

*SFC Meeting Minutes
September 7, 2012*

September 7, 2012	Date of Action	Final
<p>Information & Updates <u>Disability Services Informational Presentation (Barbara Blacklock)</u> Barbara Blacklock, Program Coordinator for Disability Services, encouraged faculty to refer students to Disability Services if disability suspected.</p> <ul style="list-style-type: none"> • Center does not diagnose, but has tools & resources to help students determine if they need accommodations. • Saw approx.. 45 med students last year; most have “invisible” disabilities (mental health, ADD, learning disabilities, systemic illnesses such as epilepsy). • Challenge to get med students to recognize they need help. • Confidential. Accommodations are not reported on any documents that follow students: not on transcript, not in MSPE. • Provided preferred language on disability accommodations; link to statement will appear on each course’s Black Bag site. • Contact info: <ul style="list-style-type: none"> ○ 612 626 1333 ○ ds@umn.edu <p><i>Support slides in addendum.</i></p>		
<p>Black Bag Update (Leslie Anderson) <i>What is working well</i></p> <ul style="list-style-type: none"> • Calendar-driven access to session information/details/resources • Announcements • Grade postings for assessments and assignments that occur within Black Bag <p><i>Areas still being fine-tuned</i></p> <ul style="list-style-type: none"> • Score postings for assessments and assignments that occur outside Black Bag (Ex: written quiz administered in lab) 		
<p>Annual Course Reports</p> <ul style="list-style-type: none"> • Microbiology & Immunology (Peter Southern) <u>Microbiology & Immunology</u> <ul style="list-style-type: none"> • 2012 marked Peter Southern’s first year as course director. • Overall student evaluation scores ranged from 4.0 to 4.6 (five point scale). • Five students did not pass the course initially; all passed on retake of final exam. • Eighteen students passed the course but by slim margins: they were very close to the 70% requirement on the final. <p><i>New in 2012</i></p> <ul style="list-style-type: none"> • 40% of the course was either presented by instructors new to the course or by veterans extending their topic range. • Two of five instructors were new to the course. • The lab components of the course remained essentially unchanged from prior 		

years.

- Questions on final exam were intermingled rather than grouped by topic.
- Experimented with formal grading of lab reports; reports accounted for 8.7% course grade. Proved to be too time consuming, too difficult to distinguish between levels of effort. Will revert to P/N score in 2013.

What worked well

- Instructors readily accessible
- Students provided with past exams/questions
- Labs contributed to solid foundation
- Students reported that course objectives and content were well aligned and that they acquired an understanding of the objectives.

Areas of concern

- Lab report grading pilot unproductive.
- Students not always arriving prepared.
- Would like better understanding of foundation students acquire in fall semester and foundation they need to be successful in MS 2.
- Working to find opportunities to make case-based discussions more clinically oriented.

Changes for 2013

- P/N grading of lab reports.
- Clearly set expectations for pre-class preparation.
- Will move scored quizzes to 8:00 AM Monday mornings to encourage preparation.
- Will add formative quizzes to lab sessions.

Summary notes in addendum.

Physiology (Steve Katz)

- Two students did not pass the course initially; both passed on retake of final exam.

What worked well

- Students reported that they acquired an understanding of the course objectives (mean: 4.5).
- Students give teaching faculty high marks.
- Achieved a good balance in number of summative exams: 2 quizzes, a midterm, final, 8 low-stakes online quizzes.
- Provided several formative/self-assessment options: study questions for each section, interactive notes in lecture.
- Integration with FCT cases.
- E-books versus hard copy texts.

Areas of concern

- Clickers and clicker support: technological challenges discourage use. (Action step: Discuss new technology options at upcoming SFC.)
- Would like feedback from year 2 faculty on their perception of student preparedness in physiology.
- GI: student perception that it is not covered well. Several faculty interested in examining/understanding where and how GI is addressed in the curriculum.

<p><i>Changes for 2013</i></p> <ul style="list-style-type: none"> • Transition to Black Bag. • Make additional final exam available to students as a self-assessment tool; needs be written. <p><i>Summary notes in addendum.</i></p>		
<p><i>Best Practices</i></p> <ul style="list-style-type: none"> • Helpful to have course director at lectures and labs <ul style="list-style-type: none"> ○ Able to address questions, add to discussion, revisit areas of confusion ○ Augmented consistency of message • Exploring strategies for gaining better understanding of what is taught where within the curriculum; expect Black Bag to be instrumental. • Action step from discussion: A number of faculty would like to see focus groups conducted with MS 4 students to gain feedback on specific areas of the curriculum that were particularly useful – or not. • Students should have completed Step 1; need to ensure student participants represent a wide range of abilities. For discussion at future SFC. 		
<p>Discussion: Impact of Year 1 and 2 Course Honors (Kathy Watson) Dr. Watson opened the discussion of honors grading by providing a brief overview:</p> <ul style="list-style-type: none"> • Honors grading was introduced in the Twin Cities for the 2011/2012 academic year; it had been used in Duluth for approximately 10 years. • The change was made in the Twin Cities to ensure a common system across campuses prior to the LCME visit. • Ed Steering Committee revisited the discussion of honors at its August meeting. Three students presented a summary report (see addendum) drafted in February 2012 ten student representatives, years 1 through 4. The report’s consensus statement: <p style="padding-left: 40px;">While there are potential benefits to a P-F-H grading system, these benefits are not substantiated and unlikely to benefit the vast majority of students. Meanwhile, the effect of a P-F-H system on students’ well-being and extracurricular involvement as well as the type of applicants that the medical school attracts are much more widespread. Therefore, we recommend changing to a P-F- grading system for the incoming class of 2016.</p> <p><i>Discussion</i></p> <p>Glenn Giesler: Honors grades encourage learning. Possibly 10% would be a good target (versus awarding honors to the top 15%).</p> <p>Kevin Wickman: Has seen increase in student stress levels, improved attendance and engagement. Perhaps if honors were to be eliminated, the threshold for a passing score should be raised to 80% (from 70%).</p> <p>Deb Powell: Dislikes honors. 15% is a meaningless benchmark; if we are going to have honors, we need to use more meaningful assessments to distinguish between levels of performance. Would prefer to see meaningful narrative comments from small groups.</p>		

<p>David Satin: The top 15% methodology does not fit all courses, particularly ECM. Can courses set their own bar for honors?</p> <p>Discussion ended because of time; topic of honors will be continue to be addressed at ESC in October.</p>		
<p><i><u>Next Meeting</u> – October 5, 2012</i></p>		