



# The Medical College of Georgia Office of Academic Affairs

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Applicable to: Clerkship Directors  
Approved by:  
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## Clerkship Curriculum Oversight Policy

The purpose of this policy is to define and reinforce the oversight responsibilities of the Augusta-based Clerkship Directors within our institution's statewide regional campus model. This policy affirms the Clerkship Director's authority and responsibility for oversight of clerkship content, delivery, assessment, and student experience across all instructional sites.

This policy further ensures alignment with LCME standard 8.7 (Comparability of Education/Assessment) which states: A medical school ensures that the medical curriculum includes comparable educational experiences and equivalent methods of assessment across all locations within a given course and clerkship to ensure that all medical students achieve the same medical education program objectives.

- A. **Policy Statement** - The Augusta-based Clerkship Director retains primary responsibility and authority for the design, implementation, monitoring, and continuous quality improvement of the clerkship across all campuses and affiliated instructional sites. The clerkships are defined as clinical rotation in Psychiatry, Neurology, Internal Medicine, Obstetrics and Gynecology, Surgery, Pediatrics, Family Medicine and Emergency Medicine.

While site-based Clerkship Directors and faculty are responsible for local delivery of the curriculum, such delivery must remain aligned with the centrally approved objectives, instructional methods, assessment strategies, grading standards, and policies established by the Clerkship Director and the Office of Academic Affairs.

Oversight mechanisms in this policy are intended to ensure consistency, and comparability across all campuses in accordance with LCME standards.

B. **Oversight Authority of the Clerkship Director**

- a. Establishing and maintaining standardized clerkship learning objectives.
- b. Ensuring uniform required clinical experiences and exposure expectations.
- c. Approving all required didactic content, assignments, and educational materials.
- d. Reviewing and approving any proposed site-specific curricular modifications.
- e. Determining grading components, weighting, and performance standards.
- f. Ensuring consistent use of approved evaluation tools across sites.
- g. Monitoring grade distributions and assessment outcomes across campuses.
- h. Providing guidance and expectations to Site Clerkship Directors.



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- C. **Quarterly Site Clerkship Director Meetings** - The Augusta-based Clerkship Director must convene quarterly meetings with all Site Clerkship Directors for the respective clerkship. These meetings shall occur no fewer than four times per academic year, include representation from all instructional campuses, and be documented with attendance records and maintained minutes. A quorum should be present at each quarterly site director meeting.

Meeting agendas shall include curriculum updates, assessment data review, student feedback, LCME comparability metrics, and quality improvement initiatives. These meetings shall also serve as a method to share expertise in curriculum development that considers the unique circumstances of each regional campus and the varying practice sites across the state.

Site clerkship director meeting minutes will be sent to all site clerkship directors, curriculum office leadership, and campus leadership for monitoring and review after each quarterly site clerkship director meeting for each clerkship.

D. **Responsibilities of Site Clerkship Directors**

- a. Implementing the clerkship curriculum as approved by the Clerkship Director and the Curriculum Oversight Committee.
- b. Participating in required quarterly oversight meetings.
- c. Providing requested performance data and site-specific updates.
- d. Ensuring faculty compliance with standardized objectives and evaluation processes.

- E. **Alignment with LCME Standards** - This policy supports institutional compliance with LCME standards requiring comparable educational experiences across instructional sites, equivalent methods of assessment, central oversight of distributed medical education programs, and ongoing monitoring and quality improvement of clinical education.

- F. **Monitoring and Accountability** - The Assistant Dean for Curriculum or designee may review documentation of quarterly meetings, review clerkship outcome data across campuses, conduct periodic audits of curricular alignment, and recommend corrective action if oversight expectations are not met.

- G. **Review Cycle** - This policy will be reviewed periodically by the Curriculum Oversight Committee (COC) and revised as needed to ensure ongoing compliance with accreditation standards and institutional best practices.