

U.S. Department of Education



**Staff Analysis
of the
Standards Used by**

Grenada

for the Evaluation of Medical Schools

March 9, 2001

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Background

At its September 1996 meeting, the National Committee on Foreign Medical Education and Accreditation (NCFMEA) determined that the standards used by the New York State Department of Education (NYSED), Office of the Professions, to evaluate St. George's University School of Medicine in Grenada (for the purpose of placing St. George's students in clinical clerkships in teaching hospitals in New York State) in conjunction with the standards used by Grenada's Ministry of Health, Housing, and the Environment to evaluate and approve clinical clerkships for St. George's students outside of New York, were comparable to those used to evaluate medical schools in the United States. However, because Grenada had only fairly recently contracted with an independent medical expert¹ to conduct evaluations of those clerkships outside of New York using the New York standards, the Committee requested a report by September 1, 1997 on the results of those evaluations. That report was reviewed and accepted at the October 1997 NCFMEA meeting.

In response to the Secretary's request that Grenada provide information on its current accreditation/approval process for a re-evaluation of those processes, the country stated that there were no changes from its 1996 submission and therefore, the Secretary should consider that response in conducting the current review. Department of Education staff obtained and used a current copy of the NYSED guidelines for approving foreign medical schools in conducting its current analysis.

Summary of Findings

The standards and processes used by Grenada/NYSED to evaluate and approve Grenada's sole medical school, St. George's University School of Medicine, and its clinical sites are quite similar to those used to evaluate and accredit medical schools in the United States.

¹ Grenada has contracted with a former employee of the New York State Education Department to perform an inspection of the clinical component of St. George's medical program that takes place in Michigan and the United Kingdom. Documents provided by Grenada indicate that this is an ongoing process.

Staff Analysis

The National Committee on Foreign Medical Education and Accreditation is charged with determining whether the standards of accreditation used by a foreign country to accredit medical schools offering programs leading to the M.D. (or equivalent) degree are comparable to standards of accreditation applied to M.D. programs in the United States.

In making this determination, the Committee uses the following guidelines which it has determined provide an appropriate framework for the thorough evaluation of medical schools offering programs leading to the M.D. (or equivalent) degree. The Committee wishes to make it clear that these are in fact guidelines and that a foreign country's review and approval process can differ substantially from these guidelines and still be determined to be comparable to the standards used in the United States, provided the foreign country can demonstrate that its standards and processes of evaluation are effective alternatives to those used in the United States.

NOTE: In the analysis that follows, the term "Guide" refers to the three principal documents containing the regulations and guidelines; they also contain fairly detailed discussions of the interpretations of those regulations and guidelines. The three documents are the Guide for Foreign Medical Schools Seeking to Operate in New York State, A Guide for Use in the Evaluation of Foreign Medical Schools, and Questions Related to the Evaluation of Foreign Medical Schools. The term "data base document" refers to the questionnaire foreign medical schools must fill out as part of their application for approval. It is comparable to the LCME survey.

PART I: The Entity Responsible for the Accreditation/Approval of Medical Schools

There should be a clearly designated body responsible for evaluating the quality of medical education in the foreign country, and that body should have clear authority to accredit/approve medical schools in the country that offer educational programs leading to the M.D. (or equivalent) degree.

In its original application, the Grenadian Permanent Secretary stated that the Grenadian standards and process are the same as those of the State of New York. It is important to clarify, however, that Grenada does not use the NYSED standards and process as the basis for conducting its own evaluation of the medical program at St. George's University School of Medicine. Rather, Grenada basically relies on NYSED to conduct the evaluation of the medical school, using the standards and processes that NYSED has developed for the approval of foreign medical schools wishing to establish clerkships in NY state

hospitals. Gernada's Ministry of Health, Housing, and the Environment then contracts to have a third-party evaluator conduct evaluations of clinical sites located in New Jersey, Michigan, and the United Kingdom using the same standards. Approximately 85 to 95 percent of the University's students do their clinical clerkships in New York or New Jersey. About five percent do their clerkships in Michigan and the rest in the United Kingdom. Both NYSED and the third-party evaluator provide Gernada with copies of evaluation reports.

The Guide requires that the medical program offered by foreign medical schools be recognized as an acceptable training program for physicians by the appropriate civil authorities of the country in which it is located. It further stipulates that the institution must be "listed in one or more of the generally accepted resource volumes on international education" and its program must be "legally recognized and approved for the training of physicians by the competent authorities of the jurisdiction in which it is located."

