LCME Re-Accreditation 2025: Independent Student Analysis Preliminary Survey Results

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Background

- The Liaison Committee on Medical Education (LCME) is the accreditation body for medical schools in the U.S. and Canada[1] set forward to promote standardization and excellence in medical education[2]
- Its importance was preceded by the 1910 Flexner Report, which showed that *medical school programs were vastly inconsistent* and did not utilize any kind of standardized model to teach their students[2]
- Once a school undergoes the necessary steps for accreditation, they must undergo re-accreditation every 8 years
- The Independent Student Analysis (ISA), a survey written, conducted, and analyzed by students[3] is an important aspect of the re-accreditation process and aims to answer the following question:

What are Students' Perceptions of their Respective Medical School?

Why is the ISA Survey Important?
- Students are key stakeholders in the medical school curriculum
- Research has shown numerous benefits of student involvement in medical education including but not limited to:
  - Students can appreciate their own education more and therefore develop more respect for faculty and administration
  - Students are more likely to engage in student-faculty collaboration and feel that they gain more from their own education
  - Students develop important advocacy, communication, and organizational skills that will ultimately make them better physicians in the future[4567]

Methods

- Town Halls
- Survey Question Development
- Survey Pretesting
- Survey Administration
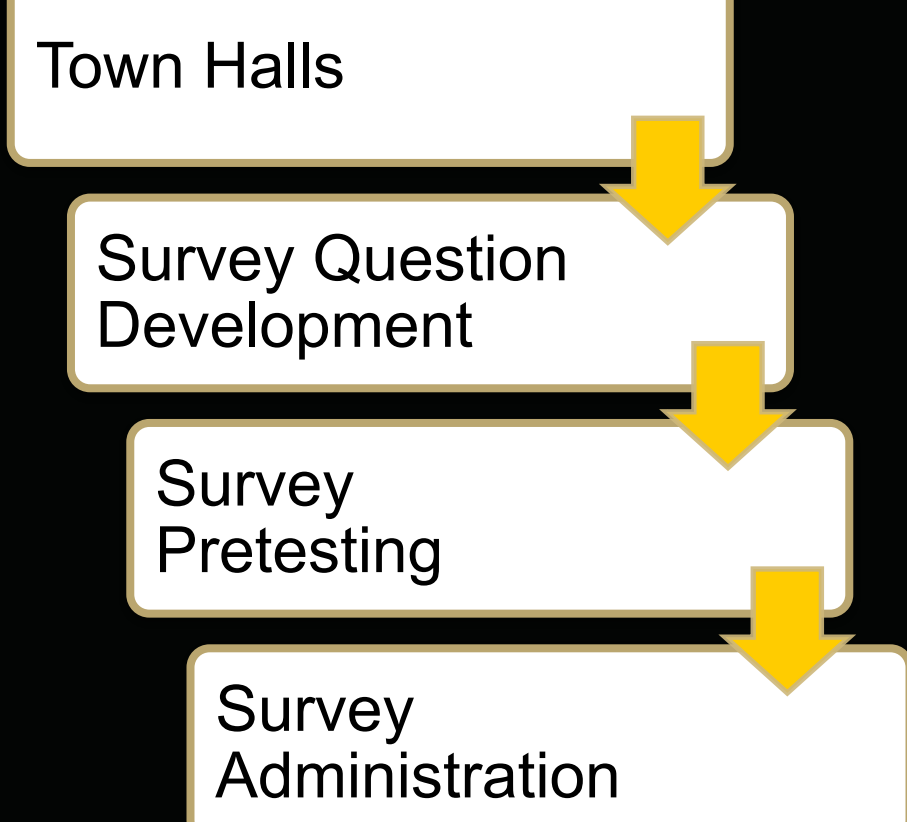
Results

Student-Faculty-Administration Relationships

Satisfied (>80% satisfied or very satisfied)	Dissatisfied (>20% dissatisfied or very dissatisfied)
• Access to Research Opportunities • Support for Participation in Research • Clarity of the Student Mistreatment Policy • Process to Report Student Mistreatment • Student Mistreatment Prevention Activities • Adequacy of Pre-Clerkship Lecture Halls and Large Group Classroom Facilities • Adequacy of Pre-Clerkship Small Group Teaching Spaces • Access to Patients during the Required Clerkships • Adequacy of Educational/Teaching Spaces at Hospitals • Medical School Campus Safety and Security • Clinical Site Safety and Security • Access to Service Learning/Community Service	• Responsiveness to Student Problems of the Office of the Associate Dean of/for Student Affairs (M4s) • Awareness of Student Concerns of the Office of the Associate Dean for Educational Programs/Medical Education (M3s and M4s) • **Responsiveness to Student Problems of the Office of the Associate Dean for Educational Programs/Medical Education (21% of M3s and 27.7% of M4s)**

Student Services

Satisfied (>80% satisfied or very satisfied)	Dissatisfied (>20% dissatisfied or very dissatisfied)
• Adequacy of Education About Preventing Exposure to Infectious and Environmental Hazards • Adequacy of Education About Procedures to Follow After a Potential Exposure to Infectious and Environmental Hazards	• Adequacy of Debt Management Counseling (M4s) • Availability of Student Personal Counseling/Mental Health Services (M4s) • Accessibility of Student Mental Health Services with an average dissatisfaction rate

