



**THE GEORGE
WASHINGTON
UNIVERSITY**
WASHINGTON, DC

Responsible University Official:
Senior Associate Dean for MD Programs
Responsible Office: Office of Medical
Education
Most Recent Review: November 2022

POLICY ON GW SMHS MD PROGRAM NARRATIVE ASSESSMENT

Policy Statement

A medical school ensures that a narrative description of a medical student's performance, including his or her non-cognitive achievement, is included as a component of the assessment in each required course and clerkship of the medical education program whenever teacher-student interaction permits this form of assessment.

Narrative assessments are defined by the LCME as "written comments from faculty that assess student performance and achievement in meeting the objectives of a course or clerkship."

Reason for Policy/Purpose

As per LCME DCI element 9.5, to provide George Washington School of Medicine and Health Science (SMHS) MD Program faculty, staff, and students with information on what narrative assessment is and where it occurs in the curriculum.

Who Needs to Know This Policy

Current students, staff, faculty, and residents

Policy

To ensure that faculty provide meaningful narrative description and feedback to medical students regarding their achievement of learning objectives in cognitive and non-cognitive domains, narrative assessment shall include faculty observations of and student feedback in areas related, but not limited to the following:

- **Medical Knowledge** including an understanding of health, pathophysiology, diagnosis and treatment, seeing logical relationships between data
- **Patient Care** including skills in clinical reasoning, history taking, physical and mental health status exam, developing a prioritized differential diagnosis, synthesizing data into assessments, formulating and implementing plans for diagnosis or treatment, technical or procedural skills, evaluation of outcomes

- **Interpersonal and Communication Skills** including oral and written presentations; communication with patients and team members
- **Practice Based Learning and Improvement** including accessing biomedical resources to inform care, demonstrating knowledge of evidence-based medicine principles, identifying and filling information gaps
- **Systems Based Practice** including identifying principles of cost-effective care and ways to enhance patient safety and quality, advocating for patients, optimizing outcomes and minimizing disparities in the healthcare system
- **Professionalism** including demonstration of honesty and integrity, responsibility, reliability, dependability, teamwork and collaboration, inter-professional team relationships, team leadership, empathy, commitment to competence and excellence, respect for others, ability to accept and respond constructively to feedback
- A narrative may include areas of strength and also address opportunities for academic and professional growth and development

Scope and Applicability

- A narrative description of a learner's performance must be provided in all courses and clerkships where the structure and instructor-student interactions allow for multiple and/or longitudinal observations by faculty of individual students' performance and achievement of cognitive and non-cognitive learning objectives; these courses/clerkships are typically four weeks or longer in duration.
- Faculty who interact with students individually or in small groups of 12 or fewer students for at least 4 or more sessions are required to provide narrative description.

Pre-Clinical

Courses in the preclinical years that contain small groups (i.e. 12 or fewer students) with the same facilitator(s) should provide narrative assessments to all students on their performance in the small group setting; this includes the Practice of Medicine (POM) course and the Patients, Populations and Systems (PPS) course. In POM, the clinical instructors (POMIs), standardized patient instructors (SPIs), librarian instructors, and CAP preceptors provide narrative feedback description of a student's performance. In PPS, small group mentors provide narrative description of a student's performance.

By way of example, courses or sessions in the preclinical years where this requirement does not apply (criteria are not met) are the integrated case-based sessions in the organ blocks (30 students/group).

Clerkships and Electives more than 4 weeks

A narrative assessment should be provided as a component of the student's final evaluation in each of the required clerkships or elective. The narrative assessment may be included in the Dean's Letter (MSPE) that is submitted as part of the residency application process.

The narrative assessment may include multiple narratives submitted by individual faculty and residents who have worked with the student during a clerkship or elective, and/or a synthesis of these by the clerkship or elective director.

Facilitators/attendings should address both the student's cognitive and non-cognitive strengths and areas for improvement based on a rubric or evaluation form provided by the course/clerkship director that addresses the course objectives.

Although provision of narrative description can be conducted verbally, written documentation is required via passports, Blackboard, MedHub or email for monitoring and archival purposes and, in the case of summative assessment on clerkships, accessibility for inclusion in the Medical Student Performance Evaluation.

Contact

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Who Approved This Policy

Committee on Undergraduate Medical Education Curriculum (CUMEC) 5/21/20

History/Revision Dates
