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## THE INDEPENDENT STUDENT ANALYSIS

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Prepared on behalf of the students at the  
South Alabama Whiddon College of Medicine

By the ISA Student Committee

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## Methods

### Student Committee Selection

In the Fall of 2025, students were invited to join the ISA group through involvement in student leadership, including class presidents, CQI representatives, and OSR representatives. A total of 11 students from the M1–M4 classes were selected. From those selected, a chair was elected by members of the subcommittee.

### Survey Development

In the Fall of 2025, the student ISA committee decided against adding any questions to the standard survey. The survey consisted of 75 standard LCME questions, as detailed in Appendix E of *The Role of Students in the Accreditation of U.S. Medical Education Programs for Full Accreditation*. Two versions of the survey were developed: one for the pre-clerkship phase and one for the clerkship phase. The surveys were differentiated by questions specific to the clinical years. Each item included three response options based on access: yes, no, or N/A. The student ISA committee required respondents who selected “N/A” to provide additional information in a free-text response field.

### Survey Implementation

The survey was created and distributed using Qualtrics software to eligible members of each class. Distribution was conducted via a QR code. Each respondent was required to provide their university email address and student number at the beginning of the survey.

### Survey Distribution and Response Collection

The M1 survey was distributed on March 6 and March 13, 2026, following a small group session. The M2 survey was distributed on March 6, 2026, following a small group session. The M3 survey was distributed on February 23, 2026, during a transition-to-fourth-year session. The M4 survey was distributed on March 6, 2026, during a transition-to-residency session. All surveys closed on March 15, 2026. An initial threshold of an 80% response rate was set for each class. A contingency plan was established to keep the survey open longer if 80% was not achieved. Fortunately, it was not necessary to extend the deadline.

The Whiddon COM LCME Committee collaborated with the ISA Committee to maximize student response rates. As an incentive, students who completed the survey received a Whiddon COM tumbler. Completion was tracked by student leadership, with students confirming participation by displaying their completion screen and signing their names. Student leaders also followed up with those who had not yet completed the survey to encourage participation. Additionally, the class that achieved 100% participation in the shortest amount of time was rewarded with a Chick-fil-A breakfast.

### Analysis

Survey response rates for each class are included in Table A. The ISA committee chair conducted a comprehensive analysis of the survey data and then presented the findings to the ISA committee. Each item is discussed in detail later in the report. Based on guidance from the LCME committee, the ISA committee decided that items would be further elaborated upon if: (1) more than 95% of respondents were satisfied, (2) more than 10% of students were dissatisfied, or (3) more than 10% of students selected “N/A.”

<b>Table A: Student Response Rates per Medical School Class</b>			
Medical School Class	Responses	Total Students	Response Rate (%)
M1 (Class of 2029)	80	80	100
M2 (Class of 2028)	75	78	96.2
M3 (Class of 2027)	74	74	100
M4 (Class of 2026)	67	73	91.8
<b>Total</b>	296	305	97.1

## Executive Summary

In the spring of 2026, the ISA was distributed among Whiddon COM students as part of a student-driven process. Whiddon COM students were informed of the ISA's role in the accreditation process for evaluating the institution by the LCME. This report provides Whiddon COM faculty and staff with insight into students' perspectives on the institution's strengths and areas for improvement. Based on these results, recommendations were provided to Whiddon COM faculty and staff.

A total of 305 students received the survey, and 296 completed it, resulting in a response rate of 97.1%. This high response rate indicates that the results are highly representative of the student body's opinions. Initial analysis of the ISA data revealed that Whiddon COM students are generally very satisfied with their experience at the University of South Alabama.

Regarding leadership in the Office of Student Affairs and Medical Education, students reported a high level of satisfaction with their experiences. Students also emphasized the Office of Medical Education's consistent involvement each year and regular check-ins, which help ensure that students feel supported.

Students were generally pleased with the learning environment and facilities. They reported that the learning spaces in the pre-clerkship phase were conducive to learning. The majority of students indicated that they felt safe on campus and had adequate access to secure storage. Students also highlighted the pre-clerkship relaxation and study spaces as important contributors to their success. In the clerkship phase, students felt that educational areas provided a supportive learning environment. They reported feeling safe in clinical settings but expressed dissatisfaction with access to secure storage. Regarding student-designated spaces in clinical areas, students were satisfied with areas for reviewing electronic medical records but expressed concerns about access to student-dedicated computers. While students are provided with adequate space, they rely on their personal computers for documentation purposes. As it relates to research, Whiddon COM students felt well-supported and satisfied with their ability to participate. Many highlighted the summer research project as a simple way to get involved, and M1 and M2 students reported excitement about the research programming planned for the spring. Pertaining to community service, students reported high satisfaction with access to opportunities. They highlighted that the continuous professional development credits provided a chance to learn about different sites and select one they could commit to throughout their time at Whiddon COM.

On the topic of library and information resources, students expressed high satisfaction with their experiences using these services. They emphasized the importance of the technology team and highlighted the kindness and dedication exemplified by each member.

When it comes to student services, Whiddon COM students held the mental health and tutoring support services in high regard. They noted that the expectations and accessibility outlined during first-year orientation met or exceeded their expectations. Students also recognized the efforts of the mental health staff in reducing any shame or stigma associated with accessing services. Regarding tutoring support, students highlighted the Academic Success Team and their programming, particularly their provision of individualized feedback.

Lastly, Whiddon COM students expressed high satisfaction with their overall experience in

medical education programming. They reported that the pre-clerkship curriculum adequately prepared them for the clerkship years and spoke highly of the clinical skills training and instructional methods during this phase. In the clerkship phase, students were generally satisfied with their experiences. For a more detailed description of the Whiddon COM ISA results, see the narrative section.

## Narrative Description of Results

This section is organized into subsections corresponding to the divisions of the ISA: *Office of Student Affairs, Office of Medical Education, Learning Environment and Facilities, Library and Information Resources, Student Services, and the Medical Education Program*. Each subsection presents findings in the yes, no, or N/A format. Where appropriate, recommendations for improvement are provided to enhance student satisfaction.

### Office of Student Affairs

This section involves questions in regards to students and their relationship with the Office of Student Affairs faculty and staff.

1) **The members of the OSA are accessible.**

Overall 98.6% level of satisfaction with the accessibility to the office of student affairs. Each class responded above 95% satisfaction: M1 100%, M2 96%, M3 98.5 and M4 98.6. They noted that the Office of Student Affairs maintains an open-door policy and that faculty respond promptly and with exceptional kindness.

2) **The OSA leadership and staff are aware of student concerns.**

Reports indicated a 98.4% level of contentment with the Office of Student Affairs' (OSA) understanding of student concerns (M1: 100%, M2: 97.3%, M3: 100%, M4: 95.5%). Students particularly highlighted the comfort they feel in discussing issues and noted that the staff consistently addressed their concerns without dismissal.

3) **The OSA leadership and staff respond to student problems.**

The adequacy of OSA leadership and staff in responding to student concerns was rated at a 98% level of satisfaction (M1 100%, M2 97.3%, M3 98.6%, M4 95.5). Students highlighted themes such as the staff's open-door policy and their prompt responses to issues.

### Recommendations

Based on the data and conclusions presented, the ISA Committee recommends the following.

- Continue to foster the warm, supportive, and approachable environment that the office consistently demonstrates.
- Maintain consistent, reliable, and timely communication when addressing student concerns or challenges. Ensure transparency in communication by providing clear updates and follow-up on student inquiries.

## Office of Medical Education

This section contains the student responses regarding their relationship and impression in regards to the Office of Medical Education.

4) **The members of the OME are accessible.**

Overall, 99.7% of students agreed that the OME office is accessible (M1: 100%, M2: 98.6%, M3: 100%, M4: 100%). Students reported high satisfaction with the Office of Medical Education, particularly appreciating the open access during business hours and the prompt responses to emails.

