UPSOM Curriculum Committee Curricular Reform Task Force Curriculum Reform Data

Team Leader:
Team Members:
School reviewed:
 How did your team review the school's curriculum (e.g., online review, face to-face or phone discussion, published data, etc.)?
Which perceived weaknesses in the curriculum prompted the school to undertake curriculum reform?
Summarize the changes in the curriculum made after curriculum reform that the school deems to be most important:

- 4. Describe the curriculum implemented after reform was completed, both preclinical and clinical. For each topic, describe the current, post-reform state, and also indicate if this is a change from the pre-reform state.
 - a. Summarize the pre-clerkship curriculum. Are courses longitudinal or in a block format? In what order are courses presented? How are courses integrated? How is clinically relevant information presented/delineated?

b.	How are inpatient and outpatient clinical experiences defined and integrated into the curriculum?
C.	How does the curriculum achieve horizontal and vertical integration? How is this integration assessed/measured/evaluated?

d.	How does the school assess students during the preclinical and clinical curriculum? Are exams standardized (e.g., NBME), locally-written, or a combination of the two? Are exams conducted using paper forms, online, or in another format?
e.	How are step exams integrated into the curriculum? Are they required? When are they offered? Does the curriculum offer dedicated study time for step exams? How is the curriculum altered for students who need additional time to prepare for step exams?
f.	Does the curriculum include traditional basic science courses such as biochemistry and genetics, or is basic science integrated into organ block courses?

g.	How is didactic information offered to students (lectures, online modules, readings, etc.)? How much "class" time is used for lectures vs. active
	learning activities each week? Does the curriculum incorporate third-party materials (Sketchy, Boards and Beyond, Pathoma, etc.), and if so, how?

h. How is interprofessional education and training about social determinants of health, social justice, and other "hot topics" incorporated into the curriculum?

i.	How is remediation provided for students who are struggling (coaching, special classes, etc.)?
j.	How is a "passing score" for a class/topic determined (minimum score on exam, etc.)? How do students remediate a course if they did not demonstrate proficiency?
k.	How do course directors assure that material is integrated across lectures in
K.	a course (such that redundancy and omissions are minimized)? How many lecturers are engaged in a typical basic science course (many or just a few)?

5. What challenges were encountered when designing and implementing curricular reform? What unexpected benefits were realized in the process?

6. Describe the curricular reform process. Which stakeholders were involved other than students and faculty? What steps were needed to achieve the reform? Were any stepwise changes made during the process? How did the school reconcile the old and new curriculum during the transition? How long did the curricular reform process take?

7.	Which aspects of the curricular reform have been successful? How was success assessed? Which aspects of curriculum reform failed? Are additional curricular changes contemplated for the near future?
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Ο.	Did curricular reform result in graduating physicians who were better prepared to succeed in their careers? How was this assessed?

9. What else should the UPSOM Curriculum Committee and leadership know about the process of curriculum reform?