



QUILLEN COLLEGE *of* MEDICINE

EAST TENNESSEE STATE UNIVERSITY

Policy Name: **Clinical Proficiency Competency Objective Structured Clinical Examination (OSCE) Graduation Requirements**

Policy Replaces a Previous Policy (this includes change in policy name): <input checked="" type="checkbox"/> Yes/ <input type="checkbox"/> No
If so, list name of previous policy (include policy number if different): Objective Structured Clinical Examination (OSCE) Clinical Proficiency Competency for Promotion to Senior Year (policy number is same)
Policy Number (issued by the Office of Academic Affairs upon final approval): MSEC-0610-1
Policy Owner (Individual, Department, or Committee/Chair): Kenneth Olive, MD / MSEC Chair (2008-2013); Ramsey McGowen, PhD / MSEC Chair (2013-2019); Ivy Click, EdD / MSEC Chair (2020-)
Committees, Departments, or Individuals Responsible for Implementation: Office of Academic Affairs
Original Approval Date and Who Approved by: 6/1/2010 – Kenneth Olive, MD / MSEC Chair
Effective Date(s): 6/1/2010; 4/12/2018; 4/17/2023
Revision Date(s) (include a brief description) and Who Approved by (made by Policy Owner and/or Policy Advisory Committee): 4/12/2018 – Updated to reflect OSCE is delivered at the beginning of the M3 year / Ramsey McGowen, PhD, MSEC Chair 3/21/2023 – Updated to reflect OSCEs are delivered during the M3 and M4 years / Ivy Click, EdD, MSEC Chair
Administrative Edits (briefly describe) by Staff and/or the Policy Advisory Committee (PAC) and Date (these revisions do not require voting/approval by the policy owner): 10/18/2021 – Change Process/Procedure #1 to beginning of their third year
Exemption(s) to Policy (date, by what committee or individual, and brief description):
LCME Required Policy: <input type="checkbox"/> Yes/ <input checked="" type="checkbox"/> No
If yes, please list the Element(s) Affiliated with this Policy (include Element number/name/statement):
<i>All policies will be reviewed by the Policy Advisory Committee every three years unless an earlier review is identified.</i>
Date of Review:
Revisions Made: <input type="checkbox"/> Yes/ <input type="checkbox"/> No If yes, list revisions made:
Revisions Require Approval by Policy Owner: <input type="checkbox"/> Yes/ <input type="checkbox"/> No

Policy Name: Clinical Proficiency Competency Objective Structured Clinical Examination (OSCE) Graduation Requirements

Policy Statement:

The name of this policy has been changed from *Objective Structured Clinical Examination (OSCE) Clinical Proficiency Competency for Promotion to Senior Year* to *Clinical Proficiency Competency Objective Structured Clinical Examination (OSCE) Graduation Requirements*.

An Objective Structured Clinical Examination (OSCE) is required at the beginning of the M3 and M4 year at which time students must demonstrate clinical proficiency. The successful demonstration of proficiency is a requirement for graduation. The Office of Academic Affairs will be provided documentation of completion of the competency once it had been attained.

Purpose of Policy:

For those students who do not successfully demonstrate competency, the following process will be implemented for remediation of the OSCE competency.

Scope of Policy (applies to):

All third- and fourth-year medical students.

Policy Activities:

Formative Clinical Proficiency Competency (CPC) OSCE

1. All QCOM students will be required to take the Formative Clinical Proficiency Competency (CPC) OSCE prior to beginning clinical clerkships.
2. Students failing to demonstrate competency as outlined by the OSCE Director will receive formative feedback to improve their performance.
 - a. To demonstrate competency, a student should have a final score at or above 70% in all grade categories (encounter, note, overall).
 - b. Students failing to demonstrate competency will have focused review meetings with the OSCE Director to discuss their performance.
 - c. Students will submit a targeted plan for improvement and resources will be made available to help them improve and address their identified gaps over the third year.
3. Students determined to have failed to demonstrate competency are able to request a review of their performance by the OSCE Director.

Summative Clinical Proficiency Competency OSCE

1. All Quillen students are required to take the Summative Clinical Proficiency Competency (CPC) OSCE. Students passing this examination as outlined by the OSCE Director will be deemed to have attained this competency.
2. Students failing to demonstrate competency on this evaluation will require additional effort to meet this competency including:
 - a. Remediation will be necessary if a student scores below 70% in any one of the grade categories (encounter, note, overall).
 - b. Students must meet with the OSCE Director to review areas in which they failed to demonstrate competency. This may include reviewing videos of student performance, rubrics, feedback and/or student documentation.
 - c. Students must meet with the OSCE Director to develop an individualized action plan to address the deficient competency.
 - d. Students should schedule and attend at least three remediation targeted review sessions to monitor progress towards meeting the competency. The review of performance and submission of a remediation plan is the first of these three (3) sessions.
 - e. The student, not the OSCE Director, is responsible for initiating contact with the OSCE Director to schedule review sessions to complete their remediation plan.
 - f. Students will schedule and complete a Clinical Proficiency Competency OSCE once review sessions are completed.
 - g. Students failing to demonstrate competency on the Summative CPC OSCE after remediation will be forwarded to the Student Promotions Committee for review and recommendation which could include but is not limited to further evaluation, repeated remediation, or dismissal.
3. Students determined to have failed to demonstrate competency are able to request a review of their performance by the OSCE Director.

Policy Name: Clinical Proficiency Competency Objective Structured Clinical Examination (OSCE) Graduation Requirements

Remediation Requirements

If student passes encounter, note, and overall	No remediation is required
If student fails encounter	Remediation is required
If student fails note	Remediation is required
If student fails overall	Remediation is required
If student is in bottom 10% of a grade category	One meeting for focused review is required; no remediation is required

Administrative Reviews/Approvals	Date Approved
<i>University Compliance (if applicable)</i>	
<i>Policy Advisory Committee (includes three-year reviews)</i>	3/24/2023
<i>Associate Dean for Accreditation Compliance (if applicable)</i>	
<i>Vice Dean for Academic Affairs</i>	3/24/2023

Policy Review and/or Revision Completed By (if applicable)	Date Policy Reviewed and/or Approved (if applies to that department, committee, or group)
<i>Office of the Dean</i>	
<i>Office of Academic Affairs</i>	4/12/2018; 10/18/2021; 3/20/2023
<i>Office of Student Affairs</i>	
<i>Department of Medical Education</i>	
<i>Medical Student Education Committee</i>	6/1/2010; 3/21/2023
<i>Student Promotions Committee</i>	
<i>Faculty Advisory Council</i>	
<i>Administrative Council</i>	
<i>M1/M2 Course Directors</i>	
<i>M3/M4 Clerkship/Course Directors</i>	
<i>Student Groups/Organizations (describe):</i>	
<i>Other (describe):</i>	

Final Policy Emailed to:	Date of Email Notifications
<i>Medical Education Director for Posting on Educational Policies Website</i>	3/30/2023; 5/1/2024
<i>Policy Owner</i>	5/1/2024
<i>Admissions Office for Catalog (only new policies)</i>	