

LInC Course and Clerkship Leadership Guide

October 2017

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*Welcome!*

This Orientation and Reference guide is designed to provide basic information to you as course and clerkship leaders, with links to more detailed resources. The creation of this guide has been a collaborative effort among the Offices of Undergraduate Medical Education (OUME), Institutional Research, Evaluation and Assessment (IREA) and Academic Technology and Curriculum Innovation (ACTI) (formerly Academic Computing Services (ACS)). It is organized by course and clerkship development topics.

Your LInC Leadership Meetings

**Attendance at Curriculum Committee meetings:** Meetings provide a venue for course and clerkship leaders to share ideas, problem-solve, receive faculty development, discuss policy, plan calendars, present and provide peer review on course and clerkship reviews, learn of new initiatives, etc. and are thus are critical to the co-leadership role. Invitations are extended to all course co-leaders for each meeting, and all are encouraged to attend, though responsibilities may be shared to ensure each course is represented. ***(monthly)*** See <https://inside.umassmed.edu/committees/Committees/> for a listing of curriculum committees.

**Annual UMMS EPC curriculum retreats, and targeted course and clerkship leader mini-retreats:** Retreats serve as a mechanism for deeper review of topics covered in curriculum committees and to work across courses, curriculum years, schools and disciplines; expectation is that course leaders will make every effort to attend. ***(2-3 times per year)*** Check out the 2017 EPC retreat.

**Meetings with Department Chairs:** Course and clerkship co-leaders should meet at least annually with the chairs of the departments who sponsor their courses to review course evaluation reports, student feedback, faculty performance, course administration issues and plans for change in subsequent years. Chairs should be kept aware of course progress and issues throughout course delivery as necessary. In case of clerkships, Chairs should be appraised of both clerkship-specific and coordinated thematic section issues.

Your Course Feedback and Reviews

**Course feedback groups with students:** These voluntary sessions occur with a small group of students at the request of course leaders. They provide an opportunity for direct discussion and sharing of ideas with a subset of students in real time and on a deeper level than via course evaluations. Most co-leaders formulate 3-4 questions of interest relevant to their course and then facilitate student discussion and encourage constructive feedback by the group. For example: “Students from last year told us X and this year we did Y. What did you think?” Groups are scheduled by **Maria Paz Torres Gutierrez,** *(508) 856-5642*, *Maria.TorresGutierrez@umassmed.edu*in the OUME at the course leader’s requested times.

**FOM1 and FOM2 course leader meetings with student course representatives:** Each course is assigned one primary (and perhaps secondary) student representative from the group of student curriculum committee representatives who meets with course leaders to discuss issues of concern to students or faculty, serve as liaison between the class and the course leaders, meets with course leaders after course evaluation to prepare the internal course review and attended curriculum committee meetings as the student voice. Student Curriculum Committee representatives are named annually by the SOM Student Body Committee (SBC).***(varies depending on course length, meetings occur during course and after course evaluations are received.)***

**Internal course quality improvement review:** Required, structured annual review created in collaboration with student course representatives and presented to curriculum committee. The review incorporates a curriculum database review and follows a specific format. The final review is posted on the EPC website providing broad access to the institutional community. ***(every year)*** [internal course review form](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/internal-course-review-reporting-form-04-2016.pdf)

**Periodic Course/Clerkship Review:** Periodic meetings with Associate Dean of UME and Institutional Research, Evaluation and Assessment (IREA) if requested by course leaders in order to review student feedback, performance and assessment, plan feedback to teaching faculty, feed-forward to other courses and students and course planning for the following year. ***(scheduled on request)***

**Feedback to Faculty:**Course and clerkship leaders are responsible for providing faculty with feedback regarding their own performance or course materials in order to promote ongoing course improvement. Faculty can assess their own evaluation data in E\*Value. Course leaders and administrators also access end of block or course evaluations. In addition, many course and clerkship leaders observe faculty teaching, particularly when they are new to the course (this can be done in real-time or through viewing lecture capture). Each of these provides an opportunity to offer specific feedback and reinforce expectation with faculty.

Faculty who self-identify, or are identified by course leaders or chairs as needed development can receive assistance from course leaders, the OUME or office of Faculty Affairs. The Senior Associate Dean for Educational Affairs and Associate Dean for Undergraduate Education (ADUME) receive copies of all course and clerkship evaluations after the course leaders and their Department Chairs. They may reach out to course leaders or individual faculty to discuss feedback or support on going course improvement.

Curriculum committees also review relevant evaluation data and policies annually. These vary by committee priorities and needs.

Your Course To-Do List

**How to Prepare an Existing Course?**

**Update/Maintain course schedule:** Each year the OUME collaborates with course leaders to update or maintain the annual course schedule based on the prior schedules recorded in the curriculum calendar. CCE and AS curriculum committee chairs manage the process of annual schedule development in coordination with the Office of Student Affairs.

**Academic Curriculum Calendar**:

Creating the high-level curriculum schedule annually is the work of the EPC through its curriculum committees and drafts are formally submitted by their chairs. In creating the schedule, the Chairs of FOM1, FOM2, CCE and AS curriculum committees work in appropriate consultation with the offices of student affairs (Justine Ashley) and OUME (Carly Eressy), and one another across all four years. Annual schedule development follows a list of guidelines related to holidays, exams, and other course considerations to decrease inter and intra-year schedule conflicts and to meet registrar and financial aid requirements. Calendars can also change to accommodate mutual requests by course leaders, or in support of curriculum change as recommended by the EPC or its curriculum committees. The responsibility for determination of calendar dates are available at: [Curriculum Dates and Planning Responsibilities](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/curriculum-dates-and-planning-responsibilities.pdf) 2012**.** Once completed, dates are shared with the Offices of Undergraduate Medical Education and Student Affairs (OSA) for finalization. After finalization, they must be sent to the Registrar and Financial Aid Offices for confirmation and posting. [Academic calendars](http://www.umassmed.edu/studentaffairs/curriculum/academic-calendars/) are posted on the Office of Student Affairs (OSA) website.

