GMDC

Guidelines for Site Visits and Site Visit Reports

Grenada Medical and Dental Council

Table of Contents

Purpose of the Guidelines 3

I. Types of GMDC Site Visits 3

A. Clinical Site Visit 3

B. Main Campus Site Visit 4

C. Limited Site Visit 6

II. Selection of Site Visitors 7

A. Application Process 7

B. Training and Orientation 8

C. Confidentiality 9

III. Logistics for Site Visit 9

A. Travel Plans 9

B. Reimbursement and Compensation 9

IV. Roles and Assignments 10

A. Roles 10

1. Role of the GMDC Accreditation Secretariat 10

2. Role of Site Visit Team Chair 10

3. Role of Site Visitors 11

4. Role of Site Visit Coordinator 11

5. Role of Observers 12

B. Team Assignments 12

V. Conducting Site Visits 13

A. Interviews and Scheduled Meetings 13

B. Team Deliberations 13

VI. Documents for Site Visits 14

A. Clinical Site Visit Form 14

1. Assessment Definitions 14

2. Review Process 15

B. Main Campus Site Visit Report 16

1. Assessment Definitions 16

2. Structure of the Report 17

3. Main Campus Site Visit Report Review Process 18
VII. Appendix 19
A. Conflict of Interest Policy and Disclosure Form 19
B. Sample Site Visit Schedule 19
C. Style Guide for Site Visit Reports 19
D. Clinical Site Visit Form Template 20
E. Main Campus Site Visit Report Template 20

Purpose of the Guidelines

These guidelines are intended to assist site visitors in preparation for site visits (on-site or virtual) conducted as part of the Grenada Medical and Dental Council ("GMDC") accreditation process. Generally, the process and procedures for the various types of GMDC visits are similar unless otherwise indicated. GMDC has two types of accreditation reviews, a full review and a limited review. Site visits are an integral part of GMDC's accreditation reviews. Detailed information about the full review and limited review process can be found in the GMDC Accreditation Policies and Procedures Manual.

I. Types of GMDC Site Visits

GMDC conducts three types of site visits: clinical site visits, main campus site visits, and limited site visits. Clinical site visits and main campus site visits happen as part of the accreditation full review process. Limited site visits happen outside of the accreditation full review process and may include a visit to a clinical site or main campus site depending on the cause of the review. Site visitors participate in all three types of site visits and are responsible for gathering information for the GMDC Governing Body during each site visit. The Governing Body uses this information to make a decision about a programme's accreditation status. Site visitors are responsible for familiarizing themselves with all types of site visits.

A. Clinical Site Visit

Clinical site visits are conducted as part of the full review process. Visits to clinical sites assess the performance of the clinical sites against a subset of GMDC standards and elements, specifically those related to clinical sites. Generally, clinical site visit teams have up to three (3) site visitors. Individual clinical sites are assessed on the following elements:

Element	Element Focus
I.1.6	Institutional authority
I.3.2	Conflicts of Interest
I.3.5	Mistreatment policies
I.6.2	Campus safety
I.7.2	Appropriate spaces
I.10.1	Adequate resources (patient volumes/types)
I.10.2	Affiliation agreements
II.2.2	Educational objectives and outcomes
II.2.6	Comparability
II.3.4	Defined types and numbers of patients
II.4.1	Effective assessment of student performance

II.4.4	Formal feedback during clerkships
III.3.2.	Student support services
III.3.5.	Environmental exposures
IV.1.1	Learning environment (IPL)
IV.4.1	Graduate Medical Education (GME)
IV.4.2	Faculty familiar with learning objectives
IV.4.3	Appropriate supervision during clinical learning situations
V.1.5	Faculty functionally integrated
V.2.2	Adequate qualified faculty

Site visitors should review the following reference materials in preparation for a clinical site visit:

- GMDC Guidelines for Site Visits and Site Visit Reports
- GMDC Standards of Accreditation
- GMDC Accreditation Policies and Procedures Manual
- Clinical Site Visit Form
- Previous site visit report (if available)

B. Main Campus Site Visit

Site visitors conduct a main campus site visit to assess the programme's performance against all GMDC Standards. The typical length of time for a main campus site visit is three (3) to five (5) days. In addition, main campus site visit teams generally have three (3) to five (5) individuals, inclusive of the Executive Director. A summary list of the themes as well as the standards organized under each theme are presented below. Additional details, along with the elements associated with each standard, can be found in the GMDC Standards of Accreditation.

