

**DMU PA PROGRAM
REMEDATION POLICY AND PROCEDURES 2025-26**

Purpose

The purpose of the DMU Physician Assistant (PA) program remediation policy, outlined below, is to improve student learning of clinical and technical skills, clinical reasoning and problem-solving abilities, interpersonal skills, medical knowledge, and professional behaviors. The remediation process allows faculty to identify and address student deficiencies in a timely manner, which helps to assure forward progress toward meeting program and professional competencies. The correction of deficiencies is measured and documented.

This policy also improves the program's process of self-assessment and accreditation compliance.

Applicable ARC-PA Standards (5th edition):

- A3.15 The program must define, publish, consistently apply and make readily available to students upon admission: c) policies and procedures for remediation and deceleration.
- B4.01 The program must conduct frequent, objective, and documented evaluations of student performance in meeting the program's learning outcomes and instructional objectives for both didactic and supervised clinical practice experience components. The evaluations must: b) allow the program to identify and address any student deficiencies in a timely manner.
- C1.01 The program must define its ongoing self-assessment process that is designed to document program effectiveness and foster program improvement. At a minimum, the process must address: b) effectiveness of the didactic curriculum, c) effectiveness of the clinical curriculum, d) preparation of graduates to achieve program defined competencies, e) PANCE performance, f) sufficiency and effectiveness of principal and instructional faculty and staff, and g) success in meeting the program's goals.

Overview of Remediation Policy

DMU PA Program Remediation Team (PART)

The DMU PA program Remediation Team (PART) oversees student remediation throughout the program. The PART consists of four program faculty who are dedicated to student learning and assessment and are committed to ensuring effective remediation practices.

Remediation Protocol

Clinical Medicine Courses (MSPA 1337, 1338, and 1339)

Failure of System (< 75% in a system)

Failure of a system is defined as < 75% achievement on all assessment items aligned to that clinical medicine system. A student failing a clinical medicine system is required to participate in the remediation process outlined below.

Completion of this remediation process is essential to addressing deficiencies in medical knowledge and to prevent further knowledge gaps. However, this process will not result in any adjustment of the course or system grade as recorded in the grade book and these systems are still counted in the total number of system failures in the course.

1. Upon failure of a clinical medicine system, the Course Director and/or academic assistant will notify the PART. The student will be contacted by a member of the PART to outline the steps for remediation.
2. Remediating students will be required to meet with the PART (or Course Director) following system failure to gather additional information, review the remediation plan, and to discuss methods for reassessment and goals for successful remediation.
3. The student will be required to complete a remediation assignment (Appendix A) based on areas of deficiency as determined by a review of the objectives and outcomes for the failed system. Details of the remediation assignment (format, objectives, expectations, timeline, due date, etc.), and resource referrals, as applicable, will be communicated to the student by the PART and/or course director.
4. The PART will schedule at least one additional meeting with the learner following completion of the remediation assignment to review the completed assignment and address any ongoing concerns. The PART faculty member

will assess the learner's understanding of concepts included on the remediation assignment as described in #5 below.

5. Reassessment will have two components:
 - i. The first component will be a verbal assessment of learner understanding of concepts included on the remediation assignment via four (4) discussion questions. Questions will be selected from topics on the completed remediation assignment and will follow the "question prompts" included on the remediation rubric.
 - ii. The second component of reassessment will consist of evaluation of the learner's remediation assignment via grading rubric (Appendix B) to ensure demonstration of understanding and acquisition of medical knowledge consistent with the learning objectives and outcomes for the remediated system. Learners are required to achieve a satisfactory score on the written assignment in order to successfully remediate.
 - iii. Learners achieving a reassessment score of $\geq 80\%$ will have successfully completed the remediation process for the given system.
 - iv. Learners who score $< 80\%$ on reassessment, or who do not satisfactorily pass the written remediation assignment, will be referred to the PA Academic Progress Committee (APC) for further consideration and recommendations.
6. The PART will strive for a timely remediation of clinical medicine topics by aiming to complete this outlined remediation process in a time frame of about 2-3 weeks. This time frame may be shortened or extended based on individual student needs as determined by the PART.
7. Failure of > 2 systems within MSPA 1337 Clinical Medicine I and MSPA 1338 Clinical Medicine II, or > 1 system in MSPA 1339 Clinical Medicine III will result in course failure. For further information on course failure, please refer to the Student Handbook.

Clinical Applications Courses (MSPA 1385, 1386, 1387)

Failure of Simulated Encounter - Objective Structured Clinical Examination (OSCE)

1. Upon failure of an OSCE, the Course Director will notify the PART.
2. The student is required to meet at least once with the PART (or Course Director) prior to the next scheduled simulated encounter or remediation encounter to gather additional information, review the remediation plan and to discuss methods of reassessment, student progress, and provide feedback.
3. Prior to the scheduled meeting with the PART, the learner is required to complete the following self-assessment activities, as applicable and assigned:
 - a. Re-watch recorded OSCE encounter.
 - b. Complete OSCE Self-Assessment Form (Appendix C).

