

Clinical Education Committee
March 4, 2016
Minutes

Attendance: please see last page

Review of minutes - February 2016 - approved as is

Late grades

MEDS - see recent emails for upcoming offerings

Student Comments

Match Week 3/14-3/18: MS4 excused Thursday and Friday (if they go to event)

Updates:

EHR curriculum - Epic 101

Continuing to move forward. Dr Pitt continues to work with IT and Security personnel at major teaching sites (excluding VA). Students will access Epic training modules through BlackBag and complete modules and a MCQ assessment that will exempt them from some or all of the Epic onboarding at each site. Brooke Nesbitt will communicate to students and track compliance.

Future efforts - Use of EHR in MS1-2 curriculum (not Epic-specific)

Preceptor efforts (adjunct faculty & thank yous)

1. An issue raised by community preceptors is the desire to understand better the option and process of obtaining adjunct faculty status. A concern of Dr Pereira is that advertisement of that option in the process for recruitment of preceptors may increase the requests to departments for adjunct faculty appointments.
 - a. Dr Gleich asked if there was information about the faculty status of the Fairview faculty (non UMP previously). Would they become affiliate and/or adjunct faculty? Uncertain at this time....
 - b. Cost of adjunct faculty appointments is shared by the department and the medical school.
2. Please be sure to formally recognize and thank the community preceptors teaching in your courses.
 - a. Dr Pereira has nicely cultivated a strong relationship between the medical school and MMA on several projects, including preceptor recognition.
 - b. In May, there will be a full page "ad" in Minnesota Medicine from the MMA to thank teaching preceptors.

Curriculum mapping

Last week, CEC members received an email from Brad Clarke and Dr Pereira. Included in that email was a color coded flow chart for curriculum mapping. Functionality has been added to BlackBag to allow clerkship directors to map their session objectives to course objectives, and

course objectives (goals) to PCRS competencies. Mapping should be completed as soon as possible, in combination with reviewing the sites in preparation for 16-17 rollover.

Discussion

New clerkship planning (different lengths and advanced clerkships)

Plans for 2017-2018 clerkship redesign has been approved by Education Council.

Handouts include a memo to clerkships, table with lengths changes, and draft schedule of "lanes." In addition, capacity for 16-17 is important because that affects the needs carrying over into 17-18. Data provided today is a previous report, numbers are constantly changing due to open enrollment.

Dr Yamamura shared that OBST 7500 has always struggled with capacity. Numbers are decreasing at major sites, like UMMC-Fairview and HCMC. There is not enough capacity to add the bubble. Dr Specker echoed those same concerns for Psychiatry. Dr Chipman weighed in that perhaps additional M Health hospitals could be leveraged given the new merger, such as Southdale, Ridges.

Dr Fiol noted opportunities for shared didactics between 4-week clerkships that "flip-flop" like Neuro and Psych do.

Review of Px Dx

In 2014, the current patient encounter tracking list (procedures and diagnoses) list was developed. It is prudent for an annual or bi-annual review. There are two EPA's to which specific patient encounters are mapped. Several patient encounters have been logged multiple times per student and potentially could be removed from list. Some patients have extremely low reporting numbers - will that prevent students from graduating? It may be more helpful to have a report by student, rather than totals of how many times an individual procedure or diagnosis was logged (one student may be logging it many times, while another student has never logged it). Please review list and notify Dr van den Hoogenhof of any changes you recommend to the list.

Assessment within new clerkships

not covered in this meeting due to time

Next meeting: April 1 - Combined SFC/CEC/CUMED meeting.