Theme I: Institutional Setting

I.1 Governance
I.2 Faculty Committees
I.3 Institutional Policies
I.4 Legal, Risk, and Compliance
I.5 Finance
I.6 Admin/HR and Contracts Management
I.7 Facilities and Equipment
I.8 Information Technology
I.9 Libraries
I.10 Clinical Affiliations

Theme II: Curriculum

II.1 Curriculum Governance
II.2 Delivery Structure
II.3 Content
II.4 Assessment

Theme III: Students
III.1 Admissions
III.2 Registrar
III.3 Student Affairs
III.4 Financial Aid and Debt Management
III.5 Visiting Students
III.6 Postgraduate Progression

Theme IV: Academic Environment
IV.1 Interprofessional Education
IV.2 Diversity
IV.3 Research Portfolio
IV.4 Clinical Experience
IV.5 Learning Environment

Theme V: Faculty
V.1 Faculty Affairs
V.2 Faculty Development

Theme VI: Institutional Effectiveness
VI.1 Mission and Strategic Planning
VI.2 Quality Assurance and Improvement

Theme VII: Pilot Elements
VII.1 Student Well-Being[1]

The site visit team members will receive the following documents electronically no later than six months ahead of the main campus site visit. Site visitors are expected to review the documents in preparation for the main campus site visit:

- GMDC Guidelines for Site Visits and Site Visit Reports
- GMDC Standards of Accreditation
- GMDC Accreditation Policies and Procedures Manual

[1] The pilot element theme is not required by GMDC and does not impact a programme's accreditation decision. This is a location in which GMDC can test out new themes for eventual incorporation into the Data Collection Instrument (DCI).

- Completed DCI and its supporting documentation
- Medical School's Self-Study Summary Report
- Results of student surveys
- Main Campus Site Visit Report Template
- Other supporting documentation requested by the site visit team

Three months prior to the full review main campus site visit, site visitors are expected to review the medical school's completed DCI, the Self-Study Summary Report, and the results of the student experience survey and develop a list of initial questions and supplemental data requests. The Accreditation Secretariat ("the Secretariat" or "Office of the Secretariat") will compile the questions and communicate them and supplemental data requests to the school for a response. More information on this process and the timeline requirements can be found in the GMDC Accreditation Policies and Procedures Manual.

C. Limited Site Visit

Limited site visits are conducted as part of a limited review to focus on specific areas of concern or identified non-compliance. A limited site visit can include a visit to the programme's clinical sites or main campus. They are typically shorter in length (1-2 days) than the main campus site visits because of their focused nature. Limited site visits occur as a result of:

1. Probation status
2. Significant non-compliance with GMDC's Standards of Accreditation from a majority of the clinical site reviews not rising to the level of a probation decision
3. Special Information Requests for accreditation concerns

Limited site visits are conducted to address specific concerns, and therefore the standards and elements being assessed at the limited site visit are specific to the cause of the visit. In preparation for a limited site visit, site visitors are expected to review the following documents:

- GMDC Guidelines for Site Visits and Site Visit Reports
- GMDC Standards of Accreditation
- GMDC Accreditation Policies and Procedures Manual
- Other information and supporting documentation requested by either the GMDC[2] or the Office of the Secretariat

For more information on the limited review, please refer to the GMDC Accreditation Policies and Procedures Manual.

[2] A limited site visit triggered by probationary action would require the school to submit an action plan and briefing book; site visitors review the submission of the briefing book.

