Response to Provost Rosowsky request 9/25/14
“Charge to Develop an Academic Advising Plan in Each School”
Due 11/21/14

Advising Plans objectives:

1. Include guidelines for advising responsibilities in workload assignments in accordance with the Collective Bargaining Agreement or the COM Faculty Handbook (as appropriate), and clearly indicate how advising is considered in performance reviews;

The responsibility for formulating, operating, and evaluating the system of career and residency counseling resides with the Associate Dean for Students. Components of the system for all students, described below, include:

- Individual advisors
  - Primary/PCR Advisors (Foundations Level through Clerkship Year)
  - Specialty Advisors (Advanced Integration Level)
- The resources from the AAMC Careers in Medicine program that are incorporated into the UVM Advising System
- Class-wide Careers in Medicine Workshops and Panel Discussions
- Regularly scheduled individual meetings with the Associate Dean for Students

Each entering student is introduced to the College’s advising system during Orientation. Each student is assigned a Primary academic and career advisor, and that faculty member remains the student’s formal advisor from entry into medical school through the Clerkship Year or until the student selects a specialty advisor. Faculty development and training for primary academic advisors occur at regular intervals and are organized and run by the PCR Course Director and the Associate Dean for Students.

The on-line resources for the Careers in Medicine program are made available to students from the first week of medical school and use of them is regularly encouraged by advisors in individual and group meetings with advisees, the Associate Dean for Students, and through Careers in Medicine workshops. Alongside the workshops, during each fall semester a series of 19 specialty panel discussions are given during lunch hours, representing the range of medical and surgical specialties among which students will eventually choose to apply for residency training. In parallel with those official offerings, a robust assortment of medical and surgical specialties and subspecialties are represented by Student Interest Groups in which a large proportion of the student body participates each year.

By December of the third year, each student selects a specialty advisor to assist with the many decisions and details involved in the residency training application process. Each medical and surgical specialty has a designated Director of Specialty Advising who has responsibility for overseeing specialty advising in his or her specialty and serves as a resource for students potentially interested in those disciplines at all stages of the curriculum. The Directors of Specialty Advising participate in training with, and regularly receive information relevant to their roles from, the Associate Dean for Students. The Directors of Specialty Advising, in turn, provide training, monitoring, and quality assurance among the specialty advisors within their disciplines.
In addition to regular meetings with their advisors, students are encouraged to meet with the Associate Dean for Students during each of the three levels of the curriculum. Topics for each of those individual meetings include:

- **Foundations**: Adjustment to medical school, academic performance and resources, early thoughts about career options
- **Clerkship Year**: Clerkship experiences and performance, career choices, specialty advisor choices, Advanced Integration rotation selections
- **Advanced Integration**: Advanced Integration experiences, residency application plans, letters of recommendation, Medical Student Performance Letter

In 2010, the College of Medicine changed its standards and guidelines for all promotional tracks to recognize advising as one of its five areas of emphasis. Promotion and tenure are linked to an individual’s effectiveness as an advisor. Faculty seeking promotion and tenure are required to document quantity, quality and scholarly involvement in all areas of teaching, including advising.

2. **Recognize faculty/staff members who excel at student advising**;

The Office of Medical Student Education recognizes the importance of advising as an integral part of teaching, and therefore, is committed to developing an Advisor of the Year award. This award will be the responsibility of and be selected by the UVM College of Medicine Teaching Academy.

The Association of American Medical Colleges (AAMC) solicits annual nominations for the Careers in Medicine Excellence in Medical Student Career Advising Individual Award. This national award recognizes the accomplishments and commitment of an advisor dedicated to helping students succeed in fulfilling their career and educational goals through effective career advising.

