

GOVERNANCE STRUCTURE AND MANAGEMENT MEDICAL DOCTOR PROGRAM

Reference number	: VUNI.64
Published date	: 25/03/2024
Effective date	: 25/03/2024
Applicable Department	: College of Health Sciences
Access level	: VinUni all

Records of changes

Ve	rsion	Published Date	Effective Date	Approved by	Description of changes
	1.0	25/03/2024	25/03/2024	Developed by: Executive Officer- Medical Program Committee Reviewed by: Vice Dean of Medical Education Approved by: Dean of College of Health Sciences	First released

TABLE OF CONTENTS

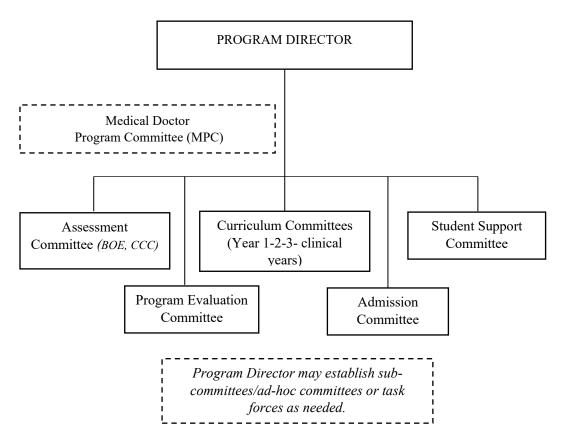
I.	BAC	CKGROUND	3
II.	MEI	DICAL PROGRAM COMMITTEE (MPC)	4
III.	STA	NDING SUBCOMMITTEES	5
3	.1.	Assessment Committee	5
3	.2.	Board of Examiners (BOE) (Subcommittee of the Assessment Committee)	7
3	.3.	Clinical Competency Committee (CCC)	8
3	.4.	Curriculum Year Committee(s)	11
3	.5.	Student Support Committee	13
3	.6.	Program Evaluation Committee	14
3	.7.	Admission Committee	15
IV.	REV	TEW AND AMENDMENT	16
V.	APP	ENDICES	17

I. BACKGROUND

Purpose: Medical Doctor Program, College of Health Sciences at VinUniversity has developed a governance structure and management in line with our commitment to continuous improvement and the pursuit of excellence in medical education, This structure holds the responsibility and authority necessary to oversee the six-year Medical Doctor (MD) Program.

Scope: The governance structure is applicable for MD Program offered at College of Health Sciences, VinUniversity. A defined structure for teaching and learning is expected to be transparent, accessible to all stakeholders, and aligned with VinUniversity's vision and mission, ensuring the institution's stability. The goal of this document is to describe the leadership and decision-making model governing our program, including information about committee structures, membership, roles and responsibilities, reporting hierarchies, quorum requirements, and logistical considerations for meetings. By aligning the structure with the Accreditation Standards set forth by the World Federation of Medical Education (WFME) for Basic Medical Education, we are able to further reinforce our commitment to maintaining high standards in medical education.

The organizational structure for the MD Program's government can be outlined as follows:



II. MEDICAL PROGRAM COMMITTEE (MPC)

TERMS OF REFERENCE

High-level responsibilities for the oversight of the Medical Doctor (MD) Program:

- Policy Development: Develop, review, and establish policies governing the MD program, ensuring alignment with regulatory standards and educational best practices.
- Regulatory Compliance: Stay informed about changes in regulations affecting the MD program, ensuring compliance and adaptation as necessary.
- Stakeholder Engagement: Lead initiatives to engage key stakeholders, fostering collaboration and alignment with program objectives.

MEMBERS

- The committee consists of members representing key stakeholders, including faculty, students, program leaders and academic officers.
- Membership should reflect diversity and expertise in areas relevant to the program's objectives and responsibilities.
- The Committee Chair or their designee may extend invitations to additional individuals as needed.
- The MPC has the following voting members:
 - Chair of the Committee
 - MD Program PD, Associate PD
 - Standing Subcommittees (Chairs)
 - Teaching Faculty representatives
 - Affiliated hospital representative(s)
 - Student representatives
 - Senior leaders (Ex-officio member)
 - o University of Pennsylvania nominee (Ex-officio member)
 - o Curriculum Development Manager (Executive Officer)

QUORUM

At least half of the current voting members of the Committee present in person or virtually shall constitute a quorum.