II. Selection of Site Visitors

The Office of the Secretariat recruits and selects qualified medical practitioners, medical educators, and other qualified professionals to serve as site visitors on behalf of GMDC. The individuals selected will have the knowledge, expertise, and appropriate qualifications to serve in this capacity, particularly in the areas of medical education, medical practice and/or health professions education. For instance, the Secretariat looks for physicians to serve on site visit teams that hold or have recently held an active medical license and demonstrate that they have extensive experience in clinical practice.

Medical educators are individuals who currently hold or have recently held faculty positions at an institution accredited by a recognized accrediting body that offers degree-granting medical education programmes. Medical educators are expected to have sufficient and appropriate experience in teaching and/or supervision of medical students or medical residents. Other qualified professionals with the appropriate expertise, academic credentials and certifications may be selected from fields such as healthcare administration, physical and biological sciences, among others, based on the requirements of the visit.

The Office of the Secretariat maintains a roster from which site visitors are selected to serve on teams. The roster is reviewed and updated on a periodic basis in order to ensure that individuals with the appropriate skills and competencies are represented and that the diversity and breadth of the pool of potential site visitors are sufficient.

GMDC informs site visitors of their selection to a main campus visit approximately nine months prior to the scheduled site visit, absent extenuating circumstances. For clinical site visits, GMDC informs site visitors of their selection approximately three to four months prior to the scheduled visit, absent extenuating circumstances. These selections will be based on:

- the scope and nature of the visit (e.g., a clinical site visit, a main campus site visit, a limited site visit)
- the expertise needed to conduct the visit
- the geographic location of the site visitors

A. Application Process

Individuals who have the appropriate qualifications to serve on GMDC site visit teams are invited to submit their credentials by completing the Site Visitor Application, which can be found on GMDC's website, www.gmdc.gd.

The Office of the Secretariat will acknowledge receipt of applications and review the qualifications of each applicant. Each applicant will be directed to the GMDC website to

complete GMDC's Conflict of Interest and Disclosure form for Site Visitors, also found in Appendix A of this document.

Staff reviews each completed application to determine if the applicant has the appropriate qualifications to serve as a site visitor for GMDC. If the applicant meets GMDC's stated criteria, the successful applicant will be informed of the decision via written correspondence and subsequently added to the roster of site visitors.

The Secretariat selects individuals from the roster of site visitors to establish a site visit team for each visit, with the intent of ensuring that each team is representative of the expertise and knowledge needed for the review. An individual's placement on a team to participate in a site visit is not final until the team list is finalized and confirmed by the secretary. If invited to participate in a site visit, prospective site visitors should carefully consider their availability and ability to be impartial during the review without any conflicts of interest. GMDC will make every effort to avoid conflicts of interest.

B. Training and Orientation

The GMDC Office of the Secretariat is responsible for selecting site visitors and ensuring that site visit teams have sufficient information and training needed to conduct an effective review and assessment of the sites. All site visitors, current and prospective, are required to participate in training sessions (virtual or in-person) to ensure that they understand the GMDC Standards of Accreditation and related policies and procedures as well as GMDC's expectations for the conduct of a site visit. On occasion, GMDC may require participation in special or updated training to address specific issues and topics related to the accreditation process. The Office of the Secretariat will send notices to current and prospective site visitors when training sessions are scheduled. A required orientation is provided prior to the start of each site visit by the Site Visit Team Chair ("the Team Chair").

Prospective site visitors must attend at least one training cycle (usually 2 sessions) of GMDC Site Visitor Training workshop in order to be considered to serve on a site visit team. If selected to serve on a team, each new site visitor will be assigned to work with an experienced site visitor, who will serve as a resource during his/her first site visit. The Team Chair will also ensure that new site visitors receive a brief orientation prior to the visit. On occasion, a new site visitor may be asked to observe a site visit, prior to an assignment as a formal member of a site visit team.

On occasion, materials from a programme applying for initial accreditation or an accredited programme may be used during site visitor trainings for training purposes only. In such instances, prior permission from the Chief Academic Official (CAO) of the medical school will be sought.