Contacts: Justine Ashley (OSA), Justin.Ashley@umassmed.edu , 508-856-3789

 Carly Eressy (OUME), Carly.Eressy@umassmed.edu , 508-856-5694

***Special Note:*** Remember to share with the Registrar and Director of Financial Aid **January 15th** of the prior academic year**: Semester start/stop dates**

**December 15th** of the prior academic year: **Room requests**

**Review your learning objectives, instructional strategies, and assessment methods:**

In 2017 AY, we are getting ready to move our curriculum database from e\*Value over to OASIS (Online Access to Student Information and Scheduling). So now is a good time to review any existing course materials and check that the learning objectives use active verbs and the instructional strategies and assessment methods use the MedBiquitous terminology. This will assist in generating course reports for the LCME. Both PeopleSoft and Blackboard Learn link into OASIS. Contact: Carly Eressy, Carly.Eressy@umassmed.edu, 508.856.5694

Writing Learning Objectives:Review your course and session learning objectives to make sure that the objectives include [active verbs](https://drive.google.com/file/d/0B97v-sL8XHlBT19iYUxfR21zRVU/view?usp=sharing) . Avoid the use of the verbs that are open to interpretation and difficult to measure in assessments such as know, learn, appreciate, be familiar with, understand, be aware of, and demonstrate understanding. Contact: Gail March Cohen, PhD., Assistant Dean for Undergraduate Medical Education Curriculum, Gail.MarchCohen@umasssmed.edu, 508-856-5641

Describing LCME instructional strategies and assessment methods:The medical school accreditation organization, the Liaison Committee on Medical Education (LCME) and the AAMC Curriculum Inventory, applies the [Medbiquitous terminology](https://drive.google.com/file/d/0B97v-sL8XHlBUlloQ0NpOERYcjA/view?usp=sharing) for instructional strategies and assessment methods. Please use this terminology when describing your instructional strategies and assessment methods.

### **FOM1 and FOM2 outreach for teaching assistants:** Some courses benefit from student TA’s. A sample information and recruitment letter is available here [Sample Application Letter to Recruit TA Student](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/Sample-application-letter-to-recruit-TA-student.pdf). A letter should be sent to the ADSA acknowledging student efforts as TA’s for inclusion in MSPE with cc to Assistant Dean for curriculum, Gail March Cohen, PhD., Gail.MarchCohen@umassmed.edu .

**Requests for advance standing process** for FOM students should be directed to the Associate Dean for Undergraduate Medical Education, Melissa Fischer Melissa.Fischer@umassmed.edu , and follow these [Advanced Standing Guidelines](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/Advanced-standing-guidelines.pdf) from 2011.

**Update course website**: Each course and clerkship has a website on the learning management system (LMS) Blackboard Learn (Bb Learn). Any changes to the course information and materials are loaded onto the LMS by the course administrator. Each website uses a standard UMASS template to provide a consistent framework for students across courses. *The template may not be altered.*

At the initial start-up of each course (start-up and ongoing requests), the OUME will ask course leaders to:

* Provide a list of faculty and staff who should have access to their own Bb Learn course website
* Grant access to faculty from other courses to promote coordination and collaboration

Request after the initial one time course list, a Bb Learn form to add or remove faculty and staff by contacting Carly Eressy (OUME), Carly.Eressy@umassmed.edu, (508) 856-5642 (access takes about 3 business days)

* Ask other course directors for permission for your faculty to access other Bb course sites

**How to Develop a New Course?**

**Course Development:** TheCourse Co-leaders are responsible to---

* Recruit faculty to teach, create, update and share key course elements such as objectives, teaching methods, requirements regarding course materials and teaching expectations
* Request specific faculty development sessions from the OUME to support and improve faculty teaching
* Review course expectations and objectives
* Oversee faculty material, provide feedback regarding clarity, format, scope and appropriateness of content with a goal of consistency of format and coordination of topics to support student learning
* Work with the OUME to build and maintain materials and databases required for curriculum management and accreditation
* Consult with faculty to promote best practices in material development (see below) such as materials being available in advance of class; inclusion of specific objectives, summary slides, key points, reflective questions to promote understanding and self-assessment; slide labeling with faculty members' last name, course abbreviation and year as a footer; development of exercises or questions for formative a summative student performance assessment.

*FOM1 and FOM2 Preparation and Consolidation Time:* In addition to course session hours, course leaders are allotted time “out of class” that can be used to assign students self-directed work that relates to an upcoming class session (preparation) or reinforces concepts after class sessions have occurred (consolidation). This time is allotted in 1 hour segments (maximum 2 hours per day, 10 hours per week across all courses) and often includes a brief formative assessment to allow students to gauge their mastery of the material. Use of all preparation and consolidation time by course leaders is optional. Preparation and consolidation time augment classroom learning and do not replace student homework or study time.

For FOM1 and FOM2 courses, slides and materials should be posted in the learning management system at least 5 days in advance of class.

