



Policy: Didactic & Clinical Phase Remediation Policy	Applicability: PA Sciences Program Students
Policy Owner: PA Sciences Program	Approved By: Dean, School of Graduate Studies
Effective Date: May 20, 2024	Last Reviewed: May 6, 2026
Next Review: May 7, 2027	Contact: Program Director, Physician Assistant Sciences

PURPOSE: The purpose of this policy is to establish a structured remediation process that promotes long-term knowledge acquisition, clinical reasoning, and sustained competency among students in the didactic and clinical phases of the program. This policy is designed to ensure that remediation supports not only short-term academic improvement but also readiness for entry into the profession.

SCOPE: This policy applies to all students enrolled in the didactic and clinical phases of the PA program and governs the identification, implementation, and escalation of remediation for academic performance concerns.

POLICY:

Didactic Phase Remediation:

The program utilizes a tiered remediation model to support early identification of academic difficulty, targeted intervention, and longitudinal monitoring of student performance.

Remediation is not limited to correction of isolated academic deficiencies but is intended to ensure integration, retention, and application of knowledge across the curriculum.

Clinical Phase Remediation:

Remediation in the clinical phase of the program will occur when an MMC PA Sciences student fails to pass a major graded assignment with a 70% or higher score. Major assessments include End of Rotation Exams, End of Rotation Papers and Objective Structured Clinical Examinations (OSCEs).

DEFINITIONS:

Remediation – Process for addressing deficiencies in a student’s knowledge and skills, such that the correction of these deficiencies is measurable and can be documented.

Remediation Event – Any required intervention following substandard academic performance, including failed examinations, repeated low performance, or faculty-identified concerns.

Tiered Remediation model - A progressive system of academic support consisting of Tier 1 (early intervention), Tier 2 (formal remediation), and Tier 3 (intensive longitudinal remediation)

Cumulative Academic Burden – The accumulation of multiple remediation events across courses of semesters, associated with increased academic risk and decreased likelihood of



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sustained competency.

PROCEDURE:

Didactic Phase Remediation Procedure:

Tier 1: Early Academic Support

Triggers:

- Any exam score of 75% or less
- Course average trending to "C" final grade (<78-80% at the mid-point of the semester)
- Two assessment scores <75% within a course
- Difficulty with clinical vignette or application-based questions

Required Actions:

- Mandatory exam review with the course director, generally within 72 business hours after student receives exam grade
- Written assignment of targeted learning modules and question sets (e.g., Lecturio)
- Submission of a reflective learning plan by the student within 72 business hours after the meeting

Improvement following Tier 1 intervention is defined as objective evidence of corrected knowledge or performance deficits, demonstrated through subsequent assessment performance. Students must achieve a minimum of 80% on major assessments and demonstrate application of knowledge in clinically oriented contexts. Simple completion of required remediation activities alone does not constitute improvement. All improvements must be verified and documented by faculty.

Tier 2: Formal Remediation

Triggers:

- Failure of a major assessment <69.5
- Repeated low performance within a course at the mid-point of the semester
- Failure to improve following Tier 1 intervention
- Failure to complete Tier 1 intervention

Required Actions:

- Mandatory meeting with course director within 72 business hours after student receives written notification that formal remediation is required
- Development of an Individualized Remediation Plan (IRP)



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- Targeted review of missed instructional objectives
- Completion of assigned question bank and content modules
- Participation in faculty-guided review sessions
- Completion of case-based or application-focused assignments
- Reassessment demonstrating competency in identified area

Grading and Attempts:

- Only one (1) major assessment per course per semester is eligible for grade improvement
- Only one (1) remediation attempt per assessment is permitted
- The maximum score is achievable after remediation is 90%
- Remediation must occur within seven (7) calendar days of the original assessment

Improvement following Tier 2 (Formal Remediation) is defined as sustained demonstration of competency in previously deficient areas, as evidenced by achieving a minimum score of 69.5 or higher on targeted reassessment, successful application of knowledge in clinical contexts, and consistent performance on subsequent course assessments. Students must complete all components of the Individualized Remediation Plan.

Tier 3: Intensive Longitudinal Remediation

Triggers:

- Two failed major assessments within a course
- Three remediation events within a semester
- Four or more cumulative remediation events during the didactic phase
- Failure of a remediation reassessment
- Persistent academic difficulty across multiple courses, as evidenced by course grades below 80%

Required Actions:

- Referral to the Student Progress and Promotion Committee
- Development of a longitudinal academic success plan
- Mandatory weekly faculty or advisor meetings
- Ongoing assignment of structural learning resources (e.g., Lecturio, Aquifer)
- Referral to academic support services

A student is considered to have demonstrated improvement when there is sustained, competency-level performance across multiple assessments and learning contexts, including:

- Achievement of $\geq 80\%$ on two or more major assessments



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- No additional remediation triggers
- Demonstrated ability to apply medical knowledge in clinical or case-based contexts

Completion of all components of the longitudinal academic success plan

Release from Tier 3:

- Students who meet defined improvement criteria may transition to a monitored status period
- During this period
 - Reduced frequency of required meetings
 - Continued performance monitoring
- Full release from Tier 3 occurs only after sustained stability without reoccurrence of academic difficulty
- Students who fail to meet release criteria may remain on Tier 3 for the remainder of the didactic phase and may be referred to the Student Progress and Promotion Committee for additional action.

Outcomes:

The accumulation of remediation events is considered evidence of academic risk and may affect a student's academic standing, progression, and graduation eligibility. Remediation is intended to support competency development and does not guarantee continued progression in the Program.

