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## Checklist of Requirements

## for Completing the Independent Student Analysis (ISA)

## for Full Accreditation Visits

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| Please note that the LCME considers the Independent Student Analysis to be critical, but it can only use the analysis if it is completed using the required survey items with the results presented in the required format. * Include all of the [survey items listed in the Required Student Opinion Survey Items section below](#_Required_Student_Opinion_1) exactly as written (these same items are listed in Appendix C of the *Role of Students* document).
* Add survey items not included in the required list as needed to reflect the distinctive characteristics of your medical school or to address other issues of particular importance to your medical school’s students.
* Use the [required response scale in the Reporting of Results - Tables in the Independent Student Analysis section below](#_Reporting_of_Results_1) for all survey items (this is the same scale depicted in Appendix D of the *Role of Students* document).
* Encourage participation in the survey; aim for at least a 70-80% response rate for each class year.
* Title the ISA narrative report sections “Methods”, “Executive Summary”, “Narrative Description of Results”, “Summary and Conclusions”, and “Numerical Tables”. See the [ISA Report Development section below](#_ISA_Report_Development).
* Specify in the “Methods” section the dates when surveys were administered to each class, the survey response rate for each class year, and the overall response rate. Describe any other methods used by students to collect information from their classmates.
* Use the [table in the Reporting of Results - Tables in the Independent Student Analysis section below](#_Reporting_of_Results_1) to report responses to each survey item in the “Numerical Tables” section.
* Note that the Faculty Accreditation Lead may ask for the survey and the Independent Student Analysis to be redone if they do not contain the required items or are not reported in the required format.

**IMPORTANT NOTE:** **Be certain to provide the ISA, including the data tables, in a Microsoft Word document so that survey team members can easily copy its tables into the team report.** For more detailed information, see *The Role of Students in the Accreditation of U.S. Medical Education Programs for Full Accreditation* (May 2023) on the LCME website ([lcme.org/publications](https://lcme.org/publications/)). |

# ISA Report Development

The ISA report includes a narrative and the data tables for each item in the survey. The following are guidelines for writing some of the ISA Report sections:

* “Methods”. Begin with a description of the method(s) used to gather student opinion data, including the survey of students in all classes. Include the dates when surveys were administered and a response rate table that displays the number and percent of students responding to the survey for each class year and overall. If applicable, also include the number of students participating in other methods used by students to collect opinions from their classmates, such as class meetings or focus groups.
* “Executive Summary”. Follow the “Methods” section with an executive summary. Use the summary to highlight the major findings and organize it by accreditation elements or by some other framework (e.g., curriculum, student services).
* “Narrative Description of Results”. In the narrative that follows the executive summary, concisely summarize the results of the student opinion survey, organizing the findings by topic areas (e.g., curriculum, student services). Note the areas in which the medical school is doing well and areas in which it needs improvement, documenting conclusions using data from the survey. Note any recent changes (e.g., curriculum revisions or changes in student services) that may reflect differences in how each class rated an item or other reasons for areas of student concern or differences across classes. DO NOT INCLUDE individual student data or individual student comments. However, you may include as illustrations in the “Narrative” section comments that are representative of a large number of student responses and/or include a synthesis of similar comments from a number of students. In the “Numerical Tables” section, include a table for each item on the survey. For each item, the LCME requires providing the number and percent of students who selected n/a, dissatisfied and very dissatisfied combined, and satisfied and very satisfied combined. These must be presented in total and by class year.

