

Clinical Education Committee
December 1, 2017
Minutes

Open

November minutes approved in advance

Meeting time

- At least for now the meeting time will not change

Reports

[Education Council Report](#) from 11/21/17 Meeting (Dr. Ercan-Fang)

- See handout
- Dr. Ramaswamy asked Dr. Nelson about issues with recruiting facilitators
 - Dr. Nelson said that they are working on different ways to use less facilitators
- Dr. Ercan-Fang asked about flipped classroom
 - Dr. Nelson replied that some lectures in flipped classroom don't work very well because there is usually more pre-homework to do and then additional content in the classroom
 - They try to make objectives very clear, but pilots have been rocky
- Dr. Violato commented that Dr. Nelson had several people go through to identify essential vs. non-essential content
 - Dr. Howell explained that it took a lot of time to go through all the material to discover what was going to be essential
 - Dr. Violato said that this is a good model for moving towards better integration
 - Dr. Murray volunteered the group to contribute to these discussions with SFC colleagues
 - Dr. Nelson explained that there needs to be scaffolding in the first and second years
 - Dr. Pereira said that there are 3 areas similar schools are working through - need to know, don't need to know and don't need to know at this time
 - Kevin O'Donnell said that the flipped classroom model does have limitations with lectures beforehand that students need to do during ILT time before the next day of class
 - Ali McCarter agreed that this is a welcome change in the curriculum

Clerkship Director of the Month (Dr. Hutto)

- Dr. Hutto is coming up on a year of taking over for her department
 - The biggest challenge has been going from a six week to a four week clerkship
 - Challenging for learners to do something different all the time so they don't feel integrated into the team
 - Is excited to hear about integration within Years 1/2 because students have stated that they don't learn much about Ob/Gyn in the first two years
 - More acute issues are with capacity

- Difficult to get private practitioners to participate in teaching because they are usually paid by production
- Dr. Hobday asked Dr. Hutto to elaborate on the changes she has made to the online curriculum
 - Dr. Hutto explained that there is not very much dedicated time for clerkship directors to understand how people learn best
 - In a review of their BlackBag site there was very outdated information
 - Instead took short lectures and handouts on high yield topics from the national group
 - Students enjoy the practice based learning cases
 - Have also added a UI site to go through cases and questions - has had good student response
- Dr. Murray asked about how the capacity was looking for a normal year next year
 - Dr. Hutto said that it will be fine, however the university is more full than it should be
 - Dr. Hutto is still working to get sites to sign on, but is having challenges
- Dr. Clark asked how the problem based learning is facilitated from site to site
 - Dr. Hutto explained that there is a new facilitator for each block
 - There are only 3 sites that do facilitation, so students at community sites come into some of the larger sites
- Dr. Slattery said thank you to Dr. Hutto for her work!
- Dr. Pereira added a thank you to Dr. Hutto for her work on capacity
 - There is a maldistribution between the Duluth campus and the Twin Cities
 - The providers in Duluth want more students than we are able to provide and they would like to move towards accepting other learners instead of medical students
 - Dr. Pereira is working on having a Duluth track to better use the capacity in Duluth
- Dr. Murray added that nursery might be a helpful addition to distribute capacity in a different way
 - Dr. Hutto agrees that this idea has potential, particularly with integration in the first two years

Discussion

[Recommendation for membership and governance](#) (Dr. Murray)

- Dr. Murray explained that this proposal will go to the education steering committee to then go to education council for approval, but would like feedback from the group about the composition of the membership of the committee (see handout)
 - Dr. Jewison asked how the surgical subspecialties would work
 - Dr. Murray explained that voting membership was never fully fleshed out before, but it would change the membership of the committee for surgical subspecialties to one director to represent them all
 - Dr. Jewison would like to hear from the other surgical subspecialty directors

- Dr. Nikakhtar asked about advanced selective and elective directors who would be involved
 - Dr. Murray explained that there would be one elective director and one advanced selective director
- Dr. Nixon said it would be difficult for one person to represent all of the departments for electives
 - Brooke explained that they would ideally be someone from a department who has not previously been represented on this committee so that they represent that perspective
- Dr. Nixon asked about representatives to come and how that would work with voting
 - Dr. Murray confirmed that either the director would come or a representative and either would be allowed to vote
- Dr. Nixon asked whether the representative needed to be another physician or if it could be an administrative person
 - Dr. Murray stated that it didn't necessarily matter
- Dr. Hobday asked which department the advanced selective director would come from
 - Dr. Murray said that we should seek membership that maximizes departmental diversity

Strategic Plan Update (Dr. Pereira)

- Dr. Pereira explained that this will be a standing item going forward so that everyone is informed
 - Dr. Englander has been bringing communities together to create a vision statement with guiding principles and goals and have been modified based on input
 - Currently have a draft vision statement and 5 year goals
 - Will be pulling together groups to create 1 year objectives to meet these goals
- Kevin O'Donnell explained that the student council worked through this with Dr. Englander

Discussion

Wellbeing and Balance in Medical School (Dr. Kim) (see slides)

- Dr. Kim explained that the presentation was a version of what was given to education council and ultimately was given to students during orientation (see slides)
- Kevin O'Donnell asked about how many students are actively participating in the wellbeing program
 - Dr. Kim said that it varies from week to week, but there were about 183 students who participated in the survey and then at the activities fairs there were 60-70% who participated
 - Kevin O'Donnell asked what students were supposed to do with their data
 - Dr. Kim said that the questions should be reflective for students and are also used to help focus programming on certain areas throughout the academic year

- Ali McCarter asked if and how some of this material will be covered during intersession
- Dr. Howell explained that they are going to be doing a session on sleep during the upcoming intersession
- Dr. Kim explained that next year the wellbeing program will roll out to years 3 and 4
- Dr. Nixon asked how much of this work is directed towards students and how much is directed to structural change at the school level
 - Dr. Kim said that they work in parallel with each other

[Burnout/Empathy/Resilience](#) (Dr. Howell, Dr. Nikakhtar, Dr. Violato)

- Dr. Nikakhtar reviewed the literature on burnout in medical school (see slides)
 - Dr. Nixon added that one of the biggest issues is that when something bad happens (patient dies, etc.), no one talks about it
- Dr. Howell presented on the GQ information from our school and moving forward (see slides)
 - Dr. Kim explained that the G2 survey was the initial data that was used to create the wellbeing program
- Dr. Howell went on to explain burnout and sleep-medicine data and found that the strongest predictor for burnout was a diagnosable and treatable sleep problem
 - A presentation on this will be completed for students during intersession