Subcommittee Updates

During June, the following elements have gone through an initial review by subcommittees:

Organizational & Leadership Subcommittee: 1.2 Conflict of Interest Policies—BCM has all required COI policies.

Academic & Learning Environments: 3.4 Anti–Discrimination Policy, 3.5 Learning Environment/Professionalism—Curriculum Office is reviewing the assessment methods for the SOM’s professionalism competencies.

Faculty & Resources Subcommittee: 4.5 Faculty Professional Development—This element is in compliance and the subcommittee is working on updating the narrative with current data.

Curricular Objectives & Content Subcommittee: 7.0 Curricular Content, 7.1 Biomedical, Behavioral, Social Sciences—The Curriculum Office is working to ensure that content taught in the curriculum is accurately captured.

Curriculum Management & Assessment Subcommittee: 8.8 Monitoring Student Time, 9.0 Teaching, Supervision, Assessment, Student & Patient Safety—The Curriculum Office is working to ensure that the academic workload is adequately reviewed.

Medical Student Experience Subcommittee: 11.0 Medical Student Academic Support, Career Advising, & Educational Records, 11.1 Academic Advising, 11.2 Career Advising—Over the past few years, the Office of Student Affairs has worked to implement systems and resources for both academic and career advising for students.

Institutional Student Analysis Subcommittee: School leaders have developed action items in response to the ISA report and will be working on implanting changes over the upcoming months.

Elements of the Month

- **Element 1.2—Conflict of Interest Policy**
  - **Element 12.5—Non–Involvement of Providers of Student Health Services in Student Assessment/Location of Student Health Records.**
  - **Element 1.4—Affiliation Agreements**

**Element 1.2 — Conflict of Interest Policy**

Element 1.2 states that a medical school has in place and follows effective policies and procedures applicable to board members, faculty members, and any other individuals who participate in decision-making affecting the medical education program to avoid the impact of conflicts of interest in the operation of the medical education program, its associated clinical facilities, and any related enterprises.

**Definition:** Conflict of Interest (COI) occurs when the private interests (financial or otherwise) of an Individual or members of their Immediate Family have the potential to bias or compromise an Individual’s obligations to the College such that an independent observer might reasonably question whether actions or decisions are being made in the best interest of the College. A Conflict of Interest may exist whether or not decisions are affected by a personal interest. In other words, the conflict does not depend on the person’s character or intent, but rather on the situation and appearance.
Continuation of Element 1.2 — Conflict of Interest Policy

The following policies are in place to avoid conflicts of interest:

**Governing Board Members**  View BCM’s Policy 02.9.30, Conflict of Interest—Trustees

Baylor College of Medicine is fortunate to be guided by distinguished Boards of Trustees (of both the College and the various subsidiary entities, which the College owns or controls), and the College greatly benefits from their broad range of experience, knowledge and wisdom. While these attributes are essential to the fulfillment of their responsibilities to the College, having such attributes necessarily means that the Trustees have extensive interests, obligations and loyalties beyond their involvement with the College.

The Board’s conflict of interest disclosure regimen requires trustees, annually, to disclose any contractual, employment, personal, or familial interests in the College. The Policy is available to all Trustees in the New Trustee Information Packet and defines both general and specific guidelines to avoid conflicts of interest among members (“Trustees”) of the Board.

**Disclosure of Outside Interests Policy**  View BCM’s Policy 31.2.01

Baylor College of Medicine acknowledges that collaboration across BCM departments and with outside entities is essential for advancing scientific innovation and academic excellence. However, in order to preserve the integrity of its educational and scientific activities, BCM will work to ensure that all Individuals adhere to the highest standards of professional and ethical conduct, and that such conduct is free from influence that might create or appear to create bias.

This policy establishes:

1. **A Culture of Disclosure.** All Individuals must avoid actual and apparent conflicts of interest. All Covered Personnel and Investigators must disclose all Financial Interests and Significant Financial Interests as stated below. Disclosures may be shared with affiliate partners, regardless of the primary location of the Individual’s office, lab and/or practice.

2. **A list of Prohibited Activities.**

3. **Deadlines for Disclosure**

4. **Pre-Approval Requirements for Covered Personnel,** Covered Personnel must seek pre-approval for certain Financial Interests with Industry from the appropriate Department Approver and Office of Compliance.