- One (1) failed major assessment
 - Student enters Tier 2 Formal Remediation
- Two (2) failed major assessments within the same course or three (3) remediation events within a semester
 - Student enters Tier 3 Intensive Longitudinal Remediation
 - Student will be referred to the Student Progress and Promotion Committee for review
- Four (4) cumulative remediation events during the didactic phase
 - Student may be placed on Academic Warning or Academic Probation
 - A formal Academic Success Plan will be required
- Persistent academic difficulty despite Tier 3 intervention
 - Students who fail to demonstrate sustained improvement after Tier 3 intervention may be placed on Academic Probation or referred to the Student Progress and Promotion Committee for consideration of dismissal

Failure to complete any required remediation activity within the prescribed timeframe, absent written approval from the course director or program director will result constitute an



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unsuccessful remediation attempt.

Clinical Phase Remediation Procedure

Failure of Graded Assignments:

In the event that a student scores below 69.5% on a major graded assessment during the clinical phase of the program, the following will occur:

1. The student must contact the Clinical Education Director (CED) within 24 hours of notification of a failed assignment and arrange a meeting with the CED to discuss the assignment and complete a Clinical Remediation Form.
2. The meeting must occur within 48 hours of the notification of a failed assignment, at which time, the student will be given a written remediation form, and a list of topics that were missed on the graded assignment.
3. The remediation assignment must be completed within one week of the initial failed assessment.
4. After the remediation plan has been completed, the student will be re-assessed based upon the nature of his/her deficiency.
5. For failed OSCEs / Oral Presentations, the re-assessment must be completed by the conclusion of the following call-back session.
6. On re-assessment, the student is expected to earn a minimum grade of 69.5% or higher.
7. If the student earns a minimum grade of 69.5% or higher, the student has successfully completed the remediation. However, the highest grade the student can receive is a 70%.
8. Failure to adhere to deadlines and/or failure to achieve a minimum grade of 69.5% will result in referral to the Student Progress and Promotion Committee Student Progress and Promotion Committee.
9. Copies of the Clinical Remediation Form and any correspondence will be made available to the Chair of the Student Progress and Promotion Committee Student Progress and Promotion Committee, the Course Director, the Clinical Education Director, the Didactic Education Director, the student's faculty advisor, and placed in the student's file.

Failure of One First Attempt of PAEA End of Rotation Exam

A student is required to remediate, which consists of a written explanation of the "keyword feedback" provided on the student's individual PA Education Association (PAEA) End of Rotation (EOR) Exam Performance Report. The student will:

1. Select 25 bullet points (if there are less than 25 bullets, the student must answer all bullet points)
2. For each bullet point, the student must expand on the topic listed, focusing on the TASK



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identified (i.e., clinical intervention, clinical therapeutics, diagnosis, diagnostic studies, etc.) References must be provided for each bullet point.

3. After the remediation plan is accurately completed, the student will be required to take another version of the PAEA EOR exam in timed mode within one week of failing the original EOR exam.
4. Students must pass with a score of 69.5% or higher within one week of the original examination.
5. If the student passes the remediation exam, a maximum grade of 70% will be recorded as the final grade.
6. If the student does not earn a grade of 69.5% or higher on the remediation PAEA End of Rotation Examination, the original score will stand and the student will be required to complete another remediation plan as directed by the Clinical Education Director.

Failure of Two First Attempt of PAEA End of Rotation Exam

In the event of a second first attempt End of Rotation exam failure, the student will:

1. Perform the remediation process as outlined above
2. If the student passes the remediation exam, a grade of 70% will be recorded as the final grade.
3. If the student does not earn a grade of 69.5% or higher on the remediation PAEA End of Rotation Examination, the original score will stand and the student will be required to complete another remediation plan as directed by the Clinical Education Director, and
4. The student will be placed on academic probation for the remainder of the clinical phase.

Failure of Three First Attempt of PAEA End of Rotation Exam

In the event of a third End of Rotation exam failure, the student will:

1. Perform the remediation process as outlined above
2. If the student passes the remediation exam, a grade of 70% will be recorded as the final grade, and the student will be placed on academic probation for the remainder of the clinical year.
3. If the student does not earn a grade of 69.5% or higher on the remediation PAEA End of Rotation Examination, the original score will stand and the student will be required to complete another remediation plan as directed by the Clinical Education Director, which may result in delayed graduation.

Failure of Four First Attempt of PAEA End of Rotation Exam

1. Perform the remediation process as outlined above



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2. If the student passes the remediation exam, a grade of 70% will be recorded as the final grade.
3. If the student does not earn a grade of 69.5% or higher on the remediation PAEA End of Rotation Examination, the original score will stand and the student will be referred to the Meharry Medical College Physician Assistant Sciences Program Student Progress and Promotion Committee for recommendation for dismissal from the program.

Failure of a SCPE Course:

1. In the event that a student fails a SCPE course due to the overall score of the course falling below 69.5%, the student will be required to repeat the SCPE course and be placed on Academic Probation for the remainder of the clinical phase.
2. If a student fails a second SCPE course, the student will be referred to the Meharry Medical College Physician Assistant Sciences Program Student Progress and Promotion Committee for recommendation for dismissal from the program.

Outcomes:

- Failure of two (2) first-attempt PAEA End of Rotation Examinations
 - Student will be placed on Academic Probation for the remainder of the clinical phase
- Failure of three (3) first-attempt PAEA End of Rotation Examinations
 - Student will be referred to the Student Progress and Promotion Committee for comprehensive academic review
 - A revised Academic Success Plan will be developed
 - Graduation eligibility will be reviewed
- Failure of four (4) first-attempt PAEA End of Rotation Examinations
 - Students will be referred to the Student Progress and Promotion Committee for consideration of dismissal from the Program

****Any patient safety violation, regardless of assessment score, may result in immediate remediation, course failure, probation, removal from a clinical site, or referral to the Student Progress and Promotion Committee.**



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EXHIBITS: RELATED

POLICIES: