

 <b>QUILLEN COLLEGE of MEDICINE</b> EAST TENNESSEE STATE UNIVERSITY	<b>Policy/Procedure/Process Name:</b>	Liaison Committee on Medical Education (LCME) Continuous Quality Improvement (CQI) Policy
	<b>MSEC/ADMIN Number:</b>	ADMIN 0119-3
	<b>Approving Officer:</b>	William A. Block Jr., MD MBA, Dean
	<b>Agent(s) Responsible for Implementation:</b>	Executive Associate Dean for Academic and Faculty Affairs
<b>Original Approval Date:</b> 1/11/2019  <b>Effective Date(s):</b> 1/11/2019; 7/20/2020	<b>Originator Name/Committee:</b>	Kenneth E. Olive, MD Executive Associate Dean for Academic and Faculty Affairs
<input type="checkbox"/> <b>New Policy/Procedure/Process</b>	<input checked="" type="checkbox"/> <b>Revision of Existing Policy/Procedure/Process</b>	
<b>Revision Date(s):</b> 1/11/2019 (Formalization of previous practice into policy); 7/20/2020 (clarification of response to determinations of non-compliance); 11/2/2021-Admin Revision (change EAD to Vice Dean for Academic Affairs)	<b>LCME Required Policy/Procedure/Process:</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <b>LCME Element(s) Number and Description:</b>  1.1 Strategic Planning and Continuous Quality Improvement  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.	
<b>Exemption(s) to Policy through MSEC Action (date of meeting):</b>		
<i>All policies/procedures/processes will be reviewed during the MSEC Evaluation of the Curriculum as a Whole unless an earlier review is identified.</i>		
<b>Administrative Review Date(s):</b> 7/20/2020		

**(A.) Policy Statement:**

Quillen College of Medicine (QCOM) will engage in an ongoing continuous quality improvement (CQI) process to ensure the medical education program's compliance with the Liaison Committee on Medical Education (LCME) accreditation standards.

The Dean and Vice Dean for Academic Affairs (senior leadership) will systematically review all accreditation standards and elements with relevant administrative staff, and faculty members. Senior leadership will identify those elements to be reviewed during the CQI process. These will be selected based on those determined to be in non-compliance or compliance with monitoring at the last full survey visit as well as those standards identified by LCME as frequent standards resulting in severe actions (Hunt D, Migdal M, Waechter DM, Barzansky B, Sabalis RF. The Variables That Lead to Severe Action Decisions by the Liaison Committee on Medical Education. Acad. Med. 2016 Jan; 91(1):87-93) and as most frequent LCME citations (from LCME presentations). Senior leadership will seek input on the elements chosen from the Administrative Council, the Faculty Advisory Council (FAC), and the Medical Student Education Committee (MSEC). Senior leadership will identify the data to be reviewed for each element, a schedule for review, and the group(s) to review the data. Most data will be reviewed annually.

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Relevant groups will review the elements and data as indicated by the schedule and make determinations of the program's compliance with the standards/elements.

For those determined to be non-complaint, senior leadership will develop, implement, and monitor the outcomes of a corrective action plan in cooperation with appropriate faculty and staff members. Each corrective action plan will identify goals, measures of effectiveness, and a timeline.

The most recent schedule is attached and considered a part of the policy.

**(B.) Purpose of Policy**

The LCME CQI Policy is designed to ensure ongoing compliance with the LCME accreditation standard.

**(C.) Scope of Policy:**

Applies to all faculty and staff members responsible for compliance with accreditation standards.

**(D.) Activities of Policy:**

Collecting, analyzing, and reporting data related to compliance with LCME accreditation standards

<b>Approved by:</b> <b>Name / Title:</b> William A. Block Jr., MD, MBA / Dean <b>Date(s):</b> 1/11/2019; 7/20/2020	<b>Policy/Process/Procedure Superseded by this Current Policy/Process/Procedure (name and number):</b> <i>(List only if a name change is involved)</i>  <b>LCME CQI Schedule Revision</b> - Formalization of previous practice into policy
<b>Review/Revision Completed by:</b>	<b>Date</b>
<input checked="" type="checkbox"/> Office of the Dean	1/11/19; 07/20/20
<input checked="" type="checkbox"/> Academic Affairs	1/11/19; 07/20/20; 11/2/21
Student Affairs	
<input checked="" type="checkbox"/> Medical Student Education Committee	2/19/19; 07/20/20
Student Promotions Committee	
<input checked="" type="checkbox"/> Faculty Advisory Council	1/16/19; 07/20/20
<input checked="" type="checkbox"/> Administrative Council	1/24/19; 07/20/20
M3/M4 Clerkship/Course Directors	
M1/M2 Course Directors	
<input type="checkbox"/> Student Groups/Organizations (describe):	
<input type="checkbox"/>	
<input type="checkbox"/>	

<b>Notifications of New or Revised Policy</b>	<b>Method of Notifications and Date</b>
Medical Students	
All QCOM Faculty	
All QCOM Staff	
<input checked="" type="checkbox"/> Admissions Office (catalog)	January 2019