



UW SCHOOL OF MEDICINE

COMPASS

March 2026 Launch



Why Change?

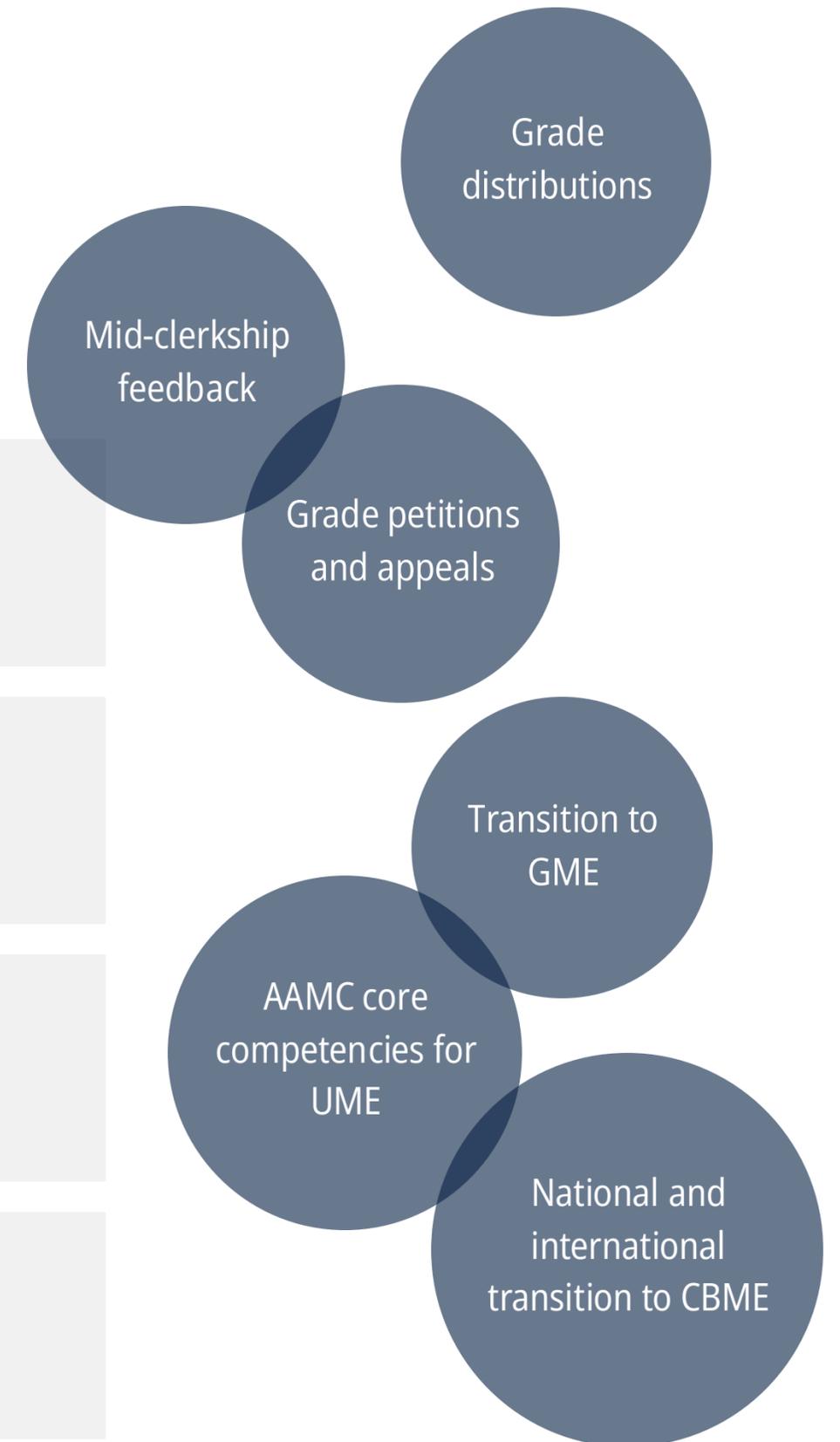
There are significant gaps and challenges in the current assessment model that need to be addressed:

Current grading practices have highlighted inequities related to race, ethnicity, and gender.

Many students are uncertain about how their clinical grades are determined, affecting their learning.