Note: Remediation team member(s) will also review recorded patient encounter with prepared feedback for the learner.
4. Upon identification of specific deficiencies, remediation team faculty and the learner will collaboratively develop SMART goals the student must achieve on upcoming OSCE events to successfully remediate. These SMART goals will be shared with the clinician grader for the learner's remediation, who can provide feedback to the PART and learner regarding achievement of/progress toward goals.
5. For formative encounters, the student must achieve the pre-determined remediation SMART goals during the remediation encounter or the next simulated encounter to successfully remediate. If student is unable to achieve SMART goals and pass the next simulated encounter, the student will continue to meet at regular intervals with the PART and/or other faculty to further develop and enhance clinical skills until SMART goals are attained.
6. For summative encounters, the student must repeat the summative encounter and achieve the pre-determined remediation SMART goals. The student must achieve a score of $> 80\%$ to pass the repeat summative encounter.
7. Failure of ≥ 3 OSCEs cumulatively across all Clinical Applications courses (MSPA 1385, 1386, 1387) will result in referral to the PA APC.

8. Failure of 4 OSCE encounters in MSPA 1386 Clinical Applications II, or failure to successfully remediate the final OSCE in MSPA 1387 Clinical Applications III will result in a course failure. For further information on course failure, please refer to the Student Handbook.

Documentation

The PART will maintain records of students who are referred to the remediation team including reason for referral, remediation plan/goals, progress, reassessment, and correction of deficiencies (Microsoft Teams). Documentation of individual student meetings between remediating learners and PART faculty will occur in the program Teams Advisor Documentation Tool.

Other Assessment Types

For other assessment types and courses not listed here, please refer to the course syllabus for specific remediation information. Please also refer to the current Student Handbook for additional information regarding remediation and course failure.

References

Guerrasio J. *Remediation of the Struggling Medical Learner*. 2nd ed. Association for Hospital Medical Education; 2018.

Kalet A, Chou CL. *Remediation in Medical Education: A Mid-Course Correction*. 2nd ed. Springer International Publishing; 2023.

Clinical Medicine System Remediation Assignment

SYSTEM NAME

Directions: Please complete the table(s) below with information about the listed diagnoses. Be thorough and detailed in your responses. Information should be in your own words, not merely copy and pasted. You may reference your lecture materials, but you must use and cite *at least two* additional sources in completing this assignment. You are responsible for knowing and understanding the content on these tables and may be asked about any information from this assignment as part of your reassessment by PA remediation team faculty.

Objectives:

Copy instructional objectives from clinical system not achieved at $\geq 75\%$

Condition/Topic: XX

Etiology/ pathophysiology	Epidemiology	Signs/symptoms, clinical presentation	Diagnosis (physical exam findings, evaluation, diagnostic criteria)	Management (pharmacologic and non-pharmacologic)

Condition/Topic:

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Etiology/ pathophysiology	Epidemiology	Signs/symptoms, clinical presentation	Diagnosis (physical exam findings, evaluation, diagnostic criteria)	Management (pharmacologic and non-pharmacologic)

Reassessment Prompts

Remediation team faculty with ask the student 3-4 questions during the remediation meeting to assess understanding of the clinical medicine content. Questions may be selected from the following (any combination):

- Describe the etiology/pathophysiology of _____.
- How would a patient with _____ generally present (signs/symptoms)?
- How would you distinguish _____ from other conditions with similar clinical presentations?
- What are the expected findings on physical examination of a patient presenting with _____?
- What would you expect to see on diagnostic testing in a patient with _____?
- Discuss the pharmacologic management of a patient with _____.
- What are important non-pharmacologic management considerations in a patient with _____?

References:

- 1.
- 2.

Clinical Medicine System Remediation Reassessment Rubric

	Unsatisfactory (0 points)	Satisfactory (1 point)
Written assignment: Student appropriately identifies the etiology, epidemiology, signs and symptoms, diagnosis, and management for the specified clinical medicine topics (REQUIRED)		
Verbal reassessment #1: Student responses to reassessment prompt #1 demonstrate understanding of the specified clinical medicine topic(s)		
Verbal reassessment #2: Student responses to reassessment prompt #2 demonstrate understanding of the specified clinical medicine topic(s)		
Verbal reassessment #3: Student responses to reassessment prompt #3 demonstrate understanding of the specified clinical medicine topic(s)		
Verbal reassessment #4: Student responses to reassessment prompt #4 demonstrate understanding of the specified clinical medicine topic(s)		
Total:	Unsatisfactory (fail) < 4 points	Satisfactory (pass) ≥ 4 points

OSCE Self-Evaluation and Reflection

Subjective

1. What aspects of the HPI/history went well?
2. How can you improve upon your history-taking skills for this patient and future clinical experiences?

Objective

3. What aspects of the physical examination went well?
4. How can you improve upon your physical examination skills for this patient and future clinical experiences?

Assessment/Plan

5. What aspects of the assessment/plan portion of your patient encounter went well?
6. How can you improve upon your assessment and plan skills for this patient and future clinical experiences?

Oral Presentation and/or Documentation

7. What aspects of the oral presentation and/or SOAP note went well?
8. How can you improve upon your oral presentation and/or documentation skills for this patient and future clinical experiences?

Patient Interaction and Communication

9. What aspects of patient interaction and communication went well?
10. How can you improve upon your patient interaction and communication skills for this patient and future clinical experiences?

Global

11. What component(s) of this OSCE did you find the most challenging?
12. What is your overall impression of your individual performance on this OSCE assessment considering where you are in your clinical training?

SMART Goals (to be completed with PA Remediation Team faculty member)