MEETING

• The Medical Program Committee (MPC) will convene quarterly, with an annual retreat. In exceptional cases, the MPC Chair may call for additional meetings as needed.

- The tentative meeting agenda will be prepared by the Committee Chair and distributed at least one week prior. Members wishing to add agenda items must seek approval from the Chair.
- If the Committee members are unable to attend, they may submit a written report to the MPC Chair in advance.
- Student representatives are required to submit written feedback to the MPC Chair at least two days before the meeting.
- In the absence of submitted reports, it will be assumed that there are no updates to report.
- If items or issues pertaining to students are raised, student representatives should be excused from that particular portion of the meeting.
- The Executive Officer is responsible for recording meeting minutes, which will be circulated within two weeks following each meeting.

REPORT

Report to MD Program Director - College of Health Sciences, VinUniversity

When required, report to Dean, Vice Dean(s)- College of Health Sciences, VinUniversity

III. STANDING SUBCOMMITTEES 3.1. Assessment Committee

TERMS OF REFERENCE

Assessment Policies:

- Comprehensive oversight of the assessment activities within the MD Program.
- Ensure alignment between assessment strategies and the MD Program's curriculum, fostering comprehensive evaluation of student learning outcomes.
- Oversee the quality and integrity of assessment processes, ensuring fairness, validity, reliability, and adherence to standards.
- Contribute to the development and review of assessment policies and guidelines, aligning them with institutional and accreditation standards.
 Assessment Strategies:
- Develop and refine assessment strategies and methods aligned with program objectives and best practices in medical education.
- Evaluate and recommend appropriate assessment tools and techniques for courses within the Medical Doctor (MD) Program.
- Identify areas for enhancement in assessment practices, implementing measures for continuous improvement and innovation.
- Offer support and resources to faculty for the effective design, implementation, and evaluation of assessment strategies.
 Examination Policies

- Collaborate with relevant stakeholders and committees, fostering effective communication and alignment in assessment practices across the MD Program.
- Review and validate the assessment blueprints, examination papers to ensure alignment with the curriculum, educational objectives, and standards. *Examination Process*
- Analyze assessment data to derive insights, generate reports, and provide recommendations for enhancing the effectiveness of assessment practices.
- Integrate student feedback into the assessment process, ensuring their perspectives contribute to evaluation methods and improvements.
- Collect and act upon feedback from students, faculty, and stakeholders regarding assessment quality and fairness.

- The committee consists of members with diverse expertise and roles that collectively contribute to effective assessment strategies and practices within the Medical Doctor (MD) Program
- The Committee Chair or their designee may extend invitations to additional individuals as needed.
- The committee has the following voting members:
 - Chair of the Committee (Assessment Lead)
 - Faculty Representative
 - Student representatives
 - Quality Assurance Representative
 - Office of Registrar Representative
 - Examination Unit Officer
 - Research or Data Analyst
 - Ex-Officer Members (Teaching and Learning Center)
 - Executive Officer

MEETINGS

- Assessment Committee meetings are typically held quarterly. However, in exceptional circumstances, additional meetings may be called by the Committee Chair as necessary.
- The tentative meeting agenda will be prepared by the Committee Chair and distributed at least one week prior. Members wishing to add agenda items must seek approval from the Chair.
- The Executive Officer is responsible for recording meeting minutes, which will be circulated within two weeks following each meeting.

REPORT

Report to MD Program Director - College of Health Sciences, VinUniversity

When required, report to Dean, Vice Dean(s)- College of Health Sciences, VinUniversity

3.2. Board of Examiners (BOE) (Subcommittee of the Assessment Committee)

The Board of Examiners (ad hoc committee), consisting of faculty and academic staff, ensures the integrity, fairness, and impartiality of MD Program assessments <u>focusing on the pre-</u><u>clinical phase</u>, free from biases and conflicts of interest. These objectives are vital for upholding educational excellence and offering students equitable and accurate evaluations of their performance.

