



CUMED 5/08/2018

Meeting was called to order at 8:04 am

**Attended:** K. Diebel, P. Fernandez-Funez, R. Heuer, N. Jauss, K. Nelson (TC), R. Michaels, K. Nordgren, J. Pearson, A. Shaw, G. Simmons, G. Trachte, Paula Guisfredi

**Absent:** R. Christensen, J. Boulger, A. Greminger, R. Harden, A. Johns, E. Onello, M. Statz

**Welcome:**

- Dr. Shaw entertained a motion to approve the April 10<sup>th</sup> & 19<sup>th</sup> meeting minutes.
- Dr. Simmons seconded the motion: All in favor of approval: none-opposed.

**FMED Department, Course Update:**

- Dr. Pearson indicated the summer is a great time for students to participate in preceptor shadowing but logistically shadowing is becoming harder. Essentia Health will only take students who are enrolled in a course. Existing courses did not fit the shadowing experiences.
- Paula Guisfredi reviewed the FMED inactivated courses and found FMED 5591 -Independent Study will meet the immediate need without going through the steps of creating a new elective course.
- Dr. Pearson is the Course Director.
- FMED 5591, Independent Study has been reactivated and now has enrolled medical students for summer 2018 (5 students doing Behavioral Health, 1 student doing geriatric).

The process:

- Students will contact their faculty advisor for course participation.
- Students find their own preceptor.
- Shawn Evenson will register the student in the course.
- Paula Guisfredi will do the student on-boarding.
- Students will be required to do a reflective paragraph at the end of their shadowing.
- Student credit will be variable based on the number of hours they work (similar to the Summer Internship in Medicine course; 3-12 credits).
- This data is reported back to the preceptor site for their reporting purposes

*Discussions:*

- Dr. Michaels stated credit amounts should not matter as the course is a check box to get students into the hospital systems. Having a varied credit amount will create more internal work.
- Dr. Trachte indicated there is a requirement for hours and credits. Undergraduate classes are 15 contact hours per 1 credit. The course credit standards need to be defined for students.
- Dr. Pearson indicated the credit amount in clinical years has a different ratio: 1 credit per week. Do we give a credit for a 1-day shadowing experience?
- Dr. Michaels indicated the course needs an expectation. Students enrolling in the course are expected to have “x” minimum/hours of shadowing experiences. Dr. Diebel agrees to have a minimum standard for the course.

Dr. Diebel thanked CUMED members for their input on the FMED Department course. CUMED is the place to bring up these types of department course updates. Knowing department courses exist can help promote and reduce duplication efforts.

### **April Follow-Up:**

- Dr. Diebel reminded members of the Blackbag tagging deadline of June 20<sup>th</sup>. Course sessions need to be tagged and attested too before the course can be rolled in to academic year 2018-2019. There is a little time crunch with fall courses, especially the FOM course and CRRAB I course.

### **Student Updates:**

- Rachel Heuer, MS I: At the end of Dr. Nikceovich session last week, a discussion came up on economics of healthcare. Dr. Nikceovich is the President and Chief Medical Officer of Essential Health East Region. Students have an interest of having a lecture on this subject. Dr. Nikceovich indicated he would be willing to do the session on the topic of how economics impacts hospitals, patient care, prescribing drugs etc.
- At the end of the CCM course, there are topics related to economics; Dr. Adams has a lecture, “The Buck Stops Here”, Fred Friedman does law and medicine sessions.
- Dr. Pearson indicated this topic would fit better into the first year; i.e. Intro to Family Medicine course. During CCM, a second year course, students are focused on board study.
- Dr. Onello is Course Director for the Intro to Family Medicine Course and should be asked. Dr. Johns also suggested Social Behavioral Medicine I course.
- Dr. Diebel suggested to invite Dr. Nikceovich to do a Brown Bag session next year so both classes could attend.

