



Charles R. Drew University of Medicine and Science
"A Private University with a Public Mission"

DIRECT OBSERVATION POLICY

POLICY: # 319.5a

Supersedes: N/A

Issuing Officer: Dean, College of Medicine
Responsible Office: Office of Medical Education
Effective Date: 9/24/24
Next Review Date: 9/24/27

I. PURPOSE:

The Liaison Committee on Medical Education (LCME) has established standards regarding the requirement of medical schools to ensure that, throughout its medical education program, there is a centralized system in place that employs a variety of measures (including direct observation) for the assessment of student achievement, including students' acquisition of the knowledge, core clinical skills (e.g., medical history-taking, physical examination), behaviors, and attitudes specified in medical education program objectives, and that ensures that all medical students achieve the same medical education program objectives.

II. POLICY STATEMENT:

This policy establishes the Charles R. Drew University of Medicine and Science (CDU) College of Medicine (COM) MD Program centralized system of direct observation (DO) to provide formative feedback and to assess a student's acquisition of the knowledge, core clinical skills, behaviors, and attitudes required to demonstrate competency with institutional learning objectives for the MD program related to these items, in accordance with the LCME requirements. DO is essential to ensure medical student development in performing appropriate histories, physical examinations, communication, and other clinical skills.

III. POLICY:

Direct Observation of History and Physical Examination (H&P)

- *Students are required to be observed at least once per every required clerkship completing the relevant portions of a history and physical or mental status exam.*

Direct Observation During Required Clerkships

- *Students are required to submit the required DO documents in the Acuity/One45 Learning Management System.*
- *One DO must be conducted by a faculty member for the following required clerkships (Surgery, Internal Medicine, Psychiatry, Neurology Obstetrics & Gynecology, Pediatrics, and Family Medicine.) Additional DOs may be required by a clerkship to address specialty-specific EPAs.*
- *Clerkship Specific DOs are to be approved by the Educational Policy and Curriculum Committee (EPCC) and may be conducted by an appropriately trained faculty member, clinical fellow, or resident physician.*
- *Each clerkship will be required to utilize a DO Checklist to document the assessment.*
- *Students will submit completed DOs on Acuity/One45.*
- *The specific H&P elements to be included for each Clerkship's DO is determined by each clerkship and is approved by the EPCC.*
- *The list is reviewed and approved by the EPCC on an annual basis, prior to the start of clerkships in each academic year.*
- *The list of required H&P elements and any additional EPAs for which students must submit a DO is listed in the syllabus for each clerkship.*

Timeline for Requesting DOs

- *Students are provided instructions regarding the submission of DO's during Clinical Foundations, the Orientation to the M3 Clerkship Year, as well as during clerkship-specific orientation sessions.*
- *If students have not completed their required DOs by their mid-clerkship meeting, they must provide a clear plan outlining how they will complete these requirements by the end of the clerkship.*

Responsibilities

- *Students: Students are responsible for reviewing clerkship syllabi to ensure they understand specific DO requirements for each clerkship. Additionally, students are responsible for submitting all DO requests within the timeframes specified within this policy.*
- *Faculty, Residents, Fellows, and other healthcare professionals providing instruction or supervision of medical students: These individuals are responsible for completing DO requests submitted to them in a timely manner in order to provide students with formative feedback on their performance.*
- *Clerkship Director and Site Director: Clerkship Director and Site Director are responsible for ensuring that direct observations are submitted by students as outlined in these procedures. Clerkship Director and Site Director are also responsible for advancing issues that may impede the completion of direct observations to the Assistant Dean for Undergraduate Medical Education so that they may be addressed in a timely fashion.*

IV. APPLICABILITY:

The faculty, students, and staff of the CDU COM are responsible for knowing this policy and its procedures.

V. DEFINITIONS:

- *Direct Observation (DO): A DO is an assessment based on the direct observation of a medical learner's clinical skills that is designed to provide feedback on skills essential to the delivery of high-quality clinical care.*

- *History and Physical Examination (H&P): Direct observation of the relevant portions of a history and physical (mental status exam for Psychiatry).*
- *Entrustable Professional Activities (EPAs): Defined by the AAMC, there are 13 Core EPAs that all medical students should be able to perform upon entering residency, regardless of their future career specialty.*
- *Educational Policy and Curriculum Committee (EPCC) is the committee charged to represent the faculty to oversee the medical education program as a whole and has responsibility for the overall design, management, integration, evaluation, and enhancement of a coherent and coordinated medical curriculum.*

VI. RELATED POLICIES/FORMS:

- *Direct Observation Checklist*

VII. RELATED LINKS:

- *LCME Standards, Publications, & Notification [Forms](#)*
- *AAMC: The Core Entrustable Professional Activities (EPAs) for Entering Residency [Website](#)*

VIII. POLICY HISTORY:

Review Dates:	Change Description:
9/24/24	New policy reviewed by the Clerkship Phase Subcommittee (9/18/24). Approved by the EPCC on 9/24/24.
10/3/24	Policy reviewed by CDU Policy Committee – no conflict with university policies.