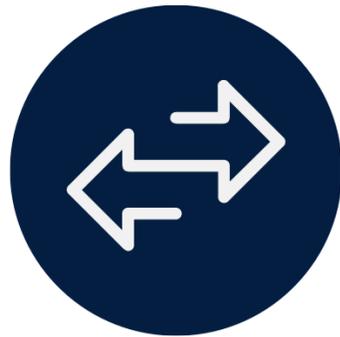
Some graduates feel unprepared for residency and practice, impacting our ability to meet the healthcare needs of our communities.

Our educational framework needs to better support all students and prepare them to meet the needs of their future patients.



What Is CBME?

Competency-based medical education (CBME) is an outcomes-based approach to the design, implementation, and evaluation of a medical education program and to the assessment of learners using an organizing framework of competencies.



Shift the focus from grades to patient care



Remove peer comparisons



Focus on formative over summative



Focus on development over judgement

The goal of CBME is to ensure that all learners achieve the desired patient-centered outcomes during their training.

Why CBME?

UWSOM Goals

Equity and transparency in grading

Reduction of bias

Emphasis on competence

Growth mindset

Patient-centered focus

CBME Practices

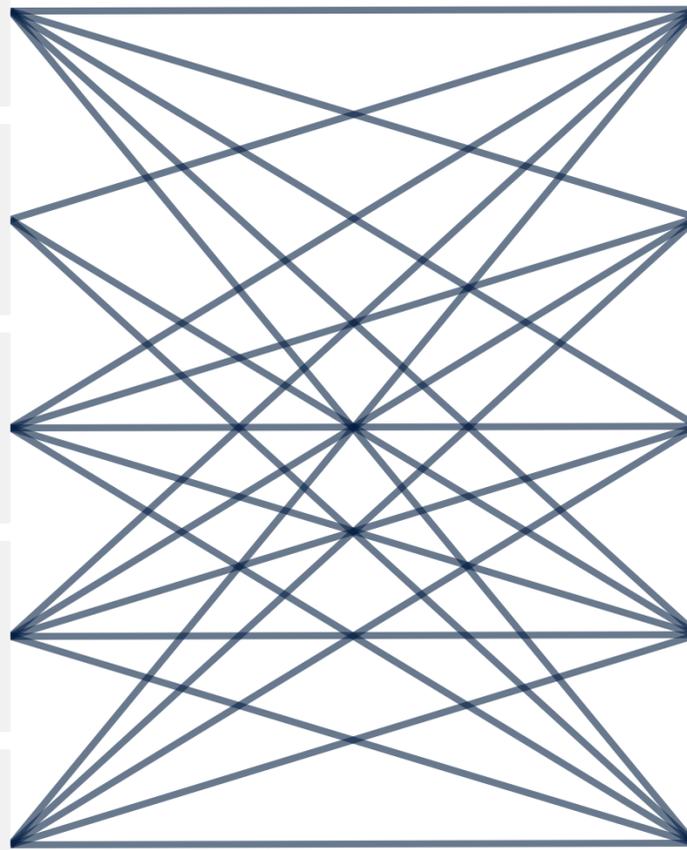
Documented, frequent feedback

Early, targeted intervention

Self-assessment and reflection

Variety of assessments

Longitudinal lens



CBME in Action



Workplace-Based Assessments

Preceptors observe and document authentic observations of a student's performance in the clinical setting on a regular basis through a variety of assessments.

Competency Committees

Competency committees review each student's WBAs and other assessment data, determine milestones, and recommend promotion and/or further support for the student.

Promotion to Next Phase

Students recommended for promotion by a competency committee progress to the next phase in their training.

Clinical Assessment Workgroup

PREPARE

2022 - 2023

Phase Milestones

- Recruit a clinical assessment workgroup
- Define the overarching values, goals, and measurable outcomes for a new assessment system
- Select a model for clinical assessment

DESIGN

2023 - 2024

Phase Milestones

- Define the components of the new clinical assessment system
- Develop an implementation strategy for instituting pass/fail grading that aligns with planned changes to the clinical assessment system

PHASED ROLLOUT

2025 - 2027

Phase Milestones

- Implement approved changes to curriculum
- Implement new assessment methods
- Implement technology support systems
- Build faculty education and program evaluation strategies

