

University of Illinois College of Medicine



Phase 1 Assessment Policies and Procedures in the Illinois Medicine Curriculum

Approved by CCIA on July 31, 2019

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Expectations of students *in all courses*:

- **Students must participate in required activities, such as attending and participating in activities and completing preparatory and follow-up assignments on time with appropriate engagement to receive a passing grade.**
- **Students are expected to attend all mandatory activities in their entirety.** See Phase 1 Attendance Procedures
<https://medicine.uic.edu/education/educational-policies>
- **Students are expected to know and to abide by the standards for professional behavior detailed in the College of Medicine's Student Academic Policies and Professional Standards.**
<https://medicine.uic.edu/education/educational-policies/>
- **Not meeting the aforementioned expectations may impact students' ability to progress through the College of Medicine's undergraduate medicine program. Students who are contacted by representatives of curricular affairs or student affairs (Deans, course faculty, advisors, course coordinators) are expected to respond promptly and to meet with representatives as requested.**

Phase 1 (pre-clerkship) courses

1. Block Courses

- **Blocks 1 - 7**

2. Longitudinal Courses

- **Doctoring and Clinical Skills**
- **Synthesis**
- **Medical Colloquia**

3. Preparation for Clerkships Course

- **Transition to Clerkships**

Phase 1 comprises seven Block courses, three longitudinal courses, and a course to prepare for the start of clerkships.

Block Courses

Each of the seven Block courses is 5-10 weeks in duration. The first two Block courses provide a broad overview of medical science topics. Starting with Block 3, the Block courses focus on specific organ systems.

Longitudinal Courses

Three **longitudinal courses** run the entire length of Phase 1.

Doctoring and Clinical Skills (DoCS) focuses on work with patients in clinical settings as well as in simulation practice settings. In DoCS, students develop patient interviewing, physical examination, clinical reasoning, and communication skills.

Synthesis meets for a week at the end of most Block courses and includes simulated cases, sessions that focus on patients in the context of society, sessions that address the US healthcare system, as well as small group sessions with faculty focusing on professional identity formation, career development, and approaches to wellness. At the end of Phase 1 there is a six-week Synthesis Capstone Block 8 course that reviews and reinforces core concepts immediately before the Step 1 exam.

Medical Colloquia meets multiple times throughout Phase 1 and engages our community in powerful dialogues about key issues in medicine.

Preparation for Clerkships Course

Transition to Clerkships (TTC) is the last course of Phase 1 and its content is revisited in Phase 2 during the Clinical Connections and Competencies (C3) course. TTC provides practice in clinical skills and procedures and exposure to the expectations of the clinical environment.

See Appendix 1, Credit Hours Per Course

Graded Assessment in Phase 1

The College of Medicine provides students with its clear expectations with regard to meeting professional standards, preparing for group active learning sessions, using feedback to develop learning plans and expectations with regard to contributing to the learning environment and having a positive impact on other students' learning. The College's expectations are communicated in students' orientation to medical school, in Transition to Clerkships, and on its website.

All courses in Phase 1 result in a transcript record of either Pass or Fail. Longitudinal courses result in a transcript record for each term. Students have access to detailed information about their performance on quizzes, final exams, Objective Structured Clinical Examinations (OSCEs), and other assessment measures with an eye to identifying and understanding which areas to focus on for further development, and which study or practice strategies may be most useful.

See Appendix 2, Progressing Through the Curriculum

Graded assessment in Block courses

Block courses provide foundational medical knowledge via case-based learning in a classroom or lab setting, or via independent learning. Block grades comprise three weighted elements:

Professional engagement, 10%
Weekly assessments, 30%
Final exam, 60%

1. Professional Engagement

Professional Engagement represents 10% of the total grade for a Block course and is based on attendance. In Block courses, it is **non-compensatory**, meaning that this element must be passed to receive a course grade of Pass. Unexcused absences negatively impact the Professional Engagement element of the grade. An unexcused absence on one day represents 1 of 10 Professional Engagement points. (See Attendance Policy for description of unexcused absences.) If students have more than three unexcused absences, they receive a failing grade for the Block course.

All other professionalism issues will elicit a Professional Development: Concerns form and meetings with the course director and campus student affairs and curriculum deans.