Guidelines can be found: [Preparation and Consolidation Guidelines](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/preparation-and-consolidation-guidelines.pdf)

‘Best practice’ examples can be accessed at: [Examples of Preparation and Consolidation Assignments](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/examples-of-preparation-and-consolidation-assignments.pdf)

### FOM1 and FOM2 outreach for teaching assistants:Some courses benefit from student TA’s. A sample information and recruitment letter is available here [Sample Application Letter to Recruit TA Student](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/Sample-application-letter-to-recruit-TA-student.pdf). A letter should be sent to the ADSA acknowledging student efforts as TA’s for inclusion in MSPE with cc to Assistant Dean for curriculum, Gail March Cohen, PhD., Gail.MarchCohen@umassmed.edu .

FOM1 and FOM 2 Lecture Capture and Audio Podcasting Capture:a video camera icon on the *intranet* calendar indicates that a session will be recorded using video capture for student viewing through the learning management system (LMS). Faculty will need to contact the UMMS Help Desk for assistance to change the default opt in and opt out for their sessions. Video capture is meant as an adjunct to the curriculum.

“Opt out” options:

* sessions are recorded and posted as video files by default unless faculty 'opt out' which is most commonly done if patients will be part of the session and do not wish to be recorded.
* The lecture capture system also records and posts audio podcasts of all sessions by default unless faculty choose to ‘opt out’.

“Opt in options:

* If faculty would like to have sessions captured in *audio AND video* using podcast format, they must ‘opt in’ for the *VIDEO* podcasting option.
* If the system fails, course leaders may request posting of similar sessions from the prior year by contacting AV through the UMMS Help Desk. AV detects the problem (or is informed by others). Information Services (IS) contacts the course leader and administrator to either:
	+ Say they have a similarly titled lecture video from last year; or
	+ Ask if there was a similar lecture the prior year.
	+ Course leader or administrator confirms it is ok to post the prior version with the individual faculty member. Course leader or administrator asks IS to post.

HIPAA requirement– Obtaining consent from patients to be photographed or videotaped for educational *purposes.* Bringing patients into the classroom, or using their images, histories or data to help educate our students are powerful ways to reinforce clinical relevance and our UMMS competencies in our teaching. Please be aware that in order to protect patient confidentiality:

* All personally identifiable information regarding patients should be carefully removed from data, images or any patient-specific materials before sharing with students
* Patients who agree to be photographed or videotaped, even by our standard lecture capture system, must complete a specific consent form in advance. Verification of this consent is the course leader’s responsibility. This form can be accessed at: [Consent to Participation Photography and Publication](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/consent-to-participation-photography-and-publication.pdf).

**Best practices for course materials:** In order to support your teaching, the OUME offers faculty development and shares resources and best practices for large and small group teaching with course leaders and faculty. Please contact us if you are interested in specific topics.

Contact: Gail March Cohen, PhD., Assistant Dean for Undergraduate Medical Education Curriculum, Gail.MarchCohen@umasssmed.edu, 508-856-5641.

Best practices for developing new course materials include:

* Write clear and specific learning objectives using [active verbs](https://drive.google.com/file/d/0B97v-sL8XHlBT19iYUxfR21zRVU/view?usp=sharing)
* Describe your instructional strategies using [Medbiquitous terminology](https://drive.google.com/file/d/0B97v-sL8XHlBUlloQ0NpOERYcjA/view?usp=sharing)
* Base your assessment methods on measuring achievement of the learning objectives
* Create lecture slides with plain backgrounds (no patterns or photos) and use contrasting backgrounds and fonts (e.g., black font on yellow or pastel backgrounds, OR yellow/white font on blue background). Plain white backgrounds are too glary on the eyes.
	+ Include a title for each slide
	+ Limit text on the slides to the “Joy of Six” – 6 words per line, 6 lines per slide
	+ Simplify charts, figures and tables to show only the information you want your students to learn
	+ Cite sources in 12pt font at bottom
	+ Add UMassMed logo to lower right corner View>Master Slide>copy and paste
	+ Begin with learning objectives and end with summary slide that answers the learning objectives

### Adhere to best practices in large and small group materials development [Student Perspectives on Effective Teaching](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/student-perspectives-on-effective-teaching.pdf)

* [Save all course materials as a pdf (including lecture slides) to upload to Blackboard Learn (Bb L) for student annotation and archiving](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/student-perspectives-on-effective-teaching.pdf)
* [Submit educational materials to administrators 5 days in advance to allow timely upload and review by students (if possible materials should not be edited after upload as many students download and annotate materials prior to course sessions)](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/student-perspectives-on-effective-teaching.pdf)
* [Communicate changes in materials to students by email or before class when these changes are necessary](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/student-perspectives-on-effective-teaching.pdf)

More information is available on the OUME website at: [http://www.umassmed.edu/oume/faculty-](http://www.umassmed.edu/oume/faculty-resources/) [resources/](http://www.umassmed.edu/oume/faculty-resources/)

**Accreditation standards:** The Liaison Committee on Medical Education (LCME) accredits the medical school and the next UMMS review is 2020. The curriculum data from 2018-2020 will be collected and reported to the LCME. This is a valuable opportunity for curriculum quality assurance and improvement. When writing your course and course materials, consider the LCME elements. More information is available on the UMMS LCME Accreditation Institutional Self-study website at: <https://www.umassmed.edu/lcme/accreditation-faq/>

**Integrating classroom technology into the course:** The Academic Technology team offers schedules and individual consultations to support the suite of applications listed on this website

<https://www.umassmed.edu/it/services/Academic-Technology-and-Curriculum-Innovation/> . These applications are tools to enhance the delivery of teaching and learning. Contact for more information AcademicComputingServices@umassmed.edu .