**Health Vendors Policy**  View BCM’s Policy 31.2.04

Covered Personnel must not accept Gifts or Financial Support from Healthcare Vendors except as allowed under this policy or as pre-approved pursuant to the Disclosure of Outside Interests Policy (32.2.01).

Executive Summary:

1. **Access:** Healthcare Vendors must have an appointment with a BCM Faculty member before coming onto a BCM Site with limited access to Learners and patients.

2. **Gifts:** No Gifts, except for educational materials, can be accepted from Healthcare Vendors.

3. **Free Samples:** Pharmaceutical or device samples can only be accepted if used for patient care purposes and are not billed to the patient or their third-party payer.

4. **Meals:** Meals cannot be accepted from Healthcare Vendors.

5. **Events:** Covered Personnel can accept Financial Support through CME programs accredited by the ACCME or programs that meet the ACCME standards for speaking services provided it is not received directly from the Healthcare Vendor.
Element 12.5 — Non-Involvement of Providers of Student Health Services in Student Assessment/Location of Student Health Records

Element 12.5 states that the health professionals who provide health services, including psychiatric/psychological counseling, to a medical student have no involvement in the academic assessment or promotion of the medical student receiving those services, excluding exceptional circumstances. A medical school ensures that medical student health records are maintained in accordance with legal requirements for security, privacy, confidentiality, and accessibility.

The Baylor College of Medicine’s (BCM) Educator Conflicts of Interest Policy (23.2.04) states that, whenever possible, Educators who also serve as Health Providers may not participate in the academic assessment or promotion of any medical to whom the Educator currently provides or helps provide healthcare services. This prohibition cannot be waived by students enrolled in any BCM degree-granting program.

Educators who provide medical or psychological services to medical students, whether currently or in the past, should avoid teaching and evaluating those students when there is an expectation of providing a medical or psychological assessment of the medical student. Educators who are members of committees should recuse themselves from any committee decisions that pertain to a current or prospective medical student to whom the Educator currently provides or helps provide healthcare services.

How are students, residents & faculty informed of the Educator Conflicts of Interest Policy?

Students are informed of the Educator Conflicts of Interest Policy via the policies in the Student Handbook and both the BCM public and internal websites. The policy is disseminated to students via course overview documents, is linked on course Blackboard sites, and discussed during course orientations.

Residents are initially informed of the Educator Conflicts of Interests Policy via an online orientation module and an in-person orientation presentation. Residents are required to complete the online module annually as a refresher and for updates. Residents receive the policy in-person via department meetings and are emailed the policy via clerkship directors.

Faculty are informed of the policy via the Teaching Faculty Handbook, annually during reappointment, via email, and in-person at department meetings. The policy is also included in the assessment form completed by faculty and residents. By submitting the evaluation, faculty and residents are confirming they do not have a conflict with the student.

Report Perceived Conflicts of Interest

Learners who have Immediate Family, Extended Family, or personal relationships with an Educator should not participate in evaluations of that Educator. Learners are expected to report an actual or perceived Conflict of Interest that may impact the teacher-learner paradigm. Reports should be directed as follows:

SOM:
1) Clerkships: report to the Clerkship Director
2) Courses: report to the Course Director
3) Other Issues: Associate Dean of Student Affairs or designee
Avoiding Conflicts of Interests.

Educators must strive to avoid Conflicts of Interest that may arise in relation to the following academic, administrative, or clinical activities, as well as in leadership roles to which Educators may be assigned. Some examples are as follow:

1. **In Academic Assessments, Immediate Family or Extended Family relationship to the Learner** – Educators should recuse themselves from the academic assessment and promotion of the Learner, and all committee discussions in which that Learner or Applicant is a subject. The Educator may not serve as a primary preceptor for that Learner in any graded course.

2. **In Committee Memberships & Leadership Roles**, educators serving on school or program promotions committees, whether appointed or elected, should recuse themselves from voting and decision making concerning a Learner when the following relationships or circumstances are present, although Educators may share relevant information about a Learner with the Committee.

3. **For Admissions Committee**, educators serving on the School of Medicine Admissions Committee, including the Interviewing Subcommittee, must take a leave of absence from the Committee for one application cycle.

4. **For Advisory Committees & Administrative Workgroups**, educators who are in any of the following circumstances should recuse themselves from voting and decision making concerning a Learner, although they are permitted to share relevant information with the designated decision-makers (e.g., promotions committee)

5. **For Educators in Dual or Multiple Roles**, unavoidable Conflicts may arise for Educators who serve in multiple administrative and teaching roles in small-scale programs, or for Educators in large programs whose roles cover broad ranges of Learners.