NYSED's data base document requires foreign medical schools to provide evidence that they have the legal authority to operate a school of medicine.

The 1995 on-site evaluation team report of NYSED's visit to St. George's provides evidence that NYSED does examine whether foreign medical schools have the proper legal authority to operate a school of medicine and are listed in generally accepted resource volumes on international education.

PART II: Accreditation/Approval Standards

The entity with the foreign country that is responsible for evaluating the quality of medical education in the country and has authority to accredit/approve medical schools should have standards comparable to the following:

1. Mission and Objectives

- (a) The educational mission of the medical school must serve the general public interest, and its educational objectives must support the mission. The medical School's educational program must be appropriate in light of the mission and objectives of the school.**
- (b) An essential objective of a program of medical education leading to the M.D. (or equivalent) degree must be to prepare graduate to enter and complete graduate medical education, qualify for licensure, provide competent medical care, and have an educational background necessary for continued learning.**

According to the Guide, the purpose of NYSED's evaluation of foreign medical schools is to provide assurances that students who participate in clinical clerkships in New York State are functioning with an adequate framework of medical education and have the basic competencies necessary to perform with safety for the public. Further, the Guide requires "a complete educational program, the structure and content of which provide an adequate foundation in the basic and clinical sciences." The Guide also incorporates LCME's standard for educational programs leading to the M.D. degree, which require a breadth and depth of program sufficient to serve the general public interest. Thus, there is general assurance in the written materials describing NYSED's approval process that it requires foreign medical schools to serve the general public interest.

The 1995 on-site evaluation team report of NYSED's visit to St. George's provides evidence that NYSED does in fact examine whether a medical school seeking approval to offer clinical clerkships in New York serves the general public interest.

2. Governance

- (a) The medical school must be legally authorized to provide a program of medical education in the country in which it is located.**
- (b) There must be an appropriate accountability of the management of the medical school to an ultimate responsible authority external to and independent of the school's administration. This external authority must have sufficient understanding of the medical program to develop policies in the interest of both the medical school and the public.**

The Guide requires the medical program offered by foreign medical schools to be recognized as an acceptable training program for physicians by the appropriate civil authorities of the country in which it is located. NYSED further stipulates that the institution must be "listed in one or more of the generally accepted resource volumes on international education" and its program must be "legally recognized and approved for the training of physicians by the competent authorities of the jurisdiction in which it is located."

NYSED's data base document requires foreign medical schools to provide evidence that they have the legal authority to operate a school of medicine.

The Guide does not address the issue of the school's management being accountable to an external authority independent of the school's administration.

3. Administration

- (a) The administration of the medical school must be effective and appropriate in light of the school's mission and objectives.**
 - (i) There must be sufficient administrative personnel to ensure the effective administration of admissions, student affairs, academic affairs, hospital and other health facility relationships, business and planning, and the other administrative functions that the medical school performs.**
 - (ii) The chief academic officer of the medical school must have sufficient authority provided by the institution to administer the educational program. That individual must also have ready access to the university president or other university official charged with final responsibility for the school, and to other university officials as are necessary to fulfill the responsibilities of the chief academic officer's office.**
 - (iii) In affiliated institutions, the medical school's department heads and senior clinical faculty members must have authority consistent with their responsibility for the instruction of students.**

As mentioned in the previous section, the Guide requires that "an administrative and governing system is provided which allows the school to accomplish its objectives." It also contains a fairly extensive set of questions on administration designed to serve as a point of reference for on-site evaluators in assessing the effectiveness and appropriateness of the school's administration. The questions also allow evaluators to determine whether the chief academic officer is qualified by experience and training to provide leadership in medical education and to determine whether the functions, responsibilities and authority of senior administrative staff are clearly defined.

NYSED's data base document requires foreign medical schools to provide detailed information on the administration of the medical school, including the curriculum vitae of the key members of the administration and the organization of the faculty (departmental as well as committee structure).

- (b) The chief academic official of the medical school must be qualified by education and experience to provide leadership in medical education.**

The Guide incorporates the LCME standard for administration, including the section on the qualifications of the dean. The Guide also provides a set of questions for evaluators to use in examining the qualifications of the chief academic official and other key academic and clinical administrators.