3. **Ensure developmentally responsive advisement sessions by class year (First-Year through Senior Year) and specialty needs coordinated by faculty members and/or advising professionals**;

The advising system begins upon matriculation when each entering student is assigned to a Professionalism, Communication & Reflection (PCR) course group, each of which is led by a faculty preceptor. There are 16 total PCR groups. Preceptors meet with individual students at least twice per year in their advising roles, in addition to their weekly PCR curriculum group sessions, and are available to provide support and information as well as guide discussions of academic progress, career exploration, and wellness. The advising system was designed to be integrated into the curriculum in order to ensure its optimal use by students; most students do seek such advice and support primarily from the faculty preceptors of their PCR groups. Since PCR preceptors assess first-year students’ performances in the PCR course (which is graded on a pass/fail basis), students are not obligated to seek advice or counseling from those faculty members, though the vast majority of students do so and view the arrangement favorably. If a student expresses preference for an alternate advisor, the Associate Dean for Students will assign the student a different advisor who does not have responsibility for assessing student performance. Vertical integration and mentorship from students in all classes is encouraged and support is provided for these larger group sessions, by the Office of Medical Student Education.

The on-line resources of the Careers in Medicine program are made available from the first week of medical school and use of them is regularly encouraged by advisors in individual and group meetings
with advisees, the Associate Dean for Students, and via the Careers in Medicine workshops. Two such class-wide Careers in Medicine workshops are scheduled during each of the first two years of medical school. The fifth workshop occurs during fall of the Clerkship Year and the last of those workshops is given at the end of the Clerkship Year and consists of a panel of residency training directors. Alongside the workshops, during each fall semester a series of 19 specialty panel discussions are given during lunch hours, representing the range of medical and surgical specialties among which students will eventually choose to apply for residency training. (See Fall 2014 Careers in Medicine Specialty Panel Series.) In parallel with those official offerings, a robust assortment of medical and surgical specialties and subspecialties are represented by Student Interest Groups in which a large proportion of the student body participates each year.

By January of the third year, each student chooses an advisor in the specialty in which s/he is planning to apply for residency training. Although relationships with individual faculty advisors form the centerpiece of the academic and career advising system, centrally organized and monitored workshops, panel discussions, and career-choice activities are scheduled throughout all four years of medical school. These activities are designed to complement individual advising activities, facilitate the medical education and career planning processes, and provide guidance throughout the residency application process and the Match.

The system for identification of and early intervention with students experiencing academic difficulty is overseen primarily by the Director of Student Success, who works in close collaboration with the Associate Dean for Students, advisors, and tutors. The Director of Student Success is also in very frequent contact with course and clerkship directors, as well as well as with the Foundations Director and Associate Dean for Clinical Education. The Director of Student Success systematically reviews the results of all course and clerkship exams and meets with all students who receive failing or marginally passing examination grades in order to collaborate with them in formulating plans for success. All students who for any reason are in jeopardy of failing courses, clerkships, or advanced rotations are referred to the Director of Student Success, including clerkship students whose mid-rotation feedback indicates that they are in danger of failure. In addition, students experiencing academic difficulty may be identified at any time by faculty members, course and clerkship directors, the Director of Student Success, or the Associate Dean for Students. Students experiencing academic difficulty or concerns of any kind may, and often do, self-refer to services provided by the Office of Student Success. Those services include:

- Learning styles assessments
- Assistance with study techniques
- Exam-taking skills
- Peer mentoring (tutoring)
- Stress management
- Time management
- Myers-Briggs interpretation
- Referrals for diagnostic testing for learning disabilities
- Referrals to the UVM ACCESS (Accommodations, Consultation, Collaboration, and Educational Support Services) Office for possible recommendations for learning accommodations and/or other educational assistance. Here students may be assigned a specialist to determine reasonable & appropriate accommodations & services and provide advisement and advocacy on disability-related issues.
Students whose academic difficulty manifests in the realm of clinical skills are routinely identified by the Director of Simulation Education, who has responsibility for assessment of student performance on clinical skills examinations. If a deficiency is identified, The Director of Simulation Education (in conjunction with the course or clerkship director and the Director of Student Success) works with the student to develop a remedial plan.

4. **Seek ways to engage and involve third and fourth year students as peer mentors to first-year students in designated first-year courses; and**

As noted above, each matriculating student is assigned to a PCR group. The vertical integration that this structure offers and that the Office of Medical Student Education supports with funding, as well as the smaller cohorts, creates opportunities for more senior students to assist more junior students adapt to the academic and personal demands of medical school.