6. **For Healthcare Services**, educators who also serve as **Health Providers** may not participate in the academic assessment or promotion of any Learner to whom the Educator currently provides or helps provide healthcare services. This prohibition cannot be waived by students enrolled in any BCM degree-granting program.

Where are Student Health Records stored and confidentially maintained?

Per the **Student Records Policy (23.1.06)**, depending on the content, Non-Academic Records are appropriately maintained by a school or program Custodian or by any employee with professional responsibility for implementation, oversight, and/or participation in any of the business affairs of the school or program or on behalf of the institution in its entirety (e.g., Title IX Coordinator). Student Health Records are typically maintained in the Office of Student Services or the Occupational Health Program (OHP).

In order to preserve student privacy to the extent possible, Student Health Records are received, reviewed, and maintained by a party (or entity) with specialized knowledge that is authorized to act on behalf of the school, program, and the institution, such as the Disability Coordinator and Wellness Intervention Team (WIT) in the Office of Student Services.

BCM oversees the release and use of all Non-Academic Records, and adheres to the same standards described in the policy with respect to release and use. However, depending on the record content, the release, use, and/or modification of Non-Academic Records may also be governed by other applicable laws, regulations, accreditation standards, and College policies in addition to FERPA. For these reasons, school deans (and other academic faculty and staff) do not have access to Student Health Records, and the student’s consent is required for release of these records outside of the Office of Student Services and OHP.

Students may examine their Non-Academic Records by making a written request to the Custodian of the Record (as reflected in the Record Retention Schedule), unless the content of the Record is also governed by a state or federal law other than FERPA or otherwise prohibited by College policy.
Element 1.4 — Affiliation Agreements

In the relationship between a medical school and its clinical affiliates, the educational program for all medical students remains under the control of the medical school’s faculty, as specified in written affiliation agreements that define the responsibilities of each party related to the medical education program. Written agreements are necessary with clinical affiliates that are used regularly for required clinical experiences; such agreements may also be warranted with other clinical facilities that have a significant role in the clinical education program. Such agreements provide for, at a minimum the following:

- The assurance of medical student and faculty access to appropriate resources for medical student education
- The primacy of the medical education program’s authority over academic affairs and the education/assessment of medical students
- The role of the medical school in the appointment and assignment of faculty members with responsibility for medical student teaching
- Specification of the responsibility for treatment and follow-up when a medical student is exposed to an infectious or environmental hazard or other occupational injury
- The shared responsibility of the clinical affiliate and the medical school for creating and maintaining an appropriate learning environment

Who signs the UME affiliation agreements?
The Dean of the SOM must be the final signatory for UME educational affiliation agreements.

What are some of the main sites that BCM currently has an active agreement with?
Baylor College of Medicine School of Medicine has up-to-date affiliation agreements with all clinical partners used for inpatient clinical experiences. Furthermore, every outpatient clinical site used for a core rotation employs an affiliation agreement containing the standardized language of the element to ensure that the educational program for the medical students remains under the control of the medical school’s faculty.

Example of affiliates:
*MD Anderson Cancer Center  *Texas Children’s Hospital (TCH)  *Michael E. DeBakey VA Medical Center  
*Baylor St. Luke’s Medical Center (BSLMC)  *Harris Health (Ben Taub)
*Houston Methodist  *The Children’s Hospital of San Antonio (CHoSA)

In our next LCME Newsletter ...
In the August newsletter we will look at elements 4.3, 4.4 and 4.5. You will also be provided with our monthly subcommittee updates and any other LCME information as it pertains to our upcoming site visit. For more information please visit our LCME website at www.bcm.edu/lcme.

Accreditation Contacts
Jennifer Christner, MD
Dean, School of Medicine
Jennifer.Christner@bcm.edu

Ricky Mercado, MPH
Director, Accreditation, Compliance and CQI
Rmercadobcm.edu

Elizabeth De Los Rios, MEd
Project Manager, Accreditation
Erl8@bcm.edu

For general inquiries or concerns please email SOM-LCME@bcm.edu

Resources
BCM Self-Study Website:
www.bcm.edu/lcme

LCME: https://lcme.org/

Policies & Procedures: (intranet)

SOM Student Handbook
https://www.bcm.edu/education/schools/medical-school/md-program/student-handbook