TERMS OF REFERENCE

- Receive the results and make decisions on progression status in line with program requirement and assessment policy.
- Review and ensure the examination standards are clear, consistent, and appropriate for the program.
- Develop plans for makeup exams, remediation and communication to the students.
- Analyze examination results, including pass rates, student performance, and trends.
- Provide regular assessment reports and recommendations to relevant authorities based on data analysis.
- Receive, document, and oversee incidents and violations, ensuring adherence to institutional policies and regulations.
- Identify and rectify issues or irregularities in assessments.
- Collect and act upon feedback from students, faculty, and stakeholders regarding examination quality and fairness.
- Continuously improve assessment processes based on feedback.

MEMBERS

Members of the Board of Examiners (BOE) shall be flexibly selected as follows, ensuring a diverse and knowledgeable composition that aligns with the meeting's objectives. The Chair of the BOE will have the authority to determine the membership, which may include:

- Chairperson (Year Chair Lead)
- Teaching faculty
- Teaching Assistants
- Course Instructors/Block Leaders
- Office of Registrar Representative
- Executive Officer

MEETINGS

The timing and frequency of BOE meetings are at the discretion of the BOE Chair, and they are determined based on the educational activities schedule, academic calendar, assessment cycles, and specific needs of the MD Program. These meetings should be scheduled to facilitate effective assessment review, discussion, and decision-making, ensuring the fairness, validity, and reliability of assessments. Additional meetings may be called by the Committee Chair as necessary.

Common meeting practices include:

- At the end of semester, academic year, or during the annual retreat.
- Following mid-term exams, final exams, make-up exams, or block exams.
- Pre- and post-examination meetings.
- Ad-hoc emergency meetings when urgent matters arise.
- Data analysis meetings to identify trends and areas for improvement.
- Addressing other educational needs, such as curriculum revision.

Executive Officers document meeting proceedings and securely stored.

Communication with students following the meetings is determined by the Chair.

Confidentiality is rigorously upheld within the BOE's discussions, as members have access to sensitive academic data and assessment-related information.

REPORT

Report to the Program Director.

When required, report to Dean, Vice Dean(s)- College of Health Sciences, VinUniversity

3.3. Clinical Competency Committee (CCC)

The Clinical Competency Committee is the governing body responsible for reviewing, monitoring, and rendering decisions on the progress of medical students during their clinical training of medical school years 4 through 6. This committee assesses medical students' readiness for greater professional responsibilities, academic advancements, and their transition to clinical practice. The committee makes recommendations to the Chair of Assessment for medical student progress, including promotion, remediation, corrective actions or dismissal, but cannot render a final decision.

The ultimate purpose of the CCC is to demonstrate our accountability as medical educators to the public, that our students will provide high quality, safe care to our patients and maintain the standards of the health care system following graduation from medical school.

The CCC shall include a minimum of three (3) program faculty members, at least one (1) of whom is a core faculty member. The program director may attend in an observer role, but should not chair the committee or lead discussions. Members shall be appointed by the program director. Meetings will occur at least every 6 months and maintain written minutes. Documentation and comments should be summative, fact-based, and not directly attributable to any specific individual (e.g., use general terms to capture the outcome). These documents must be kept confidential and archived for several years. A simple majority of members, present in person, via videoconference, or via phone, will constitute a quorum of the VinUniversity CCC.

When making decisions, the CCC should not call it a "vote" as the committee is making recommendations to the Chair of Assessment regarding medical students but rather will reach a consensus recommendation. If a faculty member not from the program makes an assessment on a student with which the CCC disagrees, it is expected that CCC will take data from evaluations and apply them to expected outcomes to judge the progress of students. In the event of remediation, the CCC will determine the appropriate course for each student on an individual basis including intensifying mentoring, additional reading, skills or simulation experience, added clerkships or electives, to extend their overall educational program, or counseling. In the event the CCC and Chair of Assessment disagree on performance, the Program Director will make the final decision on a student's performance. In the event a student disagrees with the CCC assessment, there is no appeal of the CCC assessment. A student may appeal a decision by the program on probation, termination or non-promotion.

Program:

• Develop shared mental model of what the student performance should "look like" and how it should be measured and assessed.

• Ensure assessment tools sufficient to effectively determine performance across the competencies.

• Increase quality, standardize expectations, and reduce variability in performance assessment.

• Contribute to aggregate data that will allow programs to learn from each other by comparing residents' and fellows' judgments against comparable data.

- Improve individual students along a developmental trajectory.
- Serve as a system for early identification of students who are challenged.
- Model "real time" faculty development.

