

**Clinical Education Committee**  
**November 3, 2017**  
**Minutes**

**Open (Murray)**

October minutes approved in advance-thank you!!

Review [Sequence of Events](#)

- Dr. Murray explained that she is seeking to create a process for everyone to engage in the committee during the month

[12-month work plan](#)

- Dr. Murray asked that everyone sign up for at least one topic to lead and one topic to be a co-moderator for
- Dr. Murray explained that we now have 2 sided table tents
  - Hoping that we have all the required clerkships represented at this meeting
  - Instead there are “Representative” slips that they can tape over your name to use for that meeting
- Dr. Gleich said that his support staff feels uncomfortable sitting at the “big kid table”
  - Expressed concern that substitutes for him are very last minute most of the time
  - Dr. Murray hopes that everyone feels empowered to come and sit at the table
  - Dr. Murray expressed that it is important that directors communicate expectations to their representatives

Meeting time change to 7:30

- Dr. Murray explained that the request to move the meeting time is still in the works
  - What we are seeking is a technological solution for folks who cannot be there - not for everyone to participate remotely
- Dr. Olson asked for how many folks would have to leave before 9 if we move it back to 7:30

[Education Council Update](#) (Dr. Ercan-Fang)

- Discussion of graduation questionnaire (see handout)
  - Dr. Murray asked for feedback from the students
  - Erin Mustonen said that this seems on par with the student experience
    - Community involvement and giving back would be something to add in during their 3rd and 4th year to keep students engaged
    - Kevin O’Donnell said that intersession might also be able to fill those needs
  - Dr. Kim asked for feedback on the lanes
    - Kevin O’Donnell explained that the lanes are great for the cohort building
      - Much less stress than previous scheduling model
  - Dr. Murray said that the more transparent the medical school is about the graduation questionnaire the more that the committee is better aligned to help in areas that need improvement

Clerkship Director of the Month (Dr. Howell)

- Dr. Howell explained that undergraduate education is the most important part of what they do in their department - try to center it around that
  - Four week clerkship divided evenly between inpatient and outpatient experiences

- One challenge is that there is a much bigger group that is going through, capacity is an issue
  - Faculty burnout is higher - have worked directly with them on low score notifications
  - Higher level patients for medical students - more shadowing
  - More crowded
- Great opportunity to work with students in January intersession on helping with sleep problems
- Integration with Dr. Nelson in psychiatry
- Dr. Ercan-Fang asked more about the integration with psychiatry
  - Dr. Howell explained that the integration starts in year 1 - going through lectures to emphasize clinical aspects of the basic science curriculum
    - Dr. Nelson explained that this will also be matched with the HHD5 course
      - Cut the number of large group contact hours by 50%
      - Focusing on structure of information rather than trying to get too granular
      - Trying to be more intentional about what students hear across their 4 years
- Dr. Howell asked for thoughts on how to decrease evaluations about complaints of shadowing
  - Dr. Murray offered that the ways they schedule students in inpatient environments need to be different than the ways they schedule students in outpatient environments
    - Must be scheduled to build relationships with faculty that are built on trust
  - Dr. Howell explained that Dr. Pereira had mentioned the site directors retreat which could be helpful to figure out strategies
  - Dr. Olson has said there are strategies for scheduling that can assist in making it less shadowing
  - Erin Mustonen said that in her outpatient experience, when she worked with a faculty member who was engaged and wanted her to be there, there was much less shadowing
  - Dr. Howell has talked the chair into hiring general education focused neurologists as well
  - Dr. Kim expressed that students the more longitudinal experiences are, the more that students can be value added
  - Dr. Murray expressed the idea of having a continuity clinic with an outpatient preceptor throughout all 4 years
  - Dr. Kim said that the Hofstra model is that students are given 5 preceptors that take them through their 4 years
  - Erin Mustonen explained that in Duluth they have the RMSP program where they are in a rural community with a preceptor for 5 weeks over their first 2 years where they will have more responsibility due to relationships built
  - Dr. Ramaswamy explained that she believes in the longitudinal model
    - They have had an entire site drop out due to some of the negative comments from students about their experiences