NYSED's data base document requires foreign medical schools to provide the curriculum vitae of the chief academic officer as well as the deans of academic and clinical affairs and any other major officers of academic affairs.

One of the questions that foreign schools must respond to is "is the chief academic officer qualified by education and experience to provide leadership in medical education, in scholarly activity and research, and in the care of patients."

- (c) The medical school may determine the administrative structure that best suits its mission and objectives, but that structure must ensure that the faculty is appropriately involved in decisions related to--**
 - (i) Admissions;**
 - (ii) Hiring, retention, promotion, and discipline of faculty; and**
 - (iii) All phases of the curriculum, including the clinical education portion;**

The questionnaire used by NYSED requires information on the role of faculty in selecting students for admission to medical schools and whether both basic science and clinical faculty are involved in the selection of students. Further, the questionnaire also requires schools to provide information on the involvement of faculty in the appointment of new staff.

- (d) If some components of the educational program are conducted at sites that are geographically separated from the main campus of the medical school, the school must have appropriate mechanisms in place to ensure that--**
 - (i) The educational experiences at all geographically separated sites are comparable in quality to those at the main campus; and**
 - (ii) There is consistency in student evaluations at all sites.**

NYSED evaluates educational quality at each clinical site in NY. The NYSED also requires schools to provide extensive information on how students are evaluated as well as the involvement of the faculty in student evaluations.

4. Educational Program

- (a) **Duration:** The program of education leading to the M.D. (or equivalent) degree must include at least 130 weeks of instruction, scheduled over a minimum of four calendar years.

In order to receive approval for students to participate in clinical clerkships in sites within the State of New York, schools must demonstrate that the medical education program offered is at least 32 months in length.

- (b) **Curricular Content:** The medical school's curriculum must provide students with general professional education, i.e. the knowledge and skills necessary to become a qualified physician. At a minimum, the curriculum must provide education in the following:

(I) The sciences basic to medicine, including—

- (A) The contemporary content of those expanded disciplines that have traditionally been titled anatomy, biochemistry, physiology, microbiology and immunology, pathology, pharmacology and therapeutics, and preventive medicine; and

- (B) Laboratory or other practical exercises that facilitate the ability to make accurate quantitative observations of biomedical phenomena and critical analyses of data.

The Guide states that its guidelines are based, in part, on the LCME standard for an educational program for the M.D. degree, including the section that specifies the content of the curriculum. The Guide also contains a discussion of the approval criteria for the curriculum, which addresses issues such as its breadth and depth. The Guide states that each medical program must include a system for assuring that all portions of the program include sufficient instruction in the necessary subjects and provide an adequate foundation in the basic and clinical sciences. Finally, the Guide provides a set of questions for evaluators to use in examining whether the curriculum contains the required breadth and depth. Included in the questions is a requirement that a foreign medical school include coursework in anatomy, biochemistry, physiology, microbiology, immunology, pathology, pharmacology and therapeutics, and preventive medicine.

The Guide also requires that sufficient laboratory work complement classroom lectures. The questions also ask the school to provide information that would ensure the adequacy of laboratory facilities to allow the medical school to accomplish its mission.

NYSED's data base document requires schools to provide detailed information on the content of the curriculum and the year each component is offered.

- (ii) **A variety of clinical subjects, including at least the core subjects of internal medicine, obstetrics and gynecology, pediatrics, surgery, and psychiatry and, preferably, family medicine.**

Note 1: Medical schools that do not require clinical experience in one or another of the above disciplines must ensure that their students possess the knowledge and clinical abilities to enter any field of graduate medical education.

Note 2: Clinical instruction must cover all organ systems and include aspects of acute, chronic, continuing, preventive, and rehabilitative care.

Note 3: The medical school's program of clinical instruction must be designed to equip students with the knowledge, skills, attitudes, and behaviors necessary for further training in the practice of medicine.

Note 4: Instruction and experience in patient care must be provided in both ambulatory and hospital settings.

Note 5: Each required clinical clerkship (or equivalent) must allow the student to undertake thorough study of a series of selected patients having the major and common types of disease problems represented in the clerkship.

Clinical clerkships for the sole medical school in Grenada are provided in teaching hospitals in New York under formal affiliation agreements and with the approval of the NYSED, Office of the Professions. The New Jersey Board of Medical Examiners has granted similar approval for clinical clerkships at specific hospitals in that state, based largely on the findings and conclusions of New York with respect to the University's medical program. Michigan has also granted approval for clinical clerkships at specific hospitals in that state. Likewise, the United Kingdom permits the University to place students in clinical clerkships at certain hospitals in that country.

It is the school's policy that all core rotations (defined as Internal medicine, surgery, obstetrics/gynecology, pediatrics, and psychiatry) must be taken in the university's affiliated hospitals in the three states mentioned and the United Kingdom and only where there exists residency training programs approved by the American Council on Graduate Medical Education (ACGME), or their British equivalent.

The University has on staff, two Deans of Clinical Studies whose specific responsibilities include such areas as the screening and recruitment of hospitals for clinical programs, the curriculum for the clinical program, the requirements for the successful completion of both core rotations and electives, the grading system for the clinical programs, the placement of students in the programs, and the overall supervision of students in the core rotations.

- (iii) Disciplines that support the fundamental clinical subjects, such as diagnostic imaging and clinical pathology.**

No information could be found on this issue.

- (iv) Ethical, behavioral, and socioeconomic subjects pertinent to medicine.**

The NYSED documentation is silent on this issue. However, discussions with NYSED staff revealed that during the on-site review, the team does review the curriculum to ensure that these topics are covered.

- (v) Communications skills integral to the education and effective function of physicians, including communication with patients, families, colleagues, and other health professionals.**

The NYSED documentation is silent on this issue. However, discussions with NYSED staff revealed that during the on-site review, the team does review the curriculum to ensure that these topics are covered.

(c) Design, Implementation, and Evaluation:

- (i) There must be integrated responsibility by faculty within the medical school for the design, implementation, and periodic evaluation of all aspects of the curriculum, including both basic sciences and clinical education.**

- (ii) The medical school must regularly evaluate the effectiveness of its medical program by documenting the achievement of its students and graduates in verifiable ways that show the extent to which institutional and program purposes are met. The school should use a variety of measures to evaluate program quality, such as data on student performance, academic progress and graduation, acceptance into residency programs, and postgraduate performance; the licensure of graduates, particularly in relation to any national norms; and any other measures that are appropriate and valid in light of the school's mission and objectives.**

The Guide, while not specifically incorporating the LCME standard for faculty, does include the LCME standard for administration, which addresses the role of faculty in the design, implementation, and evaluation of the curriculum. The Guide also contains very specific standards for faculty, including standards for qualifications, experience, research, and teaching effectiveness. Finally, the Guide provides a set of questions for evaluators to use in examining the faculty of a medical school, including questions directed toward ascertaining whether there is a faculty committee responsible for the curriculum, whether the faculty are responsible for setting the objectives of the curriculum, and the extent of the interaction between basic science and clinical faculty.

The Guide incorporates many parts of the LCME standards for an education program for the M.D. degree, including the section on evaluation of student achievement. The Guide also provides questions for evaluators to use in examining a school's system for evaluating students. These questions ascertain the system for measuring student success, the involvement of the faculty in evaluating student achievement, the instruments used for measuring student achievement, and whether the school has the means by which achievement of curriculum objectives is measured and achieved.

The Guide notes that schools must maintain records of student performance in the medical school program including any additional post-graduate study and employment to show that the program is effectively meeting its stated objectives. The data base document requires submission of USMLE scores for the past five years; however, there was no indication that placement into residency programs or licensure of graduates is tracked.

5. Medical Students

(a) Admissions, Recruiting, and Publications

- (i) The medical school must admit only those new and transfer students who possess the intelligence, integrity, and personal**

and emotional characteristics that are generally perceived as necessary to become effective physicians.

- (ii) A medical school's publications, advertising, and student recruitment must present a balanced and accurate representation of the mission and objectives of its educational program. Its catalog (or equivalent document) must provide an accurate description of the school, its educational program, its admissions requirements for students (both new and transfer), the criteria it uses to determine that a student is making satisfactory academic progress in the medical program, and its requirements for the award of the M.D. degree (or equivalent).
- (iii) Unless prohibited by law, student records must be available for review by the student and an opportunity provided to challenge their accuracy. Applicable law must govern the confidentiality of student records.

The Guide contains a fairly extensive discussion of its own approval criteria for this area, including such topics as admissions, student evaluations, and advisement. Finally, the Guide provides a set of questions for evaluators to use in examining these topics. The questions address all aspects of the admissions process and require schools to show that transfer students accepted for admittance have "demonstrated achievements in college or another medical school that are comparable to those of the students in the class they seek to join." The Guide notes that information on admissions, the program, faculty, and clinical resources are to be placed in the catalog. The Guide also requires schools to ensure that all faculty and student records are available to the respective parties and are well maintained.

NYSED's data base document requires schools to provide detailed information on admissions and transfer policies, entering students' grade point averages and mean new MCAT scores, attrition rates, etc.

(b) Evaluation of Student Achievement

- (i) The medical school faculty must establish principles and methods for the evaluation of student achievement, including the criteria for satisfactory academic progress and the requirements for graduation.
- (ii) The medical school's evaluation of student achievement must employ a variety of measures of student knowledge, competence, and performance, systematically and sequentially

applied throughout the medical program, including the clinical clerkships.

- (iii) The medical school must carefully monitor the progress of students throughout their educational program, including each course and clinical clerkship, must promote only those who make satisfactory academic progress, and must graduate only those students who successfully complete the program.

As noted above, the Guide addresses the area of evaluation of student achievement. The Guide notes that schools must maintain records of student performance in the medical school program including any additional post-graduate study and employment to show that the program is effectively meeting its stated objectives. The Guide also provides questions for evaluators to use in examining a school's system for evaluating students including their basic science coursework and clinical training. These questions ascertain the system for measuring student success, the involvement of the faculty in evaluating student achievement, the instruments used for measuring student achievement, and whether the school has the means by which achievement of curriculum objectives is measured and achieved.

(c) Student Services

Students must have access to preventive and therapeutic health services, including confidential mental health counseling. Policies must include education, prevention, and management of exposure to infectious diseases during the course of the educational program

The Guide states that each school must maintain adequate student services. The Guide is not specific on the extent of student services that must be provided; however, student services are evaluated as evidenced by the evaluation conducted by the NYSED team in 1995 which indicated that they reviewed the student services offered by the college.

6. Resources for the Educational Program

- (a) **Finances:** The medical school must have adequate financial resources for the size and scope of its educational program.
- (b) **Facilities:**
 - (i) The medical school must have, or be assured use of, physical facilities and equipment, including clinical teaching facilities, that are quantitatively and qualitatively adequate for the size and

scope of the educational program, as well as the size of the student body.

- (ii) The medical school should be encouraged to conduct biomedical research and must provide facilities for the humane care of animals when animals are used in teaching and research.**

The Guide requires demonstration that sufficient financial resources are available to allow schools to meet their stated mission. Each school must also have a financial management system in place to ensure that the effective operation of the medical school is not compromised. The NYSED questionnaire that each school must submit includes information on the financial condition of the school.

Schools must also demonstrate that sufficient facilities exist to support the students, administration, and faculty. Facilities include faculty offices, laboratories, student classrooms, and libraries. Teams are to look at the number, design, condition, and accessibility of the facilities in making a determination as to their sufficiency in allowing the school to adequately support the objectives of the medical program. The data base document requires countries to provide information on the facilities available.

The Guide also provides a number of questions addressing the quantity and quality of the foreign medical school's physical facilities.

The Guide does not directly address the issue of biomedical research or the humane care of animals when animals are used in teaching and research; however, the evaluator questions do address the research issue. Further, the 1995 team report did discuss the research efforts undertaken by the medical school.

(c) Faculty:

- (i) Members of the medical school's faculty must be appropriately qualified to teach in a medical program leading to the M.D. (or equivalent) degree and effective in their teaching. The faculty must be of sufficient size, breadth, and depth to provide the scope of the educational program offered.**
- (ii) The medical school should have policies that deal with circumstances in which the private interests of its faculty or staff may conflict with their official responsibilities.**

The Guide requires a school to have on its faculty "a sufficient number of representatives of the biological, behavioral, and clinical sciences to implement the objectives of the Institution." The Guide further states that "[s]ince the

composition of the faculty relates directly to the objectives and goals of the school, it is the responsibility of that institution to provide a sufficient number of faculty of appropriate quality to assure that the educational obligations to the students are fulfilled. In order to meet these obligations, the faculty must have demonstrated competence in the biological, behavioral, and clinical sciences. The competence of the faculty to offer the courses and to discharge the other academic responsibilities which are assigned to them shall be demonstrated by training, earned degrees, scholarships, experience, teaching ability, and the ability to advance knowledge." The Guide also provides a set of questions for evaluators to use in assessing the quality and quantity of a foreign medical school's faculty. NYSED's data base document (questionnaire) requires schools to provide extensive documentation on the quantity and quality of faculty.