Faculty:

- Facilitate more effective assessment that may be easier for evaluators.
- Assist faculty in developing a shared mental model of the competencies.

• May result in simplified "more actionable" assessment tools to help faculty document more effectively and efficiently what they observe trainees doing in clinical settings.

Student:

- Improve the quality and amount of feedback.
- Normalize constructive feedback.
- Offer insight and perspectives from a group of faculty members.

• Compare performance against established competency benchmarks (rather than only against peers in the same program), improving students progress along a developmental trajectory.

• Identify those students early who are challenged and not making expected progress so that individualized learning plans can be designed. Allow earlier identification of sub-optimal performance that can improve remedial intervention.

- Improve stretch goals for students to achieve higher levels of performance.
- Provide transparency around performance expectations.

TERMS OF REFERENCE

The CCC will fulfill the following responsibilities with no voting role, but rather in an advisory role to the Chair of Assessment.

The Program Director will appoint the Chair of the CCC for each Year. There is expected to be a minimum of three faculty members on the committee. It is expected that members of the committee will maintain meeting attendance for ongoing active membership in the committee. In the event of multiple absences, the Program Director may replace that faculty member. The coordinator is responsible for scheduling the meeting location and time, notifying attendees of the meeting, aggregating data sources and summarizing data. At the meeting they will record recommendations on each student. Membership may include:

- Chair of CCC by Year
- Clerkship Director or Assistant Clerkship Director(s)
- Clinical faculty
- Executive Officer (or Coordinator)
- Ex-Officio members

MEETINGS

The CCC will meet at least semi-annually.

REPORT

Report to the Chair of Assessment.

3.4.<u>Curriculum Year Committee(s)</u>

TERMS OF REFERENCE

- Oversee the curriculum relevant to the specific year in the MD program.
- Monitor resource allocation for effective implementation.
- Receive, evaluate, and act upon student feedback, ensuring effective resolution of concerns.
- Review evaluation reports for all courses in the year, providing recommendations for implementation.
- Approve proposed course changes within the relevant year.
- Identify opportunities for program enhancement and implement strategies for continuous improvement.
- Monitor and review student progress within the specific year.
- If necessary, submit relevant issues to the Medical Program Committee (MPC) for further action at a higher level.

- The committee consists of members representing key stakeholders, including faculty, students, program leaders and academic officers.
- Membership should reflect diversity and expertise in areas relevant to the program's objectives and responsibilities.
- The Committee Chair or their designee may extend invitations to additional individuals as needed.
- The committee has the following voting members:
 - Chair of the Committee
 - o Course Instructors/Block Leaders/Clerkship Directors
 - Student representatives
 - Adjunct/Affiliated teaching faculty nominates.
 - Executive Officer

MEETINGS

- Curriculum Year Committee meetings are typically held on a monthly or bi-monthly basis. However, in exceptional circumstances, additional meetings may be called by the Committee Chair as necessary.
- The tentative meeting agenda will be prepared by the Committee Chair and distributed at least one week prior. Members wishing to add agenda items must seek approval from the Chair.
- If the Course Instructors/Block Leaders/Clerkship Directors are unable to attend, they may submit a written report to the Chair in advance.
- Student representatives are required to submit written feedback to the Chair at least two days before the meeting.
- In the absence of submitted reports, it will be assumed that there are no updates to report.
- The Executive Officer is responsible for recording meeting minutes, which will be circulated within two weeks following each meeting.

QUORUM

At least half of the current voting members of the Committee present in person or virtually shall constitute a quorum.

REPORT

Report to MD Program Director - College of Health Sciences, VinUniversity

When required, report to Dean, Vice Dean(s)- College of Health Sciences, VinUniversity

3.5. <u>Student Support Committee</u>

TERMS OF REFERENCE

- Develop and implement strategies to support student welfare, academic success, and personal development.
- Address student concerns, grievances, and issues related to student life, ensuring a supportive and inclusive environment.
- Review and propose improvements to student support services, including counseling, mentorship, and extracurricular activities.
- Oversee policies and initiatives aimed at fostering a positive student experience, including orientation programs, health services, and accommodation facilities.
- Collaborate with faculty, administration, and relevant stakeholders to address student-related matters effectively.
- Monitor student satisfaction, feedback, and engagement to enhance the overall student experience.