5) **The OME leadership and staff are aware of student concerns.**

Response rates indicated 99% agreement that the OME is knowledgeable about student concerns (M1: 100%, M2: 97.4%, M3: 100%, M4: 98.5%). While students did not provide details about specific concerns, these results suggest that students generally feel the OME is aware of their needs.

6) **The OME leadership and staff respond to student problems.**

Regarding the Office of Medical Education (OME) response to student concerns, overall satisfaction was 98.7% (M1: 100%, M2: 97.4%, M3: 100%, M4: 97%). These results indicate that students feel their concerns are addressed effectively by the OME.

Additionally, M1 and M2 students reported high satisfaction with the inclusion of review sessions prior to exams.

## Recommendations

Based on the data and conclusions presented, the ISA Committee recommends the following.

- Continue to remain visible, accessible, and actively engaged with students throughout both the pre-clerkship and clerkship phases.
- Maintain a strong commitment to addressing student needs and concerns in a timely, consistent, and student-centered manner.
- Encourage regular check-ins or touchpoints to proactively identify and address concerns early.

## Learning Environment and Facilities

This section presents student responses regarding their perspectives on mistreatment policies, campus and clinical site safety and security, the learning environment during pre-clerkship and clerkship phases, access to relaxation and study spaces, and specific aspects of research opportunities.

7) **The medical school's student mistreatment policy is clear.**

Students' response showed 99% agreement with understanding the student mistreatment policy (M1: 98.7%, M2: 98.7%, M3: 98.6, M4: 100%). Students are reminded of the details regarding the mistreatment policy of each module in the pre-clerkship phase and each clerkship during the clinical phase.

8) **I am aware there is a process for reporting student mistreatment or know where to find it.**

Overall, 97.6% of students reported that they are knowledgeable about the mistreatment reporting process (M1: 97.5%, M2: 94.7%, M3: 98.6%, M4: 100%). Students have the ability to submit anonymous reports through Canvas and at the end of module or clerkship evaluations. Additionally, students are aware of the Whiddon COM ombudspersons who are available to receive reports.

9) **The procedures to report student mistreatment are clear.**

Regarding procedures for reporting student mistreatment, 99% of students agreed that the process is well-defined (M1: 98.75%, M2: 98.7%, M3: 98.6%, M4: 100%). These results reflect Whiddon COM faculty and staff's commitment to ensuring that students are well-informed about policies related to mistreatment.

10) **I am aware of the medical school's activities to prevent student mistreatment.**

Pertaining to students' awareness of activities aimed at preventing student mistreatment, responses indicated a 96.6% level of agreement (M1: 97.5%, M2: 96%, M3: 98.6%, M4: 94%). While no specific qualitative details were provided, these results offer insight into Whiddon COM faculty and staff efforts to prevent student mistreatment.

11) **The medical school's activities to prevent student mistreatment are effective.**

Involving prevention of student mistreatment, responses indicated that 96.3% of students agreed that Whiddon COM's methods are effective (M1: 100%, M2: 96%, M3: 98.6%, M4: 89.5%). Among M4 students, 4.5% selected N/A and 6% disagreed; those who selected N/A reported never having experienced mistreatment. Overall, the results are reassuring Whiddon COM's commitment to fostering a safe and supportive learning environment.

12) **I am aware that the medical school investigates/acts on reports of student mistreatment.**

Overall, 91.9% of students reported being aware of Whiddon COM's investigations of student mistreatment (M1: 96.3%, M2: 90.7%, M3: 89.2%, M4: 91%). Across all classes, 7.1% selected "N/A," with students indicating they had not experienced or known anyone who had been mistreated and had not observed such investigations.

**13) I feel safe and secure on the medical school campus.**

Across all respondents, 99.7% of students reported feeling safe and secure on the medical school campus (M1: 100%, M2: 98.6%, M3: 100%, M4: 100%). Although qualitative insights were limited, these findings provide evidence of Whiddon COM faculty and staff's efforts to ensure student safety.

**14) I feel safe and secure at clinical sites.**

Findings revealed that 96.4% of M3 and M4 students reported feeling safe and secure at clinical sites (M3: 96%, M4: 97%). Students identified Whiddon COM safety measures, including key card entry, secure study spaces, and shuttle access from parking areas, as key factors contributing to this high level of agreement.

**15) The medical school's pre-clerkship lecture halls and large group classroom facilities are suitable for the educational sessions that are held in them.**

Regarding Whiddon COM's preclerkship lecture halls and large-group classrooms, 98% of students reported them as suitable (M1: 100%, M2: 97.4%, M3: 100%, M4: 94%). Each M1 and M2 class has access to its own lecture hall, providing adequate space for all students.

**16) The medical school's pre-clerkship small group teaching spaces are suitable for the educational sessions that are held in them.**

Students reported a 95.6% level of agreement regarding the appropriateness of the pre-clerkship small-group teaching spaces (M1: 98.7%, M2: 96%, M3: 92.5%, M4: 95.6%). They noted that the team-based layout and smart screens contribute to a learning environment that is conducive to collaboration and engagement.

**17) The educational/teaching spaces at hospitals are suitable for the sessions that are held in them.**

Overall, clerkship students reported a 99.3% level of agreement with the educational spaces provided during the clinical year (M3: 100%, M4: 98.6%). Students indicated that each clerkship provides a designated room or scheduled time, ensuring an appropriate environment for learning.

**18) I have access to a relaxation space for pre-clerkship students on the medical school campus.**

Across all classes, 96.3% of students reported having access to relaxation spaces during the pre-clerkship phase (M1: 96.2%, M2: 94.7%, M3: 97.3%, M4: 97%). Students emphasized that these spaces are accessible at all times. These findings indicate that Whiddon COM provides adequate access to relaxation spaces for its students.

**19) I have access to pre-clerkship study space on the medical school campus.**

Findings revealed that 98.3% of students reported having access to a pre-clerkship study space (M1: 97.5%, M2: 98.7%, M3: 97.3%, M4: 100%). Students noted that these spaces are available at all times, allowing them to study on their own schedules. Overall, the results demonstrate that students have adequate access to study spaces.

**20) I have access to a workspace and computers to enter patient notes at hospitals/clinical sites.**

Regarding access to workspace and computers at clinical sites, clerkship students reported a 10.6% level of disagreement (M3: 12.2%, M4: 9%). Students noted that while they can access the EMR using personal laptops and cell phones, there are no designated computer spaces for medical students within the hospitals. When asked about the reasons for limited access, students indicated that there is insufficient space for dedicated medical student computers. Despite this, students reported that the lack of hospital-based computers does not hinder their ability to access information or complete notes.

**21) I have access to space where I can read about my patients at hospitals/clinical sites.**

Overall, 95.7% of third- and fourth-year medical students reported having access to space to review patient information (M3: 96%, M4: 95.4%). Students highlighted the availability of rounding rooms and medical student-only spaces, which provide a suitable environment for chart review. These findings demonstrate that students have adequate space to review patient information.

**22) I have access to secure storage space for my personal belongings on the medical school campus.**

In regard to access to secure storage space on the medical school campus, 96.3% of students reported having such access (M1: 96.3%, M2: 94.7%, M3: 97.3%, M4: 97%). Students indicated that they have access to personal lockers and are overall satisfied with their ability to store personal belongings securely.

**23) I have access to secure storage space for my personal belongings at hospitals/clinical sites.**

Ten percent of clerkship phase students reported not having access to secure storage space at their clinical sites (M3: 10.8%, M4: 9%). Students noted that rounding rooms require key card access and that lockers are available in a building near the main hospital; however, there are no lockers within the hospital designated specifically for student use. To improve access to secure storage, students recommended adding lockers within the hospital for student use.

