Education Council (EC) Meeting Minutes

December 16, 2008

<u>Members present:</u> S Allen, D Anderson, L Anderson, J Beattie (L Watson), K Brooks, A Campbell, T Ebner, A Friedman, L Henson, R Hoffman, M Hordinsky, J Jochman, A Johns, L Ling, W Miller, A Minenko, C Niewoehner, J Nixon, L Perkowski, L Ryan, T Stillman, T Thompson, D Wangensteen, K Watson, P White R Wong, M Woods, J Wynn

<u>Members absent</u>: J Adams M Baird, B Benson, B Brandt, S Chahla, B Clarke K Crossley, C Hegarty, B Johns, M Kondrak, M LuBrandt, R McCollister, J Miller, C Patow, D Power, L Repesh, J Sauter, R Soninno, T Walseth

I. Approval of Minutes

Minutes for November 25, 2008 meeting were approved without changes or additions.

II. Discussion

<u>Duluth New Doctor Calendar – Discussion and Vote for Approval</u>

Dr. Lindsey Henson gave an overview of how the MED 2010 and the Duluth New Doctor curricula calendars will correlate with one another, (see attachment for Year 1-4 projected schedules). Along with the overview, she also provided details and comparison for weekly schedules for Year 1 and Year 2 for each campus. The comparison of schedules generated lengthy discussion for how the campuses shared goals can be accomplished, while maintaining their unique tracks. The discussion also dealt with specifics related to required competencies and the competency assessments called Milestones 1-3, required for students from both campuses. The Milestones will determine student progress in the seven required competency domains. Important future considerations include the pre-requisites for and timing of clerkships for RPAP students, how to design transition for Duluth students to Yr-3, timing of Milestones and the start dates for each campus.

There was an added discussion regarding how to facilitate the "flexible" curriculum (3-yr MD degree) for individuals selecting that option. The following suggestions were considered; altering begin dates, offering well designed "advanced scientific courses", an individual's educational and life long experiences and Duluth's undergraduate "early admission" program.

Upon a motion duly made and seconded the proposed Duluth New Doctor Calendar was unanimously approved by the members of the Education Council, with the understanding that the following concerns will be resolved. The agreed upon concerns are 1) the impact on RPAP, 2) timing of the Milestones and 3) the begin date for each campus.

Update on Curriculum Retreats

Dr. Lindsey Henson spoke about the two retreats that have taken place for clinical competency curriculum planning for MED 2010.

To recap the work done during the first Clinical Competency Curriculum (CCC) Retreat, Dr. Henson shared two Summary Reports; titled "Desirable Learning Experiences for MED 2010...", and Desired Attributes and Abilities of Students Entering Residency and/or Phase 3 of MED 2010..." The two summaries are a compilation of discussions of Working Group members at the November 21st Retreat. These reports were compiled by group facilitators and are a synthesis of the many ideas discussed in the small group format.

Meeting materials included a preliminary report from the December 12th CCC Retreat, which was also done with a small group format. Members of the groups received very specific "design challenges" and the Report provides a recap of discussion and input from each group. Design challenges included the following:

- Flexible movement from course to course and site to site
- Cluster disciplines at specific sites
- An integrated longitudinal curriculum model
- Curriculum to support pursuit of a surgery or surgical subspecialty (framework for student advisement)

Dr. Henson remarked that as a result of the individual group discussions, a congruence of opinion occurred across the groups for some very specific topics. For example, some themes included in the responses are; use of formative feedback and handoff related to clinical skills without influence on student (clerkship) grades, clustering shorter courses at specific sites, and basic science clusters at the beginning of a clerkship as a method to integrate courses. Work Group members who attended the Retreats expressed strong support for the format and development process; they note broad representation in the work groups (includes input from over 100 individuals), they've become aware of new ideas, each retreat builds upon the work done previously, feel it has been a productive way to involve faculty, important to retain the "master tutor" model and student participation has been very important.

Next steps include posting materials on a wiki to allow others to review, returning reports to facilitators who will design a "template" for groups to use as a method for more in depth development and finalize this report for use at the next CCC Retreat in January. In addition, at the January CCC Retreat, begin to develop details for Phase II.

The December 15th Scientific Foundation Retreat addressed questions of how to+ organize the basic sciences curriculum planning. A focal point of group discussions was to determine what overall outcome is important to the education of doctors and where does basic science fit. Individual groups each concluded the following, "develop doctors who can think critically and analyze information".

A brief preliminary Report from this Retreat provides two models that were discussed by groups and also lays out plans for "next steps". Education Council members discussed

the impact of each model. EC members agreed that integration will require course directors to work closely with each to coordinate this across the curriculum.

Dr. Wesley Miller talked about individuals (UME students) "who can bring knowledge to the table that can actually be applied to a realistic situation, who can think critically and apply knowledge; which leads to reasoning for effective medical decision making. The curriculum should not artificially separate the discipline of critical thinking from medical application"

EC members reached a consensus to move ahead to develop a curriculum design which includes core principles and immersion, followed by moving into organ systems with normal following abnormal.

MED 2010 timetable

Lindsey Henson provided a current timeline for January-July, 2009, for MED 2010 progress. The spreadsheet breaks down on-going and developmental activities which need to proceed simultaneously. The schedule also designates where within Medical Education and across Medical School administration, development and supporting actions will be required. Some areas have very concrete, fixed deadlines to meet; i.e., Admissions and the applications for entering class of 2010.

A Report to the AHC with a submission deadline of February 1, 2009 is being written; it will be presented shortly after to the AHC-Academic Council and is scheduled to be presented to the Regents in March. The Report will be used to determine resource implications and will require a completed general plan in January, 2009 as support documentation. Also in January all of the competencies that have been developed, reviewed and mapped will be posted to a web site. For the January EC meeting, Linda Perkowski will present two important plans for approval; an approach to approving electives and an approach to scholarship and research on education. The following months include the following deadlines and implementation; current evaluation of programs, with plans for future evaluation; proposal of plans for an advising process; update on pilots; a newly designed MSPE and the Match results; and a letter to the LCME with details for the new program. For more detail please consult the spreadsheet included in the December 16th meeting packet.

Dr. Friedman explained further that meeting these deadlines will require EC members to be prepared for concise discussion and decision making, regarding upcoming MED 2010 developments.

Recorder Sue Mowbray

The next Education Council meeting will be held on January 20, 2009

Approved by EC members January 20, 2009