MEMBERS

Members of Student Support Committee typically involve a diverse set of members who collectively oversee and address various aspects of student welfare, support, and engagement within MD Program. The Chair will have the authority to determine the membership, which may include:

- Chair of the Committee
- Faculty Representative
- Student representative
- Academic Staff
- Ex-Officio members (Representatives from Office of Registrar, Student Affair Management...)
- o Executive Officer

MEETINGS

- The frequency of meetings for a Student Support Committee can vary based on the needs, activities, and ongoing issues related to student welfare within the MD program. Additional meetings may be called by the Committee Chair as necessary. Common meeting practices include:
 - Regular meetings will be scheduled in accordance with the committee's decisions.
 - In response to the issues
 - Following student feedback cycle
- Executive Officer document meeting proceedings and securely stored.

REPORT

Report to MD Program Director - College of Health Sciences, VinUniversity

When required, report to Dean, Vice Dean(s)- College of Health Sciences, VinUniversity

3.6. Program Evaluation Committee

TERMS OF REFERENCE

- Develop and oversee the comprehensive plan for evaluating the Medical Doctor (MD) Program
- Establish an evaluation framework outlining key performance indicators (KPIs) and metrics to assess the MD Program's effectiveness and compliance with educational goals.
- Oversee the collection, analysis, and interpretation of data related to the MD Program's performance, including student outcomes, faculty contributions, and curriculum effectiveness.
- Identify areas for improvement based on evaluation findings, recommending strategies and initiatives to enhance program quality and effectiveness.
- Facilitate engagement with stakeholders, including faculty, students, alumni, and external partners, to gather diverse perspectives for evaluation purposes.
- Ensure alignment of the MD Program with accreditation standards and regulatory requirements through ongoing evaluation and compliance monitoring.
- Generate comprehensive annual reports summarizing evaluation findings, recommendations, and actions taken to improve the MD Program's quality and outcomes.
- Stay informed about current research and best practices in medical education, incorporating relevant findings into evaluation methodologies and recommendations.
- Develop, review, and revise policies and guidelines related to program evaluation, ensuring they adhere to best practices and regulatory requirements.

MEMBERS

The Program Evaluation Committee should consist of individuals with diverse expertise and roles, ensuring comprehensive oversight, analysis, and improvement of the Medical Doctor (MD) Program. The chair of the Program Evaluation Committee should be impartial, objective, and dispassionate in order to ensure a fair evaluation and decision. is The Chair will have the authority to determine the membership, which may include:

- Chair of the Committee
- Faculty Representative
- Student representative

- o Academic Staff representative
- Quality Assurance and Accreditation officer
- Stakeholder Liaison (Representatives responsible for engaging with stakeholders, including administration, accreditation bodies, and external partners...)
- Ex-Officio members (Representatives from Office of Registrar, Teaching and Learning Excellence center, Library Team, Operation...)
- o Data analyst/Statistician
- o Executive Officer

MEETINGS

Program Evaluation Committee meetings are held at least once per semester. However, in exceptional circumstances, additional meetings may be called by the Committee Chair as necessary. Common meeting practices include:

- Annual Review meeting
- Pre-Self-evaluation review cycle

The Executive Officer is responsible for recording meeting minutes, which will be circulated within two weeks following each meeting.

REPORT

Report to MD Program Director – College of Health Sciences, VinUniversity

When required, report to Dean, Vice Dean(s)- College of Health Sciences, VinUniversity

3.7. Admission Committee

TERMS OF REFERENCE

- Develop, review, and refine policies, criteria, and procedures for admitting students into the Medical Doctor (MD) Program, ensuring alignment with institutional objectives and accreditation standards.
- Collaborate with Admission Team at institutional level to review and evaluate applications received for the MD program, ensuring fairness, consistency, and compliance with established admission criteria.
- Collaborate with Admission Team to organize the admission process, events and activities for successful students' enrollment.
- Collect, analyze, and report admission statistics, including demographics and success rates, to inform future admissions strategies and planning.
- Identify areas for improvement in the admissions process and recommend strategies to enhance its effectiveness, transparency, and fairness.