**24) I have access to research opportunities.**

Overall, 98.3% of students reported access to research opportunities (M1: 98.8%, M2: 98.7%, M3: 94.6%, M4: 100%). Students highlighted the summer research projects, which allow them to find and connect with principal investigators.

**25) The medical school supports student participation in research.**

The large majority of students (97%) reported that Whiddon COM supports student involvement in research (M1: 98.8%, M2: 96%, M3: 94.6%, M4: 98.5%). First- and second-year students highlighted new programming that provided opportunities to meet and engage with multiple principal investigators. Across all four class years, students consistently reported that Whiddon COM encourages participation and actively provides opportunities to learn more about research involvement.

**26) I have access to service-learning/community service opportunities.**

Across all four classes, 99.7% of students reported access to service-learning and community service opportunities (M1: 100%, M2: 98.7%, M3: 100%, M4: 100%). Students highlighted that continued professional development programming encourages participation in long-term community service initiatives. Additionally, students noted that individual interest groups provide field-specific opportunities, allowing them to engage in service activities that align with their interests.

**Recommendations**

Based on the data and conclusions presented, the ISA Committee recommends the following.

- Continue efforts to prevent mistreatment and ensure that clear, accessible procedures are in place for reporting and addressing concerns. Ongoing education and reinforcement of these processes are essential to maintaining a safe and supportive learning environment.
- Maintain current efforts to ensure student safety across both the medical school campus and all affiliated clinical sites, with continued attention to maintaining secure and supportive learning and working conditions.
- Although students reported that limited access to student computers does not currently hinder their academic performance, this committee recommends the addition of a small number of institutional computers. This would improve convenience, promote equitable access for all students, and provide reliable backup options in situations where personal devices are unavailable.
- With regard to safety and storage, the committee recommends continuing current efforts to ensure safety on the medical school campus while expanding access to secure storage at each clinical site. A proposal has been made to increase locker availability in order to improve secure storage options for students, particularly during clinical rotations. This enhancement would also improve convenience and accessibility throughout the day, supporting students in managing their belongings safely and efficiently across training environments.
- Continue to support and promote the availability of research opportunities for students, ensuring that they remain accessible across all years of medical education.

## Library and Information Resources

This section presents student responses regarding their perspectives on access to library resources both on and off campus, as well as support from library personnel, technology staff, and access to course materials off campus.

**27) I am able to access library resources and holdings from any location on and off the medical school campus.**

Responses revealed that 98% of students reported the ability to access library resources and holdings from any location, both on and off the medical school campus (M1: 100%, M2: 98.7%, M3: 94.6%, M4: 98.5%). Students noted that the biomedical library offers online features that are accessible from any location.

**28) I have access to library support personnel and services.**

Access to library support personnel and services was reported by 99.7% of students (M1: 100%, M2: 100%, M3: 98.6%, M4: 100%). Students described library staff as highly reliable and accessible, particularly in their assistance with research and the use of interlibrary loan services to obtain needed resources.

**29) I have access to support from technology staff.**

Responses revealed that 99% of students reported access to technology staff (M1: 98.7%, M2: 100%, M3: 98.6%, M4: 98.5%). Students noted that the technology staff work diligently to ensure that all needs are met and frequently support after-hours events to address any unforeseen issues. Overall, Whiddon COM's technology support helps ensure that lectures and other academic activities run smoothly.

**30) I can access online courses and clerkship instructional materials from any location on and off the medical school campus.**

An overwhelming 99.7% of students reported access to online courses and clerkship instructional materials from any location (M1: 100%, M2: 98.7%, M3: 100%, M4: 100%). Students emphasized the ability to access the Canvas site from anywhere, noting that this accessibility is crucial to their academic success.

## Recommendations

Based on the data and conclusions presented, the ISA Committee recommends the following.

- Continue to provide support from library and technology staff for medical students. Additionally, maintain access to library resources and course/clerkship materials from any location to support flexible and effective learning.

## Student Services

**31) I am able to access personal health care services during the pre-clerkship phase of the medical education program.**

Overall, 99.7% of students reported access to personal health care services during the first and second years (M1: 98.7%, M2: 100%, M3: 100%, M4:100%). Students noted that access was facilitated by the availability of the University of South Alabama Student Health Clinic and its proximity to the medical school.

**32) I am able to access personal health care services during the clerkship phase of the medical education program.**

Accessibility of personal health care services among third- and fourth-year students was reported to be 94.3% (M3: 93%, M4: 95.5%). These findings indicate that Whiddon COM provides adequate access to personal health care services during the clerkship phase, though continued efforts to maintain and further improve access remain important.

**33) I am able to access personal counseling/mental health services during the pre-clerkship phase of the medical education program.**

An overwhelming 100% of students reported access to personal counseling and mental health services during the first and second years. Students noted that the Whiddon COM psychologist/therapist maintains a consistent presence throughout each year, helping to normalize engagement and foster a comfortable, professional relationship for all students. They also lead the wellness initiative and have trained students in Mental Health First Aid.

**34) I am able to access personal counseling/mental health services during the clerkship phase of the medical education program.**

Across students in the clerkship phase, 97.9% reported access to personal counseling and mental health services during the third and fourth years (M3: 97.2%, M4: 98.5%). Students emphasized that this accessibility is supported by services being free of cost, flexible scheduling, and the ability to take time off when needed to attend sessions.

**35) Mental health services available through the medical school are confidential.**

With regard to the confidentiality of mental health services, 98% of students reported that services were confidential (M1: 100%, M2: 97.3%, M3: 98.6%, M4: 95.5%). Students noted that the Whiddon COM psychologist/therapist maintains consistent relationships with all students, regardless of their use of therapy services, which helps prevent anyone from feeling singled out and reduces stigma surrounding mental health.

**36) Student well-being programs are available in the pre-clerkship phase of the medical education program.**

Across all four classes, 99.7% of students reported access to well-being programs during the pre-clerkship phase (M1: 98.75%, M2: 100%, M3: 100%, M4: 100%). Regarding these programs, students highlighted wellness houses, which include members from all years and host several events each semester to provide a break from academic demands.

Students also noted pre-clerkship programming such as lunch-and-learns, which serve as check-ins to support their personal well-being.

**37) Student well-being programs are available in the clerkship phase of the medical education program.**

During the clerkship phase, 99.3% of students reported access to well-being programs during the third and fourth years (M3: 98.6%, M4: 100%). Similar to the pre-clerkship phase, students continue to participate in wellness house activities and attend lectures during each clerkship, led by the Whiddon COM psychologist/therapist, to promote and support ongoing wellness practices.

**38) The medical school has a coordinated career advising system that spans all years of the medical education program.**

Overall, 95.6% of students reported access to career advising across all years of the medical program (M1: 97.5%, M2: 96%, M3: 97.2%, M4: 91%). These results are reassuring and indicate that Whiddon COM provides adequate access to career advising beginning in the first year.

**39) The medical school's career advising system includes access to knowledgeable advisors.**

With regard to access to knowledgeable advisors, 94.3% of students across all four classes reported having access (M1: 98.75%, M2: 97.2%, M3: 100%, M4: 79.1%). However, responses from the fourth-year class were notable, with 16.4% reporting a lack of access and 4.5% indicating N/A. Fourth-year students identified Student Affairs as their primary point of contact for career advising, but noted that this resource does not always provide sufficiently detailed, specialty-specific guidance. As a result, many students reported relying more heavily on their specialty advisors for the majority of their career-related information and decision-making support. Some students felt that advice from the Office of Student Affairs was sometimes provided too late, limiting their ability to make timely adjustments.

