# Clinical Education Committee February 6, 2015 Minutes

## Attendance:

MEMBER	CLERKSHIP/ROLE	ATTENDANCE
James Nixon	INMD 6805-6806-6807 Essentials of Clinical Medicine	
	3A-B-C; Process of Care Clerkships	
Ray Christensen	Rural Medical Scholars Program	
Keith D. Henry	EMMD 7500 Emergency Medicine	Χ
David Power	FMCH 7600 Family Medicine	
Chris Fallert		
Briar Duffy	MED 7500 Medicine I	X, Chris Miller
	MED 7501 Medicine II	
Miguel Fiol	NEUR 7510 Neurology	X, Julie Pierce
Yasuko Yamamura	OBST 7500 Obstetrics & Gynecology	Deb Egger-Smith
Katherine Murray	PED 7501 Pediatrics	
Sheila Specker	ADPY 7500 Psychiatry	Anne Edvenson
Robert Acton	SURG 7500 Surgery, CEC Chair	X, Mitch Gmyrek
Cornelius Lam	NSU 7200 Neurosurgery	Rachel Talcott
Edward RG Santos	ORSU 7200 Orthopaedic Surgery	Χ
Jennifer Hsia	OTOL 7200 Otolaryngology	Х
Paul Gleich	UROL 7200 Urology	X, Liz Mayock
James Pacala	FMCH 7700 Primary Care Selective – Fam Medicine	
Sally Berryman	MED 7700 Primary Care Selective – Medicine	Chris Miller
Cindy Howard	PED 7700 Primary Care Selective – Pediatrics	Χ
	MED 7701 Primary Care Selective – Med/Peds	
Kathy Brooks	INMD 7200 Rural Physician Associate Program (RPAP)	X
Jacob Prunuske	Duluth Faculty Representative	Paula Guisfredi
Stephen Richardson	MS4 Student Representative	Χ
Ryan Dean	MS4 Student Representative	X
Maros Cunderlik	MS3 Student Representative	Х
Anna Gregoire	MS3 Student Representative	Х
Mark Rosenberg	Vice Dean for Education	
Kathy Watson	Senior Associate Dean for UME	Х
Majka Woods	Assistant Dean for ACE	Х
Anne Pereira	Assistant Dean for Clinical Education	Х
Suzanne van den Hoogenhof	Measurement Specialist, Assessment & Evaluation	Х
Heather Peterson	Registrar	Х
Brooke Nesbitt	Clinical Education Manager, CEC staff	Х
Abbe Holmgren	Clinical Scheduler	Х
Chelsey Jernberg	Evaluation & Data Manager	Х
Theresa Hudachek	MEDS	Х
Scott Slattery	Learner Development	Х

Review of minutes - January 9, 2015 - approved as is

# **Announcements**

<u>Introduction</u> - Michael Kim - new Assistant Dean for Student Affairs. Office is B611 Mayo. <u>GHHS Solidarity Day</u> - event to advocate for "Tell me more" - more compassionate patient care. A few minutes for students during the day (Feb 11-13) to reflect. <u>MEDS</u> (Medical Educator Development & Scholarship) - Many workshops scheduled for upcoming weeks, as well as Journal Club, Educational Research and Progress group, and AAMC Medical Education Research Certificate. Please read the MEDS emails that announce these opportunities or contact Dr Woods. Solicitations for Best Practices Day presentations are ongoing.

<u>Late Grades</u> - Dr Watson provided handout that shows areas of non-compliance for late/missing grades. This report will be submitted to LCME. Reminder that the "Incomplete" is to be used for incomplete, but so far successful, progress in the course. A withdrawal may be more appropriate if the student is heading towards failure or will have significant difficulty meeting all the requirements. Neurology clerkship personnel inquired as to the procedure if a student completes all requirements of the course, except fails the Shelf Exam. Heather Peterson (registrar) indicated that the student should receive a "K" grade until they remediate the exam. Work is ongoing on a revised grading policy that further defines the appropriate use of particular grades.

<u>Medical School Honors & Awards</u> - Please send recommendations of students for consideration to Dr Watson by Feb 13.