C. Confidentiality

Site visitors invited to serve on site visit teams and/or to participate in training sessions or other GMDC-authorized activities are required to abide by the requirements for confidentiality. This includes signing the GMDC Confidentiality Statement attached to their application form.

Documents for any current or former programme applying for initial accreditation and/or accredited programme used to support GMDC's review, evaluation and accreditation processes shall be confidential and shall not be disclosed to any individual, group or organization external to GMDC without the prior written consent of the governing authority of the medical education programme. For more information on GMDC's retention of site visitors' applications and confidentiality, see GMDC's Records Retention Retrieval and Destruction Policy

III. Logistics for Site Visit

The GMDC Accreditation Secretariat, is responsible for organizing the logistics of the site visit with the programme and communicating the relevant information to the site visitors. For virtual visits, the site will be asked to designate personnel for technological assistance.

A. Travel Plans

The length of time that site visitors can expect to spend on a visit is dependent on the type of site visit, the location of the site(s), and the number of sites scheduled per visit. Clinical site visits are conducted in geographic clusters for efficiency; therefore, some reviews may include site visits to multiple clinical sites. A visit to the programme's main campus typically takes three (3) to five (5) days, and the duration of clinical site visits vary based on the number of sites visited in the geographical cluster. The invitation to serve on a site visit team will note the duration and type of the visit.

All travel plans are centralized and coordinated on behalf of the site visit team members to ensure that members of the team arrive at the designated hotel in time for an organizational meeting the day prior to the start of the scheduled visit. Each site visit team member receives single room accommodation.

B. Reimbursement and Compensation

After the site visit, team members are expected to report their expenses for reimbursement. More information on expenses and what is eligible for reimbursement can be found in the [Site Visitor Reimbursement Guidelines]. Team members should submit their expenses to the Office of the Secretariat within [seven (7) calendar days] of the completion of the site visit.

The Secretariat will create an invoice for each site visitor based on the number of sites visited, the duration (measured in days) of the site visit, and the additional days for pre-visit research and post-visit writing of the Main Campus Site Visit Report where applicable. The Secretariat will submit the invoice and expenses for each site visitor.

IV. Roles and Assignments

There are various parties that work together to ensure that GMDC can successfully conduct site visits. These parties include the Team Chair, site visitors, and the Secretariat. The roles of the aforementioned parties are outlined below.

A. Roles

1. Role of the GMDC Accreditation Secretariat

Members of the Accreditation Secretariat may participate in site visits and other medical programme accreditation activities as their schedule allows.The GMDC Accreditation Secretariat is responsible for:

- Selecting the site visitors
- Providing the site visit team with guidelines on conducting the site visits
- Coordinating and scheduling site visits with the programme's liaison
- Providing the programme's DCI, self-study summary report, results of the student survey, and additional relevant documentation to the site visit team
- Working with the member institution to organize the agenda and schedule for the visit
- Ensuring that the members of the site visit team adhere to GMDC's Accreditation Policies and Procedures and that the Standards are interpreted correctly and consistently
- Drafting invoices and submitting expenses for reimbursement for each site visitor

2. Role of Site Visit Team Chair

The Site Visit Team Chair is the leader of the site visit team and attends the site visits with the team. The Team Chair is responsible for:

- Scheduling and participating in interviews during the site visit,
- Securing information and documentation

- Providing a brief orientation about the site, the visit, and the responsibilities of site visit team members
- Collating the assigned parts of the Main Campus Site Visit Report completed by the site visitors into the draft report that is submitted to the Accreditation Secretariat.

3. Role of Site Visitors

Site visitors conduct site visits on behalf of GMDC. Site visitors are responsible for:

- Reviewing the medical school's completed DCI, self-study summary report, and results of the student experience survey and providing initial questions and supplemental data requests 3 months prior to the main campus site visit
- Conducting and participating in interviews during the site visit
- Assessing performance against a subset of GMDC standards and elements related to clinical sites during the conduct of clinical site visits
- Documenting observations during clinical site visits by completing the Clinical Site Visit Form
- Assessing compliance against all GMDC standards and elements during the main campus site visit
- Documenting observations during the main campus site visit by completing their assigned portions of the Main Campus Site Visit Report
- Assisting in the completion of a limited site visit report after a limited site visit

The role of site visitors does not include making compliance determinations. Rather, they assist the GMDC Governing Body in making compliance determinations by carrying out the responsibilities stated above.