The Admission Committee should consist of individuals with diverse expertise and roles to ensure a comprehensive and effective admission process for the Medical Doctor (MD) Program. The Chair will have the authority to determine the membership, which may include:

- Chair of the Committee (Admission Lead)
- Admission officer/Director (institutional level)
- Faculty Representative
- Student Representative
- Stakeholder Liaison (Representatives responsible for engaging with stakeholders, including alumni, community partners, or healthcare professionals, to ensure alignment with program goals and industry needs)
- Ex-Officio members (Representatives from Office of Registrar, ...)
- Executive Officer

MEETINGS

The meeting frequency for an Admission Committee should align with the demands of the admissions cycle, the volume of applications, and the need for timely decision-making. Common meeting practices include:

- Regular Meetings During Application Periods
- Interview Period Discussions
- Admission Decision Meetings
- Periodic Review Meetings

The Executive Officer is responsible for recording meeting minutes, which will be circulated within two weeks following each meeting.

REPORT

Report to MD Program Director – College of Health Sciences, VinUniversity When required, report to Dean, Vice Dean(s)- College of Health Sciences, VinUniversity

IV. REVIEW AND AMENDMENT

- Program Director may create ad-hoc subcommittees or taskforce as needed.
- Guidelines and detailed descriptions for the functioning of each committee and working group may be provided in separate documents.
- The committee membership will be determined at the beginning of the academic year and will remain in effect throughout the year unless a specific request is made for change.
- This document will be periodically reviewed and updated as needed to ensure alignment with the program's evolving needs.

V.APPENDICES

LIST OF MEMBERSHIP FOR MD GOVERNANCE STRUCTURE ACADEMIC YEAR 23-24

* The membership roster is aimed to be compiled early in the academic year, with efforts to identify members promptly. Nevertheless, the specifics may be subject to adjustment based on actual circumstances.

MEDICAL PROGRAM COMMITTEE MPC			
No	Name	Roles	
1	Christina Liew	Chair	
2	Le Cu Linh	Member	
3	Phung Nam Lam	Member	
4	Keith Hamilton	Member	
5	Huynh Dinh Chien	Member	
6	Roshan Peiris	Member	
7	Yi Hyeon Gyu	Member	
8	Jeffrey Mayne	Member	
9	Nguyen Thi Tuyet	Member	
10	Truong Nguyen Xuan Quynh Pham Thanh Tung	Member	
11	Nguyen Thi My Hao	Student Representative	
12	Nguyen Minh Khoi	Student Representative	
13	Ha Minh Thuy	Executive Officer	
14	Dean of CHS	Ex-Officio	

YEAR 1 CURRICULUM COMMITTEE			
No	Name	Roles	
1	Huynh Dinh Chien	Chair	
2	Tran Anh Tu	Member	
3	Tu Binh Minh	Member	
4	Mai Hong Hanh	Member	
5	Nguyen Xuan Hung	Member	
6	Nguyen Thanh Tuan	Member	
7	To Thanh Thuy	Member	
8	Hoang Mai Duy Nguyen Anh Phuong	Member	
9	Le Van Phuoc Nguyen Thanh Tu	Member	
10	Trinh Ngoc Khanh Linh	Student Representative	
11	Pham Huu Minh	Student Representative	
12	Nguyen Le My Anh	Executive Officer	

	YEAR 2 CURRICULUM COMMITTEE				
No	Name	Roles			
1	Roshan Peiris	Chair			
2	Pham Thanh Tung	Member			
3	Nguyen Thi Nhung	Member			
4	Bui Phuong Hoa	Member			
5	Tran Le Dinh Duy	Member			
6	Andrew Taylor Robison	Member			
7	Huynh Dinh Chien	Member			
8	Christina Liew	Member			
9	Pham Bao Yen/ Nguyen Dinh Thang	Member (Biochemistry)			
10	Trinh Jesudhass Jayden	Student Representative			
11	Nguyen Nam Cat Tuong	Student Representative			
12	Hoang Thao Anh	Executive Officer			

J	YEAR 3 CURRICULUM COMMITTEE (FALL SEMESTER)			
No	Name	Roles		
1	Yi Hyeon Gyu	Chair		
2	Nguyen Van Dinh	Member		
3	Tran Van Quoc Thinh	Member		
4	Tran Thi Phuong Thuy	Member		
5	Trinh Ngoc Phat	Member		
6	Christina Liew	Member		
7	Truong Nguyen Xuan Quynh	Member		
8	Le Van Phuoc Nguyen Thanh Tu	Member		
9	Pham Phuong Dung	Student Representative		
10	Nguyen Duy Khanh	Student Representative		
11	Tran Thi Huong Tra	Executive Officer		