**Technology lending program:** The OUME has a number of laptops (both PC and Mac platform) and software available to faculty to support your curriculum design. These can be checked out from the OUME by contacting Kathy Moylan at kathy.moylan@umassmed.edu or 508-856-5643. Current software includes:

* + Camtasia Studio V7 for MAC
	+ Adobe Presenter 7
	+ Adobe Acrobat X Suite
	+ Adobe Acrobat 9 Pro
	+ Adobe Acrobat 9 Pro Extended Suite 10
	+ Articulate Studio 09 (Presenter 09 – Quizmaker, Engage, Video Encoder)
	+ Echo 360 – recording software

**Course schedule development:** Each year the OUME collaborates with course leaders to develop the annual course schedule. The CCE and AS curriculum committee chairs manage the process of schedule development annually in coordination with the Office of Student Affairs. This is based on prior schedules.

**Online Curriculum calendar:**  The online curriculum calendar is housed on the intranet at [Intranet](http://inside.umassmed.edu/portal/curriculum_cal.cfm) [Curriculum Calendar](http://inside.umassmed.edu/portal/curriculum_cal.cfm)**;** this is the official schedule of all course sessions for FOM1 and FOM2 with notation regarding 'prep/consolidation time'. A 'special events' calendar notes optional sessions and school-wide events. [Academic calendars](http://www.umassmed.edu/studentaffairs/curriculum/academic-calendars/) are posted on the OSA website.

**Course Learning Management System, Blackboard Learn (Bb Learn):** Each course and clerkship has a website on the learning management system (LMS Blackboard Learn (Bb Learn). All course information and materials are loaded onto the LMS by the course administrator. Each website uses a standard UMASS template to provide a consistent framework for students across courses. *The template may not be altered.* Follow self-directed tutorials: <https://www.umassmed.edu/it/services/Academic-Technology-and-Curriculum-Innovation/blackboard-learn/>

# The Academic Technology and Curriculum Innovation (ACTI builds templates for courses, provides instructional and information design services, trains faculty and course administrators, integrates multimedia and synchronous collaboration tools, administers and supports the online learning management system, and provides innovative solutions that extend the functionality of the system. To ensure consistency across the curriculum, each required course and clerkship uses the standard UMMS template for online delivery of course materials.

At the initial start-up of each course (start-up and ongoing requests), the OUME will ask course leaders to:

* Provide a list of faculty and staff who should have access to their own Bb Learn course website
* Grant access to faculty from other courses to promote coordination and collaboration

Request after the initial one time course list, a Bb Learn form to add or remove faculty and staff by contacting Carly Eressy (OUME), Carly.Eressy@umassmed.edu, (508) 856-5642 (access takes about 3 business days)

* Ask other course directors for permission for your faculty to access other Bb course sites

Training for Course leaders, faculty, administrator or faculty designer: [IT Training Schedule.](http://i.umassmed.edu/events/istraining_events.aspx?pid=80)

# Instructor (s), Faculty Monitor (read-only access to course content and no student grades), and Teaching Assistantroles do not require training.

Contact: UMMS Help Desk (to arrange for custom training session)

#

# **Development of Course Content in Bb Learn:** Each course has a minimum of one course administrator to upload course content for course co-leaders and teaching faculty. Backup support, within a department or across departments, is strongly recommended.

Course content typically includes the following content types:

* Lecture notes in PDF form (usually PowerPoint files converted to PDF)
* Audio-narrated PowerPoint presentations (PPT with an Adobe Presenter Plug-in, Camtasia, etc.)
* Assessments and Assignments presented using the native Bb Learn tools, and integrated with the Grade Center
* Video files can be integrated into the course; please consult with the ATCI team on the best technology solution
* Standard policies documents and links to UMMS resources
* Links to external websites or resources (e.g., Virtual Microscopy slides)

Bb Learn Course Availability: Faculty and staff formally associated with a course, or students enrolled in the course in Campus Solutions (PeopleSoft), gain access to course materials in Bb Learn. Login credentials are sent to the email address on file for the user. This is usually a umassmed.edu or umassmemorial.org email address.

New and returning UMMS users (students, faculty, and staff) can receive Bb Learn support 24 hours a day, 7 days a week. Please refer to the Blackboard Learn login in page for details: [https://umassmed.umassonline.net.](https://umassmed.umassonline.net/)

ATCI staff complete course/clerkship startup activities for all iterations of a course into subsequent blocks or semesters. Single-semester courses are rolled over annually. Courses that cross semesters are rolled over each semester. Clerkships are rolled over according to the block schedule set by Student Affairs, or merged together at the discretion of the Clerkship Director(s).

* Teaching faculty and staff have access to course materials in Bb Learn at all times
* A change in course start date requires an email by at least one course co-leader to ATCI (**https://www.umassmed.edu/it/**) for modification in the Bb Learn system
* Students have access to course content starting 7 days prior to the course’s start date (set by the Curriculum Calendar) unless dates are changed by the course co-leaders
* Course content for Foundations of Medicine (FOM) Years 1 and 2 is accessible to students for a period of 1 academic year after they have been actively enrolled in a course

Contact for Bb Learn assistance: umwhelpdesk@umassmed.edu

**Online Assessment Tools and Computer-Based Testing Efforts:** Teaching faculty have taken the initiative to leverage online assessment tools for the administration of tests at UMMS. The Bring Your Own Device (BYOD) program is currently in place for National Board of Medical Examiners (NBME) standardized tests.

**Classroom Teaching and Learning Technologies:** ATCI supports faculty and staff in the use of technology used for teaching and learning activities in classrooms, amphitheaters, and conference rooms. These technology tools include lecture capture and audience response systems (polling). ATCI staff train faculty and staff in the use of these tools prior to their use in the classroom, and also support faculty during their delivery of lectures and events. A minimum of 48-hour advance notice is kindly requested for scheduling purposes.

