

Unit Name and Abbreviation: Assessment and Evaluation Committee – AEC

Authority and Duties:

In Undergraduate / Postgraduate Medical Education

1. Needs analysis related to assessment and evaluation (A&E)
2. System design related to A&E
 - a. To determine the approach, strategy, levels, and criteria related to A&E
 - b. To provide consultancy related to A&E to relevant boards, committees, academic departments, and faculty members
 - c. To ensure recognition of current methods and tools used in A&E and to encourage their use
 - d. To develop materials related to A&E
3. Monitoring and evaluation related to A&E practices
4. Faculty development related to A&E*
5. Scientific research related to A&E

*The Assessment and Evaluation Committee (AEC) exercises this authority in cooperation with the Department of Medical Education (DoME).

Position within the Educational Organizational Chart (see Annex 1) and Other Primarily Related Units:

1. Upward Vertical Relationship
 - a. PDC (in terms of educational program design)
2. Lateral Relationship
 - a. Chief Coordinatorship, Coordinators Committee (CC), Phase Coordinatorships, coordinatorships of all components of the educational program (PBL, ICP, etc.) (in terms of implementation of the educational program)
3. Downward Vertical Relationship
 - a. All commissions related to design within the educational organizational chart (in terms of educational program design)

Unit Structure and Role Descriptions:

1. Chair of the AEC
2. Vice Chair of the AEC
3. Members
 - a. Representatives of Phase Coordinatorships
 - b. At least one full-time faculty member from DoME

- c. At least one student member

Appointment of Appointees, Terms of Office, and Termination of Membership:

All appointments for the establishment and functioning of the AEC are made by the Dean upon the recommendation of the Vice Dean for Education. Members of the AEC are appointed for a term of one (1) year. Members whose term has expired may be reappointed. A member who fails to attend three consecutive meetings within a calendar year without permission or a valid excuse shall forfeit membership, and a replacement shall be appointed using the same procedure. Termination of membership enters into force upon the Chair's recommendation and notification of the Dean's approval to the relevant individual. A faculty member's request to withdraw from committee membership enters into force upon notification by the Chair and approval of the Dean.

Unit Meeting / Interaction Formats and Procedures:

1. Regular meetings
 - a. Meetings related to monitoring and evaluation (once every two months)
 - b. Meetings related to needs analysis (once at the end of each academic year)
2. Extraordinary meetings
 - a. Meetings related to emerging design needs

Unit Cyclical Activities and Frequencies:

1. Review and revision of the "Assessment Procedure" pages in the Academic Program Guides (at the end of each academic year)
2. Review of the "Assessment Matrix" pages in the Phase I–II–III Academic Program Guides and submission of revision proposals to Phase Coordinatorships (at the end of each academic year)
3. Submission by the Dean's Office of the "Assessment Matrix Development Forms for Clerkships" to Phase IV and V Clinical Clerkship Departments, and evaluation of the completed forms returned to the Dean's Office (at the end of each academic year)
 - a. Verification of alignment between data collected through these forms and the "Assessment Tables" in the Phase IV and V Academic Program Guides
 - b. Evaluation and decision-making regarding change/improvement proposals received from academic departments related to clinical clerkship A&E
 - c. Collaboration with the relevant academic department and provision of

consultancy for design related to the improvement needs specified in item “b”.

4. Multiple-choice question workshop (once every two years)
5. Evaluation of program evaluation data related to A&E received from the PDE (board, committee, coordinatorship reports, student feedback, etc.), identification of improvement and/or design needs, and planning accordingly (once every two months)
6. Evaluation of examination/question analyses and planning for improvements where necessary (once every two months)
7. On-site monitoring and evaluation related to A&E in clinical clerkships, and planning for improvements where necessary (once per year)
8. Evaluation of (potential) A&E needs analysis results received from the PDC, identification of improvement and/or design needs, and planning accordingly (once every two months)
9. Evaluation of the quality of questions entered into the Question Bank

Standards and Documents:

1. Education Management Information System – Question Bank Software
 - a. Examination / question / item analysis forms
 - b. Student transcript
2. “Assessment Procedure” pages in the Academic Program Guides
3. “Assessment Matrix” pages in the Phase I, II, and III Academic Program Guides
4. “Assessment Table” pages in the Phase IV and V Academic Program Guides
5. Assessment Matrix Development Form for Clerkships
6. Committee Examination Question Objection Form
7. Exam Rules document

Correspondence and Archiving:

*Coordinatorship / Board / Committee / Working Group