4. Role of Site Visit Coordinator

The responsibilities include but are not limited to—

- Collaborate with relevant parties on the site visit schedule
- Coordinate review of a medical school's documents
- Assist members of the team (as well as the Team Chair) in preparations for the site visit
- Collaborate with the Secretariat and Team Chair for the timely collection of information from site visitors in the preparation of reports

On occasion, the Secretariat may ask the Site Visit Coordinator to accompany a team and support the activities of the site visit team.

The Site Visit Coordinator will also work collaboratively with the Team Chair to coordinate the preparation of the team's draft site visit report for submission to the Secretariat, ensure that the formatting and quality of site visit reports are consistent with GMDC's expectations, and coordinate both the draft and final site visit reports as well as any feedback from institution for submission to the Secretariat.

5. Role of Observers

Observers are members of the GMDC Governing Body, members of the GMDC's Accreditation Secretariat, individuals from other oversight or regulatory bodies, or prospective site visitors who wish to observe the site visit process. They are not considered members of the site visit team. Such individuals (inclusive of members of the Governing Body or Secretariat) will attend but not participate in the team's deliberations or contribute to the development of the Main Campus or Clinical Site Visit Report. Individuals who are not site visitors can only participate in a site visit as an observer with prior permission from GMDC.

B. Team Assignments

Generally, each team member is assigned certain responsibilities in assessing compliance with GMDC Standards and may lead the questioning during interviews with specific individuals or groups. The team assignments are made by the Secretariat in collaboration with the Site Visit Coordinator prior to the visit. Site visitors are informed of their team assignments as early as practicable but generally soon after the site visitor has accepted an invitation to serve on a team. Team assignments may vary by site visit, depending on whether it is a main campus site visit, a clinical site visit, or a limited site visit. Site visits are conducted in geographic clusters when possible and may include visits to multiple clinical sites in the same geographical location.[3]

At the organizational meeting on the day prior to the start of the scheduled visit, the Team Chair reviews the schedule and agenda for the duration of the visit, discusses plans for the conduct of the visit, addresses any questions from the site visit team members, and determines if there are any final changes to the schedule or team assignments.

[3] GMDC selects which clinical sites to visit using the representative sample methodology, which is detailed in GMDC's Accreditation Policies and Procedures Manual.

Team members are expected to come to the organizational meeting with questions that arose from their review of the materials. During a full review main campus visit, the team can discuss and identify any concerns based on the team's review of the medical school's DCI, self-study summary report, student survey results, and supplemental documents provided. The team can also discuss the initial questions and data requests they developed after the review of the programme's materials, as well as the programme's response to these questions and requests. The full review main campus site visit will have a key focus on these initial questions. Should members of the team require any further information or documentation at any time during the visit, that request should be made by the Team Chair to the school's accreditation liaison.

V. Conducting Site Visits

A. Interviews and Scheduled Meetings

During the site visit, team members participate in interviews with representatives at each site. While on occasion members of the team may break into smaller groups, the entire team is typically present for each interview. Interviews are organized so that each focuses on the questions the site visit team has for a standard or a set of complementary standards (e.g., an interview with students discussing student affairs and the learning environment). In addition, the standard(s) discussed during interviews will also be based on the stakeholder the site visit team is interviewing. For example, the site visit team may choose to discuss the curriculum governance standard when meeting with the faculty committee responsible for this function. Interview participants from the programme depend on the nature of the visit and the type of site visit (main campus, clinical, or limited). Similarly, a visit to a medical school's main campus as part of the full review will involve interviews and meetings with representatives from a wide-range of constituencies and operational groups. Interviews and meetings at clinical sites will be determined by the scope and range of core and elective rotations offered, among other factors.