**Student Laptop Requirement and Technology Orientation Sessions**

UMMS requires all incoming students to bring a laptop with them to act as a portal to online courses, streaming lectures and media, computer-based testing, virtual microscopy slides, and digital lecture notes. As a collaborative effort, ATCI staff work closely with centralized school services to develop and maintain standards for student laptops and ensure that all necessary security resources, links to required software, and minimum and preferred system requirements are clearly defined and available to students. In addition, ATCI organizes and conducts Technology Orientation sessions with students during their first two days at UMMS to ensure the proper functioning of their laptops and familiarity with necessary technology tools and resources.

# **Integrated Teaching and Learning Center (iTLC)**

The Integrated Teaching and Learning Center (iTLC) is a learning environment with high-definition display of images that facilitates small group collaboration, Computer-Based Testing (CBT), and interactive multimedia teaching and learning. The iTLC is sponsored by the Office of Educational Affairs (OEA), and is jointly supported by Information Technology (IT) and OEA. The iTLC space is scheduled through the Office of Undergraduate Medical Education.

**How to Prepare Your Exams?**

**Exam Administration:** Courses are responsible for preparing materials for and administering their own exams including securing proctors. Academic Computing can provide support for proper exam structure and settings in BBL and standardized computer-based testing. See attached for details regarding working with the Office of IREA for specifics regarding exam administration: [IREA Exam Administration Specifics](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/irea-exam-administration-specifics-2015_16.pdf) AY 2015-16.

***FOM1 and FOM2:*** See link for exam protocols adopted by curriculum committees for details regarding process of administering exams: [FOM1 and FOM2 Student Exam Information](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/foundations-of-medicine-years-1-and-2-student-exam-information.pdf)

**Exam/Assessment Structure:** Exams are designed or selected by course leaders and can be built internally or draw from external sources (such as the NBME customized assessments or question banks created by national societies). **We encourage assessments that demonstrate the skills required of a physician including application of knowledge, teamwork, communication and problem solving.**

Course leaders will be able to:

* Determine the appropriate assessment format (multiple choice, short answer, essay, paper...individual or team-based... standardized patient encounters, simulation or objective structured clinical exams (OSCE)
* Select In-class or take home, open note or closed book, and include a professionalism statement about sharing answers
* Implement a diversity of methods
* Ask faculty for internal exams to write questions while creating teaching materials to include key points (OUME can arrange for faculty development in best practices for question-writing, contact Gail March Cohen, PhD., Assistant Dean for Undergraduate Medical Education Curriculum, Gail.MarchCohen@umasssmed.edu, 508-856-5641)
* Review and edit questions as necessary
* Administer online (using BLS vista or other methods), or on paper (bubble sheets are obtained from and scored by IREA).
* Score the assessment with faculty and others
* Assess student clinical performance with the common clerkship assessment form
* Provide formative assessment (not included in final grade) and feedback (verbal and narrative) throughout the course to identify and address learning needs
* Design the summative assessment to count as no more than 80% of the final grade

**FOM1 and FOM2:** Course leaders in FOM1 and FOM2 need to inform students regarding expectations around assessments:

* Describe the kind of assessments used in the course
* Explain the access students will have to assessments
* Recognize any sample responses/answers

To support consistency among courses regarding definitions, communications with students and standard practices, the FOM 1 and FOM 2 curriculum committees jointly adopted a policy that is posted on all Bb Learn web sites [Policies and Procedures Applicable to All FOM Courses Approved by Curriculum Committees](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/policy-and-procedures-approved-by-curriculum-committees.pdf)

**Pre-exam reviews** for FOM1 and FOM2 students: As course leaders, you have to option to provide pre-exam reviews and in what format. You can invite faculty to review key topics and answer student questions prior to exams. These sessions can occur in scheduled course time or as optional sessions outside of course time that do not conflict with other courses or protected time. Sessions should be scheduled at the start of the course so students can plan to attend. If they occur outside of scheduled class time, they must be labelled optional. Course leaders should indicate whether these should be recorded (to arrange pre-exam reviews, contact Maria Paz Torres Gutierrez (OUME), Maria.TorresGutierrez@umassmed.edu, (508) 856-5642)

**Post-exam review** for FOM1 and FOM2 students: Course leaders are expected to provide feedback on summative in-class exams to support learning. (This is not feasible for NBME-customized exams.) It is best if post-exam reviews are scheduled at the start of the course so that students can option in advance to attend.

Post exam reviews for summative in-class assessments should have the following components:

1) Answers should be projected or posted immediately after the exam to allow students to compare their own notes (on scratch paper or by memory) to correct answers and estimate their performance

2) An optional time approximately 1 week after the exam to review exam items and answer questions in detail with students as a group.

**Exams in Courses with Block Structure:** Some courses are organized into blocks due to the amount or framing of content and skills. Each of these blocks should have a 'block leader' to serve as primary contact for students, faculty and administration and to provide general oversight for the block following the model provided by course leaders (recruit faculty, review materials, create exam questions, etc.) Blocks are not free-standing courses and thus appear as course components in the grading process. Block grades may be the responsibility of the block leader, but should be completed in consultation with the course leaders who are ultimately responsible for ensuring timely submission to IREA. Block leaders may participate in post exam reviews and other administrative sessions at the discretion of the course leaders.