# Required Student Opinion Survey Items

**The LCME requires that the student opinion survey include, at a minimum, the following items and that you use the scale below.**

**This is so that the response data includes topics that relate to LCME accreditation requirements and that are required for your medical school’s DCI.**

**You may add survey items as needed to reflect the distinctive characteristics of your medical school or to address other issues of particular importance to your medical school’s students.**

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***Please indicate your level of satisfaction, using the following scale:***

a = Very dissatisfied

b = Dissatisfied

c = Satisfied

d = Very satisfied

N/A = No opportunity to assess/Have not experienced this

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**Note: Data from items indicated by an asterisk (\*) should only be included for students in the required clerkship years of the curriculum (typically years 3 and 4, but in some schools, years 2 to 4).**

**STUDENT-FACULTY-ADMINISTRATION RELATIONSHIPS**

**Office of the Associate Dean of Students/Student Affairs**

1. Accessibility a b c d N/A
2. Awareness of student concerns a b c d N/A
3. Responsiveness to student problems a b c d N/A

**Office of the Associate Dean for Educational Programs/Medical Education**

1. Accessibility a b c d N/A
2. Awareness of student concerns a b c d N/A
3. Responsiveness to student problems a b c d N/A

**LEARNING ENVIRONMENT AND FACILITIES**

1. Clarity of the medical school’s student mistreatment policy a b c d N/A
2. Satisfaction with the processes to report student mistreatment a b c d N/A
3. Satisfaction with medical school activities to prevent student a b c d N/A

 mistreatment

1. Adequacy of medical school actions on reports of student a b c d N/A

 mistreatment

1. Adequacy of safety and security at medical school campus a b c d N/A
2. Adequacy of safety and security at clinical sites**\*** a b c d N/A
3. Adequacy of pre-clerkship lecture halls, a b c d N/A
large group classroom facilities
4. Adequacy of pre-clerkship small group teaching spaces a b c d N/A
5. Adequacy of educational/teaching spaces at hospitals**\*** a b c d N/A
6. Adequacy of relaxation space for pre-clerkship a b c d N/A
students
7. Adequacy of study space for pre-clerkship students a b c d N/A
8. Adequacy of student study space at hospitals/clinical sites\* a b c d N/A
9. Adequacy of secure storage space for pre-clerkship a b c d N/A
students’ personal belongings
10. Adequacy of secure storage space for personal belongings at a b c d N/A

hospitals/clinical sites\*

1. Adequacy of relaxation space at hospitals/clinical sites**\*** a b c d N/A
2. Access to research opportunities a b c d N/A
3. Support for participation in research a b c d N/A
4. Access to service learning/community service opportunities a b c d N/A

**LIBRARY AND INFORMATION RESOURCES**

1. Access to library resources and holdings a b c d N/A
2. Quality of library support and services a b c d N/A
3. Access to technology support a b c d N/A
4. Access to online learning resources a b c d N/A

**STUDENT SERVICES**

1. Accessibility of student health services a b c d N/A
2. Availability of personal counseling/mental health services a b c d N/A
3. Confidentiality of mental health services a b c d N/A
4. Availability of student well-being programs a b c d N/A
5. Adequacy of career advising a b c d N/A
6. Adequacy of advising about elective choices a b c d N/A
7. Quality of financial aid administrative services a b c d N/A
8. Adequacy of debt management counseling a b c d N/A
9. Availability of academic advising a b c d N/A
10. Availability of tutorial help a b c d N/A
11. Adequacy of education to prevent exposure a b c d N/A

to infectious and environmental hazards

1. Adequacy of education about procedures to follow after a b c d N/A

a potential exposure to infectious and environmental hazards

**MEDICAL EDUCATION PROGRAM**

1. Utility of the medical education program objectives to a b c d N/A

support learning

1. Quality of the pre-clerkship phase a b c d N/A
2. Clinical skills instruction in the pre-clerkship phase a b c d N/A
3. Amount of formative feedback in the pre-clerkship a b c d N/A

phase

1. Quality of formative feedback in the pre-clerkship a b c d N/A

phase

1. Fairness of summative assessments in pre-clerkship phase a b c d N/A
2. Opportunities for self-directed learning in the a b c d N/A