### **Honor Code, Revisit:**

- Dr. Pearson is on the Honor Council and asked to address a few issues with CUMED. Students are asking CUMED, as a reminder, to consistently use the same message on exam and review processes in each course.
- In past CUMED discussions, members talked about putting the same Honor Code Guideline in the beginning of each exam as well as at exam review sessions. It was also suggested the process be listed in each course syllabus.
- Students have said, no one reads the Honor Code at the beginning of an exam. If students continue to see the Honor Code in all syllabus as well as exams, there is consistency and it is reiterated what they can or can't do during an exam.
- Dr. Diebel indicated the Honor Code for IHO and Skin/MS is touched on in the course introduction, it's at the beginning of every exam, review and in the syllabus. Dr. Diebel does not verbally announce the Honor Code.
- Dr. Pearson indicated its more of the implementation of the guideline. A guide from CUMED would not solve inconsistencies with Course Directors. Although this may seem heavy handed parenting, looking from the other side there are things that are forgotten; i.e. cell phone in my pocket, smart watch, etc. A consistent reminder would help insure we are clear on the do's and don'ts for exams and reviews.
- Dr. Simmons stated we are in a technology era, electronic wearables are everywhere.
- Dr. Pearson indicated this is about the student checking and understanding what the do's and don'ts are. This is why we have an Honor Code.
- Dr. Michaels states students have access a [Medical Student Handbook](#) online. The online format allows for easier updates.
- Dr. Michaels created a separate guide in her previous job that spelled out the rules and expectation within year 1 and year 2. The syllabus contained course expectations. Faculty were then expected to follow these. Dr. Diebel indicated CUMED can provide a guide with the standard procedures that remind students along the way. If Course Directors and faculty are doing their due diligence, it is them up to students to adhere.

- Dr. Nordgren asked if there could be signage in 68 Med (testing rooms) or card that can live at podium that reminds the “proctor” to read the card each time. This will provide consistency across courses. Dr. Fernandez-Funez indicated we have policies and the medical students are adults. Dr. Simmons added that this is no different than the rules of flying. Technology will only advance and we have students who are completely interdependent of their devices. It makes sense that students should take off any technology wearable devices. Students will adapt.
- Dr. Pearson said the dilemma is when a student does not follow or forget the policy. There has been a recent incident/pattern where students are not following policy and Course Directors are not upholding the policy. The student concern is when something happens Course Directors need to enforce the policy.
- Dr. Fernandez-Funez indicated the problem is faculty consistency. The Course Director needs to conform to the policy.
- Dr. Johns advocated for a sign on the two doors to 68 Med. This can give consistency. We all can forget policy/procedures and having a sign will help create consistency.
- Dr. Trachte indicate the enforcement can be difficult, especially when you forget to take a cell phone out of your pocket. Enforcement can also be a challenge with students who have testing accommodations.
- Dr. Diebel likes the idea of using Orientation week and the first exam in a course to verbally remind students of what the policy and what the expectations are. The signage is fine for a reminder. A proxy should not have to police the room if Course Directors have done our due diligence here. If there is a breach, the student will need to go through the Honor Council and handled on an individual basis.
- Dr. Michaels indicated during Orientation she will send a strong message of when a student makes a mistake, the one mistake can create a negative reflection on them long after the incident. Following policy removes the question why you did well on an exam.
- Dr. Diebel will also emphasize this policy during the curriculum session during Orientation.

#### **Nominations for New CUMED Chair:**

- As Assistant Dean for Medical Education, Assessment & Evaluation, Dr. Diebel cannot remain as CUMED Chair.
- Dr. Diebel is collecting nominations for the next CUMED Chair through a Qualtrics Survey. This survey will remain up through Monday, May 14<sup>th</sup>. Dr. Diebel will meet with the individuals nominated to insure they want to be nominated for the position.
- The position as Chair of CUMED comes with extra duties beyond CUMED meetings: i.e. voting member of the Education Council, member of the Education Steering Committee and participate as a liaison to the Scientific Foundations Committee. The three committees bring together the curriculum as a whole.
- After the list of nominees are set, Dr. Diebel will send out a vote (using Qualtrics) to members with the hope to have something in place for the June meeting as a transition to a new Chair of CUMED.

#### **Neuro Med Annual Course Report** – *presented by Dr. Fernandez-Funez:*

- Neuro Med is an 8-week course and occurs in Spring semester.
- There were 64 students; 62 passes, 2 remediating. The average mean for the class was 83%.
- Instructional hours reduced from previous year (195 to 181).
- Instructional methods were enhanced: 2- brain dissection labs were created.
- Pathology content was covered by our in-house pathologies, Dr. McGary.
- Continued efforts will be made to reinforce student training for PBL.
- Course evaluation was similar to the previous year evaluation; 4 (Likert scale 1-5, 5 being high).

- The evaluation question on PBL opportunities scored high; 4.4. This shows we are providing opportunities for development and students understand the importance of the PBL process.
- Students requested an earlier release of PBL materials. The past late release was caused by the new development of the case and not having all the materials ready.
- Students responded negatively on having too much embryology and genetics. These are on the national boards.

Dr. Fernandez-Funez can be contacted for additional information or questions on the annual report.