**Exam Structure:** Information on exam structure (dates, number of exams, names of exams, weights, cutoffs) must be given to IREA/IR Analyst in writing (email OK) **at least 2 weeks prior to your course’s first exam** to avoid any confusion during the academic year. This provides the individualized structure for each course’s PeopleSoft Gradebook which is difficult to adjust after the course begins. Please let us know if you plan on submitting ALL exam grades at the end of your course. If so, know IREA/IR Analyst may need up to 3 days to process EACH exam.

**Additional Grade Components - not scanned but part of exam grade:** Some exams include short answer, essay, or other elements that add points to the bubble-sheet exam grade. In these cases, course administrators must combine exam scores with any additional points and provide the IREA IR Analyst with a final exam score that will be uploaded to the PeopleSoft database. Excel training in this area can be provided by the IREA IR analyst, if desired.

**Missed exams:** The only acceptable excuses for not taking an exam at its scheduled time are religious observances, personal illness or serious illness/death of an immediate family member. Any such conflicts should be brought to the course leaders attention as early as possible in the academic year. The course leaders/administrator will help with any missed material and facilitate the rescheduling of the missed exam. Course leaders may ask the student to provide a physician's note documenting a personal illness.

**Exam Scoring and Reporting:** At the beginning of each academic year, the IREA IR Analysts schedule a meeting to summarize and update exam procedures with course administrators and course co-leaders.

* Preliminary item analysis, histogram, alphabetical and descending exam score reports are emailed in a PDF format to the course representatives within **3 working days after receiving exam sheets and answer key** (e.g., an exam delivered on a Monday afternoon will be scored by the following Thursday afternoon).
* Course co- leaders, curriculum committee chair, IREA member, and the Associate Dean for UME meet shortly thereafter, as needed, for the post-exam review and discussion of individual questions, rescoring decisions and initial planning of course revision for the following year.
* After all challenges are collected from students and changes determined by course co-leaders, exam answer key changes may be delivered in writing to Room S4- 144 or emailed to the IREA /IR Analyst with any subsequent questions also being directed to the IREA IR Analyst.
* “Rescored” reports are ready within **3 working days** after the rescoring information is received and are sent as a PDF to the designated course representative (co-leader and/or administrator). It is important to note that rescored exams enter the queue along with all other pending exam scoring.
* The IREA office can provide a copy of the student exam answer sheet (bubble sheet) after notification and approval from respective course administrator (email OK) with cc to course co-leaders. For AY 17/18, a request for a copy of student exam sheet should be sent to Michelle Santana (Michelle.Santana@umassmed.edu).

**Uploading Student Exam Scores to Gradebook in the PeopleSoft Database**: Exam scores are uploaded to PeopleSoft Gradebook after written permission from a course co-leader (email OK) is provided to the IREA IR Analyst authorizing the upload. Adjustments to exam scores that have been uploaded to Gradebook require written (email OK) notification to the IREA IR Analyst. Uploading exam scores to the PeopleSoft database makes the scores *immediately* available to the students and the Associate Dean for Student Affairs.

**Uploading Final Course Grades to PeopleSoft:** Uploading **final course grades** to the PeopleSoft database requires all course co-leaders’ signatures on the Final Grades Authorization memo provided by IREA. The Final Grades Authorization memo is sent via email to the course administrator and co-leaders after the IREA IR Analyst is notified in writing (email OK) that the final grades are *finalized*. Final course grades are rounded to the nearest integer. Uploading the exam scores to the PeopleSoft database makes the grades *immediately* available to the students and the Associate Dean of Student Affairs.

**Training Opportunities via IREA:** IREA is pleased to offer training, as needed, to course co-leaders/block leaders, clerkship directors, and/or department Chair “walk-through” of evaluation reports and in areas related to assessment item writing, test construction, post exam, and evaluation review including review of statistical analysis of items/questions and overall test.

IREA Contact information: *Main Office - Room S4-144: Phone 508-856-6009, Fax 508-856-5310*

**What You Need to Know about Grading?**

 **Key Student Affairs Policies and Definitions:** The student handbook ([**Student Handbook**](http://www.umassmed.edu/Global/Student%20Affairs/Files/Handbook/1415HANDBOOKv3.pdf)) describes academic and professional requirements for students, school policies, electives and other opportunities. Many of these policies are relevant to course leaders as well. These include:

* + Students’ academic performance/grading with regard to advancement: [Academic Performance](http://www.umassmed.edu/Global/Student%20Affairs/Files/Handbook/1415HANDBOOKv3.pdf) [and Grading](http://www.umassmed.edu/Global/Student%20Affairs/Files/Handbook/1415HANDBOOKv3.pdf)
	+ Honor Code and Professionalism: [Honor code](http://www.umassmed.edu/studentaffairs/honorcode/)
	+ Preclinical and Clinical Grading and Progress Board Processes: [Progress Board](http://www.umassmed.edu/Global/Student%20Affairs/Files/Handbook/1415HANDBOOKv3.pdf)

***FOM1, FOM2 and Non-clinical AS:*** The foundation course exam grades are uploaded to PeopleSoft by the Office IREA after review by course leaders, staff from IREA and the Associate Dean for UME. Exam grades are available to students in PeopleSoft gradebook as soon as they are uploaded by IREA.

Final course grades are computed by course leaders and submitted to IREA, who then upload to PeopleSoft. Final grades are available to students in PeopleSoft as soon as they are posted. Some courses choose to also notify students about grades by direct email. The Registrar provides reports

regarding grade turn-around time to the Associate Dean of UME when requested in order to monitor compliance with timeliness of grade availability for students.