**40) The medical school has an effective system for advising about elective choices.**

Regarding Whiddon COM's system for advising on elective choices, 90.9% of students reported that it is effective (M1: 93.8%, M2: 96%, M3: 90.5%, M4: 82.1%). However, 17.9% of fourth-year students reported that the system is not effective. Given that elective selection primarily occurs during the fourth year, these responses are particularly important. M4 students identified several concerns with the current system. First, they noted challenges with the platform used to select electives, reporting that insufficient information is provided to effectively navigate it. Second, they described inefficiencies in the process, including the requirement to meet in person to drop certain courses and the need for multiple approvals, which were perceived as redundant and unnecessarily time-consuming. Finally, students reported difficulties coordinating scheduling, noting that when faculty recommended taking a course at a specific time, Student Affairs was not always able to accommodate or facilitate access to those opportunities.

**41) I have access to knowledgeable and helpful financial aid services personnel.**

A large portion (98%) of students reported access to knowledgeable and helpful financial aid personnel (M1: 100%, M2: 98.6%, M3: 97.3%, M4: 95.5%). Students endorsed annual meetings with the financial aid officer and accessibility for one on one appointments to discuss their questions and concerns.

**42) Academic advising is available to me during all years of the medical education program.**

An overwhelming 99% of students reported access to academic advising across all years of medical school (M1: 100%, M2: 98.6%, M3: 100%, M4: 95.6%). Students noted that their academic progress is actively monitored, allowing potential challenges to be identified and addressed early. Additionally, students reported that the incorporation of Individual Learning Plans into multiple facets of the medical curriculum has been highly effective in supporting their academic development.

**43) If I am experiencing academic difficulty, academic counseling is available to me during all years of the medical education program.**

The vast majority of students (99.7%) reported access to academic counseling across all years of medical education (M1: 98.75%, M2: 100%, M3: 100%, M4: 100%). Students highlighted the strong accessibility of academic support services, as well as the use of individualized plans tailored to each student's needs.

**44) Tutorial help is available to me during all years of the medical education program.**

Regarding access to tutorial help during medical school, 98.3% of students reported availability (M1: 100%, M2: 96.1%, M3: 98.6%, M4: 98.5%). Students highlighted the availability of peer academic support, including both one-on-one and group sessions led by students in the class above. Additionally, students felt that faculty provided adequate office hours, allowing them to seek help when needed.

**45) I am taught how to prevent exposure to infectious and environmental hazards before I begin seeing patients.**

Regarding access to information on the prevention of exposure to infectious and environmental hazards prior to patient encounters, 99.1% of students reported having access (M1: 98.75%, M2: 97.4%, M3: 100%, M4: 100%). Students indicated that education on prevention strategies begins during first-year orientation and is reinforced periodically throughout the subsequent years of training.

**46) I am aware of or have ready access to the procedures to follow after potential exposure to an infectious or environmental hazard.**

Across all four classes, 98% of students reported access to clear procedures to follow after potential exposures (M1: 97.5%, M2: 96%, M3: 98.6%, M4: 100%). Similar to prevention education, these post-exposure protocols are first introduced during first-year orientation and reinforced periodically throughout the curriculum. This ongoing reinforcement helps ensure that students are familiar with appropriate steps to take in the event of an exposure, supporting both student safety and timely reporting.

## Recommendations

Based on the data and conclusions presented, the ISA Committee recommends the following.

- It is recommended that the current robust mental health initiatives be maintained, with continued evaluation and adjustment as student needs and circumstances evolve. Ongoing assessment will help ensure that these resources remain effective, relevant, and responsive to changing demands within the medical education environment.
- Continued emphasis should be placed on maintaining the accessibility and utilization of wellness houses, with further support as needed. These spaces play an important role in promoting cross-class interaction, fostering a sense of community, and providing students with structured opportunities to take breaks from academic demands.
- Regarding career advising, it is recommended that the Office of Student Affairs collaborate more closely with current faculty advisors from each specialty to develop a clearer and more comprehensive understanding of specialty-specific requirements. This collaboration would help ensure that students receive more accurate, detailed, and consistent guidance. Additionally, it is recommended that career advising meetings occur earlier in the curriculum and serve to reinforce the information provided by faculty advisors. Earlier and more coordinated advising could better support students in making informed decisions and preparing effectively for their chosen specialties.
- Regarding elective choices, it is recommended that a more detailed and structured overview of the elective selection platform be provided to improve students' understanding and ease of use. Clearer guidance, including step-by-step instructions and examples, may help students better navigate the system and make informed decisions. Additionally, it is recommended that unnecessary or redundant meetings be reduced and that requirements such as submitting add/drop forms in person and obtaining an advisor signature be eliminated to streamline the process and allow for more efficient use of students' time.
- Efforts should also be made to strengthen collaboration with faculty to ensure better alignment regarding appropriate timing and scheduling of electives for students. This would help improve coordination and ensure that students are able to access desired electives at optimal times within their training schedule.
- Continue to emphasize the importance of the student relationship with financial aid providers and ensure continued accessibility for one-on-one appointments. Strengthening this connection can help students more effectively navigate financial concerns and available resources.
- Continue to provide robust academic support, particularly in identifying students who may be struggling early and connecting them with appropriate resources. This includes continued emphasis on academic support services, especially structured academic support groups, to further enhance student success and engagement.

- It is recommended that current prevention and exposure procedures be continued, as they allow students to receive repeated exposure to key information, supporting retention and preparedness. These procedures also ensure that students have clear access to faculty and appropriate resources in the event that an exposure occurs, promoting timely guidance and support when needed.

## Medical Education Program

### 47) **I am aware of the school's medical education program objectives.**

The majority of students (99.3%) reported being aware of program objectives (M1: 100%, M2: 98.7%, M3: 98.6%, M4: 100%). Students indicated that these objectives are consistently provided throughout the medical education program, including during both pre-clerkship and clerkship phases. This high level of awareness suggests that program objectives are clearly communicated and readily accessible across all years of training.

### 48) **I receive adequate clinical skills instruction in the pre-clerkship phase of the medical education program.**

Overall, 97% of students reported receiving adequate clinical skills instruction in the pre-clerkship phase (M1: 100%, M2: 94.7%, M3: 95.9%, M4: 97%). First- and second-year students are required to attend weekly clinical skills sessions, during which the topics are intentionally aligned with concurrent didactic content to reinforce learning and promote clinical application.

### 49) **The amount of formative feedback in the pre-clerkship phase is sufficient to allow me to self-assess how I am progressing in the courses of this phase of the medical education program.**

Across all four classes, 96.6% of students reported that the amount of formative feedback provided during the pre-clerkship phase is sufficient for self-assessment (M1: 100%, M2: 94.7%, M3: 94.6%, M4: 97%). This finding supports that Whiddon COM's current approaches to delivering formative feedback are effective in helping students gauge their progress, identify areas for improvement, and guide their learning.

### 50) **The quality of formative feedback in the pre-clerkship phase allows me to identify areas in which I need to improve as I progress through this phase of the curriculum.**

Regarding the quality of formative feedback, 93.9% of students reported that the feedback they received allowed them to identify areas for improvement (M1: 97.5%, M2: 90.7%, M3: 94.6%, M4: 92.5%). Although no specific qualitative data were provided, these findings suggest that Whiddon COM faculty and staff are delivering formative assessments that are meaningful and actionable.

### 51) **Pre-clerkship summative assessments are pertinent to the course objectives and content taught in the courses of this phase of the medical education program.**

Overall, 99.3% of students reported that summative assessments in the pre-clerkship phase align with course objectives and the content taught (M1: 100%, M2: 98.7%, M3: 98.6%, M4: 100%). Students are consistently provided with clear learning objectives for each lecture and educational activity, which are highly relevant and predictive of summative assessment content.