- Dr. Olson agrees and added that some of the things that come back in the comments is very unprofessional which can hurt relationships with sites
  - Need to help students build professional identity
- Erin Mustonen said that the perfect platform would be student council - need to hold students responsible for their comments in E-Value
  - Affects everyone negatively
- Dr. Murray said that faculty need to follow suit as well
- Erin Mustonen suggested that one factor is that the evaluations go out usually right after shelf exams which is a time of heightened emotion

## **Discussion**

### Clinical training capacity

- Dr. Murray stated that the bulge year will be over in 2018-2019
  - Dr. Pereira and her team will be working toward getting the lanes more equal across the board - should see more consistent student population
- Dr. Murray said that there is a link between capacity needs and shadowing and asked for best practices for increasing capacity and how the medical school can help support that effort
  - Pat Schommer said that the more students that they can fit in the burst experiences for the RPAP program, the more students will that will be off campus for part of their time
  - Brooke Nesbitt asked to be cautious because the bursts or pre-recs are pushed into very specific periods - the bulge will continue for courses that students don't get in their LICs
  - Ali McCarter said that the burst experience is also an issue for the shadowing discussion because with 2 weeks they do a lot of shadowing
  - Dr. Murray explained that one part of the decision to equalize the students across the lanes was because there is no harm to USMLE scores based on any of the lanes
  - Dr. Nikakhtar said that one outcome would be getting lower choices across lanes and sites
  - Ali McCarter said that it's reassuring that we're having this conversation because many 3rd year students feel like it's very overcrowded
  - Dr. Murray explained that Children's Hospital is doing an educational RVU - a way for a site to provide faculty engaged in learner education a way to catalog hours spent doing teaching - getting credit as that for part of their production
  - Dr. Gleich said that there are a large percentage of faculty who are still at 100% production
  - Dr. Olson is looking to do a more incentive based recruitment
  - Dr. Murray said this would be a great topic for the site director retreat
  - Dr. Hutto said there is a large amount of low score notifications - undertone of what they're saying is correct, but is stuck in ways to fix those issues due to capacity
    - She has had two sites drop out this year - challenge with all 3rd year students - not quite as adept at having face to face contact with patients yet
      - Request for more experience doing that in the first 2 years so they will be ready to do that when they get into their 3rd year

- Erin Mustonen said that there will be a letter to students from students on their website to try to express changes that have been made

#### Student Council

- Ali McCarter said that there is a new student council website to better communicate
  - Have also added 2 diversity representatives

#### Consent Agenda Items

- [Student Compliance Requirements](#) - students will need to be compliant in order to participate in clinical environments
  - Officially approved by CEC
- [Required Clerkship Director Roles and Responsibilities](#) (see handout)
  - Idea is for Dr. Pereira to send this letter to department chair, vice chair for education and each director - spark opportunity to discuss level of support with department chair
  - Dr. Ercan Fang had a question about the data to share with faculty - which data should they be sharing
    - Dr. Murray said that it will differ by department and the chair would need to give you the specifics of the data you should be gathering

#### Discussion

- [Advanced Selectives](#) (See handout)
  - Brooke Nesbitt explained that the idea is to give required credit for advanced specialty courses that they are taking to prepare them for residency and to give them opportunities for related experiences
  - Goal is to have a mini catalog that meet the requirement
  - Each student should take one in the specialty that they're going into and one in a different specialty
  - Proposed a starting set of courses that are at this level just from the description - open to adding more that fit this description and requirements
  - Call to the group is to liaise to directors of the electives in your department to see if they should be considered - or to develop new ones that would count for this
  - Dr. Nelson thought that the idea was that with the lessening of credits in the core requires that they would then have an opportunity to take those experiences as advanced requires
    - Brooke Nesbitt responded that students are only allowed to take one advanced selective per department so students should get opportunities to do some of the things they missed by reducing the number of weeks
  - Brooke Nesbitt asked directors to think of what courses per department would be good for students going into that specialty and for ones who are not planning on going into that specialty
  - Brooke Nesbitt said that technically there is capacity for all students to take two, but would like a broader lens for student interest
  - Dr. Murray explained that this is just the start of a conversation about 4th year
- [Recommendation for Membership and Guidance](#) - would like feedback on this online (in the folder)