***Discussion:***

- Dr. Englander would like course content hours to be 20 hours per week. Dr. Johns indicated the Duluth courses are very close to that number. There are a few outlier courses. Dr. Trachte indicated CRRAB II is at 18 hours per week.
- The students took the National Board of Medical Examiners Neuroscience Assessment on April 3, 2018. Dr. Fernandez-Funez indicated the gastrointestinal portion of the assessment scored low and was expected as students have not had the GI course. The Neuro Medicine course can help prepare students and even provide a double compliment for our students as a lead into the GI course. This assessment had more 2-step style questions.
- Dr. Johns felt our students did fairly well on the sub-disciplines of the neuroscience assessment.
- Dr. Fernandez-Funez did an analysis of 1-step vs. 2-step style of final exam questions. The final exam had 19% of 2-step questions and the students performed 10 points lower. This is an area we can enhance to better prepare students by providing the intent of these questions.
- Dr. Nordgren indicated Dr. Fitzakerley had a 2-step quiz system that she developed with David Hallberg in DMED-IT a few years ago. Students were provided practice questions to review material she taught that day. This was not required but was valuable to students to learned how to approach a 2-step question. Developing this took a lot of time for Dr. Fitzakerley and she has data on the impact to that approach. Dr. Fernandez-Funez has spoken with Dr. Fitzakerley on the process. Dr. Fitzakerley tagged her questions in ExamSoft with the 2-step questions.
- Dr. Michaels writes exam questions for the National Board of Medical Examiners (NBME) and 2-step questions require some training. During the 1<sup>st</sup> year of medical school, there will be a variable student outcome on 2-step questions. In the 2<sup>nd</sup> year, students should be learning how to answer 2-step questions. Dr. Fitzakerley's 2-step questions were/are valuable. The questions are thought-provoking for students to practice with. If we want our students to learn the 2-step question process we need to give formative opportunities for our students. Most of the NBME Step 1 questions are in a 2-step format.
- Dr. Nordgren adds the 2-step questions come back to faculty and the quality of exam questions written. Dr. Michaels indicated there are case books available on 2-step questions.
- Dr. Nordgren suggested having another boot camp / refresher on question writing. This was done a few years ago by Regional Dean Termuhlen.
- Dr. Johns reminded members all faculty were provided with the Kaplan USMLE Qbook for reference. The more questions students review during their board study, the better they do on the NBME Step 1.
- Dr. Diebel indicated students had many 1-step questions in the FOM exams. Beginning with the Skin/MS course, he exclusively used 2-step questions. Students were given practice homework and questions. Students do well on the exams. Dr. Trachte added that students do adapt. Students just need the time to answer 2-step style questions.
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**PBL Standardization:**

- Dr. Diebel will be talking about facilitation in the BioMed Department meeting. Drs. Nordgren and Fernandez-Funez offered to take 1 of their course PBL formats and pilot another active learning activity.

- A PBL facilitator training / refresher sessions and a summer (annual) PBL workshop for Course Directors and content experts to review/modify PBL case content, learning objectives, and test questions will be arranged.
- Will work on a better introduction to the process of PBL for the students prior to them starting their first PBL in NMed. There was a suggestion to have faculty explain and demonstrate in front of the class how to do a concept map and how to assess for gaps in knowledge.
- Keep PBL groups at 6-8 students.
- All other aspects of the PBL process are to remain as they are run now. This includes faculty learning objectives released at the end of the "B" session, a wrap-up session delivered by one PBL group followed by an open-ended question and answer session, and assessment of PBL learning on the course weekly/biweekly and final exams.

**Other:**

- Dr. Michaels stated incentivizing students to participate in surveys may have a negative effect on the AAMC Graduation Questionnaire (GQ). At this time, the Duluth GQ is at 65% participation rate. The GQ is critical and we cannot incentivize there. When we offer incentives, it takes away from important professional activities. Students need to get into the mindset of doing this because we are listening and care what they have to say.
- Dr. Diebel indicated the TC campus increased their student evaluation participation with pizza as well. Reminders and frequent discussions with students will need to happen on the importance of evaluation completion without incentives.

**Exam Review Procedure:**

- Postponed until the June 12<sup>th</sup> meeting.

Meeting adjourned at 9:02 am. Next CUMED meeting: **Tuesday, *June 12th @ 8 am (165 Med)***.  
 Minutes transcribed by Brenda Doup and reviewed by Dr. Diebel (Chair) & Dr. Johns (ex-Officio)