Generally, at the start of scheduled interviews or meetings, the Team Chair makes the initial introductions and explains the intent of the visit. All members of the team introduce themselves and, similarly, the medical school (or clinical site) representatives make introductions as well. Each interview, which is based on a standard or set of complementary standards, typically lasts one hour (including student interviews), but this can vary depending on the meeting. See Appendix B for a sample site visit schedule.

B. Team Deliberations

Each site visitor will use the appropriate site visit template (Main Campus Site Visit report template, Clinical Site Visit Form template) to record their findings. However, this

is for note-taking and deliberation purposes, and the site visitors will come to a consensus on their recommendations of compliance for each element associated with the GMDC Standards during team meetings. The team will meet with the Team Chair at the end of each day of the scheduled site visit to discuss their impressions of the site, share their findings, compare notes, and plan for the following day, particularly if there are further questions and/or issues of interest. (GMDC-assigned observers may sit in these meetings, but will not be a part of the deliberations.) After the completion of the site visit, each site visitor will complete their assigned portion of the appropriate site visit template based on the team's consensus. These must be submitted to the Team Chair. More information on the Clinical Site Visit form and Main Campus Site Visit Report can be found in Section VI.

VI. Documents for Site Visits

A. Clinical Site Visit Form

The Clinical Site Visit Form is a checklist for clinical site visits used to assess performance against a subset of DCI standards and elements related to clinical sites. It uses classifications of satisfactory, marginally satisfactory, and unsatisfactory to assess the select elements related to clinical sites.

1. Assessment Definitions

The Clinical Site Visit Form uses the assessment classifications of satisfactory, marginally satisfactory, and unsatisfactory to assess clinical sites against a subset of DCI standards and elements related to clinical sites. This is because compliance with each standard is the responsibility of the medical school as a whole, as determined by GMDC, and therefore not determined at an individual clinical site. The definitions are outlined below.

- **Satisfactory:** Site visitors make this recommendation based on the review of the clinical site; interviews with faculty, staff, students, and representatives from other relevant constituencies; and the professional judgment of qualified site visitors that the medical educational programme has demonstrated that it substantially meets GMDC's Standards of Accreditation.
- **Marginally satisfactory:** Site visitors make this recommendation based on the review of the clinical site; interviews with faculty, staff, students, and representatives from other relevant constituencies; and the professional judgment of qualified site visitors that while the medical educational programme may be out of compliance with one or more GMDC Standards of Accreditation,

it has evidence to support a reasonable expectation that the issue(s) of concern will be resolved within a reasonable period of time.

- **Unsatisfactory:** Site visitors make this recommendation based on the review of the clinical site; interviews with faculty, staff, students, and representatives from other relevant constituencies; and the professional judgment of qualified site visitors that the medical education programme was not able to demonstrate that it substantially meets the GMDC Standards and it is unlikely that the issue(s) of concern will be resolved within a reasonable period of time.

2. Review Process

As part of the full review process, a representative sample of clinical site visits is conducted in the three years leading up to the main campus site visit.

1) Each site visitor completes their assigned part of the Clinical Site Visit Form after each clinical site visit and submits it to the Team Chair.

2) The Team Chair compiles the assigned parts submitted by the site visitors into the Clinical Site Visit Form.

3) The Team Chair (via the Site Visit Coordinator) transmits the Clinical Site Visit Form to the Secretariat for final review.

4) GMDC communicates the final draft of the form/report to the programme.

5) The programme is required to update GMDC on their progress addressing areas of concern identified in Clinical Site Visit Forms in the Annual Progress Report (APR).

6) At the end of the representative sample of clinical site visits the Office of the Secretariat uses all the Clinical Site Visit Forms to complete the “Summary of the Representative Sample of Clinical Site Visits.”

7) The summary is incorporated into the Main Campus Site Visit Report as its own section.