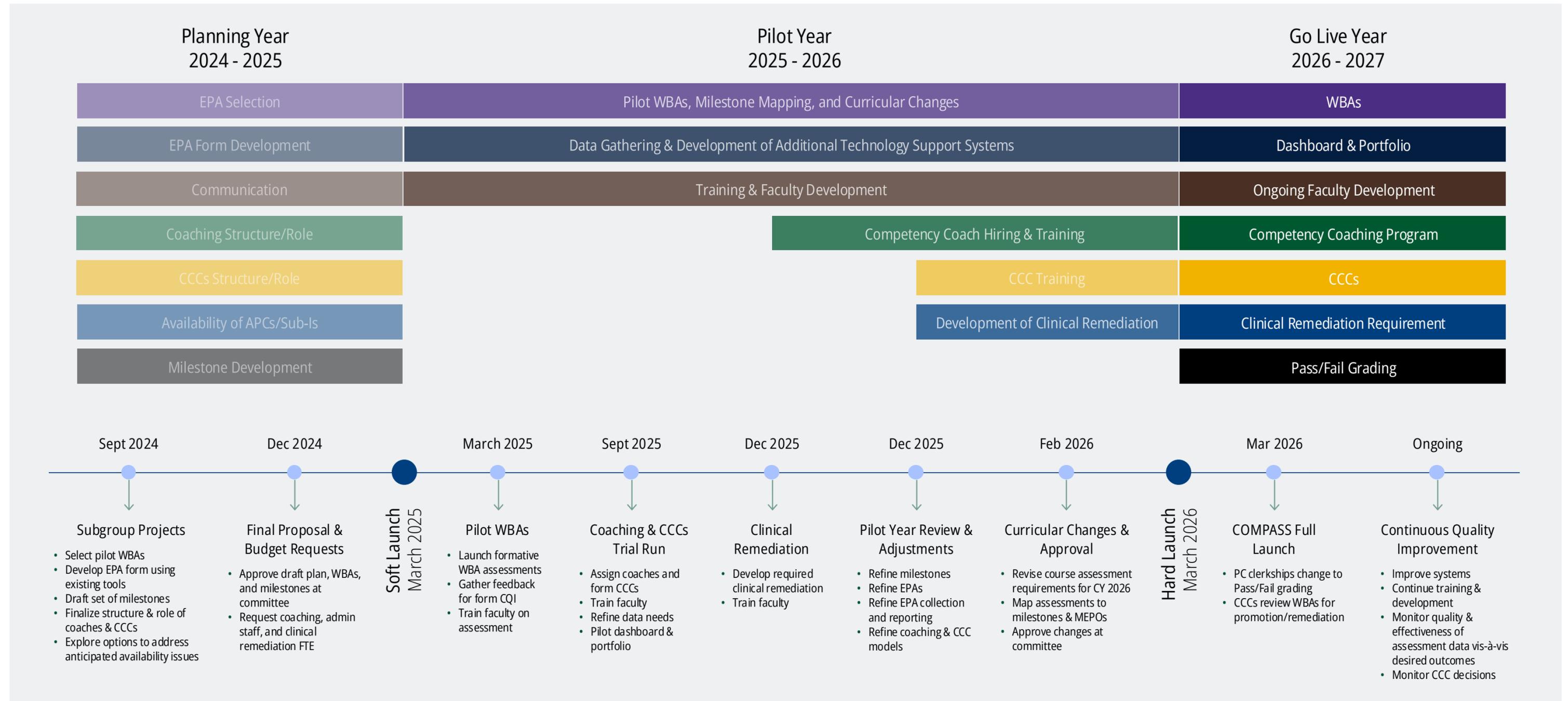
POST-LAUNCH

2027 -

Phase Milestones

- Make adjustments to initial implementation plans and processes as needed
- Track and monitor data to ensure desired outcomes are achieved
- Solicit feedback from stakeholders and other end users
- Identify areas for improvement

Phased Rollout Timeline



What is COMPASS?

COMPASS (Competency Mapping and Programmatic Assessment System) is UWSOM's new assessment framework that supports the School's transition to a competency-based medical education (CBME) model.