2. Weekly Assessments

Weekly Assessments represent 30% of the total Block grade. Weekly assessments include weekly quizzes as well as scores from Team-Based Learning (TBL) session. Weekly quizzes are unproctored and typically contain 20 items; they have a uniform pass level of 67%.

Assessment score weights may vary from term to term; students are provided with the grading table in advance of each term.

3. Final Exam

The Final Exam represents 60% of the total Block grade and is based on a proctored examination with roughly 100 NBME-format items. The minimum pass level varies based on the faculty-rated difficulty level of the items in each exam. The final exams in Block courses are **non-compensatory**, meaning that failing the final results in failing the course.

Students with Block final exam scores below or near the minimum pass level are referred to academic support, apprised that these scores place them at risk for lack of readiness for Step 1 and for clerkships, and are expected to develop a learning plan in collaboration with Strategic Academic Support. Students who fail a Block must pass a retake exam. Students who fail a Block for professional engagement reasons must successfully complete professionalism remediation.

See Appendix 3, Remediation Scenarios

See Appendix 4, Block Course Grading Scenarios

Graded assessment in longitudinal course: Doctoring and Clinical Skills (DoCS)

DoCS is a clinical course and the same level of professionalism is expected in this course as is expected in clerkships. Assessment in DoCS is based on observation of students' practice of clinical skills and attitudes. Punctual attendance is required at all DoCS sessions. **Failure to attend an activity will affect your overall DoCS grade.**

At the end of each 16-week term, students receive a Pass / Fail grade for this longitudinal course.

Students must demonstrate success in:

- conducting patient interviews including patient rapport; history-taking and physical examination;
- demonstrating medical knowledge and clinical reasoning; and
- developing treatment plans.

The course grade element weights vary from term to term throughout the longitudinal course, and students are provided with the grading table in advance of each term.

Professional Engagement

Professional Engagement in a DoCS course is based on attendance and conduct.

Unexcused absences negatively impact the Professional Engagement element of the grade. An unexcused absence on one day will result in the loss of 2% in the category of professionalism within the DoCS grading table and will result in a score of zero for a quiz (if scheduled). (See Attendance Policy for description of unexcused absences.).

Attendance in DoCS courses is **non-compensatory**, meaning this element must be passed to receive a course grade of Pass.

Exceeding the specified number of unexcused absences posted below by course results in a failing course grade regardless of performance on other course grade elements:

DoCS 1 unexcused absences allowed before course failure:

- three unexcused absences in the Fall term
- two unexcused absences in the Spring term
- one unexcused absence in the Summer term

DoCS 2 unexcused absences allowed before course failure:

- three unexcused absences in the Fall term
- one unexcused absence in the Spring term

All other professionalism issues will elicit a Professional Development: Concerns form and meetings with the course director and campus student affairs and curriculum deans. A pattern of professionalism lapses could lead to failure of the course.

Graded assessment in longitudinal course: Synthesis

Synthesis Grade: At the end of each 16-week term, students receive a Pass/Fail grade for this longitudinal course. Successful completion of required activities for Synthesis Weeks and Synthesis Capstone Block 8 will result in a passing grade for this longitudinal course.

Examples of required activities during Synthesis Weeks and Synthesis Capstone Block 8

- Simulated and paper clinical cases that develop over time
- Professional development activities
- Post-Block analysis of exam performance
- Creation of individualized learning plans
- Formative NBME Exam for assessing Step 1 readiness

The course grade element weights vary from term to term, and students are provided with the grading table in advance.

Graded assessment in longitudinal course: Medical Colloquia

Students are required to prepare for, participate in, and submit periodic reports of their participation, learning goals achieved, and future learning plans regarding the topics addressed.

Students must complete the required number of Medical Colloquia assignments with appropriate engagement to receive a passing grade. At the end of each 16-week term, students receive a Pass/Fail grade for this longitudinal course.