### 52) **The curriculum provides sufficient practice in the skills of self-directed learning as defined by the LCME.**

The majority of students (99%) reported that the curriculum provides sufficient practice in self-directed learning (M1: 98.8%, M2: 98.7%, M3: 98.6%, M4: 100%). Pre-clerkship students indicated that they participate in at least one labeled activity or assignment per course block specifically designed to promote self-directed learning. Third- and fourth-year students further reported that these early experiences effectively prepared them for the increased level of independence and self-directed study required during the clerkship phase.

**53) There is adequate available time in the pre-clerkship phase for self-directed learning and other types of preparatory assignments.**

Regarding self-directed learning and other preparatory assignments in the pre-clerkship phase, 97.6% of students reported having adequate time to complete these assignments (M1: 100%, M2: 100%, M3: 94.6%, M4: 95.5%). This reflects a strong perception across all classes that the curricular structure appropriately accommodates the workload associated with independent learning activities. Self-directed learning and related assignments are intentionally scheduled within the curriculum, and students are provided with protected time to support completion of these activities.

**54) Student workload in the pre-clerkship phase is manageable.**

The majority of students (99%) reported that the workload during the first and second year is manageable (M1: 100%, M2: 100%, M3: 98.6%, M4: 97%). Although no specific qualitative data were provided, these findings suggest that Whiddon COM faculty and staff provide adequate time, structure, and support to help students effectively manage their academic workload during the pre-clerkship phase.

**55) Curriculum content in the pre-clerkship phase is coordinated/integrated within and across courses.**

Overall, 97.6% of students reported that curriculum content is well coordinated and integrated within and across courses (M1: 100%, M2: 98.7%, M3: 94.6%, M4: 97%). These findings suggest that students perceive a high level of organization and cohesion within the curriculum, with course material intentionally structured to reinforce key concepts across different instructional settings and stages of training.

**56) The pre-clerkship phase prepared me for the clerkship phase of the curriculum.**

Overall, 96.5% of third- and fourth-year students reported that the pre-clerkship curriculum adequately prepared them for the clerkship phase (M3: 97.3%, M4: 95.5%). These findings indicate that students feel well equipped with the knowledge and skills necessary to engage in clerkship responsibilities and adapt to the increased expectations of clinical training.

**57) The overall quality of the required clerkships is satisfactory.**

Regarding the quality of required clerkship education, 97.9% of students reported it to be satisfactory (M3: 98.6%, M4: 97%). Students indicated that clerkships adequately prepare them for the development of clinical skills, performance on individual clerkship NBME examinations, and success on Step 2.

**58) I have sufficient access to patients during the required clerkships to complete the required clinical encounters/skills and to meet the clerkship objectives.**

An overwhelming 100% of students in their clerkship years reported sufficient access to patients during required clerkships (M3: 100%, M4: 100%). Students noted that Whiddon COM faculty and staff actively encourage participation in clinical experiences, fostering engagement and hands-on learning opportunities.

**59) Student workload in the required clerkships is manageable.**

Clerkship workload was reported as overall manageable by 92.9% of students (M3: 93.2%, M4: 92.5%). Students attributed this to faculty and residents who are respectful of their time and intentionally provide opportunities to complete required tasks once educational activities are concluded.

**60) I am appropriately supervised in clinical settings.**

Across students in the clerkship phase, 99.3% reported appropriate supervision in the clinical setting (M3: 98.6%, M4: 100%). Faculty and residents provide students with opportunities to independently evaluate patients while consistently performing their own assessments to ensure accuracy and patient safety. Intimate examinations are conducted with both an attending physician and a chaperone present. Students reported feeling comfortable with the level of supervision, which supports their ability to develop independent clinical reasoning while confirming findings with the care team.

**61) The amount of formative feedback in the clerkship phase allows me to self-assess how I am progressing in the required clerkships of this phase.**

Regarding formative feedback during the clerkship phase, 93.6% of students reported that the amount provided was adequate for self-assessment (M3: 93.2%, M4: 94%). Students receive periodic feedback through formal evaluations, which include both numerical ratings and narrative comments to support their ongoing development.

**62) The quality of formative feedback in the clerkship phase allows me to identify areas in which I need to improve as I progress through this phase of the curriculum.**

Overall, 92.9% of students reported the quality of formative feedback in the clerkship phase identifies areas for improvement (M3: 93.2%, M4: 92.5%). Although no specific qualitative data were provided, these findings suggest that Whiddon COM faculty and staff are delivering formative assessments that are meaningful and actionable.

**63) The manner in which summative assessments are used to determine a clerkship grade is clear and consistent.**

Regarding summative assessments in the clerkship phase, 92.9% of students reported that grading was clear and consistent (M3: 97.3%, M4: 88.1%). Notably, 11.9% of fourth-year students disagreed with this statement. Following the 2024–2025 academic year, the curriculum committee implemented a standardized grading system across all clerkships. The higher agreement among third-year students compared to fourth-year students suggests that this curricular change has improved clarity and consistency in summative assessments for students experiencing the updated system.

**64) The policies for advancement/graduation are clear.**

An overwhelming 99.7% of students reported that policies for advancement and graduation are clear (M1: 100%, M2: 100%, M3: 100%, M4: 98.5%). Students indicated that Whiddon COM provides clear guidelines, ensuring they are well informed about expectations and next steps throughout their training.

**65) I am aware there is a process for reviewing and challenging my academic record or know where to find it.**

Regarding the process for reviewing and challenging academic records, 95% of students reported awareness of how to do so or where to find this information (M1: 97.5%, M2: 98.7%, M3: 94.6%, M4: 89.6%). These findings suggest that Whiddon COM faculty and staff effectively inform students about the procedures and resources available for reviewing and challenging academic records.

**66) The medical school responds to student feedback on courses.**

Overall, 98.3% of students reported that Whiddon COM is responsive to student feedback on courses (M1: 100%, M2: 97.3%, M3: 100%, M4: 95.5%). Whiddon COM has also

implemented a “You Asked, We Listened” initiative, which highlights student recommendations alongside the actions taken by the COM to address them.

**67) The medical school responds to student feedback on clerkships.**

Regarding the medical school’s response to student feedback on clerkships, 94.3% of students agreed that Whiddon COM responds adequately (M3: 98.6%, M4: 89.6%). Notably, 10.6% of fourth-year students disagreed with this statement, compared to only 1.4% of third-year students. While faculty already communicate changes to student leadership for dissemination, it is recommended to expand communication more broadly. Clerkships could provide more concrete examples of changes made based on student feedback, potentially through a clerkship-specific “You Asked, We Listened” initiative or by incorporating these updates into existing feedback reporting platforms.

**68) The curriculum prepares me to diagnose disease.**

Overall, 98.6% of third- and fourth-year students agreed that the curriculum prepares them to diagnose disease (M3: 98.6%, M4: 98.5%). Students reported that the first and second years provide a foundation in basic science and clinical presentations of disease, while the third year allows them to apply this knowledge in a clinical context. Exposure to a broad range of pathologies enables students to develop and refine clinical reasoning skills with guidance from residents and attending physicians.

**69) The curriculum prepares me to manage disease.**

Overall, 98.6% of third- and fourth-year students agreed that the curriculum prepares them to manage disease (M3: 97.3%, M4: 100%). Students reported gaining foundational knowledge during the pre-clerkship phase, while the majority of management and treatment learning occurs during the clerkship phase. They also noted that residents and attending physicians encourage them to propose next steps in management and provide constructive feedback to support their clinical decision-making.

