Grade Notification Policies and Procedures

—These policies apply to all MD students.—

Background
The Liaison Committee on Medical Education (LCME) element 9.8 requires that all final grades be recorded and available to students within six weeks of the end of a course or clerkship. The Gateway Curriculum of Washington University School of Medicine is a competency-based curriculum in which students do not receive tiered grades. Summative decisions regarding competency are made at the level of each phase and, during Phase 2, each clerkship for patient care only. Decisions regarding course credit, which are based on the completion of the required elements of a course, are made at the completion of each course during Phase 1. The purpose of this policy is to ensure that no summative assessment or course credit decision is delayed beyond six weeks from the end of or final requirement due date for any course or clerkship, as mandated by our accrediting body.

Policies
• The Medical School Registrar is responsible for monitoring and reporting that all competency or credit decisions for courses, clerkships, and phases are submitted in the learning management system (LMS) within six weeks of the end of the course or clerkship or final requirement due date.
• The failure of course or clerkship directors to submit 100% of decisions within this time frame will result in corrective action(s) as appropriate.

Guidelines
• Communication: The expectations for return of competency and credit decisions should be shared with course and clerkship directors at least annually. All course and clerkship directors should be encouraged to create a streamlined process for the completion and integration of student evaluations in order to meet grade submission deadlines.

The Grade Notification Policies and Procedures for the Washington University School of Medicine MD Program were last approved by the Committee on the Oversight of Medical Student Education (COMSE) on Jan. 10, 2022. All substantive edits to this policy require approval by COMSE.