

Reviewed by MCAEC: 6/13/22 Reviewed by Curriculum Committee: 7/11/22	Responsible University Officer: Dean
Dean’s Executive Committee Approval: 9/6/22	Policy Owner: Associate Dean for Undergraduate Medical Education
Dean’s Final Approval: 9/6/22	Policy Contact: Director, Accreditation & Compliance

Continuous Quality Improvement Policy

POLICY STATEMENT

Upstate Medical University’s College of Medicine (COM) will engage in a process of continuous quality improvement (CQI) to ensure that the medical education program activities support COM’s mission, vision, and strategic objectives and to provide effective monitoring of the program’s compliance with accreditation standards.

REASONS FOR POLICY

The Liaison Committee on Medical Education (LCME) requires that medical schools engage in a systematic process of planning and quality improvement. The COM CQI Plan will support strategic planning efforts conducted through the Office of the Dean and facilitate regular monitoring of compliance with LCME standards with support by the Office of the Dean, Associate Dean for Undergraduate Medical Education (UME), and Director of Accreditation and Compliance.

PROCEDURES

- The Director of Accreditation and Compliance will support a system for monitoring LCME elements through the CQI Plan. The plan specifies the following:
 - Criteria for including an element in the CQI plan
 - LCME Elements to be monitored
 - Measures of compliance
 - Source of data
 - Responsible and accountable parties
 - Monitoring frequency
 - Established benchmarks
 - Metrics to determine compliance
 - Dates of the most recent and upcoming reviews
 - Outcomes and next steps
- LCME Elements for monitoring and/or improvement in the CQI plan are identified from the following categories:
 - Elements that include an explicit requirement for monitoring or involve a regularly-occurring process
 - New or recently-revised or changes in LCME expectations related to performance in elements
 - Elements that could be reviewed to ensure that policies are congruent with current operations
 - Elements that directly or indirectly effect the core operations of the school
 - Elements that were cited in the medical school’s previous full survey
 - Elements that were commonly cited in the last three years
 - Other elements that were identified through program evaluation processes, the Curriculum Committee, or COM leadership
- The Director of Accreditation and Compliance will be responsible for managing the CQI process and will report on progress to the Associate Dean for UME and to the Dean’s Executive Committee (DEC). The Associate Dean for UME will work with the Dean to provide appropriate resources for this activity that support the collection and monitoring of relevant data.
- Data Sources that will be reviewed may include, but are not limited to:
 - AAMC surveys, including the Year-Two Questionnaire (Y2Q) and the Graduation Questionnaire (GQ)
 - Student and faculty evaluations
 - AAMC Mission Management Tool

- USMLE and NBME score results
- Independent Student Analysis results
- Committee By-laws and Meeting Minutes
- Registrar reports
- College of Medicine policies and procedures
- Affiliation Agreements
- Other internal data sources as necessary
- The Director of Accreditation and Compliance will report on relevant updates or progress of the CQI plan at Phase 1, Phase 2, Curriculum Committee, and Dean’s Executive Committee meetings.
- The results of the CQI plan may be used to inform policy or procedure revisions, make recommendations to committees and COM leadership, and identify short- and long-term goals for the specific LCME elements.
- The CQI plan will be monitored annually by the DEC to identify if revisions to the elements included are necessary.

RESPONSIBILITIES

- Ultimate responsibility for oversight of the CQI process is the Dean.
- Operational responsibility for oversight of the CQI process is the Associate Dean for UME and Director of Accreditation and Compliance.
- Other departments, offices, or individuals identified to support CQI monitoring and/or data gathering activities is found in the CQI Plan Dashboard.

DEFINITIONS

LCME Element 1.1: *A medical school engages in ongoing strategic planning and continuous quality improvement processes that establish its short and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve educational program quality, and ensure effective monitoring of the medical education program’s compliance with accreditation standards.*

FAQ

There are no FAQ associated with this policy.

APPENDICES

LCME CQI Plan Dashboard

RELATED INFORMATION

- Implementing a System for Monitoring Performance in LCME Accreditation Standards [Approved by the LCME® on October 19, 2016 – [LCME Website](#)]

Review Date:	Change Description:
4/11/18	New Policy
4/11/18 – 4/21/18	Reviewed by MCAEC
5/2/18	Approved by Dean’s Executive Committee and Dean Licinio
5/11/20	Reviewed by the MCAEC
7/7/20	Reviewed and reapproved with minor editorial changes not affecting the intent of the policy by the Dean’s Executive Committee and Dean Chin