School of Medicine - Direct Observation Policy

Type

School-Level (SOM, SAHS, GSBS, or NSTM only)

Rationale

This policy is necessary to comply with Liaison Committee on Medical Education (LCME) standard 9.4, which requires that the medical school "have a centralized system in place that employs a variety of measures (including direct observation) for the assessment of student achievement, including students’ acquisition of the knowledge, core clinical skills (e.g. medical history-taking, physical examination), behaviors, and attitudes specified in medical education program objectives, and that ensures that all medical students achieve the same medical education program objectives."

Stakeholders Affected by this Policy

Compliance with this policy is mandatory for all Baylor College of Medicine (BCM) faculty members who teach, facilitate or precept medical students in the core clerkships.

Definitions

Direct observation is defined as an assessment based on the live performance of a medical trainee’s clinical skills that is designed to provide feedback on skills essential to the delivery of high-quality clinical care.

Policy

Direct Observation Requirements for Faculty

- BCM faculty participating in core clerkships must conduct direct observation of medical students during clinical encounters with patients for the purpose of performing student assessments and providing feedback.
- During clinical encounters, faculty members must directly observe part or all of a patient’s history and mental/physical exam.
- Faculty members must document the direct observation utilizing a Direct Observation Form.
- Completed Direct Observation Forms must be submitted to the Course Director.
- The minimum number of required direct observations varies based on the length of the clerkship, as stated in Table 1.
Table 1. Required Number of Direct Observations

<table>
<thead>
<tr>
<th>Clerkship Length</th>
<th>Minimum # of Direct Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 weeks</td>
<td>1</td>
</tr>
<tr>
<td>8 weeks</td>
<td>2</td>
</tr>
<tr>
<td>12 weeks</td>
<td>3</td>
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Documentation of Clerkship Completion

- Completion of clerkship requirements will be affirmed through a written document, either in paper or electronic form, containing the original signatures of faculty members responsible for determining that defined clinical objectives have been met by each student.

Responsibilities

This policy requires collective supervision by all current Department Chairs and Clerkship Directors in the BCM School of Medicine (SOM). Clerkship Directors are responsible for ensuring that direct observation is taking place, and for informing the Department Chair and the Clerkship Subcommittee of any issues that may impede full compliance with this policy. The Department Chair works collaboratively with the Clerkship Director, and is ultimately responsible for ensuring departmental compliance with this policy.

Procedures for Implementation and Review

Clerkship Leadership

- Written documentation of clerkship completion is reviewed by clerkship leadership (e.g. clerkship directors, site directors, associate clerkship directors) to determine whether each student has been directly observed.

- If direct observation has not occurred by the midpoint, the student’s clerkship preceptor or other supervising faculty member will be identified and contacted directly by a designated midpoint evaluator to schedule a direct observation.

- At the end of the clerkship, clerkship leadership is responsible for completing initial review of each written document to verify student completion of requirements in the clinical setting. Clerkship leadership is also responsible for verifying whether participating faculty members have generated a sufficient number of Direct Observation Forms, as stated in Table I. Completed forms are collected by clerkship leadership and submitted to the UME office for verification.

- If clerkship leadership determines that full compliance with this policy has not been achieved by participating faculty, a list of preceptors and/or other supervising faculty members who failed to provide direct observation is provided to the Department Chair for further action.

Undergraduate Medical Education Office

- At the midpoint of each clerkship, the Undergraduate Medical Education (UME) Office surveys students about clerkship requirements, including whether they have received direct observation of History Taking and Physical Exam. The survey results are provided within 3 working days to Clerkship Directors identifying students who have not received feedback or direct observation. Clerkship Directors then work with the faculty to ensure an evaluation is scheduled prior to the end of the clerkship.
• At the end of each clerkship, the UME Office again surveys students on whether they have received direct observation of the History Taking and Physical Exam. All non-compliance is reviewed by relevant committee participants and members of senior leadership, and administrative action may be levied in accordance with this policy as described in the Compliance section below.

**Schedule for Review and Update**

• This policy may be reviewed and revised as necessary, but at least every five years.

**Stakeholder Compliance**

On a term basis, compliance results for all clerkships are summarized by qualitative and quantitative analysts in the UME office and distributed to the Curriculum Committee Chair, Clerkship Subcommittee of the Curriculum Committee, Clerkship Directors, Department Chairs and the Provost. The Clerkship Subcommittee of the Curriculum Committee reviews the data and any reported issues with direct observation, and provides a report to the Curriculum Committee as a whole. The Curriculum Committee as a whole acts upon these data and approves remediation actions to be taken. Clerkship directors and Department Chairs are expected to conduct a root cause analysis to remove barriers, as needed. Clerkship metrics are also reviewed at Academic Council. Actions that may be taken by the Department Chairs against faculty members who repeatedly fail to conduct direct observations in accord with this policy, including remediation, reassignment of teaching responsibilities, and documenting “failure to meet expectations” in such faculty members’ annual faculty evaluations.

**Related Policies**

Pending

**Applicable Laws, Regulations & Standards**

**LCME Standard 9.4**