The Clinical Site Visit Form is incorporated into the Main Campus Site Visit Report through a summary of the assessment of the representative sample of clinical sites, completed by the GMDC Accreditation Secretariat. In addition, the findings in the Clinical Site Visit Forms are communicated to the programme by GMDC. Please refer

to the Accreditation Policies and Procedures Manual for further detail regarding the timing and procedures related to the clinical site visits.

B. Main Campus Site Visit Report

The Main Campus Site Visit Report is completed by site visitors after the full review main campus site visit and details the findings from the main campus site visit as well as a summary of the representative sample of clinical site visits. It allows site visitors to recommend every element under each standard as compliant, marginally compliant, and non-compliant. A written narrative should be provided in sufficient detail to indicate the team's rationale/evidence in support of each finding. The rationale/evidence can be drawn from the DCI and Self-Study, interviews conducted during the site visit, and other documentation and/or information reviewed by the team.

Overall, the team will need to ensure that its findings are consistent with its statements on strengths or areas of concern. For additional guidance on the writing of the Main Campus Site Visit Report, see the style guide in Appendix C.

The Governing Body makes the final decision on compliance determinations based on the completed site visit report and other documentation submitted by the school. The report, along with other documents provided by the programme, is used by the Governing Body to assess the evidence of three foundational components related to each accreditation standard: a) governance, b) procedures, and c) documentation.

1. Assessment Definitions

The Main Campus Site Visit Report uses the assessment classifications of compliant, marginally compliant, and non-compliant to provide recommendations to the GMDC around the programme's compliance with all GMDC Standards. The final determination of compliance against each standard and element is made by GMDC upon review of the Main Campus Site Visit Report. The definitions are outlined below.

- **Compliant:** Site visitors make this recommendation based on the review and analysis of information and evidence provided during an accreditation review; interviews with faculty, staff, students, the governing board or representatives from other relevant constituencies; and the professional judgment of qualified site visitors that the medical educational programme has demonstrated that it substantially meets GMDC's Standards of Accreditation.
- **Marginally compliant:** Site visitors make this recommendation based on the review and analysis of information and evidence provided during an

accreditation review; interviews with faculty, staff, students, members of the governing board or representatives from other relevant constituencies; and the professional judgment of qualified site visitors that while the medical educational programme may be out of compliance with one or more GMDC Standards of Accreditation, it has evidence to support a reasonable expectation that the issue(s) of concern will be resolved within a reasonable period of time.

- **Non-compliant:** Site visitors make this recommendation based on the review and analysis of information and evidence provided during an accreditation review; interviews with faculty, staff, students, members of the governing board or representatives from other relevant constituencies; and the professional judgment of qualified site visitors that the medical education programme was not able to demonstrate that it substantially meets the GMDC Standards and it is unlikely that the issue(s) of concern will be resolved within a reasonable period of time.

2. Structure of the Report

The Main Campus Site Visit Report is a comprehensive report covering all GMDC standards and elements. The standards are grouped into six categories, called themes. Each standard has multiple components, called elements. The Accreditation Standards are organised in the following way, and the Main Campus Site Visit Report follows the same structure in its assessment of compliance:

I. Theme
    A. Standard
        1. Element

The report consists of six parts, outlined below.

Section	Title	Description
A	Introduction to the Site Visit Report	A brief narrative regarding the nature of the visit and the profile of the site
B	Site Visitors	The name, title, and affiliation of each person participating in the visit
C	Summary of Key Findings	Key findings from the visit, including the programme's strengths and areas in need of improvement
D	Compliance with GMDC	Ratings of compliance for all 94 elements, including narrative responses outlining rationale/evidence and areas of concern

	Accreditation Standards	
E	Summary of Representative Sample of Clinical Sites	A summary of the strengths and areas of improvement from the representative sample of clinical sites; synthesizes the findings from the Clinical Site Visit Forms
F	Conclusion	Site visitors can provide additional information about the site visits and the programme here

3. Main Campus Site Visit Report Review Process

1) During the main campus site visit, once the team reaches final consensus regarding recommendations of compliance for each of the standards and corresponding elements, the information is recorded by the Team Chair or a designated site visit team member.