It is designed to replace the current tiered grading system in required core clerkships with a system more aligned to student competency development and patient care needs, including:

- Workplace-based assessments (WBAs)
- Clinical competency coaches
- Clinical competency committees (CCCs)

Affected Clerkships	Grading	Change Date
Required Patient Care core clerkships (Family Medicine, Pediatrics, Internal Medicine, Psychiatry, Obstetrics & Gynecology, and Surgery, <i>including WRITE clerkships</i>)	Pass/Fail with additional assessment requirements	Spring 2026
Required Explore & Focus core clerkships (Emergency Medicine, Neurology, Neurological Surgery)	Pass/Fail with additional assessment requirements	Spring 2027
All other clerkships (APCs, Sub-Is, and clinical electives)	No change (will remain tiered or Pass/Fail as currently designated)	No change



← Look for the COMPASS icon to identify UWSOM's new assessment program!

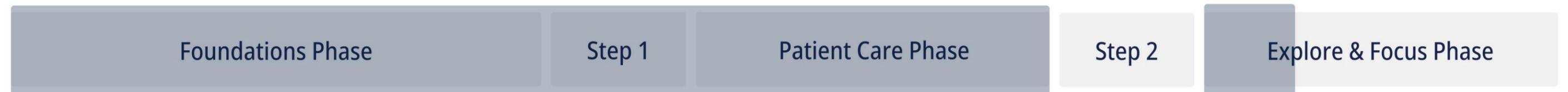


DON'T PANIC 🤔😓😭

2021



2027



We know this shift has the potential to put pressure on students to find new ways to be competitive for residency.

Here's what we're doing to help:

- ➔ Developing a student portfolio to highlight strengths and growth in pass/fail clerkships
- ➔ Encouraging "early and often" communication and support around career advising
- ➔ Identifying opportunities for additional sub-Is in Spring of 4th year (or earlier)
- ➔ Working to improve the quality of narrative comments on MSPEs

Grading

Domain	Assessment	Passing Threshold	Grade If Failed	Remediation
Patient Care	Clinical performance rating items	Level 2 or higher on all items	Fail	Repeat clerkship
	WBAs	At least 1** verified level 2 or higher on all required activities		
	Mini-CEX*	Pass		
Interpersonal & Communication Skills	Clinical performance rating items	Level 2 or higher on all items	Fail	Repeat clerkship
	WBAs	At least 1** verified level 2 or higher on communication WBA		
	Mini-CEX*	Pass		
Service to Patients & Community (Professionalism)	Clinical performance rating items	“Competent” or “approaching competency”*** on all items	Fail	Repeat clerkship
	Completion of all clerkship requirements	Completion of all required clinical encounters, at least 3 WBAs/week across all required activities, required mini-CEXs, any additional clerkship-specific assignments		
Medical Knowledge	NBME subject exam	5 th percentile (national)	Pass	Must pass exam prior to graduation

* Mini-CEX domain varies by clerkship

** 2 on 12-week IM clerkship

***Students who receive “approaching competency” on any item will be referred to clinical competency coach; patterns will be reviewed by CCC

Completing WBAs

WBA Requirements

WBAs are designed to provide learners with quick, specific feedback on their skill progression in real time.

All students are **required** to compete at least 3 WBAs per week.

Required Activities:

