

Standards for grading and promotion of undergraduate medical students in the Foundations Curriculum

Approval body: MD Program Curriculum Committee

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Introduction

These *Standards* serve as an adjunct to the *University of Toronto Grading Practices Policy* and describe the practices of the MD program with regard to determining student grading and promotion. They are in accordance with the Terms of Reference of the Board of Examiners, and are complemented by the MD program's *Guidelines for the Assessment of Undergraduate Medical Trainees in Academic Difficulty*.

Application

The grading and promotion standards provided below apply to the Foundations Curriculum (Years 1 and 2) for students admitted to the MD program for the 2016-17 academic year and beyond.

Standards

1. ***Authority of the Board of Examiners:*** All final decisions related to a MD student's standing and promotion are made by the Board of Examiners, a standing committee of the Council of the Faculty of Medicine. To inform these decisions, the Board of Examiners receives recommendations from the Student Progress Committee, represented by the Foundations Director and/or Director of Student Assessment, and the Faculty Lead for Ethics & Professionalism.
2. ***Individual assessment marks and course grades:***
 - a. ***Individual assessment marks:*** Marks for individual assessments are not subject to any formal approval, but rather serve as the basis for decisions about overall course standing. Individual assessment marks do not appear on transcripts or other documentation provided by the MD program to external individuals or organizations.
 - b. ***Provisional (unofficial) course grades:*** Course grades communicated through MedSIS or other means constitute an unofficial record; they are reserved exclusively for internal use and do not appear on transcripts or other documentation provided to external individuals or organizations. Provisional course grades in MedSIS are subsequently forwarded to the Board of Examiners to confirm academic standing (see Sections 7 and 8.) The program calculates numerical grades for each course for the purpose of informing the adjudication of academic awards.
 - c. ***Official course grades:*** Upon approval of the Board of Examiners, course grades are loaded into the Repository of Student Information (ROSI), which is the official record and is used by the University to generate official transcripts. MD program course grades are transcribed as "Credit (CR)", "No Credit (NC)", "In Progress (IPR)" or "Incomplete (INC)".¹

¹ The shift from an Honours/Pass/Fail system to Credit/No Credit was introduced beginning with the 2009-10 academic year, following approval by Faculty of Medicine Faculty Council in March 2009.

3. *Standards of achievement on each type of assessment, other than professionalism*: Each course in the Foundations Curriculum is composed of four major components and several longitudinal themes.² It is the responsibility of each course committee, in consultation with the relevant component directors and theme leads as well as the Student Assessment and Standards Committee (SASC), to define satisfactory completion of each type of assessment required during their course. This section does not apply to the assessment of professionalism, which is addressed in section 5.

Specifically:

- a. *Assessment methods*: Course committees are responsible, in consultation with the relevant component directors and theme leads, for establishing the assessment methods to be used in the course. These assessment methods are subject to periodic review by the Student Assessment and Standards Committee (SASC) and/or the UME Curriculum Evaluation Committee (UMECEC). Changes to assessment methods must be brought to the attention of the Foundations Director, in accordance with the *Guidelines and protocol for making curricular changes*.
 - b. *Definition of “satisfactory progress”*: For every marked assessment in a course, course committees are responsible, in consultation with the relevant component directors and theme leads, for defining the numerical and/or completion threshold for satisfactory progress on that assessment and for establishing assessment methods to measure achievement of that threshold. Course committees are also responsible, in consultation with the relevant component directors and theme leads, for identifying any mandatory non-marked learning activities that are required for successful completion of the course. Both marked and non-marked assessments on which a satisfactory progress is achieved will be recorded as “Satisfactory Progress”.
 - c. *Communication to students*: Course committees are responsible for articulating all assessment methods for their course in a course outline provided to students no later than the first day of the course. Any changes to the assessment methods after they have been made know to students must take place in accordance with the *University of Toronto Assessment and Grading Practices Policy*.
4. *Definition and application of Focused Learning Plans*: Students who have not satisfactorily achieved the threshold standard for any course assessment and are required to formulate a Focused Learning Plan, as described in the *Guidelines for Assessment of Undergraduate Medical Trainees in Academic Difficulty*, will be assigned a provisional MedSIS course grade of “Partial Progress”. If the Focused Learning Plan is satisfactorily completed, the student’s provisional MedSIS course grade will be changed from “Partial Progress” to “Satisfactory Progress”. In the event that the Focused Learning Plan has not been satisfactorily completed, see Section 8.b below.
 5. *Standards of achievement in professionalism*: Satisfactory professional behaviour is a requirement to achieve credit in every course, and assessment of professionalism is included in every course. A student may be identified as not satisfactorily progressing due to lapses in professionalism. Two or more minor lapses or a major lapse will trigger a process that can lead to the student failing to achieve credit in one or more courses, failure of a year, or dismissal from the program. Procedures to address unsatisfactory progress based on lapses in professional behaviour are described in the *Guidelines for Assessment of Undergraduate Medical Trainees in Academic Difficulty*.

² The four major components of the Foundations Curriculum are: Toronto Patient-Centered Integrated Curriculum (TOPIC), Integrated Clinical Experience (ICE), Portfolio, and Health Science Research (HSR). The themes are organized in three major categories: those related to priority population groups, those related to CanMEDS roles, and those related to specific content areas.

6. *Standards of achievement in a course as a whole:* In order to receive credit for a course, students must:
 - a. satisfactorily complete all marked assessments for each of the four components as well as those for the longitudinal themes that constitute the course, AND
 - b. perform satisfactorily on any non-marked learning activities in that course (including but not limited to professionalism and logging of clinical experiences in courses where this is relevant).
7. *Definition of provisional course grades in MedSIS:* Provisional course grades differ in some respects from the final grades awarded by the Board of Examiners. Specifically:
 - a. *Satisfactory Progress* is used to denote that all requirements in the course are being met. Credit for the course will be recommended to the Board of Examiners at the end of the academic year pending satisfactory completion of all course assessments, including those for all longitudinal components and themes that constitute a course, and barring the availability of new information that calls into question the student's successful performance in the course, as described in Section 8.
 - b. *Partial Progress* is used to denote that a student has not yet demonstrated satisfactory progress in one or more longitudinal components and themes that constitute a course, and has been required to formulate a Focused Learning Plan. Upon achievement of satisfactory progress on their Focused Learning Plan, the student's provisional course grade in MedSIS will be changed from Partial Progress to Satisfactory Progress. Partial Progress is an interim, internal notation that does not appear on official documentation.
 - c. *Unsatisfactory Progress* is used to denote that a student has not been successful in completing the course due to any of the reasons in Section 6 and/or if formal remediation has been assigned by the Board of Examiners. The final course grade recommendation to the Board of Examiners will depend on the student's history of academic difficulty³, as described in Section 8. Unsatisfactory Progress is an interim, internal notation that does not appear on official documentation.
 - d. *CR (Credit)* is used to denote that all requirements in the course have been met. This is the grade that will be recommended to the Board of Examiners at the end of the academic year, barring the availability of new information that calls into question the student's successful performance in the course, as described in Section 8.
 - e. *NC (No Credit)* is used to denote that a student has not been successful in completing the course due to any of the reasons in Section 6. The recommendation to the Board of Examiners will depend on the student's history of academic difficulty³, as described in Section 8 below. An interim notation of Unsatisfactory Progress is used to denote if formal remediation has been assigned by the Board of Examiners.
 - f. *INC (Incomplete)* is used to denote that a student has not completed/submitted certain requirements of the course (marked or non-marked assessments), as arranged with the appropriate curriculum leader(s). Upon completion of the assessments, a provisional MedSIS course grade and final grade recommendation will be determined.

8. *Principles governing recommendations to the Board of Examiners:* The Student Progress Committee, represented by the Foundations Director and/or Director of Student Assessment, and the Faculty Lead for Ethics & Professionalism will be guided by the following principles in making their recommendations to the Board of Examiners:
- a. *Successful completion of a course:* A grade of “Credit (CR)” in a course will be recommended to the Board of Examiners if a student:
 - i. has satisfactorily completed all marked assessments for each of the four components as well as those for the longitudinal themes that constitute the course, AND
 - ii. has performed satisfactorily on any non-marked learning activities in that course (including but not limited to professionalism and logging of clinical experiences in courses where this is relevant).
 - b. *Remediation:* A program of formal remediation will normally be recommended to the Board of Examiners if a student:
 - i. has not satisfactorily completed all marked assessments for each of the four components as well as those for the longitudinal themes that constitute the course, OR
 - ii. has not performed satisfactorily on any non-marked learning activities of the course (including but not limited to professionalism and logging of clinical experiences in courses where this is relevant) by the time of the Board’s meeting, OR
 - iii. has not demonstrated satisfactory progress on their Focused Learning Plan, as described in Section 4.

For further details about Focused Learning Plans and remediation, please see the *Guidelines for Assessment of Undergraduate Medical Trainees in Academic Difficulty*. If a remedial program is approved by the Board of Examiners, credit in the course will not be assigned unless and until the remedial program is successfully completed. If the remedial program is successfully completed, the student will be assigned a new grade of 60% and CR in the course, subject to the approval of the Board.

- c. *Failure of a year and repetition of one or more courses:* Re-registration in the same level of the program and repetition of one or more courses in that level will normally be recommended to the Board of Examiners if a student has “failed the year,” meaning that he/she:
 - i. has not achieved a satisfactory score (as established in advance) on a shorter program of formal remediation previously imposed by the Board of Examiners, OR
 - ii. has not achieved credit on the first attempt in one or more courses in the same level of the program, as confirmed by the Board of Examiners.

At the discretion of the Student Progress Committee, a recommendation may be made for a student to repeat all of the courses in the academic year in question or only the course(s) in which he/she experienced academic difficulty.

- d. *Dismissal*: Dismissal from the program will normally be recommended to the Board of Examiners if a student:
 - i. has not achieved credit in one or more courses on his/her second attempt (“failed repetition”), as confirmed by the Board of Examiners, OR
 - ii. has failed a year (as defined above) on two separate occasions over the course of the program, as confirmed by the Board of Examiners.
 - e. *Promotion*: Each course in the Foundations Curriculum is considered a developmental milestone in the achievement of those competencies necessary to progress to the next level of medical training. Recommendations regarding promotion to the next stage of training will be made at the end of each academic year. Promotion from one year to the next will be recommended to the Board of Examiners if a student has achieved “Credit” in all courses, including successful completion of longitudinal components and themes, by the end of the academic year.
 - f. *Graduation*: Graduation at the next Convocation of the MD program will be recommended to the Board of Examiners if a student has been deemed to have successfully achieved credit for every program course and requirement, including the specified amount of approved and assessed elective time, as confirmed by the Board of Examiners.
9. *Deviations from normal practice*: Throughout these Standards, where the word “normally” is used in relation to recommendations to the Board of Examiners, the Student Progress Committee, represented by the Foundations Director and Director of Student Assessment, and the Faculty Lead for Ethics & Professionalism may choose to deviate from the recommendation that is indicated. In such a case, the person making the recommendation must provide rationale to the Board of Examiners for this deviation, and the Board of Examiners will take both the recommendation and the rationale under consideration.
10. *Appeals*: Students may appeal to the Appeals Committee, a standing committee of the Council of the Faculty of Medicine, decisions made by the Board of Examiners.