#### **Student Issues**

Student Council discussed the issue of Research opportunities. The number of students stating they are interested in research doesn't match the number of students who ultimately participate in research. Council is looking into the cause - lack of opportunities? unawareness of opportunities? A survey of students indicated the "Craigslist-style" research opportunity repository is heavy on certain types of research; Council is interested in trying to develop more variety in the opportunities posted. Students also expressed interest in finding out at clerkship orientation about research opportunities available in that department for interested students. Dr Fiol suggested that a research workshop for students is a good idea; it would be prudent to include information about research filing - IRB applications, regulations, data management, etc. Dr Acton shared that the AHC also has a database of the research activities of faculty - "Experts at Minnesota" - send out. Dr Henry asked if there could be a tab on each clerkship BlackBag site about research opportunities in that specialty.

There was also discussion in Student Council that students who want to do research will find opportunities. The bigger question may be how to motivate students to do research; are there opportunities promoted that are for basic research opportunities - these are easiest for students to identify and volunteer for.

#### **Updates**

**Qsort Exercise - March meeting** 

Two articles will be sent out on EPA's prior to the March CEC meeting for preparation. The committee will complete the activity during the March meeting - <u>very important for Clerkship Directors to attend and participate</u>. Where do we want to put collective energy into the curriculum redesign (beyond the calendar)? Next step towards comprehensive assessment of learners.

<u>Approved Absences</u> - please see Attendance Calendar handout that includes Excused Absence policy links and additional approved absences. Clerkships must also consider the Duty Hours policy in balance with approved absences - are days like Pre-match and Match Day considered days off (meaning they can be scheduled for six other clinical work days in that week) or should those intense days be included in duty hours total? These activities are "required." If MS4 students choose not to attend the activity, they should go back to their clerkship. Since activities like Pre-Match and Match day are university-sponsored "school work" days, they do contribute to duty hours total.

<u>EHR Curriculum</u> - Dr Kim reminded group that over last 1-2 years staff and trainers from health systems discussed more standardized EHR curriculum and training for student. Consensus was that each group wanted

to do their own training. Right now, OME is working to develop a medical school-led curriculum on electronic medical records, health informatics, etc to integrated into the Year 1-2 curriculum.

#### Discussion

See attached handout from Dr Pereira - Summary of Clinical Restructuring

Efforts needed to help ensure MS3 students can complete foundational clerkships, with time in MS4 for advanced and specialty electives. The earliest changes could be rolled out, due to the scheduling lottery timeframe, is 2017-2018. Within the set of foundational clerkships, there are many options as to which one to take first, second, etc. Directors are cognizant of the stage each student is at, as well as what they have taken already. Dr Fiol asked if the restructure proposal meets the intent of LCME requirements. Dr Pereira responded that the restructure is still in line with the intent of LCME requirements as much as the current structure is. In fact, the proposed foundational clerkships do represent what the majority of schools also include as their required clerkships. Exact structures and operations is only in the beginning planning stages. Foundational clerkships that are being partnered/combined will reflect and plan on how best that will work in their specialties/sites.

Dr Brooks also asked for consideration of the RPAP students and the opportunities that the RPAP sites can provide for students. Partnership between RPAP and TC sites? Dr Nixon expressed concern about foundational clerkships that do not align with residency programs - what if a student excels in Obstetrics/Gynecology, but does not excel in "Newborn Nursery," and therefore does not receive overall honors. Same recommendation that these specialty partners work within group to develop curriculum and operations.

#### **TALKING POINTS:**

What are opportunities within each areas to work together on patient encounters and shared care, as well as assessments?

What is the new science in each area that can improve curriculum? What are some obstacles to making structure changes?

What preparation is needed in MS1-2 to set students up for success in these partnered clerkships?

Some of that work could be completed at the Curriculum retreat. Will need to work backwards from June 2017 implementation. Consensus is that general framework proposal is supported. Current efforts to move foundational clerkships into MS3 will support this new structure.

## **Additional Update**

#### **PxDx**

Evalue has rolled over new, narrowed-down Diagnoses and Procedures list. This list is not editable by individual courses and personnel. Any previous data by students is maintained in the system is accessible by students, courses, and evaluation staff. Starting in 15-16, completion will be tracked for graduation eligibility. Dr van den Hoogenhof shared that many students and coordinators have asked about previously required items not being included; courses can track within their course if there are defined diagnoses and procedures they want students to document.

Next meeting: March 6, 2015 Qsort Exercise