



**Charles R. Drew University of Medicine and Science**  
*"A Private University with a Public Mission"*  
**College of Medicine - MD Program**

<b>CONTINUOUS QUALITY IMPROVEMENT (CQI) POLICY</b>
<b>CDU Policy 311.1d</b>
<b>Issuing Officer:</b> Dean of College of Medicine
<b>Responsible Office:</b> College of Medicine
<b>Date Reviewed by the Education Policy and Curriculum Committee:</b> 9/20/2022
<b>Date Approved by the Faculty Executive Board:</b> 10/26/2022
<b>Date of Dean's Final Approval:</b> 11/2/2022
<b>Revised Date/Review Date (at least 3 years from Effective Date):</b> To be reviewed 11/2/2024
<b>Supersedes (if necessary):</b> N/A

**POLICY STATEMENT**

In alignment with the Liaison Committee on Medical Education (LCME) Element 1.1, all medical schools are required to engage in a systematic process of planning and quality improvement. This policy ensures systematic evaluation of the educational program to promote effectiveness, efficiency, and ongoing improvement in alignment with LCME Standards and Elements. The College of Medicine, Office of Academic Affairs, under the purview of the Senior Associate Dean of Academic Affairs, will provide effective systematic monitoring of the medical education program's policies, processes and practices to ensure compliance with LCME standards and elements through a continuous quality improvement plan.

**REASON FOR POLICY**

LCME Element 1.1 Strategic Planning and Continuous Quality Improvement:  
 "A medical school engages in ongoing strategic planning and continuous quality improvement processes that establish its short and long-term programmatic goals result in the achievement of measurable outcomes that are used to improve educational program quality, and ensure effective monitoring of the medical education program's compliance with accreditation standards".

**PROCEDURES**

LCME elements related to curricular management will be monitored by the EPCC with administrative CQI support from the Office of Medical Education (OME), led by an assistant dean of medical education, and the Office of Academic Affairs with a team of two staff members, led by Senior Associate Dean of Academic Affairs. The EPCC monitors continuous quality improvement activities, including the identification of major resource needs as well as policy/procedural changes necessary to promote continuous quality improvement and compliance with accreditation standards. Elements are monitored on an ongoing and "real-time" bases as part of the standing process of curricular management.

Other CQI elements are monitored and reviewed by the respective responsible party (*e.g., Faculty Executive Board (FEB), COM Department Chairs, Associate Dean of Faculty Affairs*).

Criteria for selecting priority elements are based on the categories outlined within the LCME 2016 White Paper, *Implementing a System for Monitoring Performance in LCME Accreditation Standards*. These criteria include:

- Elements that include language that monitoring is required or involve a regularly-occurring process that may be “prone to slippage”
- New elements or elements where LCME expectations have evolved
- Elements that include policies that must be congruent with current operations
- Elements that directly or indirectly affect the core operations of the school
- Standards/elements that were cited in the medical school’s previous LCME survey
- Commonly cited by the LCME
- Other data points that were identified by the EPCC and COM leadership include the AAMC Graduation & Year Two Questionnaires, Independent Student Analysis, and internally generated data.

Oversight across all LCME standards is outlined in the CQI Dashboard and will be maintained by our Director of CQI and Accreditation. The CQI Advisory Committee will provide oversight over the development and implementation of the CQI Plan, which is actualized in the CQI Dashboard. The CQI Plan provides extensive details identifying the type of metric, the source, measurement schedule, target, accountable title, office responsible for monitoring, and the reason the element is being monitored. CQI data may include performance metrics in various areas related to LCME standards and COM Strategic Plan. The data may include quantitative and qualitative information and may inform decisions about whether long-term and short-term programmatic goals are being met.

The CQI Advisory Committee will consist of the following:

1. COM Dean
2. Senior Associate Dean, Medical Education
3. Senior Associate Dean, Student Affairs and Admissions
4. Senior Associate Dean, Academic Affairs
5. Assistant Dean of Medical Education
6. Director, Accreditation and CQI
7. Director, Evaluation and Assessment
8. Chair, Educational Policy Curriculum Committee
9. At-Large Faculty
10. Diversity, Equity, and Inclusion Committee Member
11. Student (when program begins)

#### DEFINITIONS

- Continuous Quality Improvement (CQI) within the context of this policy is an iterative process, utilizing qualitative, quantitative data to evaluation, and improve efficiency, effectiveness, quality, or performance as they relate to accreditation standards.
- Continuous Quality Improvement Plan is a detailed action plan that is linked to the LCME accreditation standards. It is the method by which operational problems are identified, interventions are designed and initiated, outcomes are monitored for effectiveness and best practices are replicated.

#### RELATED INFORMATION

- LCME Standards, Publications, & Notification Forms <https://lcme.org/publications/>

Review History:	Change Description:
5/3/2023	Updated with new university policy number and upcoming review date which is two years from approved date