**70) The curriculum includes education in disease prevention.**

The majority of students (99.7%) reported agreement that the curriculum includes adequate education in disease prevention (M1: 100%, M2: 100%, M3: 98.6%, M4: 100%). In the pre-clerkship phase, students noted that the curriculum provides examples of how lifestyle choices impact health, as well as strategies to prevent and reduce disease risk. Students particularly emphasized the value of the teaching kitchen, which helped them develop skills to recommend healthy lifestyle modifications while considering affordability. In the clerkship phase, students highlighted an emphasis on holistic patient assessment, which supports their ability to counsel patients on preventive strategies tailored to individual circumstances.

**71) The curriculum includes education in health maintenance.**

The majority of students (99.7%) reported agreement that the curriculum provides adequate education in health maintenance (M1: 98.8%, M2: 100%, M3: 100%, M4: 100%). Students reported learning detailed, evidence-based guidance on preventive care, including age-appropriate screening recommendations and vaccination schedules. In

addition, they noted consistent reinforcement of healthy lifestyle behaviors such as nutrition, physical activity, sleep hygiene, and risk factor reduction throughout both the pre-clerkship and clerkship phases.

**72) The curriculum prepares me to care for patients from different backgrounds.**

Overall, 98.6% of students reported agreement that the curriculum prepares them to care for patients from diverse backgrounds (M1: 98.8%, M2: 98.7%, M3: 98.6%, M4: 98.5%). Students noted that the patient population served is broad and diverse, providing meaningful exposure across a wide range of backgrounds and clinical presentations. Early access to clinical environments in the first year was also reported to improve students' comfort and confidence in working with diverse patient populations. These findings are reassuring and suggest that the curriculum effectively prepares students to provide culturally responsive care to a diverse patient population.

**73) The curriculum promotes the development of interprofessional collaborative skills.**

The majority of students (99.7%) reported that the curriculum promotes the development of interprofessional collaborative skills (M1: 100%, M2: 98.7%, M3: 100%, M4: 100%). Students noted early exposure in the pre-clerkship phase to panels and presentations from various healthcare professionals, which helped them understand the roles of different members of the care team in patient management. During the clerkship phase, students reported increased opportunities for direct collaboration with other healthcare professionals, which further strengthened their interprofessional communication and teamwork skills.

### Recommendations

Based on the data and conclusions presented, the ISA Committee recommends the following.

- Continue to support structured training in self-directed learning to ensure students are equipped with effective strategies for independent study. Maintain adequate protected time for self-directed learning across all phases of the curriculum.
- Continue to standardize grading criteria and rubrics across all clerkships to ensure consistency and equity. Continue to provide students with clear, written expectations for how summative assessments are calculated and weighted at the start of each clerkship. Recommend to offer examples of high-, mid-, and low-performing evaluations to improve transparency and understanding of grading standards. Ensure timely release of summative grades with accompanying explanations to enhance clarity.
- Maintain and enhance formative assessments and action feedback so students can adequately self-assess as they progress. Emphasize timely, specific, and actionable feedback that clearly identifies strengths and areas for improvement. Recommend to provide faculty and residents with guidance or training on delivering effective, high-quality feedback. Create opportunities for students to reflect on feedback and develop individualized improvement plans.
- Continue to reinforce the strong foundation in diagnosis, management, prevention, and health maintenance across all phases of the curriculum.

## Summary and Conclusions

This high response rate indicates that the results are highly representative of the student body's opinions. Overall students at Whiddon College of Medicine report satisfaction with the experiences that are provided at this institution.

Overall, students report high satisfaction with their experiences with both the OSA and OME offices. It is recommended to continue fostering open communication and to proactively address student concerns as they arise, ensuring a responsive and supportive environment.

Regarding the learning environment and facilities, students reported that they are generally adequate, particularly in areas related to student safety and access to study and relaxation spaces. However, students identified limited access to computers and secure storage at clinical sites as areas for improvement. The ISA recommends expanding access to these resources at clinical locations to enhance convenience, support workflow efficiency, and improve the overall student experience.

Additionally, students reported high levels of accessibility to library resources, technology support staff, and course materials. Based on these findings, it is recommended to continue maintaining and further enhancing accessibility to these resources in order to sustain high levels of student satisfaction and support academic success.

Students reported overall high accessibility to the services provided. However, they identified limited access to adequate career advising and elective opportunities as areas for improvement. The ISA committee recommends earlier and more structured exposure to career advising, as well as encouraging the OSA to collaborate more closely with specialty faculty advisors to provide students with updated, comprehensive information on specialty-specific requirements. Regarding elective choices, the ISA recommends improving the availability and clarity of information within the current platform, streamlining the selection process, and facilitating greater collaboration between students and faculty to ensure better alignment and scheduling of electives.

Finally, students reported a high level of overall satisfaction with the adequacy of the medical education program. However, they identified inconsistencies in summative assessments during the clerkship phase as an area for improvement. The ISA committee recommends continuing efforts to standardize grading practices across all clerkships to ensure consistency, fairness, and transparency. Additionally, providing examples of evaluations may help clarify expectations and grading standards. To further improve student perceptions of formative assessment, it is recommended to enhance the quality and specificity of feedback provided and to incorporate structured opportunities for students to reflect on feedback, supporting continuous learning and self-improvement.

In conclusion, students at Whiddon COM overwhelmingly report satisfaction with faculty and administrative support, curriculum design, educational resources, learning environment, and safety throughout all four years of their medical training. The ISA Committee recommends increased attention to specialty-specific career and elective planning, access to computers and storage at clinical sites, and clarification of clerkship grading standards to further increase student satisfaction.

## Numerical Tables

### Office of Student Affairs

**Table 1: The members of the OSA are accessible**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	3	4	0	0	72	96
M3	74	100	0	0	0	0	74	100
M4	67	91.8	1	1.5	0	0	66	98.5
Total	296	97	4	1.4	0	0	292	98.6

**Table 2: The OSA leadership and staff are aware of student concerns.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	2	2.6	0	0	73	97.3
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	3	4.5	64	95.5
Total	296	97	2	0.6	3	1	291	98.4

**Table 3: The OSA leadership and staff respond to student problems.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	1	1.3	1	1.3	73	97.3
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	3	4.5	64	95.5
Total	296	97	1	0.3	5	1.7	291	98

## Office of Medical Education

**Table 4: The members of the OME are accessible.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	1	1.4	0	0	74	98.6
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	1	0.3	0	0	295	99.7

**Table 5: The OME leadership and staff are aware of student concerns.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	1	1.3	1	1.3	73	97.4
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	1	1.5	66	98.5
Total	296	97	1	0.3	2	0.7	293	99

**Table 6: The OME leadership and staff respond to student problems.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	1	1.3	1	1.3	73	97.4
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	2	3	65	97
Total	296	97	1	0.3	2	1	292	98.7

## Learning Environment and Facilities

<b>Table 7: The medical school's student mistreatment policy is clear.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	1	1.3	0	0	79	98.7
M2	75	96	1	1.3	0	0	74	98.7
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0	67	100
Total	296	97	2	0.7	1	0.3	293	99

<b>Table 8: I am aware there is a process for reporting student mistreatment or know where to find it.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	2	2.5	78	97.5
M2	75	96	1	1.3	3	4	71	94.7
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0	67	100
Total	296	97	1	0.3	6	2	289	97.6

<b>Table 9: The procedures to report student mistreatment are clear.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	1	1.25	0	0	79	98.75
M2	75	96	1	1.3	0	0	74	98.7
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0	67	100
Total	296	97	2	0.7	1	0.3	293	99

**Table 10: I am aware of the medical school's activities to prevent student mistreatment.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	2	2.5	78	97.5
M2	75	96	1	1.3	2	2.7	72	96
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	4	6	63	94
Total	296	97	1	0.3	9	3	286	96.6