The 1995 on-site evaluation team report of NYSED's site visit to St. George's University School of Medicine provides evidence that NYSED conducts an extensive evaluation of the quantitative and qualitative aspects of a foreign medical school's faculty.

There was no mention in the Guide regarding faculty conflicts of interest and no reference to this issue was found in any of the documents.

- (d) **Library: The medical school must have a library sufficient in size, breadth, and depth to support the educational program and adequately and professionally staffed.**

The Guide contains the following general statement with respect to libraries:

"The library should have sufficient funds, staff, holdings, and equipment. The library should hold the important books and journals appropriate to the field of study, degree level, course offerings, and research requirements. There should be professional staff sufficient to assist students and to keep the collection current. The library should be open at hours convenient to students."

The Guide also incorporates the LCME standards for library. Finally, the Guide provides a set of questions for evaluators to use in assessing the foreign medical school's library.

NYSED's data base document requires foreign medical schools to provide detailed information concerning their libraries, including information on the specific holdings of the medical school or health center library, the university hospital library, and the libraries of all affiliated hospitals.

The 1995 on-site evaluation team report of NYSED's site visit to St. George's University School of Medicine provides evidence that NYSED conducts a thorough evaluation of the adequacy of a foreign medical school's library.

(e) Clinical Teaching Facilities The medical school should have affiliation agreements with each teaching hospital or clinical facility it uses that define the responsibilities of each party.

The NYSED has granted approval to the University to place students in clinical clerkships in those teaching hospitals in the State of New York with which the University has established a formal affiliation agreement. The affiliation agreement must meet the New York requirements for such agreements.

The New Jersey Board of Medical Examiners has granted similar approval for clinical clerkships at specific hospitals in that state, based largely on the findings and conclusions of New York with respect to the University's medical program. Michigan has also granted approval for clinical clerkships at specific hospitals in that state. Likewise, the United Kingdom permits St. George's to place students in clinical clerkships at certain hospitals in that country.

No information was given regarding affiliation agreements with clinical sites outside of New York and New Jersey.

PART III: Accreditation/Approval Processes and Procedures

The entity within the foreign country that is responsible for evaluating the quality of medical education in the country and has authority to accredit/approve medical schools should have processes and procedures for granting accreditation/approval to medical schools that are comparable to the following:

1. Site Visit

The accreditation/approval process must include a thorough on-site review of the school (and all its geographically separated sites, if any) during which sufficient information is collected to determine if the school is in fact operating in compliance with the accreditation/approval standards. This review should include, among other things, an analysis of the admission process, the curriculum, the qualifications of the faculty, the achievement of students and graduates, the facilities available to medical students (including the training facilities), and the academic support resources available to students.

The Guide requires a thorough on-site review of any foreign medical school before that school may be approved to place students in clinical internships in the State of New York. According to the Guide, "the site visit will include, among other things, an evaluation of:

- a. The depth and breadth of the curriculum and the integration of the basic science component with the clinical component of the program;
- b. The administrative and governing system of the institution;
- c. The faculty, both basic science and clinical;
- d. The standards for admission, the maintenance of student records, and the provision for student services;
- e. The basic sciences facilities including faculty offices, laboratories, classrooms and libraries and other supporting basic science instruction; and
- f. The clinical facilities both in the home country and in New York State."

In the case of the medical school located in Grenada, NYSED's evaluation team visited the campus in 1995 to evaluate the school's program of medical education - primarily the basic medical sciences program - that prepares students for clinical training. There were also visits to Bay Shore, New York (headquarters for the school's clinical program in New York) and affiliated hospitals in New York State to (1) evaluate the clinical training provided at the University's affiliated hospitals, (2) review faculty and student records, and (3) meet with academic and administrative officers regarding the structure for monitoring and supervising the clinical training that takes place in New York.

As previously mentioned, Grenada has contracted with an independent expert to evaluate the clinical component of the University's medical program that takes place in Michigan and the United Kingdom. Documentation provided by Grenada showed that the evaluation of sites located outside of New York is an ongoing practice by the country.

