
ACOM CURRICULUM COMMITTEE BYLAWS

I. Purpose: The purpose of the Alabama College of Osteopathic Medicine (ACOM) Curriculum Committee (CC) is to have in place a body (e.g., faculty committee) that exercises collective responsibility for the education program as a whole, and has responsibility for the development, management, evaluation, and enhancement of the curriculum. This committee shall include student and faculty representation from the pre-clinical (years 1 and 2) and clinical education (years 3 and 4) years. The curriculum must meet the mission of ACOM. The ACOM CC will:

A. Evaluate the current curriculum for:

1. Curricular deficits
2. Curricular redundancies
3. Adequacies of delivery
4. Application of nationally accepted standards and best practices.

B. Establish curricular goals and data-driven endpoints unique to the ACOM community in light of regional and local interests as well as ACOM goals.

C. Establish procedures to evaluate the unique relationships of I.A. and I.B. as outlined above.

D. Facilitate implementation of curriculum content, timing, and delivery based on the forthcoming goals and endpoints.

II. Charge and Responsibilities: To develop, manage, evaluate, and enhance the undergraduate osteopathic medical education curriculum at the Alabama College of Osteopathic Medicine (ACOM), enabling graduates to become competitive resident osteopathic physicians by:

A. Meeting regularly to:

1. Establish or adjust educational goals
2. Review curriculum
3. Revise curriculum
4. Recommend changes
5. Facilitate and oversee implementation of curriculum changes

B. Evaluating educational outcomes including:

1. Curricular mapping
2. End of course reports
3. National exams
4. Residency match rates
5. Residency placement
6. Graduating seniors survey

C. Facilitate the design, implementation, and assessment of ACOM's curriculum.

III. Organizational Structure:

The CC will be supported by the Division of Medical Education. The infrastructure of this office will allow the CC to have access to relevant metrics and analytics within ACOM specifically and across national osteopathic and allopathic medical schools and will enable the CC to best oversee the ACOM curriculum.

IV. Membership:

A. CC Election and Appointment:

1. General membership will be comprised of faculty members nominated and elected by the Faculty at large, Dean appointees, student membership, and non-voting ex-officio membership.
 - a. For the purposes of the CC, Faculty is defined as professionals who have been appointed with the rank of Professor, Associate Professor, or Assistant Professor.
2. The Dean reserves the right to appoint two additional voting and/or two additional non-voting members to the CC and ex officio membership of the CC.
 - a. If the specific membership needs of the CC (as outlined elsewhere) are not met by general election, Dean's appointments will fill these roles.
 - b. Dean's appointments, voting and non-voting, will serve a one-year term.
 - c. The Dean may reappoint as deemed appropriate.
3. Two-year terms for elected faculty positions begin every July 1.
4. To maintain continuity of leadership, voting should be scheduled so that election years alternate among membership.

B. General Membership:

1. Eligibility:
 - a. Faculty members, as defined above, must have a minimum of 1 year of Faculty experience at another college of medicine and 2 years of Faculty experience at ACOM OR must have 3 years of Faculty experience at ACOM prior to serving on the CC.
 - b. Assistant and Associate Deans are not eligible for voting membership on the CC.
 - c. Student membership in the CC will be:
 - i. Student Government Association (SGA) President from OMS 1 after February 15 of the respective academic year.
 - ii. Student Government Association (SGA) President from OMS 2.
 - iii. Student representation from the OMS 3 & 4 years represented by an Anatomy/OPP or SIM/PCS Fellow elected by his/her peer Fellows.
 - iv. Student Government Association (SGA) President from OMS 3.
2. Voting membership will be comprised of the following:
 - a. Two Clinical Faculty with greater than or equal to 0.5 FTE to the ACOM Dothan Campus:
 - i. At least one of whom is directly involved in third- and fourth-year clinical education (some examples include direct clinical practice and clerkship directors). (COCA 6.1).
 - ii. At least one of whom is a D.O.
 - b. One Anatomy Faculty.
 - c. One Molecular Medicine Faculty
 - d. One LRC/FMHC Faculty.
 - e. Optional Dean's appointments (IV.A.2.).
 - f. Student representation will be assigned a total of 2 votes. Each student will have 1/2 of one vote. Representation will be comprised of:
 - i. OMS 1 Student Government Association (SGA) President.
 - ii. OMS 2 Student Government Association (SGA) President.

