MD Program
UNIVERSITY OF TORONTO

Standards for grading and promotion of MD students – Foundations (Years 1 and 2)

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Introduction

These *Standards* serve as an adjunct to the *University Assessment and Grading Practices Policy* and describe the practices of the MD program with regard to determining student grading and promotion in Foundations (Years 1 and 2). They are complemented by the MD Program's *Academic difficulty procedural guidelines* and *Student professionalism guidelines*.

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 and/or Faculty Lead, 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 may calculate numerical grades 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 transcripted as "Credit (CR)", "No Credit (NC)", "In Progress (IPR)" or "Incomplete (INC)".

3. *Standards of achievement on each type of assessment, other than professionalism*: Each course in the Foundations Curriculum is composed of components and longitudinal themes. It is the responsibility of each Foundations 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 the MD Program's *Student professionalism guidelines*.

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 Evaluation Committee. Changes to assessment methods must be brought to the attention of the Foundations Director, in accordance with the MD Program's *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, including the standards of achievement for the course as a whole (see Section 6), 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 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 *Academic difficulty procedural guidelines*, 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. *Professionalism*: Satisfactory professionalism competency is a requirement to achieve credit in every course, and assessment of professionalism competency is included in every course. Satisfactory professionalism competency is required to progress from one year level to the next and to graduate from the program. Assessment of professionalism takes place through competency-based professionalism assessments. Professionalism incidents that require immediate action are addressed through critical incident reports. The MD Program's professionalism standards of achievement and procedures to address unsatisfactory progress with respect to professionalism are described in the *Student professionalism guidelines*.

6. *Standards of achievement in a course as a whole*: In order to received credit for a course, students must:

   a. satisfactorily complete all marked assessments for each of the components and 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 or probation has been assigned by the Board of Examiners. For students placed on remediation or probation, a grade of No Credit (NC) will be assigned to the initial course attempt(s) requiring remediation/probation, regardless of the outcome of the remediation/probation on the subsequent attempt(s). Following remediation or probation, the final course grade recommendation to the Board of Examiners for the subsequent attempt will depend on the student's history of academic difficulty, 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 difficulty, as described in Section 8.

    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 and Faculty Lead, 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 components and 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 components and 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, OR

iii. has not demonstrated satisfactory progress on their Focused Learning Plan, as described in Section 4.

A program of formal remediation normally includes failure of one or more courses and delay in promotion to the next year or level of medical training, and re-registration in the same level of the program and repetition of those courses when they are next offered the following year. 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 cases where a program of formal remediation is recommended to and approved by the Board of Examiners, a grade of No Credit (NC) will be assigned to the initial course attempt(s) requiring remediation, regardless of the outcome of the remediation on the subsequent attempt(s). If the remedial program is successfully completed, the student will be assigned credit for the subsequent course attempt(s), subject to the approval of the Board.

If the remedial program is not successfully completed, dismissal from the program will normally be recommended to the Board of Examiners. In exceptional circumstances, the Student Progress Committee may recommend probation rather than dismissal. See 8.c below for more details regarding probation.

c. *Dismissal*: Dismissal from the program will normally be recommended to the Board of Examiners if a student has not successfully completed remediation, as defined above, and/or has:

I. not achieved credit in one or more courses on the second attempt (including unsuccessful remediation as the second attempt), 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.

Probation: In exceptional circumstances, the Student Progress Committee may recommend and the Board of Examiners may approve probation rather than dismissal. A recommendation of probation normally includes failure of one or more courses and delay in promotion to the next year or level of medical training, and re-registration in the same level of the program and repetition of those courses when they are next offered the following year. If probation is approved by the Board of Examiners, a grade of No Credit (NC) will be assigned to the course attempt(s) requiring probation, regardless of the outcome of the probation on the subsequent attempt(s). If probation is successfully completed, the student will be assigned credit for the subsequent course attempt(s), subject to the approval of

the Board. If probation is not successfully completed, dismissal from the program will normally be recommended to the Board of Examiners.

In cases where dismissal from the program or probation is recommended to the Board of Examiners, the student should be provided with timely notice of the recommendation, disclosure of the evidence on which the recommendation is based (i.e. the reasons for the recommendation), and an opportunity to provide a response to the Board of Examiners.

d. *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.

e. *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.

9. *Deviations from normal practice*: Where the word "normally" is used in relation to recommendations to the Board of Examiners, the Student Progress Committee and Faculty Lead, Ethics & Professionalism may choose to deviate from the recommendation that is indicated in these Standards. In such cases, a rationale must be provided to the Board of Examiners for the deviation, and the Board of Examiners will take both the recommendation and the rationale under consideration.

10. *Appeals*: Students may appeal to decisions made by the Board of Examiners to the Appeals Committee, which is a standing committee of the Council of the Faculty of Medicine.