Library and Information Resources

Satisfied (>80% satisfied or very satisfied)	Dissatisfied (>20% dissatisfied or very dissatisfied)
• Access to Library Resources and Holdings • Quality of Library Support and Services • Ease of Access to Technology Support • Access to Online Learning Resources (M2s) • Utility of the Educational Program Objectives to Support Learning (M2s and M3s)	• Access to Online Learning Resources (M3s and M4s) • Utility of the Educational Program Objectives to Support Learning (M4s)

Learning Environment and Facilities

Satisfied (>80% satisfied or very satisfied)	Dissatisfied (>20% dissatisfied or very dissatisfied)
• Access to Research Opportunities • Support for Participation in Research • Clarity of the Student Mistreatment Policy • Process to Report Student Mistreatment • Student Mistreatment Prevention Activities • Adequacy of Pre-Clerkship Lecture Halls and Large Group Classroom Facilities • Adequacy of Pre-Clerkship Small Group Teaching Spaces • Access to Patients during the Required Clerkships • Adequacy of Educational/Teaching Spaces at Hospitals • Medical School Campus Safety and Security • Clinical Site Safety and Security • Access to Service Learning/Community Service	• Adequacy of Student Study Space at Hospital/Clinical Sites (M4s) • Adequacy of Relaxation Space for Pre-Clerkship Students (M3s and M4s) • Adequacy of Relaxation Space at Hospital/Clinical Sites (M4s) • Adequacy of Secure Storage Space for Pre-clerkship Students Personal Belongings (M2s) • Adequacy of Storage Space for Personal Belongings at Hospitals/Clinical Sites (M3s and M4s) • Adequacy of School's Actions on Reports of Student Mistreatment (M4s)

Medical Education Program

Satisfied (>80% satisfied or very satisfied)	Dissatisfied (>20% dissatisfied or very dissatisfied)
• Adequacy of Education to Diagnose Disease • Adequacy of Education to Manage Disease • Adequacy of Education in Disease Prevention • Adequacy of Education in Health Maintenance • Adequacy of Education in Caring for Patients from Different Backgrounds • Quality of the Required Clerkships • Coordination/Integration of Content in the Pre-Clerkship Phase (M2s and M3s) • Student Workload in the Pre-Clerkship Phase • Adequacy of Supervision in the Clinical Setting • Clinical Skills Instruction in the Pre-Clerkship Phase • Clinical Skills Assessment in the Clerkship Phase • Amount of Formative Feedback in the Pre-Clerkship Phase (M2s and M3s) • Quality of Formative Feedback in Pre-Clerkship Phase (M2s and M3s) • Amount of Formative Feedback in Required Clerkships (M3s) • Quality of Formative Feedback in Required Clerkships (M3s) • Fairness of Summative Assessments in the Pre-Clerkship Phase • Clarify of Policies for Advancement/Graduation	• **Self-Directed Learning Opportunities in the Pre-Clerkship Phase (27.1% of M3s)** • **Quality of the Pre-Clerkship Phase (34.6% of M4s)** • Utility of Pre-Clerkship Phase as Preparation for Clinical Clerkships • Responsiveness to Medical Student Feedback on Courses • Responsiveness to Medical Student Feedback on Clerkships (24.6% of M4s) • **Adequacy of Unscheduled Time for Self-Directed Learning in Pre-Clerkship Phase (42.5% of M3s)** • Student Workload in Required Clerkships • Fairness of Summative Assessments in Clerkship Phase • **Adequacy of Career Advising had (30% of M4s)** • Adequacy of Advising about Elective Choices • Ability to Review and Challenge Academic Records (M4s) • **Coordination/Integration of Content in the Pre-Clerkship Phase (30% of M4s)** • **Amount of Formative Feedback in Pre-Clerkship Phase (28.5% of M4)** • **Quality of Formative Feedback in Pre-Clerkship Phase (25.4% of M4s)** • Amount of Formative Feedback in the Required Clerkship (M4s) • Quality of Formative Feedback in the Required Clerkships (M4s)

CONCLUSIONS, LIMITATIONS, and NEXT STEPS

- The student body, overall, seems to be satisfied with many aspects of their medical school experience, including most Student Services, Learning Environment and Facilities, and Student-Faculty-Admin Relationships. However, the Medical Education Program seemed to raise several concerns, particularly among the M4 and M3 classes. These conclusions will be analyzed in the context that these classes faced two unique circumstances throughout their medical school journey: the COVID-19 Pandemic as well as a major curriculum change.

- While the survey items were vetted, clarified, and tested for appropriate clarity, it is still possible that individuals answering questions will interpret them differently than intended and therefore answers will be variable, thus creating a measurement error. This is further compounded by the aforementioned circumstances (COVID and curriculum change) faced by respondents of the survey.

- For the next phase of this project, responses are being broken down and compared between the main campus (Anschutz) and the new Fort Collins Branch campus. Additionally, the Class of 2027 (M1s) will be surveyed, and their results will be incorporated in the final report. Additionally, there will be student focus groups to explore these results and discuss solutions that can be implemented by CUSOM.

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