- iii. OMS 3 or 4 OPP/Anatomy or Simulation/PCS Fellow.
- iv. OMS 3 Student Government Association (SGA) President.

3. Ex Officio/non-voting member from each of the following:
- a. Vice President of Institutional Effectiveness and/or his/her Faculty/staff appointee.
 - b. Associate Dean of Medical Education and/or his/her Faculty/staff appointee.
 - c. Associate Dean of Student Services and/or his/her Faculty/staff appointee.
 - d. Pre-Clinical Curriculum Manager.
 - e. Clinical Curriculum Manager.
 - f. Title IV FSA Coordinating Official.
 - g. Chair of OPP.
 - h. Future Clinical Integration Coordinators.
 - i. If a member of the Library Faculty is not elected as a member, one will be appointed as an ex officio member.

C. Membership contribution:

- 1. It is expected that CC members will provide substantive contributions to the general operations and output of the CC.
- 2. Appointed or elected members of the CC who are deemed to not provide substantive contributions or who are deemed to be disruptive to general CC operations may be presented anonymously or otherwise to the Chair and/or Vice President of I.E. to determine whether said member should be removed. The Chair and/or V.P. of I.E. will discuss the situation with the Dean's Cabinet prior to any member removal. The process of removing a member is at the discretion of Dean's Cabinet.

D. CC Leadership:

- 1. The CC will be led by a Chair and Vice Chair.
- 2. Chair:
 - a. The Chair of the CC will be elected by majority vote from the voting membership of the CC.
 - b. The Chair will report to the Dean's Cabinet and assist in the decision-making processes in relation to curricular issues at least monthly.
 - i. It is expected that these reports will occur at least monthly or more frequently as required by ongoing curricular needs as determined by the CC, Dean's Cabinet, and the Dean.
 - c. The Chair will be elected by current CC members upon development of the CC.
 - d. Chair eligibility :
 - i. After June 30, 2021, the Chair must have served on CC for at least 1 year prior to being elected.
 - ii. Must have 3 years of experience at ACOM.
 - iii. The Chair must be Clinical or Biomedical Science Division Faculty with a terminal degree such as a D.O., MD, PharmD, EdD, or PhD. At the Dean's discretion, other qualifications may be considered for Chairship by the CC.
- 3. Vice Chair:

- a. The Vice Chair will assist the Chair in management of the CC and will serve in the Chair's stead should the need arise.
- b. The Vice Chair of the CC will be elected by the voting membership of the CC.
- c. Vice Chair eligibility is the same described in IV.D.2.d.

E. Time Commitments:

1. Early implementation suggested FTEs (first 6-18 months of the CC):
 - a. Chair 0.5 FTE.
 - b. Vice Chair 0.25 FTE.
 - c. Voting members 0.05 FTE.
 - d. Non-voting ex officio members 0.025 FTE.

V. CC Operations, Activities, and Duties:

- A. The CC will work closely with the Division of Medical Education and the Division of Institutional Effectiveness to determine best practices for setting goals for student performance and outcomes as well as goals and standards pertaining to the ACOM community at large.
 1. This is done with regard to ACOM, regional, national, and international data and metrics.
 2. Attention should be given to programmatic outcomes and curricular features related to:
 - a. Institutional, community, and regional goals and needs.
 - b. Match Rates.
 - c. Standardized assessments.
 - d. ACOM Admissions.
- B. Meetings:
 1. Weekly meetings will typically occur in perpetuity pending changes in bylaws. Alterations to the schedule are at the discretion of the Chair and Vice Chair.
- C. Decision-Making Process:
 1. Decisions regarding the oversight of curricular development and delivery made by the CC will be based upon the popular vote of the full voting membership of the CC.
 - a. A two-thirds majority is required to make any final recommendations.
 2. A quorum shall be defined as two-thirds (2/3) of voting faculty members and at least one voting student member.
 3. A quorum shall be present (i.e., telephonically, virtually, by proxy, or in-person) for all votes to be considered binding.
 4. The votes from two-thirds (2/3) of voting faculty and one student are needed for a decision to be binding.
 5. At the discretion of the chair, electronic votes are acceptable via any form of verifiable written medium (examples include email, Teams, or Zoom, hand-delivered written statement, etc.).
 - a. The presiding leader of the CC will represent the result of the electronic votes during the next meeting for the record.