2. Qualified On-Site Evaluators, Decision-Makers, and Policy-Makers

The accreditation/approval process must use competent and knowledgeable individuals, qualified by experience and training in the basic or clinical sciences, responsible for the on-site evaluation, policy-making, and decision-making.

The Guide states that the visiting team "will number at least five people and may comprise as many persons as are necessary according to the scope of the program under evaluation. The team will include Department staff and individuals designated by the Department who are medical educators and practitioners experienced in medical program evaluation."

The 1995 on-site evaluation report of St. George's University School of Medicine verifies that NYSED follows its stated policy with respect to the composition of teams to evaluate foreign medical schools. The team consisted of six members, two of whom were staff members (the Executive Secretary and the Assistant Executive Secretary) of the New York State Board of Medicine. The other four had substantial experience in medical education. At the time of the visit, all held (or previously held) professorial or administrative rank in U.S. medical schools; two were, themselves, graduates of foreign medical schools.

3. Re-evaluation and Monitoring

The accreditation/approval process must provide for the regular reevaluation of accredited/approved medical schools in order to verify that they continue to comply with the approval standards. The entity must also provide for the monitoring of medical schools throughout any period of accreditation/approval granted to verify their continued compliance with the standards.

Although there is no written guidance on re-evaluating schools, NYSED officials informed Department staff that a comprehensive on-site review takes place on at least a five-year cycle with some schools being revisited within three years. NYSED officials also notified staff that each school is required to provide an interim report within 18-months of the on-site visit that provides detailed information on the efforts to address concerns that were identified in the on-site evaluation report. If the interim report raises concerns with NYSED staff another on-site visit can be scheduled immediately. If the report satisfactorily addresses all of the concerns, a site visit is scheduled for the end of the normal five-year cycle.

Department staff discussion NYSED officials indicated that the last full review occurred in 1998. Although that on-site evaluation was not provided with the documentation, Gernada did forward a copy of the 18-month interim report that addressed the concerns identified in the 1998 on-site review.

4. Substantive Change

The accreditation/approval process must require medical schools to notify the appropriate authority of any substantive change to their educational program, student body, or resources and must provide for a review of the

substantive change by the appropriate authority to determine if the school remains in compliance with the standards.

The NYSED documents do not address the issue of substantive change. Discussions with NYSED officials revealed, however, that the approval letter sent to schools after the site visit instructs those schools to notify NYSED of any changes to the curriculum.

5. Controls against Conflicts of Interest and Inconsistent Application of Standards

The accreditation/approval process must include effective controls against conflicts of interest and inconsistent application of the accreditation/approval standards.

Although there are no written guidelines on this issue, NYSED officials informed Department staff that all on-site visitors must submit a current curriculum vitae that would allow officials to identify any potential conflict of interest issues. NYSED officials stated that they have replaced on-site members after identifying that a conflict of interest existed. Further, the presence of senior staff of the New York Board of Medicine on the on-site evaluation team and the extensive documentation prepared for the use of the evaluation team clearly provide effective controls against the inconsistent application of standards. Additionally, NYSED follows the practice of allowing institutions to request a substitute team member if the school has reason to believe that there is a conflict of interest involving someone selected by NYSED to be a member of the on-site evaluation team.

6. Accrediting/Approval Decisions

The accreditation/approval process must ensure that all accreditation/approval decisions are based on the accreditation/approval standards. It must also ensure that the decisions are based, in part, on an evaluation of the performance of students after graduation from the medical school.

The Guide clearly sets forth the standards for the approval of foreign medical schools, and the processes used by NYSED to reach its decisions concerning approval of a specific school are clearly based on those standards. NYSED has also developed a set of questions, based on the standards, that are intended to assist on-site evaluators in determining whether or not the foreign medical schools meets the standards. The questions "provide a point of reference but are not exhaustive or meant to limit a consultant's inquiry. Consultants are free to raise any issue, ask any question, or request any information which [is]

pertinent and relevant to the evaluation and which will assist in the preparation of his or her report."

The 1995 on-site evaluation team report of NYSED's visit to St. George's University School of Medicine, which formed the basis for NYSED's decision to approve the school, provides evidence that NYSED's evaluation process is based on its standards.

Documentation:

Guide for Foreign Medical Schools Seeking to Operate in New York State

A Guide for Use In the Evaluation of Foreign Medical Schools

Questions Related to the Evaluation of Foreign Medical Schools

New York State Education Department Data Base Document (Questionnaire)