**Table 11: The medical school's activities to prevent student mistreatment are effective.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	2	2.7	1	1.3	72	96
M3	74	100	1	1.4	0	0	73	98.6
M4	67	91.8	3	4.5	4	6	60	89.5
Total	296	97	6	2	5	1.7	285	96.3

**Table 12: I am aware that the medical school investigates/acts on reports of student mistreatment.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	2	2.5	1	1.25	77	96.25
M2	75	96	6	8	1	1.3	68	90.7
M3	74	100	8	10.8	0	0	66	89.2
M4	67	91.8	5	7.5	1	1.5	61	91
Total	296	97	21	7.1	2	1	272	91.9

**Table 13: I feel safe and secure on the medical school campus.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	1	1.3	73	98.6
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	1	0.3	296	99.7

**Table 14: I feel safe and secure at clinical sites.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	3	4	71	96
M4	67	91.8	0	0	2	3	65	97
Total	141	96	0	0	5	3.6	136	96.4

**Table 15: The medical school's pre-clerkship lecture halls and large group classroom facilities are suitable for the educational sessions that are held in them.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	2	2.6	73	97.4
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	4	6	63	94
Total	296	97	0	0	6	2	290	98

**Table 16: The medical school's pre-clerkship small group teaching spaces are suitable for the educational sessions that are held in them.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	1	1.3	79	98.7
M2	75	96	0	0	3	4	72	96
M3	74	100	0	0	4	5.4	70	94.6
M4	67	91.8	0	0	5	7.5	62	92.5
Total	296	97	0	0	13	4.4	283	95.6

**Table 17: The educational/teaching spaces at hospitals are suitable for the sessions that are held in them.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	1	1.5	66	98.6
Total	141	96	0	0	1	0.7	140	99.3

**Table 18: I have access to a relaxation space for pre-clerkship students on the medical school campus.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	3	3.8	77	96.2
M2	75	96	0	0	4	5.3	71	94.7
M3	74	100	0	0	2	2.7	72	97.3
M4	67	91.8	0	0	2	3	65	97
Total	296	97	0	0	11	3.7	285	96.3

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	2	2.5	78	97.5
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	2	2.7	72	97.3
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	5	1.7	291	98.3

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	9	12.2	65	87.8
M4	67	91.8	0	0	6	9	61	91
Total	141	96	0	0	15	10.6	126	89.4

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	3	4	71	96
M4	67	91.8	0	0	3	4.6	64	95.4
Total	141	96	0	0	6	4.3	135	95.7

**Table 22: I have access to secure storage space for my personal belongings on the medical school campus.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	1	1.25	2	2.5	77	96.25
M2	75	96	0	0	4	5.3	71	94.7
M3	74	100	0	0	2	2.7	72	97.3
M4	67	91.8	0	0	2	3	65	97
Total	296	97	1	0.3	10	3.4	285	96.3

**Table 23: I have access to secure storage space for my personal belongings at hospitals/clinical sites.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	8	10.8	66	89.2
M4	67	91.8	0	0	6	9	61	91
Total	141	96	0	0	14	10	127	90

**Table 24: I have access to research opportunities.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	1	1.25	0	0	79	98.75
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	4	5.4	70	94.6
M4	67	91.8	0	0	0	0	67	100
Total	296	97	1	0.3	5	1.7	291	98.3

**Table 25: The medical school supports student participation in research.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	1	1.25	79	98.75
M2	75	96	0	0	3	4	72	96
M3	74	100	1	1.4	3	4	70	94.6
M4	67	91.8	0	0	1	1.5	66	98.5
Total	296	97	1	0.3	8	2.7	287	97

**Table 26: I have access to service-learning/community service opportunities.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	1	0.3	295	99.7

## Library and Information Resources

**Table 27: I am able to access library resources and holdings from any location on and off the medical school campus.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	4	5.4	70	94.6
M4	67	91.8	0	0	1	1.5	66	98.5
Total	296	97	0	0	6	2	290	98

**Table 28: I have access to library support personnel and services.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	0	0	75	100
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	1	0.3	295	99.7

**Table 29: I have access to support from technology staff.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	1	1.3	79	98.7
M2	75	96	0	0	0	0	75	100
M3	74	100	1	1.4	0	0	73	98.6
M4	67	91.8	1	1.5	0	0	66	98.5
Total	296	97	2	0.7	1	0.3	293	99

**Table 30: I can access online course and clerkship instructional materials from any location on and off the medical school campus.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	1	0.3	295	99.7

## Student Services

**Table 31: I am able to access personal health care services during the pre-clerkship phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	1	1.3	79	98.7
M2	75	96	0	0	0	0	75	100
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	1	0.3	295	99.7

**Table 32: I am able to access personal health care services during the clerkship phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	5	7	69	93
M4	67	91.8	0	0	3	4.5	64	95.5
Total	141	96	0	0	8	5.7	133	94.3

**Table 33: I am able to access personal counseling/mental health services during the pre-clerkship phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	0	0	75	100
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	0	0	296	100

**Table 34: I am able to access personal counseling/mental health services during the clerkship phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	2	0	72	97.2
M4	67	91.8	0	0	1	0	66	98.5
Total	141	96	0	0	3	2.1	138	97.9

**Table 35: Mental health services available through the medical school are confidential.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	2	2.7	0	0	73	97.3
M3	74	100	1	1.4	0	0	73	98.6
M4	67	91.8	0	0	3	4.5	64	95.5
Total	296	97	3	1	3	1	290	98

**Table 36: Student well-being programs are available in the pre-clerkship phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	1	1.25	79	98.75
M2	75	96	0	0	0	0	75	100
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	1	0.3	295	99.7

**Table 37: Student well-being programs are available in the clerkship phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0	67	100
Total	141	96	0	0	1	0.7	140	99.3

**Table 38: The medical school has a coordinated career advising system that spans all years of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	2	2.5	78	97.5
M2	75	96	1	1.4	2	2.6	72	96
M3	74	100	1	1.4	1	1.4	72	97.2
M4	67	91.8	0	0	6	9	61	91
Total	296	97	2	0.7	11	3.7	283	95.6

**Table 39: The medical school's career advising system includes access to knowledgeable advisors.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	1	1.25	0	0	79	98.75
M2	75	96	1	1.4	1	1.4	73	97.2
M3	74	100	0	0	0	0	74	100
M4	67	91.8	3	4.5	11	16.4	53	79.1
Total	296	97	5	1.7	12	4	279	94.3

<b>Table 40: The medical school has an effective system for advising about elective choices.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	4	5	1	1.2	75	93.8
M2	75	96	2	2.6	1	1.4	72	96
M3	74	100	2	2.7	5	6.8	67	90.5
M4	67	91.8	0	0	12	17.9	55	82.1
Total	296	97	8	2.7	19	6.4	269	90.9

<b>Table 41: I have access to knowledgeable and helpful financial aid services personnel.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	1	1.4	74	98.6
M3	74	100	0	0	2	2.7	72	97.3
M4	67	91.8	1	1.5	2	3	64	95.5
Total	296	97	1	0.3	5	1.7	290	98

<b>Table 42: Academic advising is available to me during all years of the medical education program.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	0	0	1	1.4	74	98.6
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	2	3	65	95.6
Total	296	97	0	0	3	1	293	99

**Table 43: If I am experiencing academic difficulty, academic counseling is available to me during all years of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	1	1.25	79	98.75
M2	75	96	0	0	0	0	75	100
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	0	0	1	0.3	295	99.7

**Table 44: Tutorial help is available to me during all years of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0	80	100
M2	75	96	1	1.3	2	2.6	72	96.1
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	1	1.5	66	98.5
Total	296	97	1	0.3	4	1.4	291	98.3