Appendix 1. Credit Hours Per Course in Phase 1

CREDIT HOURS BY COURSE

Title	Timing/Duration	Credit Hours (74 total)	Credit Hours (% of Total)
Block Courses		51	69%
1. Body Systems & Homeostasis	1A; 7 weeks	5	6.8%
2. Pathogenesis	1A; 8 weeks	6	8.1%
3. Skin, Muscle, & Movement	1B; 6 weeks	5	6.8%
4. Circulation & Respiration	1B; 9 weeks	7	9.5%
5. Digestion & Homeostasis 2	1C; 7 weeks	5	6.8%
6. Brain & Behavior	1D; 10 weeks	8	10.8%
7. Reproduction & Regulation	1D; 5 weeks	4	5.4%
8. Synthesis Capstone	1E; 14 weeks	9	12.2%
9. Transition to Clerkships	1E; 2 weeks <i>(plus 5 wks for Synth wks listed below)</i> = 73 graded weeks	2	2.7%
Longitudinal Courses		23	31%
Doctoring and Clinical Skills	Weekly throughout 1A – 1E	15	20.3%
Synthesis	1A: 2 x 1 wk; 1B, 1C, 1D: 1 x 1 wk	5	6.8%
Medical Colloquia	offered various wks in 1A, 1B, 1D	3	4.0%
TOTALS		74	100%

CREDIT HOURS BY TERM

Weeks in Template	Courses	Course Rubric and Number* (* = C, P, or R)	Credit Hours by Course	Total Credit Hours/% of Phase 1 Credit
Phase 1A 17	Body Systems & Homeostasis 1 Pathogenesis DoCS Synthesis Colloquia	MD* 601 MD* 602 MD* 611 MD* 621 MD* 631	5 6 4 2 1	18 (24.3%)
Phase 1B 16	Skin, Muscle, & Movement Circulation & Respiration DoCS Synthesis Colloquia	MD* 603 MD* 604 MD* 612 MD* 622 MD* 632	5 7 4 1 1	18 (24.3%)
Phase 1C 8 Then 8 week break	Digestion and Homeostasis 2 DoCS Synthesis	MD* 605 MD* 613 MD* 623	5 2 1	8 (10.8%)
Phase 1D 16	Brain & Behavior Regulation & Reproduction DoCS Synthesis Colloquia	MD* 606 MD* 607 MD* 614 MD* 624 MD* 634	8 4 4 1 1	18 (24.3%)
Phase 1E 16	Synthesis Capstone DoCS Transition to Clerkships	MD* 625 MD* 615 MD* 640	9 1 2	12 (16.2%)
Totals	73 graded weeks		74	74 (100%)

Appendix 2. Progressing through the curriculum: Learning plans and individualized student learning:

As part of the curriculum, all students write learning plans that help them analyze their performance data, improve their capacity for self-assessment (areas of weakness and areas of strength), and set goals for themselves. Learning plans help students to identify the types of study strategies that work best for them in addressing the specific demands of medical school (adaptive learning system, study groups, etc.). Learning plans also aid instructors and tutors in identifying patterns of issues that an individual student may face over time and how those issues may be successfully addressed.

Continuous improvement for student learning:

The LCME requires that students who are at risk for failing a course be informed in a timely manner to ensure opportunities to recover. This requirement pertains to both courses and clerkships and typically takes the form of mid-course or mid-clerkship communication to individual students that they are at risk for failing the course or clerkship. In Phase 1, students receive frequent feedback, including information based on weekly assessments.

Various issues may place students at risk including:

Acquiring and applying knowledge:

Students may show early signs of difficulty mastering material, particularly in the first two Block courses, and the reasons for this difficulty may vary widely (competing family demands, adjustment to the medical school environment, study planning issues, stress, etc). These challenges may emerge at later points in the academic years as well.

Acquiring and demonstrating skills specific to clinical environments and patient care:

Students are likely to begin medical school with a range of prior experiences in clinical settings, from no experience to prior experience as a health care professional. Early signs of difficulty demonstrating communication skills, history-taking skills, or physical examination skills are not uncommon. Most of these resolve through practice. However, some students, despite receiving useful feedback and opportunities to practice in low-stress, low-stakes settings may not be demonstrating the increased fluidity that their peers are demonstrating. Developing a clear picture of the possible reasons for these issues, and documenting them with the student, is essential to creating a plan for addressing the issues. In some cases, the underlying cause is an insufficient medical knowledge base; in other cases, students may not be prioritizing opportunities for clinical practice, including simulations, and might be focusing only on academic progress toward the Step 1 exam.