2) Each site visitor will complete their assigned parts of the report based on the team's final consensus on each element's compliance classification.

3) Absent extenuating circumstances, portions of the report specifically assigned to individual team members should either be written on-site or forwarded to the Team Chair no later than thirty (30) days after the conclusion of the site visit.

4) The Team Chair will work along with the Site Visit Coordinator to combine assigned portions of the report submitted by each site visitor into a draft team report to be completed within thirty (30) days of the conclusion of the site visit.
    - The Team Chair will ensure that the report includes evidence relevant to the team's findings as well as the team's assessment of the programme's performance with respect to student achievement.
    - The Site Visit Coordinator will ensure that the formatting, coherence and tone of the report are in keeping with the stipulated expectations of GMDC.

5) The Team Chair arranges for the draft report to be sent to the Executive Director of GMDC's Accreditation Secretariat. The Secretariat reviews the report for completeness and to ensure that there is sufficient evidence to support the finding for each element.

6) The Site Visit Coordinator also incorporates the summary of the representative sample of clinical sites into the report. As stated in Section VI.A, the

Secretariat, in collaboration with the Site Visit Coordinator, creates this summary with the use of all Clinical Site Visit Forms from clinical site visits conducted as part of the representative sample.

7) The Executive Director transmits the draft site visit report to the CAO for review and response.

8) The CAO has ten (10) business days from the receipt of the draft to respond, in writing, to correct any errors of fact and address any concerns with the analysis, conclusion, or tone of the report. If the school fails to respond within 10 days, GMDC may assume the school has no such changes.

9) The Team Chair will respond in writing to the CAO about the changes that were or were not made based on the CAO's comments.

10) The Main Campus Site Visit Report is then brought to the Governing Body for final approval. Upon their approval, the Main Campus Site Visit Report is now considered final.

11) The GMDC Governing Body then uses the Main Campus Site Visit Report, among other documents, to make an accreditation decision.

VII. Appendix

A. Conflict of Interest Policy and Disclosure Form
[GMDC SHOULD INSERT FORM]

B. Sample Site Visit Schedule
[GMDC SHOULD INSERT SAMPLE SITE VISIT SCHEDULE]

C. Style Guide for Site Visit Reports

Teams should use the following guidelines to develop and format Site Visit Reports:

- Use Times New Roman, 12 pt. black font, single-spaced for each section completed by the team.
- Use full sentences with appropriate punctuation.
- Academic years should be listed as 20##-## (e.g., 2020-21).
- The first instance of an abbreviated acronym should be spelled out with the abbreviation /acronym in parentheses. For example, Grenada Medical and Dental Council (GMDC), St. George's University School of Medicine (SGUSOM), clinical training manual (CTM), Director of Medical Education (DME), etc. Thereafter either the acronym or the full name is acceptable.
- The terms "medical school," "college," university," "programme," "medical

students," "clinical clerks," or "residents" should not be capitalized unless used as a part of the full name of the school, college or university.

- Reference to the "affiliation agreement" should generally be lowercase, unless it is used as a part of the document's formal title.

- Overall consistency in how certain words are used (e.g., Grand Rounds, Board Review, Journal Club, Emergency Room).

- Reference to core clerkships should be in caps: Pediatrics, Surgery, Internal Medicine, Family Medicine, etc.

- The first-person "I" should not be used in the report if the visit was conducted by a team, rather than a single visitor. The report's findings and statements represent the collective perspective of the team, rather than an individual.

- Typically, reference to a previous site visit should not be included, unless it was a visit conducted under the auspices of the Grenada Medical and Dental Council.

- While it is understood that teams may want to highlight the contributions of individuals at sites visited, the site visit report should focus solely on a medical school's offices, department, or division. For example, rather than stating that a particular person is a superb employee, indicate that the specific office (or division or department) has been exemplary in addressing student needs. Comparable guidance should be followed when issues of concern are addressed.

D. Clinical Site Visit Form Template
Access template here

E. Main Campus Site Visit Report Template
Access template here