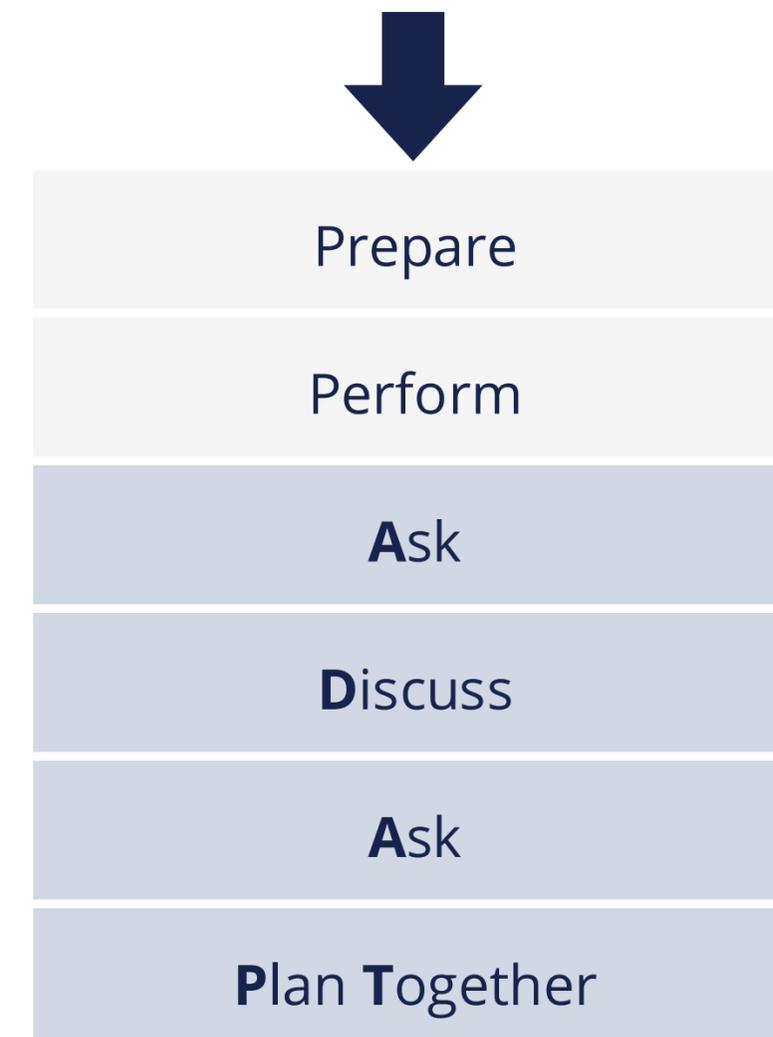
1. Gather a history
2. Perform a physical examination
3. Prioritize a differential diagnosis following a clinical encounter
4. Recommend diagnostic or screening plans for common situations
5. Interpret diagnostic or screening information for common situations
6. Provide an oral presentation of a clinical encounter
7. Document a clinical encounter
8. Communicate with patients and/or families

An OR-specific activity – **Prepare effectively for operative cases** – is available only to students taking Ob/Gyn, General Surgery, or Neurological Surgery. Completion of this activity counts towards the weekly WBA total but **does not** count as a required activity.



Initiating a WBA

Use the **Prepare to ADAPT** framework to ask for, receive, and provide formative feedback in the clinical learning environment:



Submitting WBAs

Documenting a WBA

WBAs are submitted through a Qualtrics survey. Each student has a unique form link and QR code that can be used by **either** the student or a preceptor to submit a WBA. When possible, submit a WBA immediately after performing/observing the activity.



Scan the QR code to complete a sample WBA form in Qualtrics



PRO TIP: Dictate comments by clicking the microphone icon on your device.



This assessment is for:
John Student

Which rotation is this for?

Site of care

Outpatient/Ambulatory

Inpatient

In supervising this student, how much did you participate in the activity?

I stepped in and did it, they observed

I talked them through it

They mostly did it, I directed from time to time

I was available just in case and I checked their work

Narrative Feedback

Feedback → Feedforward

In a Pass/Fail system, narrative comments play a crucial role in distinguishing performance and guiding development.

Clerkship and site directors will be able to reference WBAs when providing mid-clerkship feedback and writing summative assessments.

What did this student do well? Please be specific.

What can this student do better next time to improve? Please be specific.

Identify Strengths

Focus on **specific observed behaviors** linked to clinical skills, communication, professionalism, or teamwork. Avoid vague statements and comments on personal attributes.



“Established rapport quickly using open-ended questions and reflecting patient concerns.”



“Good job overall, seemed confident.”

Identify Opportunities for Improvement

Document **1-2 concrete improvements** and an **actionable next step**. Avoid personal judgments, vague criticisms, and comments unrelated to observed performance.



“Differential was limited to one diagnosis; aim to generate 2-3 reasonable alternatives.”



“Work on clinical reasoning.”

WBA 3: Prioritize a differential diagnosis following a clinical encounter

Scan the QR code to
complete a sample WBA
form in Qualtrics



How would you rate this Student?

What Feedback would you give?

Discussion

How Did It Go?

- How did you rate the encounter?
 - “I stepped in and did it, they observed”
 - “I talked them through it”
 - “They mostly did it, I directed from time to time”
 - “I was available just in case and checked their work”
- What feedback did you give?
 - What did the student do well?
 - How can they improve?

Using WBAs

- Who should initiate WBAs in your clinical setting? Students or preceptors?
- How can you integrate daily, informal assessments into your clinical life? After a patient? Before an informal presentation? At noon?
- How can you help students get used to asking for and receiving feedback regularly?