Demonstrating attitudes and behaviors appropriate for a professional, in all settings:

Professionalism issues are often the most difficult issues to address and correct. Even though each student has the responsibility to know and utilize College policies, professionalism lapses may occur because a student is not familiar with the College's standards, or is new to an environment and needs help interpreting the standards in a specific setting. Additionally, students may be hesitant to seek help and decide to make a decision without sufficient knowledge or context. As a College representing the community of practice our role is to communicate professional standards to students and to provide feedback and guidance on an ongoing basis (please refer to the College's Student Academic Policies and Professional Standards: Statement on Professional Behavior):

<http://medicine.uic.edu/wp-content/uploads/2017/10/APPS-as-approved-by-COMExec-June-14-2017-005.pdf>

Students are encouraged to ask questions about their progress and to consult with their course director, their academic advisor, as well as assistant and associate deans of student affairs, academic affairs, and curricular affairs. The College's Strategic Academic Support (SAS) team focuses on procedures across the campuses that support student success.

Staying on track:

The integrated curriculum offers opportunities for students who initially fail a component or multiple components of a course grade to recover from the failure and continue progression in the student's original timeframe.

Students who encounter difficulty with graded elements of a course are particularly encouraged to speak with their academic advisor to identify successful strategies for addressing difficulties during a course, rather than after final grades are determined.

Remediation:

In Block courses or Longitudinal courses, students may fail to meet criteria for passing an entire course; this may require remediation and can have implications for progression in the curriculum.

Students who receive a failing grade for a course may be required to engage in remediation activities to receive a passing grade for the course. However, under certain circumstances, students will be required to alter their original timeframe or to discontinue their studies at UI-COM. Please refer to the College's promotions policies as stated in the Academic Policies and Professional Standards:

<http://medicine.uic.edu/wp-content/uploads/2017/10/APPS-as-approved-by-COMExec-June-14-2017-005.pdf>

Appendix 3. Remediation Scenarios

What are the implications of failing the final exam at the end of a Block?

A failing grade on the Final Exam will result in failing the Block course. The student must prepare a learning plan under the direction of the Strategic Academic Support (SAS) team. The student must satisfy the conditions of the learning plan, including a schedule of communication and meetings with the Office of Student / Academic / Curricular Affairs at a frequency specific to each student. A student's learning plan may include taking exams for practice, as a tool for self-assessment.

Students who fail a Block course receive an F on their transcript. If a student fails the Block course, the student may retake the final exam after preparing a study plan approved by an academic skills specialist, if eligible according to the College's promotions policies as stated in the Student Academic Policies and Professional Standards. The retake exam score is factored in a grade recalculation and may result in a passing grade for the course if the course minimum pass level (MPL) is met. The retake of the final exam will be scheduled during the summer between M1 and M2 years (for Blocks 1-5) or during Synthesis Block 8 (for Blocks 6-7). Only students who have passed at least 67% of the year's curriculum (M1 or M2) are eligible to retake course final exams.

Remediation of a Block course may address professional engagement, assessment associated with specific weeks of the Block, and/or specific portions of the final exam. Course remediation activities may include writing assignments, a final exam retake, and other assessment activities. Successful course remediation will result in a Block course grade transcript history showing first the F and then the P received.

What are the implications of a student failing both Block 1 and Block 2?

Students who fail both Block 1 and 2 courses must meet with the campus curriculum dean and student affairs dean to receive approval for a study plan.

What are the implications of a student failing the professional engagement component of assessment within a Block?

Professional Engagement is **non-compensatory**, meaning that if this portion of the grade is failed, the student receives a failing grade for the entire course. Remediating the professional engagement component comprises individualized structured professionalism remediation including making up all missed assignments.

What are the implications of failing a longitudinal course (DoCS, Synthesis, or Medical Colloquia)?

In each of the three longitudinal courses, at the end of each term, students receive a Pass or Fail for the course segment in that term of Phase 1. Students' learning plans should address the performance issues that contributed to a failing grade for a term. Failing a longitudinal course as a whole requires individualized, structured remediation based on an analysis of areas of strength and weakness in student performance. Missed assignments must be completed and additional activities are structured to address identified areas in need of improvement.

Failure of a longitudinal course for a term is included in calculations that determine if criteria have been met for being eligible for final exam retakes, requiring completion of a repeat year, or dismissal from the program based on the promotions policy (please see the College's promotions policies).

What are the implications of failing the weekly assessment portion of the course grade?

