

Policy to Request Students at Academic Difficulty to meet with Student Support Services Personnel

PURPOSE:

To facilitate the timely and appropriate academic progression of each medical student, a formal review policy and procedure is employed to track and provide assistance to students enrolled in the program leading to the medical degree in the School of Medicine. This policy and procedure provides early identification of students that may encounter academic difficulty and enable the implementation of timely corrective measures.

The Universidad Central del Caribe (UCC) has an obligation to maintain the credibility of the University and the integrity of its programs and courses by maintaining and insisting upon appropriate levels of achievement from its students in their academic study. The UCC addresses this obligation through the ongoing formal Academic Monitoring System (AMS). Students confronting academic difficulties are identified by faculty/course coordinators and referred to the guidance counselor to assess factors in need of attention and to develop an appropriate intervention plan.

DEFINITIONS:

Students in Academic Difficulty: A student that is performing marginally or below a passing score in one or more courses and is at risk of failing a course/clerkship.

Academic Monitoring System: The AMS is a system that works in close collaboration between the faculty/course coordinators, year coordinator, the Associate Dean of Medicine, the Dean of Admissions and Student Affairs and the guidance counselor. Through the AMS students confronting academic difficulty are periodically reported to the Office of the Dean of Student Affairs for the corresponding support services.

Support Services Personnel: Refers to a professional Guidance Counselor, Dean of Student Affairs or academic advisor.

POLICY CONTENT AND PROCEDURE:

A student that is performing marginally or below passing score in one or more courses/clerkships and is at risk of failing will be identified and reported through the AMS. After each unit exam, the course coordinator reports the results to the year coordinator. The year coordinator documents and compares the progress of each student and submits a report to the year subcommittee. Students presenting academic difficulties are identified and referred to the Dean of Admissions and Student Affairs, who discusses the report with the Guidance Counselor. The Guidance Counselor follows up on those students presenting academic difficulties by e-mail, phone calls or regular mail in order to invite them for a visit.

All students who are identified with academic difficulty and making unsatisfactory academic progress **are required** to discuss their academic progress with the Guidance counselor/Dean of Students or academic advisor.

During this process, the student will be given assistance to identify reasons for not achieving satisfactory academic progress and support in order to develop an intervention strategy. This intervention strategy will include actions agreed upon by the student. Agreed upon actions may also be developed in conjunction with the Faculty and academic advisor. The plan may include counseling (provided at the institution or outside), tutorial help, or referral to external health care providers or other specialized services. These services will adhere to all confidential management of records in compliance with all institutional policies and federal regulations to this effect. The Guidance Counselor reports to the course coordinator the follow up provided to the students who were presenting academic difficulties.

Students facing academic difficulty may seek assistance from the Office of the Dean of Student Affairs on a voluntary basis.

A student with academic difficulties may refuse seeking for help at the Office of the Dean of Students Affairs, Guidance Counselor or Academic Advisor. In such cases students will be referred to the Student Evaluation and Promotion Committee for a face-to-face hearing with the Committee. The student will have to express the reasons for refusing the service and must present a corrective plan to the attention of the Committee for their approval and follow-up.

APPROVAL DATE: October, 2011

THIS POLICY TAKES EFFECT ON: November, 2011 THIS POLICY WILL REVIEWED ON: Every year

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