ACM Standards with research articles collated

Notes: The articles have been sorted under the ACM standard to which they are relevant. Some articles have relevance to more than one standard and where an article is featured under a second standard the font has been greyed. (*keeping them in alphabetical order incase that is helpful.*

At the end of the document there are a list of other articles which are not purely related to medical education but may have some of the ACM standards – these articles are listed with a note to the standard under which they may have potential relevance.

1. **The context of the medical program**
   
   1.1. **Governance**

   1.2. **Leadership and autonomy**


   1.3. **Medical program management**

   Crampton P. (2017). Does New Zealand need a third medical school? New Zealand Medical Journal. 130 1453


   Sopoaga F., Zaharic T., Kokaua J., Covello S. (2017). Training a medical workforce to meet the needs of diverse minority communities BMC Medical Education. 17 1
Appendix 1.7.1_1


1.4. Educational expertise


1.5. Educational budget and resource allocation

1.6. Interaction with health sector and society


Appendix 1.7.1_1


Sopoaga F., Zaharic T., Kokaua J., Covello S. (2017). Training a medical workforce to meet the needs of diverse minority communities BMC Medical Education. 17 1


Tucker J.D., Nie J.-B., Cheng Y., Zhu W., Kleinman A. (2014). Reviving medicine as the art of humanity in China The Lancet. 383 9927 (Standard 2)


1.7. Research and scholarship

Millar E., Baker M.G., Howden-Chapman P., Wilson N., Dickson N. (2009). Involving students in real-world research: A pilot study for teaching public health and research skills BMC Medical Education. 9 1

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Appendix 1.7.1.1


1.8. Staff resources

1.9. Staff appointment, promotion and development


2. The outcomes of the medical program

2.1. Purpose

2.2. Medical program outcomes

Anderson L.C., Pickering N.J. (2010). The student code: Ethical and professional expectations of medical students at the University of Otago New Zealand Medical Journal. 123 1318


3. The medical curriculum

3.1. Duration of the medical program

3.2. The content of the curriculum


Appendix 1.7.1_1


Millar E., Baker M.G., Howden-Chapman P., Wilson N., Dickson N. (2009). Involving students in real-world research: A pilot study for teaching public health and research skills BMC Medical Education. 9 1


Smith-Han K., Martyn H., Barrett A., Nicholson H. (2016). That’s not what you expect to do as a doctor, you know, you don’t expect your patients to die.” Death as a learning experience for undergraduate medical students BMC Medical Education. 16 1


3.3. Curriculum design


Perez, D., Rudland, J. R., Wilson, H., Roberton, G., Gerrard, D., & Wheatley, A. (2009). The revised 'Early Learning in Medicine' curriculum at the University of Otago: Focusing on students, patients, and
Appendix 1.7.1_1


3.4. Curriculum description

3.5. Indigenous health


3.6. Opportunities for choice to promote breadth and diversity

Cornwall J., Stringer M.D. (2009). The wider importance of cadavers: Educational and Research Diversity from a Body Bequest Program Anatomical Sciences Education. 2 5


4. Teaching and learning

4.1. Learning and teaching methods
Appendix 1.7.1_1


Cape G. (2009). Movies as a vehicle to teach addiction medicine International Review of Psychiatry. 21 3

Cornwall J. (2011). The diverse utility of wet prosections and plastinated specimens in teaching gross anatomy in New Zealand Anatomical Sciences Education. 4 5

Cornwall J., Pollard M.F. (2012). Evaluation of free i-applications for tertiary level gross anatomy education Australasian Medical Journal. 5 4


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Samalia L., Stringer M.D. (2012). A dissecting competition for medical students Anatomical Sciences Education. 52


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Appendix 1.7.1_1


4.2. Self-directed and lifelong learning


Cornwall J., Pollard M.F. (2012). Evaluation of free i-applications for tertiary level gross anatomy education Australasian Medical Journal. 5 4


4.3. Clinical skills development


Bai M., Nicholson H., Smith-Han K. (2016). Medical students’ experiences of practising medical procedures on patients, other students and themselves The New Zealand medical journal. 129 1444


Appendix 1.7.1.1


Appendix 1.7.1_1


Rudland J., Wilkinson T., Smith-Han K., Thompson-Fawcett M. (2008). "You can do it late at night or in the morning. You can do it at home, I did it with my flatmate" The educational impact of an OSCE Medical Teacher. 30 2


4.4. Increasing degree of independence


### 4.5. Role modelling


Janssen A.L., MacLeod R.D., Walker S.T. (2008). Recognition, reflection, and role models: Critical elements in education about care in medicine Palliative and Supportive Care. 6 4

### 4.6. Patient centred care and collaborative engagement

Cornwall J., Roy M. (2016). Does your pig go ‘knor’? Medical students’ skills in using animal sounds as a cross-cultural paediatric engagement tool *Medical Education*. 50 12


Janssen A.L., MacLeod R.D., Walker S.T. (2008). Recognition, reflection, and role models: Critical elements in education about care in medicine Palliative and Supportive Care. 6 4


Appendix 1.7.1_1


4.7. Interprofessional learning


5. The curriculum – assessment of student learning

5.1. Assessment approach


Appendix 1.7.1_1


Rudland J., Wilkinson T., Smith-Han K., Thompson-Fawcett M. (2008). "You can do it late at night or in the morning. You can do it at home, I did it with my flatmate" The educational impact of an OSCE Medical Teacher. 30 2


5.2. Assessment methods


Rudland J., Wilkinson T., Smith-Han K., Thompson-Fawcett M. (2008). "You can do it late at night or in the morning. You can do it at home, I did it with my flatmate" The educational impact of an OSCE Medical Teacher. 30 2


Appendix 1.7.1_1

5.3. Assessment feedback


5.4. Assessment quality


Rudland, J., Lacey, C., Kenrick, K., & Tweed, M. (2017). How do we know that we are assessing the "right things"? Focus on Health Professional Education, 18(1), 80-87. doi: 10.11157/fohpe.v18i1.209


6. The curriculum – monitoring 26

6.1. Monitoring

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6.2. Outcome evaluation


6.3. Feedback and reporting


7. Implementing the curriculum – students

7.1. Student intake

Crampton P. (2012). The challenges of selecting students New Zealand Medical Journal. 125 1361


7.2. Admission policy and selection

Appendix 1.7.1_1


7.3. Student support


7.4. Professionalism and fitness to practice

Anderson L.C., Pickering N.J. (2010). The student code: Ethical and professional expectations of medical students at the University of Otago New Zealand Medical Journal. 123 1318


Appendix 1.7.1_1


7.5. Student representation

7.6. Student indemnification and insurance

Cornwall J., Davies T.M., Lees D. (2013). Student injuries in the dissecting room Anatomical Sciences Education. 6 6


8. Implementing the curriculum – learning environment

8.1. Physical facilities


Jones D.G., King M.R. (2017). Maintaining the anonymity of cadavers in medical education: Historic relic or educational and ethical necessity? Anatomical Sciences Education. 10 1


8.2. Information resources and library services

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8.3. Clinical learning environment

8.4. Clinical supervision

Other articles that may be of relevance

1.4 Education expertise (and 1.6 as Standard 2)


1.6 Interaction with health sector and society

3.3 Curriculum design
Stringer M.D., Lyall P. (2012). Design, implementation, and evaluation of a postgraduate diploma in Surgical Anatomy *Anatomical Sciences Education.* 5 1

6.2 Evaluation outcomes