If a student receives below an average of 67% across all weekly quizzes and TBL IRATs and TRATs within a Block, the student can still pass the course.

Who will work with at-risk students or students who are required to engage in remediation?

Strategic Academic Support (SAS) is a College-wide team with membership representing each campus. This team works across the College to share best practices in supporting student performance excellence, to ensure efficient resource utilization, and to provide seamless support for students in academic skills, clinical skills, and professional engagement. Strategic Academic Support teams at each campus consist of faculty, learning specialists, academic advisors and other representatives of the Offices of Student / Academic Affairs, and those specializing in development of and remediation of foundational medical knowledge, clinical and procedural skills, as well as professionalism.

Related Documents

See Appendix 1, “Credit Hours Per Course”.

See Appendix 4, “Block Course Grading Scenarios”.

See Appendix 6, College Committee on Student Promotions, “Promotion to the M3 Year”.

Appendix 4. Block Course Grading Scenarios

Block grades comprise three weighted elements:

- Professional engagement, 10%
- Weekly assessment, 30%
- Final exam, 60%

The Professional Engagement portion of a Block course grade represents 10% of the total Block grade and is based primarily on attendance. It is **non-compensatory**, meaning that this element must be passed to receive a course grade of Pass. Students' unexcused absences will negatively impact the Professional Engagement element (one unexcused absence for a day represents one point of 10 Professional Engagement points in a Block 1-7 course). If a student has more than three unexcused absences, the student receives a failing grade for the Block course.

The Weekly Assessment portion of a Block course grade represents 30% of the total Block grade and is based on assessments during a given week (including TBL IRAT and TRAT if applicable). Weekly quizzes are unproctored. Each quiz has the same uniform minimum pass level of 67% in all Block courses. Block course directors expect students to be able to answer two-thirds of each weekly quiz correctly.

The Final Exam portion of a Block course grade represents 60% of the total Block grade and is based on a proctored examination with NBME-format items. The final exam is **non-compensatory**, meaning that failing the exam results in failing the course. The minimum pass level for final exams will vary from Block to Block to reflect the rated difficulty level of the items in each exam.

Scenario 1:

Professional Engagement: at maximum

Weekly Assessment: at MPL 67 passing

(Consistent across Blocks)

Final Exam: at MPL 67 passing

(Varies by Block)

This student received no deductions for Professional Engagement, and passed weekly assessment and the final exam at minimum pass level, 67%. The Block course pass level is 67%, and the student's score is 70.3, resulting in a grade of Pass.

Grade Element	Weight	Minimum Pass Level %	Actual Performance %	Calculate	Total
Professional Engagement	.10	67 (7/10)	100 (10/10)	.10 x 100	10.0
Weekly Assessments	.30	67	67	.30 x 67	20.1
Final Exam	.60	67	67	.60 x 67	40.2
Total for Course	1.0	Course MPL 67			Pass 70.3

Scenario 2:

Professional Engagement: at maximum

Weekly Assessment: at maximum

Final Exam: below MPL 67

This student received no deductions for Professional Engagement, and received maximum credit for weekly assessments, but missed the MPL for the final exam, which means the course was failed.

Grade Element	Weight	Minimum Pass Level %	Actual Performance %	Calculate	Total
Professional Engagement	.10	67 (7/10)	100 10/10	.10 x 100	10
Weekly Assessments	.30	67	100	.30 x 100	30
Final Exam	.60	67	64	.60 x 64	Exam Fail
Total for Course	1.0	67			Course Fail

Scenario 3:

Professional Engagement: at maximum

Weekly Assessment: below MPL of 67

Final Exam: at MPL of 67

This student received no deductions for Professional Engagement, missed the MPL of 67% for combined weekly assessments, and was at MPL 67% for the final exam. The Block course pass level is 67%, and the student's score is 70.2, resulting in a grade of Pass. Note that Weekly Assessments are compensatory, meaning that not meeting the MPL for quizzes does not result in failing the course.

Grade Element	Weight	Minimum Pass Level %	Actual Performance %	Calculate	Total
Professional Engagement	.10	67 (7/10)	100 10/10	.10 x 100	10.0
Weekly Assessments	.30	67	60	.30 x 60	18.0
Final Exam	.60	67	67	.60 x 67	40.2
Total for Course	1.0	67			68.2 Pass

Scenario 4:
 Professional Engagement: at maximum
 Weekly Assessment: at MPL 67
 Final Exam: **above MPL 62**

This student received no deductions for Professional Engagement and passed weekly assessment at MPL (67%) and passed the final exam above the MPL. Note that for this Block's final exam, the MPL was different (62 rather than 67 in other examples). The pass level for this Block course is 67.3%, calculated:

$$67 \times .10 = 10.0$$

$$67 \times .30 = 20.1$$

$$62 \times .60 = 37.2 \text{ (different Block final exam MPL)}$$

The student's score is 70.3, resulting in a course grade of Pass.

Grade Element	Weight	Minimum Pass Level %	Actual Performance %	Calculate	Total
Professional Engagement	.10	67 (7/10)	100 10/10	.10 x 100	10
Weekly Assessments	.30	67	67	.30 x 67	20.1
Final Exam	.60	62	67	.60 x 67	40.2
Total for Course	1.0	67.3			70.3 Pass

Scenario 5:

Professional Engagement: below MPL 67 (non-compensatory)

Weekly Assessment: at MPL 67

Final Exam: above MPL 62

Grade Element	Weight	Minimum Pass Level %	Actual Performance %	Calculate	Total
<i>Professional Engagement</i>	.10	67 (7/10)	60 (6/10)	.10 x 60	6.00
Weekly Assessments	.30	67			
Final Exam	.60	62			
<i>Total for Course</i>	1.0	64			<i>Professional Engagement Fail</i>

This student received enough deductions for Professional Engagement to fall below the MPL for this element and failed the Block course.

Appendix 5. Promotion to the M3 Year [as written in College Academic Policies]

All students are subject to the following requirements for promotion to the M3 year. These policies are drawn from the College's Academic Policies and Professional Standards.

1. **Students who complete satisfactorily all M2 curricular requirements** and have taken USMLE Step 1 will be recommended for promotion to the M3 year. The promotion will not be effective, however, until the fall M3 term (seventh term), and is dependent upon the receipt of a passing Step 1 score in the interim.

Students who are not recommended for promotion following the fifth term will not be allowed to begin clerkships.

Students are expected to sit for Step 1 before Phase 2 Transition to Clerkships course. Any student who anticipates not being able to sit by this date, must request a delay at least six weeks prior to that orientation date

Students who have passed at least 67% of the weighted curriculum for a given year (M1 or M2) are eligible for final exam retakes, if warranted. Their score on a final exam retake must be sufficient to meet the MPL for the course. If they have met all other curricular requirements, they will be recommended for promotion to the M3 year.

Students in M1 or M2 year who do not pass all requirements after participating in approved summer term courses or exams are eligible for a repeat year, **if they have not already repeated one or more of each year's terms.**

2. **Students who pass 40% to 66% of the weighted curriculum** for M2 year are eligible for a repeat year, if they have not already repeated a year, when they comply with the following conditions. They are required to prepare a study plan with Strategic Academic Support. The plan must detail their strategy to ensure success during the repeat year. At its discretion, CCSP may review and approve the study plan. Students who are granted a repeat year must participate in all M2 courses at their campus. **Students who have already repeated the M1 or M2 year are subject to dismissal.**

3. Students who are granted a repeat of a year are required to participate in all courses, including those previously passed. The failing grade(s), however, will remain on the transcripts. Repeating students who do not pass all courses by the end of the academic year are subject to dismissal.

4. **Students who pass less than 40% of the curriculum** are subject to dismissal.

All students granted a repeat year must satisfy the conditions of their study plan, which includes regular communication and meetings with the Office of Student / Academic Affairs, on a frequency to be determined for each student. Students who fail to do so will be subject to dismissal. No student will be granted more than one repeat year. Students who fail to satisfy requirements after a repeat year will be dismissed.

5. In addition, and distinct from the provisions of numbers 2 and 4 above, **any student with an Unsatisfactory or Failing grade for a term in the clinical skills courses** will be required to work with Strategic Academic Support on a study plan, either in conjunction with or in lieu of continuing in the next course in the clinical skills series. At its discretion, CCSP may review and approve the study plan. Any two failing grades in these courses – a repeat failure of the same course segment (term grade), or successive failing grades in two course segments (two successive term grades) – will constitute eligibility for dismissal from the College.