

Clinical Education Committee

May 5, 2017

Minutes

Discussion

Critical Themes (workgroups) updates **David Power, David Satin and Craig Roth**

See slides

- Dr. Satin asked how they could see working these ideas into their clerkships
- Dr. Murray clarified that one of the questions is: whether or not clerkships are able to integrate this into their individual settings.
- Dr. Ercan-Fang explained that VALUE is already doing some of this and were interested in doing more of this too
 - They will also be adding high value projects starting next year
- Dr. Nikakhtar affirmed the ideas, but thinks it would be helpful to have a group of consultants to help figure out ways to integrate this type of thing into the current clerkship structure
- Dr. Power explained that is the plan for next steps to meet with departments
- Dr. Satin said that they are happy to go into each clerkship/department to individually work with folks who are interested in this
- Dr. Power added that this doesn't necessarily need to be in every clerkship
- Dr. McCarthy stated that one challenge would be the evaluation of the effectiveness of these projects
 - The concern is around how to grade this
- Dr. Baker said they just went through the curriculum of all of the clerkships and noted that some courses have professionalism as part of their grade
 - Wondered if this was possibility something else that we could add into that part of the grade
- Dr. Power added that in their year one course students see the commissioner of health about the importance of public health
 - Students are expecting that these topics are emphasized at this school
- Dr. Olson mentioned a few challenges
 - Struggle with what students think are the real learning and the extra learning (communications, etc). Need to make sure that these topics are melded in
 - Faculty also struggle with this
 - Would like to find a couple of small things and do them in multiple places
 - Maybe a portfolio for something like this
- Dr. Jewison also wondered how they are supposed to find out what other people are doing
- Dr. Murray explained that the hesitation from the committee is around unplanned duplication and follow through in completion of activities from students

- Would really like students to have a portfolio where the clerkship directors could offer options for them to complete parts of it on their clerkships and then have a means by which students can review the portfolio
- Dr. Olson explained that part of what they are hoping to do with intercessions are to have students create a portfolio with these areas
- Dr. Hobday wondered if this is something that could be flipped classroom for intercession along with having the reflection piece be stretched through clerkships
- Dr. Olson said we should also think about hosting a Schwartz round
- Dr. Roth would like students to get involved in the planning of Schwartz round which is another interprofessional activity
- Dr. Kim said that there are structural things in the 3rd year that would help
 - Intercessions (pre/post intervention)
 - Almost all students will be taking a required rotation between those intercessions
 - Will mostly be doing it in a cohort (could this be utilized as an opportunity for Q/I etc)
- Dr. Power asked if there was something currently happening with portfolios
- Dr. Olson explained that all of the rising third year students will be expected to do this
 - Mostly required to think about reflective practice
- Dr. Satin mentioned a concern about this being an “extra” because it is not part of the clerkship
- Dr. Olson disagreed saying that students will need to do this to pass, but if it is something that is recurrent and something they do in all clerkships and is not task based (meaning making), we’ll be more successful
- Dr. McCarthy stated that the portfolio would be great for them because it wouldn’t be graded, but also because it would be strung across the continuum
 - Even if it feels like “extra” but many times it can completely change the way students practice - needs to be paired with a reflection piece
- Dr. Power said that all of these are anchored to patient care which might be a hook for students
- Dr. Nikakhtar explained that students may not recognize the value
 - Need to figure out ways to present it in a way to get buy in for students
- Dr. Slattery said that the reflection needs to be there and share it with someone else rather than being just in a portfolio where no one sees it
- Dr. Baker said that since they are all at different sites, they would need to have a conversation with Dr. Olson to make sure that RPAP is taken care of too
- Dr. Murray mentioned that we are in a feasibility stage to implement a portfolio
 - Some engagement with quality measures in direct patient care, Schwartz rounds, researching a clinical issue to write a SOAP note, supporting high value care with MEDU materials
 - Would like the team could propose the composition of the portfolio and how the clerkships would contribute to this and how these exercises are perceived as valuable

- Dr. Power said the portfolio is going to appear to be busy work and so he wouldn't like it to be something that is not rolled out in the clerkship
 - Would like it linked to the evaluation
- Dr. Murray said there are ways to integrate this into the clerkship through a portfolio
 - This way would also avoid unnecessary duplication
 - Just needs to be an expectation
- Dr. Slattery said it would be helpful to have some training about how to process consistency across clerkships
- Dr. Olson wondered if it would be better to just do one to two for the pilot year and do it really well rather than trying to implement all three and having it fail
- Dr. Power needs to hear from everyone on next steps
 - Contact Dr. Power if you're interested in this
 - Asked if there would be interest in all completing the educator curriculum on high value care? - there was some consensus
- Dr. Murray said the committee is now charged with coming up with an implementation strategy for one or more of these as a feasibility project

Update

Immunization Compliance Dr. Kim

- Compliance has continued to be more and more problematic
- Defined by our affiliation agreements with hospital systems
- Immunizations have always been difficult because Boynton checked the data
- It's been challenging to get good information from Boynton - do not have expiration dates for their compliance
- Question is how often should we be sampling students to ensure that they are compliant?
- Dr. Kim explained that influenza has been handled the way the sites handle it
- Dr. Murray said that as long as flu is out of the mix, quarterly would be fine
- Dr. Nikakhtar said that if we are promising something different in our agreements we need to hold to that standard
- Dr. Kim said that Boynton should be able to get it to us students who will be expiring in the next 30 or 60 days
 - Students have to go through Boynton for all of this
- Dr. Baker said that if TB is the issue, why can we not require all students to do it right before 3rd year and right before 4th year
- Dr. Murray said that from a risk standpoint we would be going above and beyond the normal practice if we were doing more than quarterly
- Dr. Kim said they will put a proposal together and bring it back next time

Final Grades for Graduating MS4s Dr. Kim

- Graduating today
- Get grades in ASAP (latest mid-June)
- If there's anyone at risk, need to know that now