YEAR 3 CURRICULUM COMMITTEE (SPRING SEMESTER)			
No	Name	Roles	
1	Yi Hyeon Gyu	Year 3	
2	Duong Thu Anh	Member	
3	Dinh Xuan Anh Tuan	Member	
4	Ha Phan Hai An	Member	
5	Trinh Ngoc Anh	Member	
6	Nguyen Ngoc Chien	Member	
7	Nguyen Thi Minh Phuong	Member	
8	Nguyen Trung Nghia	Member	

9	Christina Liew	Member
10	Truong Nguyen Xuan Quynh	Member
11	Le Van Phuoc	Member (Professionalism)
	Nguyen Thanh Tu	Member (Froressionalism)
12	Pham Phuong Dung	Student Representative
13	Nguyen Duy Khanh	Student Representative
14	Tran Thi Huong Tra	Executive Officer

YEAR 4 CURRICULUM COMMITTEE				
No	Name	Roles		
1	Jeffrey Mayne	Chair		
2	Nguyen Huyen Trang / Le Ngoc May	Member		
3	Nguyen Trung Nghia / Nguyen Thuy Anh	Member		
4	Nguyen Hong Quan / Tran Thi Hang	Member		
5	Dang Kim Khue / Vu Van Quang	Member		
6	Nguyen Thu Hoai	Member		
7	Phan Thi Thuy Ngan	Member		
8	Truong Nguyen Xuan Quynh	Member		
9	Christina Liew	Member		
10	Pham Thi Ngoc Thu	Student Representative		
11	Le Quoc Khanh	Student Representative		
12	Tran Quynh Giao	Executive Officer		
Member of Health Education course presents in the Fall Semester				

	ASSESSMENT COMMITTEE			
No	Name	Roles		
1	Christina Liew	Chair		
2	Le Khac Linh	Member		
3	Pham Thanh Tung	Member		
4	Jeffrey Mayne	Member		
5	Year Chair Leads	Member		
6	Registrar Officer	Member		
7	Quality Assurance Officier	Member		
8	Teaching and Learning Excellence	Member		
9	Student Representatives	Member		
10	Vu Thanh Phuong	Executive Officer		
10	Duong Trung Duc			

	BOARD OF EXAMINERS			
No	Name	Roles		
1	Year Chair Lead	Chair		
2	External Examiners	Member		
3	Teaching Faculty	Member		
4	Teaching Assistants	Member		
5	Course Instructors/Block Leaders	Member		
6	Office of Registrar Representatives	Member		
7	Vu Quynh Anh	Executive Officer		

CLINICAL COMPETENCY COMMITTEE			
No	Name	Roles	
1	Jeffrey Mayne	Chair	
2	Year Chair Lead	Member	
3	Clerkship Directors or Ass. Clerkship Directors	Member	
4	Office of Registrar Representatives	Member	
5	Nguyen Tran Dieu Hieu	Executive Officer	

PROGRAM EVALUATION COMMITTEE			
No	Name	Roles	
1	Le Van Phuoc	Chair	
2	Year Chair Lead	Member	
3	Teaching Faculty	Member	
4	Stakeholder Liaison	Member	
5	Student Representatives	Member	
6	Ha Minh Thuy	Executive Officer	
7	Dean of CHS	Ex-Officio	

ADMISSIONS COMMITTEE			
No	Name	Roles	
1	Jeffrey Mayne	Chair	
2	Admission Officer	Member	
3	Teaching Faculty	Member	
4	Student Representatives	Member	
5	Nguyen Tran Dieu Hieu	Member	
6	Le Duc Huy	Executive Officer	

STUDENTS SUPPORT COMMITTEE			
No	Name		Roles

1	Nguyen Thi Nhung	Chair
2	Tran Le Dinh Duy	Member
3	Teaching Faculty	Member
4	Student Affair Management Officer	Member
5	Student Representatives	Member
6	Office of Registrar Representatives	Member
7	Teaching Assistant	Executive Officer