A related piece of this support system is the Big Sib/Little Sib program, a longstanding tradition at the College of Medicine. Each first-year student is matched with a second-year student. The Big Sib serves as a friend, mentor, and information source for the first-year student.

During Orientation, students are introduced to the PCR group system, including the advising and academic support services provided by the Office of Medical Student Education and Director of Student Success. A series of annual wellness and academic success workshops are scheduled throughout the year to help students cope with the demands of medical school. In addition, the UVM ACCESS Office provides services for students with known or suspected disabilities.

Students with concerns about their potential academic success or adaptation to medical school are encouraged to meet with the Associate Dean for Students and/or the Director of Student Success to discuss their concerns to develop plans of action and, if necessary, receive referrals for College and University services. The Associate Dean for Students and Director of Student Success are in frequent contact to coordinate their efforts. The Director of Student Success regularly assigns peer mentors to students on an individual basis.

The Committee on Medical Student Wellbeing provides confidential peer support, confidentially connects students to mental health resources, and collaborates with the Office of Medical Student Education and Director of Student Success to educate students on ways to stay successful and maintain wellness. The faculty advisors of the Committee on Wellness are not involved in student assessment and can provide an alternate pathway for referral to mental health counseling for students who may be uncomfortable addressing their concerns with College administration.

In addition, fourth year students serve as teaching assistants in first year Foundations courses. This provides students with basic skills in teaching and evaluation in a "coached" environment, to revisit foundation sciences through teaching or scholarly activity, and to reinforce longitudinal integration in the VIC by revisiting foundation sciences with a clinical perspective. The first and second year student benefits from the teaching assistant’s medical student experience and mentorship throughout the course.
5. Ensure that all first-year students receive, during their first semester, an orientation to academic advising and associated roles and responsibilities, as well as information about the Fourth Year Plan for Career Success.

The College of Medicine does not follow a semester system; however as described above, during Orientation, students are introduced to the PCR group system, including the advising and academic support services provided by the Office of Medical Student Education and Director of Student Success. A series of annual wellness and academic success workshops are scheduled throughout the year to help students cope with the demands of medical school.

The on-line resources of the Careers in Medicine program are made available from the first week of medical school and use of them is regularly encouraged by advisors in individual and group meetings with advisees, the Associate Dean for Students, and via the Careers in Medicine workshops. Two such class-wide Careers in Medicine workshops are scheduled during each of the first two years of medical school. Alongside the workshops, during each fall semester a series of 19 specialty panel discussions are given during lunch hours, representing the range of medical and surgical specialties among which students will eventually choose to apply for residency training. (See Fall 2014 Careers in Medicine Specialty Panel Series.) In parallel with those official offerings, a robust assortment of medical and surgical specialties and subspecialties are represented by Student Interest Groups in which a large proportion of the student body participates each year.

Plan Regarding Assessment of Advisor Effectiveness

The College of Medicine’s ultimate determinant of advising efficacy is the residency match which takes place in March of the student’s graduating year. Residency match data is the College of Medicine’s equivalent of career placement data, and helps to inform the Office of Medical Student Education of the effectiveness of our advising program. In March 2014, we had an unprecedented 100% match for the class of 2014.

In addition, we utilize nationally-normed data from the annual Graduation Questionnaire (GQ) distributed to graduating medical students by the American Association of Medical Colleges (AAMC). 2014 GQ data indicates that 97.9% of graduating students responded that they “agree” or “strongly agree” that they were satisfied with the quality of their medical education. This is much higher than the national rate (91.4%).  UVM College of Medicine satisfaction has been above 90% for the past five years, with satisfaction being greater than 95% for four out of the last five years. 2014 Graduating students rate UVM Associate Dean of Students (AAMC’s lingo) higher than corresponding national rates for accessibility, awareness of student concerns and responsiveness to student problems.

We also have internal quality metrics that look at individual satisfaction, and plans are ongoing to institute an annual climate survey which will include a section on advising.