

**INSTITUTIONAL GME POLICY**  
**RESIDENTS AS TEACHERS**

**Approved by GMEC – January 24, 2014, revised November 20, 2020**

The Liaison Committee on Medical Education (LCME) which accredits medical schools has expectation for residents to serve as teachers of medical students (Standard 9.1). Similarly, the Accreditation Council on Graduate Medical Education (ACGME) Common Program Requirement IV.B.1.e).(1).(d) expects residents to demonstrate competence in educating patients, families, students, residents, and other health professionals. The ACGME Interprofessional Communication and Skills sub-competency 2 expects residents to communicate concerns and provide feedback to peer and learners. In accordance with these accreditation requirements and expectations, residents who supervise or teach medical students must be familiar with and receive orientation on the educational objectives and required clinical encounters of the course or clerkship and be prepared for their roles in teaching and assessment.

To achieve compliance with the LCME standards:

1. Residents must receive a copy of the course or clerkship rotation objectives and clear guidance from the clerkship leadership about their roles in teaching and assessing medical students; and
2. The Institution and its relevant departments must provide resources (e.g. workshops, resource materials) to enhance the teaching and assessment skills of residents. In addition, there should be central monitoring by the Institution of the level of the residents' participation in activities to enhance their teaching and assessment skills.

There should be formal evaluation of the teaching and assessment skills of residents, with opportunities provided for remediation under the direction of the Program Director if their performance is inadequate. Evaluation methods could include direct observation by faculty, feedback from medical students through course and clerkship rotation evaluations or focus groups, or any other suitable method.

Students in clinical learning situations involving patient care must be appropriately supervised at all times. While students learn through graded responsibility as their skills progress, supervision at all times must ensure patient and student safety. The accountability of physicians who supervise medical students in clinical learning settings will be clearly described in the program's policies and procedures. While residents may be assigned responsibilities for teaching and supervising specific activities of medical students, the ultimate responsibility for ensuring proper supervision of medical students will fall to the appropriate faculty member. The level of responsibility delegated to the student by the faculty supervisor will be appropriate for the student's level of training, and the activities supervised will be within the scope of practice of the supervising health professional faculty member.

## Operational components of this policy

### **Responsibilities of the program and clerkship**

1. Programs will ensure and document that all residents receive copies of the respective clerkship rotation learning objectives and required clinical encounters on an annual basis (see Appendix for LCME Standard 9.1 documentation requirements).
2. Programs will ensure and document that the respective clerkship director will orient the residents on an annual basis to their roles in teaching and methods for assessing medical students (see Appendix for LCME Standard 9.1 documentation requirements).
3. Programs will provide resources (e.g. workshops, resource materials) to enhance the teaching and assessment skills of residents on a yearly basis, and provide documentation of resident participation in these activities to the Office of the Designated Institutional Official. Programs are encouraged to work closely with their respective clerkship directors and use methods that include opportunities for residents to practice teaching skills and receive feedback.
4. Programs will work with the respective clerkships to evaluate the teaching and assessment skills of residents, with appropriate remediation provided to those residents whose performance is deemed inadequate.

### **Responsibilities of the Office of the Designated Institutional Official (ODIO)**

1. Through reporting by the respective programs as described above, the ODIO will provide central monitoring of the level of the residents' participation in activities to enhance their teaching and assessment skills. A summary will be provided to the JABSOM medical student curriculum committee on an annual basis.
2. Upon request from a program, the ODIO will provide/facilitate assistance in developing and/or delivering appropriate resources (e.g., workshops, resource materials) to enhance the teaching and assessment skills of residents.

**Appendix**

**Liaison Committee on Medical Education Standard 9.1 Data Collection**  
*(as of October 2020)*

**9.1 Preparation of Resident and Non-Faculty Instructors**

In a medical school, residents, graduate students, postdoctoral fellows, and other non-faculty instructors in the medical education program who supervise or teach medical students are familiar with the learning objectives of the course or clerkship and are prepared for their roles in teaching and assessment. The medical school provides resources to enhance residents' and non-faculty instructors' teaching and assessment skills, and provides central monitoring of their participation in those opportunities.

**Supporting Data**

*Table 1- 9.1-1 - Provision of Objectives and Orientation in the Pre-clerkship Phase of the Curriculum*

| <b>Table 9.1-1   Provision of Objectives and Orientation in the Pre-clerkship Phase of the Curriculum</b>   |  |   |  |
|---|--|---|--|
| List each course in the pre-clerkship phase of the curriculum where residents, graduate students, postdoctoral fellows, and/or other non-faculty instructors teach/supervise medical students. Describe how the relevant department or the central medical school administration ensures that the learning objectives and orientation to the methods of assessment have been provided and that this information has been received and reviewed. |  |   |  |
| Course  | Type(s) of Trainees Who Provide Teaching/Supervision | How Learning Objectives are Provided and Instructors are Oriented | How the Provision of Learning Objectives and of Orientation is Monitored |
|   |  |   |  |

*Table 2 - 9.1-2 - Resident Preparation to Teach*

| <b>Table 9.1-2   Resident Preparation to Teach</b>  |                            |                   |                         |                            |                    |
|---|----------------------------|-------------------|-------------------------|----------------------------|--------------------|
| Briefly summarize the orientation program (s) available to residents to prepare for their roles teaching and assessing medical students in required clinical clerkships. For each program, note whether it is sponsored by the department or the institution (D/I), whether the program is required or optional (R/O), and whether resident participation is centrally monitored (Y/N), and if so, by whom. Add rows as needed. |                            |                   |                         |                            |                    |
| Required Clerkship  | Program Name/Brief Summary | Sponsorship (D/I) | Required/Optional (R/O) | Centrally Monitored? (Y/N) | Monitored by Whom? |
|   |                            |                   |                         |                            |                    |
|   |                            |                   |                         |                            |                    |
|   |                            |                   |                         |                            |                    |

## **Narrative Response**

- a. Describe any institution-level (e.g., curriculum committee, GME office) policies that require the participation of residents and others (e.g., graduate students, postdoctoral fellows) in orientation or faculty development programs related to teaching and/or assessing medical students.
- b. How does the medical school ensure that all residents who supervise/assess medical students in required clinical clerkships, whether they are from the school's own residency programs or other programs, receive the relevant clerkship learning objectives, the list of required clinical encounters, and the necessary orientation to their roles in teaching and assessment?