



CUMED 12/1-/2018
pm

Meeting was called to order at 3:01

Attended: J. Boulger, R. Christensen, K. Diebel, P. Fernandez-Funez, A. Greminger, R. Hansen, B. Holbrook, R. Michaels, K. Nordgren, E. Onello, J. Pearson, A. Pereira, A. Seip, A. Shaw, M. Statz, S. Stover
Absent: R. Harden, K. Nelson (TC), M. Owen, G. Simmons

Welcome:

- Dr. Shaw entertained a motion to approve the November, 12 2018 meeting minutes.
 - Dr. Boulger seconded the motion: All in favor of approval, none opposed.

Student Updates:

MS II (B. Holbrook)

- Question on grading system in Social & Behavioral Medicine II course, specifically honors, as stated in the syllabus. Clarification that honors are not offered for any courses, and that detail was missed during syllabus update.
- MS II students wanted to express their gratitude to Dr. Heather Muster.

MS I (R. Hansen)

- Skin/MS course has ended and students are excited for RMSF and meeting their preceptors.
- Request, in the future, for a list of all anatomical structures that will be tested in the gross lab. Students were told to just study lab manual, but one structure tagged was not in lab manual.
- Students felt they got more out of anatomy lectures when included clinical application and request to incorporate more of that in the future, particularly since significant portion of exam questions were clinical application based.
- Students liked Dr. Shaw's interactive PowerPoint.

Around the Room

- Suggestion to rephrase Exam Review Protocol Item #11: "Further access to secured exam material is prohibited after student has completed their secure exam review."
 - For Skin/MS course, Dr. Diebel created review exam based on questions that scored <70% over first 3 exams. Dr. Diebel was present. Students were allowed to discuss questions amongst themselves and learn from each other. Two-hour session: 60 minute exam followed by immediate 60 minute review. Student were not allowed to take notes & only 1 device per student allowed.
 - Proposed rewording Item #1: "Access to any secured exam material in an unsecured manner is prohibited."
 - Suggestion to modify language and send to committee for a vote.
 - Request for rewording to be very specific to avoid any misinterpretations.

Assessment

Grading Task Force Report & CUMED sub-committee response

- Twin Cities is planning to trial run the policy in one course in Spring 2019 will full implementation in Fall 2019.
- First concern is that Duluth campus had little opportunity for input. Dr. Bob Englander apologized for the way this was shared and ensured this would not happen again when there is policy affecting both campuses.
 - Agreed that more members from Duluth campus are needed on Assessment Committee.
 - Dr. Diebel proposed Amy Seip, as well as a student sit on committee.
 - Dr. Boulger asked for clarification on Assessment Committee structure and reporting. Dr. Diebel explained that it is comprised of course directors, curriculum administrators, and students that reports to Education Council, which is comprised of members from both campuses.
- Second concern is policy eliminates requirement to achieve 70% on final exam to pass course. Instead, students would only need 70% of total points in course to pass. Concern is students could fail final exam and still pass course.
 - Dr. Nordgren asked for clarification on whether new grading policy would even require a final exam. Response is that no, a final exam or cumulative exam would not be required.
 - Dr. Regal (via google form) strongly supports the concept that medical students need to pass a comprehensive exam for each course at the 70% level, as well as achieving an overall 70% average for all assessments in the course. This process requires that the student study the material twice and actually integrate information from the whole course in preparing for the final exam, just as they will need to do to pass the board exams.
 - Dr. Pearson provided historical perspective on how requirement for passing a cumulative final exam was implemented on our campus. Implemented in response to dip in board scores, due to concern that if students didn't revisit material it would set them up poorly for remainder of their courses as well as for boards.
 - Request for rationale behind dropping final exam.
- Concern expressed about subjectivity with ad hoc committee, and modified Hofstee Model and how that would interface with SSC.
- CUMED formed a subcommittee that met to further explore proposed grading policy and drafted a response, highlighting comments and concerns in regards to Duluth campus.
- CUMED members decided to send a response to Dr. Bob Englander and the Assessment Committee co-chairs, Dr. Claudio Violato and Dr. David Jewison, requesting this policy not be presented at Education Council until concerns have been addressed (policy process, removal of final exam, clarification of ad hoc committee and modified Hofstee model process).
 - Discussion whether this response should be the subcommittee statement or whether CUMED chair should draft a letter summarizing concerns. Voted for sending a letter. All in favor, none opposed.
- Dr. Diebel explained need for comparability across campuses, and comparability in assessment is one way to do so.

Integration Task Force (*A. Pereira*)

- In the process of forming an Integration Task Force, and want to make sure there is Duluth representation. Task Force is forming to look at how we organize curriculum across campuses and longitudinally across 4 years.
 - Task force has been asked to review curricula from both campuses, across all 4 years, to identify whether there is an organizing framework that can be used, based on the graduation competencies and on a core set of common diseases to ensure that as the students approach the curriculum they can see the connections and the way the curriculum wraps up into those diseases.
 - Work of the Integration Task Force is to make a recommendation about how to move in this direction, what sort of organizing framework we would have.
- Handouts: current draft of strategic plan and guiding principles and list of diseases

- The list of diseases came from the Aquifer database, but not proposing using all of those for our curriculum, but Aquifer is a national consortium of basic science and clinical educators of IAMSE and specialty organizations who have developed a series of learning objectives and proposed curriculum for UGME.
This is just one potential example of references as we start to think about how to organize our curriculum.
- Question about the functional medical framework, looking at all of medicine like a tree. How do we create a framework where we don't miss the trunk (wellness, prevention, etc). Our mission is primary care, so we don't want to lose that. Similarly, discussion about death and dying.
 - Most curricula that organize by disease do focus on diseases and conditions as opposed to wellness and the deviation from wellness. That would be a good conversation for the Task Force.
 - This list is NOT the organizing framework, but just one sample. These diseases are just one potential example of a component of an overall framework.
- Goal is to identify 2 members from each department in Duluth who would be interested in collaborating on the Integration Task Force
 - Question: What kind of time commitment would it entail and when would it begin? Likely mid-January and anticipating 4-6 90-minute meetings over the course of winter and early spring.
 - Dr. Aubie Shaw and Dr. Jen Pearson volunteered to join, and opportunity will be sent out to all faculty.

Aquifer (www.aquifer.org)

- Developed to better incorporate basic sciences into Year 3 and 4.
- Goal is that by the time the student graduate they can hit all of the Entrustable Professional Activities (EPAs) (LCME standards).
- Committee explored Aquifer website.
- Dr. Bob Englander will be on campus January 28th for a lunch with faculty.

Meeting adjourned at 4:32pm . Next CUMED meeting: **January 14, 2019 @ 3:00pm (55 Med)**
Minutes transcribed by Amy Seip and reviewed by Dr. Shaw, (Chair) & Dr. Diebel (ex-Officio)