

OFFICE OF PROGRAM RESEARCH, ASSESSMENT & EVALUATION (OPRAE)

Howard University College of Medicine

LCME Self-Study Newsletter, No.10, May 9, 2008

Recommendations emanating from deliberations of the **Medical Student Self-study Committee**, chaired by Dr. Wayne Frederick, have also been reviewed by the LCME Self-study Task Force. These are likely to influence the general education requirements for admission to the MD degree program, to alter the process used for interviewing applicants, and to assure that students in the entering medical class are in proper alignment with the stated mission and goals of the Howard University College of Medicine.

Many of these recommendations require review and approval by the Admissions Committee and the Medical Faculty Senate prior to implementation as required by college by-laws. The endorsements from the Self-study Committee and the Self-study Task Force represent only the beginning of changes to the medical program. The Medical Student Committee has recommended that requirements for students entering the study of medicine at Howard University include courses in social science, history, art and music, and languages other than English. This suggestion is certainly in accord with the reality that experiences other than in the biological, chemical and physical sciences constitute the fundamental knowledge required for the practice of medicine. The general educational background expected before a student

enters the medical curriculum evolves in relation to the complexities of life on a global scale. Hence, students must have acquired a broad base of life exposure as they complete their pre-medical studies. This is particularly important since the medical faculty does not remediate in cognate humanistic areas.

The Self-study Committee and the Task Force concur that student interviewing must be a shared responsibility for both pre-clinical and clinical faculty. Demand for departmental engagement in the interviewing of applicants must be supported by Chairmen and Division leaders. One suggestion is for medical faculty to be assigned to a rotating schedule for student interviews. Faculty should be taught how to conduct a proper and meaningful interview in order to assure that significant data are provided to the Admissions Committee for decisions to be made about all applicants. Also, skilled interviewers are needed in a very competitive and stressful admissions process. Although staff interviews are often necessary and always informative, they should not be treated as the norm for the evaluation of a student applicant. Adherence to a policy that requires that admissions decisions be based upon at least one medical faculty interview report should be supported by both the Administration and Admissions Committee.

The stated mission and goals of the College of Medicine are expected to be an issue of importance throughout the process of student admissions. While academic performance is of primary significance for assessment of those individuals within the applicant pool, other qualities of an applicant's orientation and potential for contribution to the practice of medicine must be considered during the admissions process. Also, a "no tolerance" policy against discrimination during admission and throughout medical school must prevail.

The Student Self-study Committee recommends that the faculty advisory system in the College of Medicine be made more reliable and better utilized. This is particularly necessary during the first or transitional year of medical education. A formal mentoring process should be made available to all medical students so that advisory support networks may be accessed throughout the course of medical studies. A wellness consultation program for students is essential to meet LCME standards.

Although further discussion is necessary, the development of narrative evaluations of students is also recommended by the Self-study Committee. These written evaluations should be both formative (produced during a course for corrective intervention) and summative (produced at the end of a course for entry into the student record). Faculty should receive training to write meaningful narratives and provisions should be available for utilization of these evaluations to benefit the student. Filing these narratives in the student's formal record allows this information to be incorporated into the

Dean's Letter. Prerequisite to narrative evaluation is faculty familiarity with individual students through small group interaction in classroom discussions or during laboratory exercises.

Office of Program Research, Assessment & Evaluation (OPRAE)
Howard University College of Medicine

530 S.G. Mudd Building
520 W Street, NW
Washington, DC 20059
voice: (202) 806-7265
fax: (202) 667-9589

Raymond L. Hayes, Ph.D.
Professor Emeritus
Special Assistant to the Dean
&
LCME Self-study Coordinator
rhayes@howard.edu

Ms. Vivian D. Goodman
OPRAE Administrative Assistant
vgoodman@howard.edu