All co-leaders for each course are required to sign off on the final course grade, indicating they approve student grades. [Specifics for sign-off are as follows*: After IREA/research analyst is notified in writing (email is fine) that the grades are finalized, the Final Grades Authorization memo will be sent by IREA via email to the course administrator and co-leaders for signature by all course co- leaders for that respective course. The signed authorization memo must be returned to IREA (email is fine) with signatures. Once received by IREA, course final grades will be uploaded to PeopleSoft.]*

After receipt of this final grades authorization form, IREA will upload the final grade within their standard 3-day turn-around timeframe. At this point, students can see their official final grade. IREA allows 5 days for co-leaders to make any further adjustments before posting the final grade to the Registrar. After posting to the registrar, any additional grade changes must be made directly with the Registrar’s Office.

If students have any problems with or questions regarding access to exam grades via Gradebook on People Soft direct them to contact the UMMS Help Desk - telephone: 6-8643; email: UMWHelpdesk@ummassmed.edu*.*

***CCE and Sub-I’s***

Clerkships can submit preliminary grades in SharePoint in the event that final grades rely on shared assessments that do not occur within the 6-week timeframe. These should be finalized within 6 weeks of the shared assessment.

Final course grades are computed by course leaders and submitted to IREA, who then upload to PeopleSoft. Final grades are available to students in PeopleSoft as soon as they are posted. Some courses choose to also notify students about grades by direct email.

The OUME tracks course and clerkship grade turn-around time in order to monitor compliance with timeliness of grade availability for students. The Registrar provides reports regarding non-clinical grade turn-around on request. Clerkships submit information through the online SharePoint site at: [SharePoint Grade Tracking](https://sp.umassmed.edu/sites/Provost/EA/Accreditation/LCME/Lists/ARG%20Grade%20Tracking%207202/Grade_submission.aspx).*(If you receive an error message, this means you have not yet been given access to this site. Contact Tina Pierce, administrator for this SharePoint site and she will provide you with access:* tina.pierce@umassmed.edu

**Note:** Grade tracking instructions can be found at: [Instructions for Recording Grades](http://umassmed.edu/globalassets/office-of-undergraduate-medical-education-media/LInC-Leadership-Guide-Documents/instructions-for-recording-grades.pdf)

**Reporting Grades to Students:** Students can access exam grades (if recorded as such, see above) and course grades using Gradebook on the PeopleSoft management system. In addition, course leaders may choose to email grades or feedback to students (or provide it in another written format). For courses with appropriate methods such as substantial small group elements, narrative feedback must be a formal part of each grade.

Any students who have difficulty within a course (no credit, credit marginal or other performance issues) must be formally notified in writing (email is sufficient) with a copy to the student's learning

communities mentor to promote follow up and obtaining appropriate support from course leaders, faculty and the Center for Academic Achievement (CAA). This should happen within 1 week of grade determination, and at other relevant times in the semester, for instance, after individual assessments. All course and clerkship grades must be available to students within 6 weeks of course or clerkship completion.

***FOM1 and FOM2***

The timeline from date of exam to exam grade reports being made available to students is largely dependent on co-leaders’ timely review of results and any subsequent requests to have exam results rescored. After co-leaders have completed their review and all rescoring requests have been completed, 3 days is needed for IREA to upload the results for student viewing.

**Determination and Changes to Grading Process:** Details regarding levels of performance required for attainment of specific course grades (no credit, credit marginal, credit or below expectations, expected, above expectations, outstanding) must be published on the course website and shared with the students at the start of the course; any changes to these benchmarks should be designed to support students (and thus may be loosened but not made stricter) at the course leaders' discretion. These changes require updating the course website and clear communication to students. These changes require updating the course website and clear communication to students.

**Remediation:** Remediation is determined by the course and clerkship leaders in conjunction with the appropriate Academic Evaluation Board and is tailored to the student's learning need. Students receiving a grade of less than Credit (CR) or below expectation (BE) on any element of a course or clerkship may be discussed at a Basic or Clinical Sciences Academic Evaluation Board meeting with regard to the plan for the remediation of that grade. All required clerkships during the clinical years must be passed. Any grade of “Fail” on a required clerkship requires the repetition of the full clerkship. Any basic science course with a grade of NCR must be repeated unless course leaders and the BSAEB permit an attempt at remediation. This may include the taking of a comprehensive examination or other alternative mechanism. Course leaders are encouraged to share exams with the Center for Academic Achievement faculty and allow students to retake exams to support learning and determine readiness to complete remediation exams. Students are allowed to carry one CR Marginal grade into the clinical years; all other basic science grades of less than ‘Credit’ require remediation. Course directors determine if students may carry ‘Credit Marginal ‘(CRM) or ‘No Credit’ (NC) grades on individual course elements (exams, assignments, blocks) and still pass the course. For additional information regarding remediation policies see the medical school student handbook at: [Student Handbook.](http://www.umassmed.edu/Global/Student%20Affairs/Files/Handbook/1415HANDBOOKv3.pdf)

**Mentor Connections:** Each medical student is assigned a Learning Community mentor who works with the student longitudinally throughout the student’s academic career in areas related to professional and personal development and academic achievement. Course and clerkship leaders who have concerns about students in any of these areas should reach out to the student’s mentor to engage the mentor in working with the student. This includes poor performance on assessments (as noted in the section on page 4 (i) previously outlined), but may also include inappropriate classroom, email or small group behavior, incomplete assignments or other concerning actions. Student-mentor lists are updated and posted.