**Table 45: I am taught how to prevent exposure to infectious and environmental hazards before I begin seeing patients.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	1	1.25	0	0	79	98.75
M2	75	96	1	1.3	1	1.3	73	97.4
M3	74	100	0	0	0	0	74	100
M4	67	91.8	0	0	0	0	67	100
Total	296	97	2	0.6	1	0.3	293	99.1

**Table 46: I am aware of or have ready access to the procedures to follow after potential exposure to an infectious or environmental hazard.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	1	1.25	1	1.25	78	97.5
M2	75	96	2	2.7	1	1.3	72	96
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0	67	100
Total	296	97	3	1	3	1	290	98

## Medical Education Program

**Table 47: I am aware of the school's medical education program objectives.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0.0	67	100.0
Total	296	97	0	0	2	0.7	294	99.3

**Table 48: I receive adequate clinical skills instruction in the pre-clerkship phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	4	5.3	71	94.7
M3	74	100	0	0	3	4.1	71	95.9
M4	67	91.8	0	0	2	3.0	65	97.0
Total	296	97	0	0	9	3.0	287	97.0

**Table 49: The amount of formative feedback in the pre-clerkship phase is sufficient to allow me to self-assess how I am progressing in the courses of this phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0.0	0	0.0	80	100.0
M2	75	96	1	1.3	3	4.0	71	94.7
M3	74	100	0	0.0	4	5.4	70	94.6
M4	67	91.8	0	0.0	2	3.0	65	97.0
Total	296	97	1	0.3	9	3.0	286	96.6

**Table 50: The quality of formative feedback in the pre-clerkship phase allows me to identify areas in which I need to improve as I progress through this phase of the curriculum.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	2	2.5	78	97.5
M2	75	96	0	0	7	9.3	68	90.7
M3	74	100	0	0	4	5.4	70	94.6
M4	67	91.8	0	0	5	7.5	62	92.5
Total	296	97	0	0	18	6.1	278	93.9

**Table 51: Pre-clerkship summative assessments are pertinent to the course objectives and content taught in the courses of this phase of the medical education program.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0.0	67	100.0
Total	296	97	0	0	2	0.7	294	99.3

**Table 52: The curriculum provides sufficient practice in the skills of self-directed learning as defined by the LCME.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	1	1.3	79	98.8
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0.0	67	100.0
Total	296	97	0	0	3	1.0	293	99.0

**Table 53: There is adequate available time in the pre-clerkship phase for self-directed learning and other types of preparatory assignments.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	0	0.0	75	100.0
M3	74	100	0	0	4	5.4	70	94.6
M4	67	91.8	0	0	3	4.5	64	95.5
Total	296	97	0	0	7	2.4	289	97.6

**Table 54: Student workload in the pre-clerkship phase is manageable.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	0	0.0	75	100.0
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	2	3.0	65	97.0
Total	296	97	0	0	3	1.0	293	99.0

**Table 55: Curriculum content in the pre-clerkship phase is coordinated/integrated within and across courses.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	4	5.4	70	94.6
M4	67	91.8	0	0	2	3.0	65	97.0
Total	296	97	0	0	7	2.4	289	97.6

**Table 56: The pre-clerkship phase prepared me for the clerkship phase of the curriculum.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	2	2.7	72	97.3
M4	67	91.8	0	0	3	4.5	64	95.5
Total	141	96	0	0	5	3.5	136	96.5

**Table 57: The overall quality of the required clerkships is satisfactory.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	2	3.0	65	97.0
Total	141	96	0	0	3	2.1	138	97.9

**Table 58: I have sufficient access to patients during the required clerkships to complete the required clinical encounters/skills and to meet the clerkship objectives.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	0	0.0	74	100.0
M4	67	91.8	0	0	0	0.0	67	100.0
Total	141	96	0	0	0	0.0	141	100.0

**Table 59: Student workload in the required clerkships is manageable.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	5	6.8	69	93.2
M4	67	91.8	0	0	5	7.5	62	92.5
Total	141	96	0	0	10	7.1	131	92.9

**Table 60: I am appropriately supervised in clinical settings.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0	0	0.0	67	100.0
Total	141	96	0	0	1	0.7	140	99.3

**Table 61: The amount of formative feedback in the clerkship phase allows me to self-assess how I am progressing in the required clerkships of this phase.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	1	1.4	5	6.8	69	93.2
M4	67	91.8	0	0	4	6.0	63	94.0
Total	141	96	1	0.7	9	6.4	132	93.6

**Table 62: The quality of formative feedback in the clerkship phase allows me to identify areas in which I need to improve as I progress through this phase of the curriculum.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0.0	5	6.8	69	93.2
M4	67	91.8	0	0	5	7.5	62	92.5
Total	141	96	0	0.0	10	7.1	131	92.9

**Table 63: The manner in which summative assessments are used to determine a clerkship grade is clear and consistent.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0.0	2	2.7	72	97.3
M4	67	91.8	0	0	8	11.9	59	88.1
Total	141	96	0	0.0	10	7.1	131	92.9

**Table 64: The policies for advancement/graduation are clear.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	0	0.0	75	100.0
M3	74	100	0	0	0	0.0	74	100.0
M4	67	91.8	0	0	1	1.5	66	98.5
Total	296	97	0	0	1	0.3	295	99.7

**Table 65: I am aware there is a process for reviewing and challenging my academic record or know where to find it.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	2	2.5	78	97.5
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	4	5.4	70	94.6
M4	67	91.8	1	1.5	6	9.0	60	89.6
Total	296	97	1	0.3	13	4.4	282	95.3

<b>Table 66: The medical school responds to student feedback on courses.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	2	2.7	73	97.3
M3	74	100	0	0	0	0.0	74	100.0
M4	67	91.8	0	0.0	3	4.5	64	95.5
Total	296	97	0	0.0	5	1.7	291	98.3

<b>Table 67: The medical school responds to student feedback on clerkships.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0.0	1	1.4	73	98.6
M4	67	91.8	0	0	7	10.4	60	89.6
Total	141	96	0	0.0	8	5.7	133	94.3

<b>Table 68: The curriculum prepares me to diagnose disease.</b>								
Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0.0	1	1.4	73	98.6
M4	67	91.8	0	0	1	1.5	66	98.5
Total	141	96	0	0.0	2	1.4	139	98.6

**Table 69: The curriculum prepares me to manage disease.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M3	74	100	0	0.0	2	2.7	72	97.3
M4	67	91.8	0	0	0	0.0	67	100.0
Total	141	96	0	0.0	2	1.4	139	98.6

**Table 70: The curriculum includes education in disease prevention.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	0	0.0	75	100.0
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0.0	0	0.0	67	100.0
Total	296	97	0	0.0	1	0.3	295	99.7

**Table 71: The curriculum includes education in health maintenance.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	1	1.3	79	98.8
M2	75	96	0	0	0	0.0	75	100.0
M3	74	100	0	0	0	0.0	74	100.0
M4	67	91.8	0	0.0	0	0.0	67	100.0
Total	296	97	0	0.0	1	0.3	295	99.7

**Table 72: The curriculum prepares me to care for patients from different backgrounds.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	79	98.8
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	1	1.4	73	98.6
M4	67	91.8	0	0.0	1	1.5	66	98.5
Total	296	97	0	0.0	3	1.0	292	98.6

**Table 73: The curriculum promotes the development of interprofessional collaborative skills.**

Medical School Class	Number of Total Responses/Response Rate to this Item		Number and % of N/A Responses		Number and % of Disagree Responses		Number and % of Agree Responses	
	N	%	N	%	N	%	N	%
M1	80	100	0	0	0	0.0	80	100.0
M2	75	96	0	0	1	1.3	74	98.7
M3	74	100	0	0	0	0.0	74	100.0
M4	67	91.8	0	0.0	0	0.0	67	100.0
Total	296	97	0	0.0	1	0.3	295	99.7