pre-clerkship phase§

1. Adequacy of unscheduled time for self-directed learning

in the pre-clerkship phase§ a b c d N/A

1. Student workload in the pre-clerkship phase a b c d N/A
2. Coordination/integration of content in the a b c d N/A

pre-clerkship phase

1. Utility of the pre-clerkship phase as preparation for a b c d N/A

required clerkships\*

1. Quality of the required clerkships\* a b c d N/A
2. Access to patients during the required clerkships\* a b c d N/A
3. Student workload in the required clerkships\* a b c d N/A
4. Adequacy of supervision in clinical settings\* a b c d N/A
5. Amount of formative feedback in the required clerkships\* a b c d N/A
6. Fairness of summative assessments in the clerkship phase\* a b c d N/A
7. Clinical skills assessment in the clerkship phase\* a b c d N/A
8. Quality of formative feedback in the required clerkships\* a b c d N/A
9. Clarity of policies for advancement/graduation a b c d N/A
10. Ability to review and challenge student academic records a b c d N/A
11. Medical school responsiveness to student feedback on a b c d N/A

courses

1. Medical school responsiveness to student feedback a b c d N/A
on clerkships\*
2. Adequacy of education to diagnose disease a b c d N/A
3. Adequacy of education to manage disease a b c d N/A
4. Adequacy of education in disease prevention a b c d N/A
5. Adequacy of education in health maintenance a b c d N/A
6. Adequacy of education in caring for patients from

different backgrounds a b c d N/A

1. Adequacy of education related to interprofessional
collaborative skills√ a b c d N/A

§ Self-directed learning (Element 6.3) includes self-assessment of learning needs, identification of information to meet those needs from credible sources, and feedback on this skill.

√ Interprofessional collaborative skills (Element 7.9) prepare students to function collaboratively on health care teams with students/health professionals from other professions

# Reporting of Results – Required Tables in the Independent Student Analysis

**Develop a separate table for each survey item** such that the data for all relevant class years are included in the same table. The required format for the tables is shown below. The column titled “Number of Total Responses/Response Rate to this Item” shows the total number of students responding to the item (N) divided by the total number of students in the class (%). For the other columns, please add very dissatisfied + dissatisfied (a + b) responses and satisfied + very satisfied (c + d) responses. Calculate all response data percentages using the total number of responses **which includes N/A responses** as the denominator, and the type of response (e.g., satisfied/very satisfied) as the numerator. Response data percentages calculated any other way will need to be redone, which may cause delays for your medical school.

The following table format should be used for items where students in all years of the curriculum respond.

|  |
| --- |
| **Table Title\*** |
| Medical School Class | Number of Total Responses/Response Rate to this Item | Number and % ofN/AResponses | Number and % of Dissatisfied/Very DissatisfiedResponses | Number and % ofSatisfied/Very Satisfied Responses |
| N | % | N | % | N | % | N | % |
| M1 |  |  |  |  |  |  |  |  |
| M2 |  |  |  |  |  |  |  |  |
| M3 |  |  |  |  |  |  |  |  |
| M4 |  |  |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |  |  |

\* The table title should match the items listed in Appendix C: Required Student Opinion Survey Items. For example, the table title for #1 in the Required Student Opinion Survey Items would be “Accessibility of the Office of the Associate Dean of Students/Student Affairs.”

If an item is specific to a set of students, such as an item about the clinical years/clerkships, the table can be modified to reflect the medical school class(es) that can provide data based on their experience. If an item is directed to students who are or have been in the clerkship years, the following table format should be used:

|  |
| --- |
| **Table Title** |
| Medical School Class\* | Number of Total Responses/Response Rate to this Item | Number and % ofN/AResponses | Number and % of Dissatisfied/Very DissatisfiedResponses | Number and % ofSatisfied/Very Satisfied Responses |
| N | % | N | % | N | % | N | % |
| M2 |  |  |  |  |  |  |  |  |
| M3 |  |  |  |  |  |  |  |  |
| M4 |  |  |  |  |  |  |  |  |
| Total |  |  |  |  |  |  |  |  |

\* Delete any rows that include students who have not experienced the required clerkships.