Additional Resources

Learn More
COMPASS webpage



For technical questions related to WBAs: somdata@uw.edu
 For questions about COMPASS: somdata@uw.edu
 To request printed materials: sargem@uw.edu

Workplace-Based Assessments (WBAs)

Beginning in Spring 2026, **all six required Patient Care core clerkships** (Family Medicine, Internal Medicine, Psychiatry, Obstetrics & Gynecology, Surgery, and Pediatrics), **including WRITE clerkships**, have additional WBA requirements.

How to Complete

WBAs are submitted through a Qualtrics survey. Each student has a unique form link and QR code that can be used by either the student or a preceptor to submit a WBA.

Required Activities:

1. Gather a history
2. Perform a physical examination
3. Prioritize a differential diagnosis following a clinical encounter.

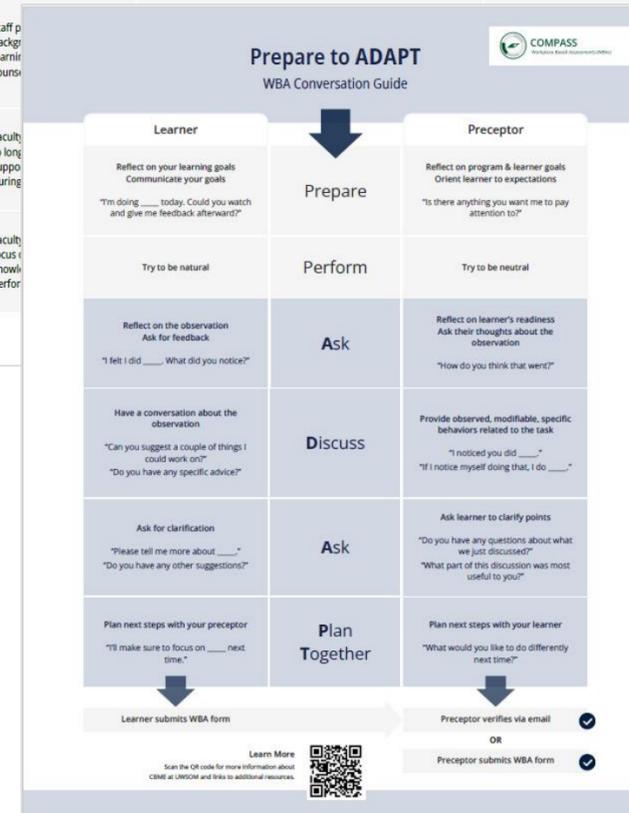
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Student Guide: Who's Who?

Role	Who Are They?	How Can They Help?	When to Reach Out
College Mentors	Regional faculty assigned to mentor and support you throughout medical school	<ul style="list-style-type: none"> Offer long-term support across all 4 years Help with career planning, wellness, and personal development Get to know you and guide you through key transitions Provide bedside teaching, small group learning, and reflective conversations 	Any time, from day one through graduation. Your mentor is your go-to for big-picture guidance and support.
Clinical Skills Educators	Faculty with expertise in teaching clinical and communication skills	<ul style="list-style-type: none"> Teach you hands-on skills like physical exams, history taking, and patient communication Give feedback on technique and professionalism Lead simulations and standardized patient sessions 	In the Foundations Phase during skills labs or any time you want to sharpen your clinical techniques.
Academic Learning Specialists	Staff provide background learning courses		
Clinical Competency Coaches	Faculty to long support during		
Clinical Learning Specialists	Faculty focus on knowl perform		



Workplace-Based Assessments (WBAs)

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Look for the COMPASS icon to identify UW SOM's new clinical assessment program!

WBA Requirements

For 3- and 6-week clerkships, follow the 1-2-3 rule:

1. verified* WBA for each required activity at a
2. (or higher) entrustment level, *and*
3. WBAs per week

For 12-week clerkships, follow the 2-2-3 rule: **2** verified* WBAs for each required activity at a **2** (or higher) entrustment level, *and* **3** WBAs per week.

*WBAs are considered verified if they are either:

1. Submitted directly by the preceptor, or
2. Submitted by a student *and* confirmed by the preceptor.

Required Activities

There are **8** required activities:

1. Gather a history
2. Perform a physical examination
3. Prioritize a differential diagnosis following a clinical encounter
4. Recommend diagnostic or screening plans for common situations
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How to Submit

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Learn More
Scan or click the QR code for more information about CME at UW SOM, changes coming in 2026-2027, and links to additional resources.