D. Implementation of recommendations:

1. Final CC decisions will be forwarded to the Dean's Cabinet for final approval prior to implementation.
2. CC recommendations approved by Dean's Cabinet will be implemented by the Faculty at large.
3. Implementation of CC recommendations will be facilitated by the V.P. of Institutional Effectiveness and the Associate Deans of Anatomy, Molecular Medicine, Graduate Studies, and Research (Biomedical Sciences); Clinical Sciences; Clinical Resources; Medical Education; and Student Services.

VI. Accountability, Reporting, and Authority:

A. Faculty:

1. Decisions made by the CC should be made with careful and thorough consideration of the input of the academic divisions.
2. Final decisions from the CC will be made by a CC vote.
3. Final CC decisions will be forwarded to Dean's Cabinet for consideration.

B. Dean's Cabinet:

1. The Chair will serve as a representative of the CC at Dean's Cabinet at least monthly.

C. The Dean:

1. Final approval of a given CC recommendation is at the Dean's discretion.

D. Associate Deans of Clinical Sciences and Biomedical Sciences:

1. The Deans will serve in a consultative role to the CC by providing direction and assistance in developing plans for given curricular needs.
2. It is the responsibility of the Associate Deans, faculty, and staff to implement approved recommendations (V.C.1.) within the confines of the curriculum as a whole and the various interdepartmental needs.
 - a. It is understood that the recommendations of the CC are data-driven and evidentiary based on established policies and best practices. Therefore, it is incumbent upon the Deans to implement the recommendations of the CC.
 - b. In the event of an unforeseen circumstance during implementation, the Associate Deans are to alert the CC (VII), and the CC will propose an alternate plan to the Dean's cabinet for consideration.

VII. Special Tasks:

- A. The Dean may assign special tasks to the CC.
- B. The Clinical and Biomedical Science Deans may propose curricular topics to the CC for consideration.
- C. Faculty members may propose curricular topics to the CC for consideration after obtaining support from all parties involved, including applicable Course/Clerkship Director(s), InSpired Forum, and Associate Dean(s).
 1. A presentation to the InSpired Forum shall be accepted by general approval of those present at the forum.
- D. Student members may propose curricular topics to the CC for consideration when supported by a faculty sponsor.

1. A faculty sponsor should have responsibility in the curricular area of proposed change.
2. The proposal will be presented in harmony with sections VI.A. and VII.C..

VIII. Subcommittees:

- A. Within the operational construct of the CC, the following subcommittees will be formed under this Charter and, pending consideration of the CC and Final Charter, will be continued and considered key operational components of the CC:
 1. Subcommittee on Curricular Design, Content, and Delivery.
 2. Subcommittee on Assessment, Evaluation, and Implementation.
 - a. Mapping (e.g., EPAs, Core Competency, COMLEX Blueprint)
 3. Subcommittee on Assessment and Evaluation Outcomes with a focus on:
 - a. Student Performance.
 - b. Residency Placement.
- B. Within the operational construct of the CC, subcommittees may be formed to address special topics or needs at the request of the Dean or the voting membership of the CC.
 1. Subcommittees will be considered consultative in relationship to the CC at large, and as such, subcommittee decisions must be approved by the CC.
- C. Subcommittees will be chaired by a member of the CC unless directed otherwise by the Dean.
- D. General membership of subcommittees may include Faculty and staff that are not members of the CC as determined by the needs of the subcommittee and the expertise of the Faculty and staff and at the discretion of the Dean, the CC Chair, and/or the relevant subcommittee chair.