

The Liaison Committee on Medical Education (LCME) Data Collection Instrument (DCI) and the AAMC Curriculum Inventory

As medical educators, we know that the accreditation process can be comprehensive and detailed. For medical schools, there may be more than one type of accreditation needed or sought. Medical schools may be subject to state-specific accreditation bodies; as an example, the [Higher Learning Commission](#) accredits colleges and universities in a 19-state region of the United States. A list of regional accrediting agencies for institutions can be found [here](#). The U.S. Department of Education identifies the [Liaison Committee on Medical Education](#) (LCME) as an accrediting agency for medical education programs leading to the MD degree (for simplicity, referred to as medical schools) which are part of accredited institutions.

The LCME [Data Collection Instrument](#) (DCI) details the standards and specific data within each standard needed as part of an accreditation submission. For a full accreditation submission, there are 12 standards, and within those standards specific elements, typically in data table or narrative format. The majority of the curriculum content can be found in standards 6-9:

- Standard 6: Competencies, Curricular Objectives, and Curricular Design
- Standard 7: Curricular Content
- Standard 8: Curricular Management, Evaluation, and Enhancement
- Standard 9: Teaching, Supervision, Assessment, and Student and Patient Safety

To support medical schools in their documentation for the LCME DCI, a number of tables within the Curriculum Inventory (CI) Verification Report have been formatted in alignment with DCI standards. The Verification Report is given to schools through the CI School Portal after successfully submitting curricular data. You can view a sample of the 2018 Verification Report [here](#). Below is a listing of all the tables within the Verification Report which support a response to a specific LCME DCI standard.

Table within the CI Verification Report	LCME DCI Standard
Table 2: Primary Instructional Method: Courses	6.0-1, 6.0-2
Table 3: Clerkship Instructional Time	6.0-3
Table 5: Assessment Methods: Courses	9.0-1, 9.0-2
Table 6: Assessment Methods: Clerkships	9.0-3

The DCI is updated periodically and thus there are versions that may differ from each other, as medical schools are on different accreditation year cycles. To accommodate for these differences, the CI Verification Report provides more data than may be needed for a specific school’s DCI completion. This data may be useful to schools beyond the DCI completion, as it can be used for program evaluation and continuous quality improvement.

To support schools' completion of the DCI related to instruction and assessment methods, data is summarized according to the categories the LCME uses. The CI has 30 different instructional method types, and 18 different assessment method types. A standardized vocabulary for instructional methods, assessment methods, and resources can be found [here](#).




**Curriculum Inventory
Standardized Instructional and Assessment Methods and Resource Types**

Suggested citation:
MedBiquitous Curriculum Inventory Working Group Standardized Vocabulary Subcommittee (2016). *Curriculum Inventory standardized instructional and assessment methods and resource types* (March 2016 version). Washington, DC: Association of American Medical Colleges.

Instructional Methods	Assessment Methods	Resource Types
IM001: Case-Based Instruction/Learning	AM001: Clinical Documentation Review	RE001: Animation
IM002: Clinical Experience - Ambulatory	AM002: Clinical Performance Rating/Checklist	RE002: Audience Response System
IM003: Clinical Experience - Inpatient	AM003: Exam – Institutionally Developed	RE003: Audio
IM004: Concept Mapping		RE004: Cadaver

A mapping of CI instructional and assessment method types to LCME categories can be found [here](#).



Curriculum Inventory Instructional and Assessment Methods mapped to LCME Reporting Categories

The Liaison Committee on Medical Education (LCME) has a limited number of specific instructional and assessment methods it wishes schools to report on when completing the Data Collection Instrument (DCI) for accreditation. The MedBiquitous/AAMC Curriculum Inventory (CI) Standardized Instructional and Assessment Methods and Resource Types contains more instructional and assessment methods than are called for in the DCI, so some CI instructional and assessment methods have been grouped into categories below to support schools' accreditation efforts.

Verification Report Table 2		
LCME Instructional Methods	Instructional Method Unique Identity (UID)	Curriculum Inventory Instructional Methods
Lecture	IM013	Lecture
Lab	IM012	Laboratory
Small group	IM008 IM019 IM026	Discussion, Small Group (<=12) Problem-Based Learning (PBL) Team-Based Learning (TBL)
Patient contact	IM002 IM003 IM018 IM024 IM025 IM029	Clinical Experience - Ambulatory Clinical Experience - In-Patient Preceptorship Service Learning Activity Simulation Ward Rounds

As an example, the LCME states in their DCI that interactions with simulated patients are included in their understanding of patient contact.

Table 6.0-1 Year/Academic Period 1 Instructional Formats						
Using the most recently completed academic year, list each course from <i>year/academic period one</i> of the curriculum and provide the total number of instructional hours for each listed instructional format. Note that “small group” includes case-based or problem-solving sessions. Provide the total number of hours per course and instructional format. If “other” is selected, describe the other format in the text. Add rows as needed.						
Course	Number of Formal Instructional Hours Per Course					Total
	Lecture	Lab	Small Group	Patient Contact*	Other	
Total						

* Includes interactions with simulated patients

Thus the Verification Report includes simulation experiences in the count of formal instructional hours in patient contact, to aid schools in using their curricular data to support accreditation efforts.

Table 2: Primary Instructional Method: Courses							
Table 2 may be used to support your response to the LCME DCI Tables 6.0-1 and 6.0-2.							
The CI Standardized Vocabulary https://www.aamc.org/download/464874/data/curriculuminventorystandardizedvocabulary.pdf contains many instructional method choices. Instructional methods are grouped https://www.aamc.org/download/458016/data/crosswalk.pdf to assist in completing the LCME DCI.							
Primary instructional method refers to whichever instructional method you mark as primary for a given event. If you list more than one instructional method for a given event, the total hours for the event will be attributed to the instructional method marked as primary. For example, if you have a two-hour event in your curriculum management system that includes lecture and simulation, and you choose to mark lecture as the primary instructional method, the full two hours of the event will be attributed to lecture in the Number of Formal Instructional Hours Per Course . To see all primary instructional methods by event count, please refer to Table 4. Please note that the LCME DCI includes simulated patients in patient contact hours; your instructional hours tagged with the instructional method simulation (IM025) are included in the column “Patient contact”.							
Clerkship instructional time by week and hours is located in Table 3.							
Sequence Blocks: Course	Academic Level	Number of Formal Instructional Hours Per Course					Total
		Lecture	Lab	Small groups	Patient contact	Other	
Sequence one	1					5.00	5.00
Sequence two	2	3.00		5.00		4.00	12.00
Sequence three	3				7.00		7.00
TOTAL		3.00		5.00		7.00	24.00

We hope this example illustrates how CI can be used to support efforts towards accreditation, and how schools may also use these resources to support regular efforts toward curriculum management and evolution.

AAMC Building Better Curriculum Webinar Series

Our next webinar is set for **Wednesday, February 13, 2019 at 1:00pm EST**. You can register for upcoming curriculum webinars and view past curriculum webinars [here](#). Our guest speaker is [Dr. Paul Standley, PhD](#), Associate Dean of Curricular Affairs and Program Evaluation at the University of Arizona College of Medicine Phoenix. We look forward to seeing you there!

If you would like to nominate yourself or a colleague as a future AAMC Building Better Curriculum Webinar guest speaker, please reach out to ci@aamc.org.

Onward!

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