individual cases. For WCM faculty, investigation and adjudication shall adhere to the procedures and protections as specified in the Academic Staff Handbook. For WCM staff, investigation and adjudication shall adhere to the relevant policies as specified by the WCM Office of Human Resources. For employees and staff of the NewYork-Presbyterian Hospital (NYPH) system, investigation and adjudication shall adhere to the relevant policies of NYPH. For employees and staff of WCM affiliated institutions, investigation and adjudication shall adhere to the relevant policies of those institutions.

Reports to: Dean, Weill Cornell Medicine; provides complainant data to Office of Institutional Equity (OIE) for OIE to determine jurisdictional authority over individual cases; provides aggregate data to EMEC and its subcommittees, General or Executive Faculty Councils or other Medical College committees or Departments as appropriate and/or upon request.

Approved by:

Executive Medical Education Committee on June 27, 2024 and July 25, 2024

General Faculty Council on September 16, 2024

Executive Faculty Council on October 14, 2024