**Basic and Clinical Science Academic Evaluation Boards (BSAEB/CSAEB):** These boards include the leaders of each course or clerkship as well as ex-officio members. The BSAEB serves for FOM1 and FOM2, the CSAEB serves for CCE and AS. It is the boards’ responsibility to periodically review student academic records to recommend students to the Progress Board for academic advancement, remediation or dismissal, to consider any extenuating circumstances which may have contributed to academic performance, and to determine the nature and process of academic make-up and remediation, if possible, for students who have not satisfactorily completed all academic requirements. (see [student handbook](http://www.umassmed.edu/globalassets/student-affairs/files/handbook/1415handbookv3.pdf) 2014/15 for details). These boards are managed by the Office of Student Affairs.

***Note:*** *invitations are extended to all course co-leaders for each meeting and all are encouraged to attend, though responsibilities may be shared to ensure at least one course leader represents the team at each meeting.*

[**Faculty, Staff and Student Educator List**](http://edit-inside.umassmed.edu/PageFiles/4369/Faculty%20list%20for%20website%209-22-15.pdf)**.** The OUME maintains a list of course and clerkship leaders, administrators and student leaders to facilitate communication and coordination. This is available to those with UMMS credentials at

What are Your Educational Resources?

**Office of Undergraduate Medical Education (OUME)**

The vision of the OUME is to advance education, community and scholarship at UMMS. In doing so, we collaborate with partners including campus and community-based faculty, students, other UMMS offices, programs and departments; local and worldwide clinical and educational affiliates and community programs and advocates. We assist in the coordination and support innovation, quality improvement and excellence in all years of the School of Medicine curriculum including a number of pathway and interprofessional courses and programs. In addition, the OUME sponsors specific courses and educational programs such as Doctoring and Clinical Skills, Flexible Clinical Experiences, Transitions and the Capstone Scholarship and Discovery Courses; Global Health Pathway and Summer Research, Curriculum and Community Service Programs and supports the work of the Educational Policy Committee (EPC).

Contact information:

Main Office – S1-149, Phone 508-856-2285, FAX 508-856-5536

Curriculum Calendar—Carly Eressy, 508-856-5694. S1-155

**Institutional Research, Evaluation, & Assessment (IREA)**

The **Office of Institutional Research, Evaluation, and Assessment (IREA)** provides direction and support to faculty and administrators in student assessment, curriculum evaluation, and medical education research. The IREA gathers, analyzes, and reports the data that supports numerous critical functions outlined in the medical school's mission including student exams and grading, administrative reporting (e.g., educational performance measures and quality indicators for mission-based management), course and clerkship evaluation, accreditation for LCME and NEASC, and outcomes to support grants and scholarly activity.

In the area of assessment, we consult on test construction, score examination data, conduct item and test analyses, and produce reports for students and faculty. In the area of curriculum evaluation, we provide instrument design and production services, data analyses, evaluation, interpretation of results, and reporting.

We conduct research in medical education, as well as consult and assist with research design, instrument design, data collection and analyses, interpretation of results, and preparation of abstracts and papers for submission to journals and conferences.

 Contact information:

 Main Office - Room S4-144: Phone 508-856-6009, Fax 508-856-5310

#### Exams --

Dan Du, MA, Institutional Research Analyst III: Phone 508-856-3402

Wei Xia, MS, Institutional Research Analyst III: Phone 508-856-1433

FOM1 and FOM2 -- Susan Barrett, MS, MEd, Institutional Research Analyst II: Phone 508-856-5623

#### Clinical Years -- Michele Carlin, Institutional Research Analyst II: Phone 508-856-5410

**Office of Student Affairs**

The Office of Student Affairs (OSA) strives to promote a supportive and responsive environment where students find help coping with the academic, personal and social demands of graduate education.  OSA nurtures a diverse culture inclusive to the sensitive needs of our students, staff, faculty and visitors.

The Office of Student Affairs also provides support for a variety of student activities, such as assignment of core clinical activities and fourth year studies, administration of the NRMP (National Residency Matching Program), Electronic Residency Application Service (ERAS), VSAS (Visiting Student Application Service), Medical Student Performance Evaluations (MSPE), orientations to inform and prepare students for all four years of medical education, commencement, and graduation activities. Student Affairs also coordinates the Basic Science and Clinical Science Academic Evaluation Boards, Progress Board, administrative support for all student-run group and organizations as well as the Student Body Committee (student governance group).  In these roles, the Office acts as an advisor both to students and faculty to help facilitate and carry out timely and informed decisions.

**Location:** Student Wing, Room S1-131
**Telephone:**508-856-2285 - Student Affairs
**Fax:** 508-856-5536
**Email:** studentaffairs@umassmed.edu
**URL:** [http://www.umassmed.edu/studentaffairs](https://www.umassmed.edu/studentaffairs/)

**Lamar Soutter Library**

 Are you looking to implement a new pedagogy, find a medical education conference, or to publish your educational resource? The Medical education page <http://libraryguides.umassmed.edu/medicaled> provides links to books, medical images, journals, LCME standards, medical education conferences, news & alerts, OEA annual reports, and selected bibliographies. Join the discussion in medical education blogs listed here <http://libraryguides.umassmed.edu/faculty/mededblogs> .

Contact for assistance: Victoria Rossetti, Victoria.Rosetti@umassmed.edu , 508-856-2463.

**Academic Technology and Curriculum Innovation**
(formerly Academic Computing Services (ACS))

The Academic Technology and Curriculum Innovation (ACTI) group, a division within Information Technology (IT), provides a range of services to support faculty, students and staff in the use of technologies integral to the University's educational and research missions. The ATCI team provides services campus-wide across all schools. ATCI staff members are subject matter experts in information and instructional design, multimedia development, and the integration of technology tools and solutions for teaching and learning.

The suite of services provided by ATCI, and IT overall, can be found on the [IT website](http://umassmed.edu/it).