Scientific Foundations Committee 
Meeting
September 10, 2010
7:30 – 9:00 am, B-646 Mayo

In attendance: M Becker, A Bleas, B Clarke, A Edvenson, L Henson, C Niewoehner, J Norrander, Perkowski (@CEC), D Powell, L Schimmenti, T Thompson @CEC), D Wangensteen, T Weinhaus, M Woods, J Wynn @CEC)


I. Minutes

II. Information

LCME Update
Dr. Catherin Niewoehner, SFC Chair, spoke briefly about the upcoming the LCME Self Study Launch scheduled for October 12th, for all UMMS Self Study Committees. She noted that the day of meetings and training will involve all Self Study Committee members and their chairs. October 12th is the official beginning of the work process to respond to the database, which will eventually be submitted to LCME.

In response to questions from Kacia Lee, the Year-1 CC/SFC representative, Dr. Deborah Powell gave an overview of preparation for our LCME reaccreditation, completion of the self study process and preparation for the site visit. Dr. Powell spoke about the steps necessary to prepare for the Self Study and for completion of the database; which requires a great deal of preparation from the students, faculty, staff and administrators.

Objectives for Curriculum Mapping Database
Dr. Perkowski referenced the list of chairs and members of LCME Self Study Committees, these groups will receive their charge from Dr. Frank Cerra, at the end of September. She stated that the goal is to have the curriculum mapping database completed by the end of the 2010 calendar year. A request has been sent to course directors to complete a form, which will provide the necessary data for curriculum mapping of all courses within our curriculum.

The Self Study work will be in full swing by January, 2011. Information received from other recently reviewed Medical School administrators, from visiting scholars and through direct written communication with the LCME Secretariate; indicates there are new areas of review that require better understanding and documentation of the UMMS’s program objectives and curricular content. For example, several of these areas include the following:

- Active learning through active teaching formats
- Objectives for courses and sessions
- Hot topics – emerging health issues
Dr. Powell spoke about the importance of demonstrating that a plan to make improvements and correct areas of deficiency is in place. Addressing issues and providing details for how deficient areas are being identified, overseen and how these areas will be improved and brought up to accreditation standards. She reiterated that the Self Study process is complex and will require the energy of students, faculty, administrators and staff.

Dr. Perkowski added that it is a good opportunity to make a case for what the Medical School need. Identify areas of need that the larger University must recognize and support to ensure reaccreditation and avoid citations and/or probationary status. An opportunity to engage faculty to identify what is needed to teach successfully is an important aspect of the process, as well as legislative issues that affect the Medical School’s future. She also reiterated that an important component for reaccreditation is the collaboration with Duluth. The change made by LCME to combine the TC and Duluth programs into one School resulted in addressing a lack of collaboration between the faculty of the two campuses. It is important to show improvement in communicating with regard to how and what Year 1 and 2 students are taught on both campuses. Duluth is losing a number of faculty over the next few years and will need support to continue to meet their curricular commitments. It is important to have a plan for how the two programs will solve these issues.

Dr. Perkowski reiterated the request to Scientific Foundation course directors to submit the objectives for their course. Brad Clarke reminded them that October 1st is the date given for submitting the objectives, if an extension is needed to please contact him at clark772@umn.edu or at 624-6996. Dr. Perkowski added that format of existing objectives isn’t important, the Curriculum staff will assist with applying a standard format. From information she is receiving regard the current LCME Standards, objectives are required for every educational event.

Course Summary Report and Schedule

Dr. Niewoehner referred to the report template sample (see meeting materials), which is to be used by Scientific Foundations Course Directors for their annual Course Summary. She also noted that each course director will present a brief (15 minute) summary to the SFC, with the reports beginning in December, 2010. Julia Wynn, Curriculum Evaluation specialist, added that course directors for new courses that began in Fall Semester 2010 met one-on-one with Curriculum Staff and received the template, along with other materials. Ms Wynn pointed out the links included on the Agenda, provide for easy on-line access to the template and other evaluation information, reports and forms. Course directors have on-line access through their X500 login. She asked them to please contact her with any questions or concerns they may have in accessing or understanding the on-line material at wynn0030@umn.edu or 612-625-4489.

Julia Wynn reported that a variety of sources provide data and feedback for course evaluation. Eduardo Medina, MS-2 suggested gathering data from the faculty teaching each thread to assist with a thorough evaluation of course from several perspectives. He added that from student input he receives for Year-2 indicates strong support for the course integration that is currently taking place.

Dr. Levine raised the point that evaluation is only a partial measure of a course’s success. Other indicators would be USMLE Step Exam results, how well do basic science courses prepare students to apply the science to clinical practice. Ms Wynn included LEDS (student
representatives), student council representatives, comment cards, surveys of resident program
directors, and the graduation survey are all examples of methods used to collect evaluation data.
Students agreed that often the barriers to learning that students experience are more often related
to communication and organization of material.

III. Discussion

**Attendance at Required Course Activities**

Dr. Niewoehner has been contacted by several course directors regarding attendance at required
activities and also what constitutes an excused absences, especially the new required small group
sessions. The discussion focused on whether to continue with the current “Attendance Policy”
with a concise set of criteria or to develop detailed and specific criteria to be followed uniformly
by all courses. Eduardo Medina raised the issue of the specific course that requires attendance
of 70% of the small group sessions (10 of 17 sessions). SFC members did not agree with this
interpretation of the criteria, generally there was strong support for 100% attendance at all
required small group sessions, as stated in the current Policy. Mr. Medina said students are
asking for alternate activities to make-up for missed sessions. Dr. Niewoehner and SFC
members agreed that it isn’t possible to make-up an interactive learning experience. All other
courses do not permit missing any of the required small groups.

Course directors voiced concerns that expanding what constitutes an excused absence gives the
wrong message with regard to work ethic, professionalism, commitment to being present and
being prepared and fulfilling their responsibilities. Discussion favored limiting the options for
excused absence to set a standard that fits with all future medical training,

Student input confirmed that fellow students feel strongly about the value of small group
sessions. And that it's necessary to clarify for students that miss small group sessions cannot be
made up, and that the attendance policy is in effect and has established guidelines for excused
absences. Mr. Medina reported that the 70% wasn’t an interpretation by the students, but that
the course director stated that it would fulfill the course requirements. He stated that students
respond well when receiving clear information, but when conflicting information is
communicated, they are confused and frustrated. SFC members agreed that the message needs
to be clarified quickly with agreement for all course directors. Mr. Medina noted that students
will comply with restrictions and he added that for the Yr-2 class the small group sessions are
new and different from last year and they are in transition.

The SFC members agreed that a standard guideline will inform students of the required
attendance and student will need to make their personal decision for whether to miss required
activities. Course directors are not required to develop new and/or additional activities for those
who do not attend. The requirement to be present is preparing students for the profession, the
message is that they have to be there. Requiring documentation from a doctor in the case of
illness or family emergency is a decision to be made by individual course directors.

Dr. Niewoehner restated that the Attendance Policy should be changed to remove family events,
and significant extracurricular activities; keeping illness or family emergency and religious
holidays. It was also agreed that all course directors and students be notified that the 70%
attendance is not a universal attendance policy.