

Scientific Foundations Committee

June 5, 2015
7:30 – 9:00 am
Mayo B-620

Minutes

2014-2015 Scientific Foundations Committee Members		
MEMBER	COURSE/ROLE	ATTENDANCE
Steve Katz	Chair (INMD 6814 Physiology)	x
Sharon Allen	INMD 6803/6804/6805 ECM 1, ECM 2, ECM 3A	
Richard Amado	INMD 6815 Human Behavior	
H. Brent Clark	INMD 6819 HHD – N & P	x
Eli Coleman	INMD 6816 Human Sexuality	
Greg Filice	MS 2 ID Thread	x
Glenn Giesler	INMD 6813 Neuroscience	x
Bob Kempainen	INMD 6808 HHD – C & R	
Anne Minenko	INMD 6809 HHD – R, D & O ³	x
Kaz Nelson	INMD 6819 HHD – N & P	
Catherine Niewoehner	INMD 6810 HHD – R & E-R	x
James Nixon	INMD 6803/6805/6806/6807 ECM 1, ECM 3A/B/C	x
Jan Norrander	INMD 6801 Human Structure and Function	x
Deborah Powell	INMD 6817 Principles of Pathology, MS2 Pathology Thread	
Michel Sanders	INMD 6802 Science of Medical Practice	x
David Satin	INMD 6803/6804/6805/6806/6807 ECM 1, ECM 2, ECM 3	
Lisa Schimmenti	INMD 6802 Science of Medical Practice	
Peter Southern	INMD 6812 Microbiology	x
Heather Thompson Buom	INMD 6811 HHD – GI & Heme	
Doug Wangenstein	INMD 6814 Physiology	
Tony Weinhaus	INMD 6801 Human Structure and Function	x
Kevin Wickman	INMD 6818 Principles of Pharmacology	x
Mary Ramey	MS2 Lab Med/Path Coordinator	x
Kevin Kay	MS2 Student Representative	
Nicole Cairns	MS1 Student Representative	x
<i>Mark Rosenberg</i>	<i>Vice Dean for Medical Education</i>	x
<i>Kathy Watson</i>	<i>Senior Associate Dean for UME</i>	x
<i>Jeffrey Chipman</i>	<i>Assistant Dean for Scientific Foundations</i>	x
<i>Majka Woods</i>	<i>Assistant Dean for ACE</i>	
<i>Anne Pereira</i>	<i>Assistant Dean for Clinical Education</i>	
<i>Michael Kim</i>	<i>Assistant Dean for Student Affairs</i>	x
<i>Brad Clarke</i>	<i>ACE Curriculum Specialist</i>	x
<i>Leslie Anderson</i>	<i>Chief of Staff, Medical Education</i>	
<i>Scott Slattery</i>	<i>Director of Learner Development</i>	x
<i>Heather Peterson</i>	<i>Medical School Registrar</i>	
<i>Brian Woods</i>	<i>Lead Course Manager</i>	x

Guests: Theresa Hudachek, Matthew Chafee, Dimple Patel, Chelsey Jernberg, Serena Sherrell

The meeting was called to order at 7:30am.

Minutes

Draft minutes from the May 1 meeting were approved as submitted.

Updates/Announcements

Summer MEDS Schedule

Theresa Hudachek reviewed the many offerings from MEDS that are happening this summer. She asked for presenters for Journal Club, as the August schedule is currently open. An announcement for the 2015-2016 MEDS schedule will be released soon. Beginning with the June 24 meeting, the Medical Education Research and Scholarship Conference will move from a weekly to a monthly schedule. This is an opportunity to present research in progress for consultation; it's not a forum for final presentations. There will be an inaugural back-to-school Faculty Summer Kickoff on Tuesday, August 4. The kickoff is from 4:30-5:30 followed by a chance to mingle with the new incoming med students. SFC members are encouraged to reserve this time on their calendars now; more information will follow.

2015-2016 meeting schedule

Reminder of the new SFC meeting schedule starting August 14. Meetings will move to the 2nd Friday of the month at 7:30am (with the exception of a quarterly joint meeting with CEC and CUMED), in room Mayo B646.

Student Issues/Concerns/Questions

Update Secure Exam Policy to align MS1 & MS2 debrief policy

The MS2 procedure is spelled out in the Secure Exam Policy, but there is not laid out for MS1 courses. Nikki has proposed some changes to the MS1 debriefs in order to standardize them, including specifics for lab exams, written/short answer exams, and online exams.

Non-medical students in Neuroscience 2015 cheated extensively on midterm & final exams, which is why Neuro didn't release answers until all students took the exams. This is an example of why debrief uniformity is not always possible. Dr Giesler noted that students are welcome to submit question challenges to the Course Director as soon as the exam is finished. The cheating by physical therapy students spread to the Physiology course in 2015, as well. Dr Kim is willing to reach out to the physical therapy department to address cheating by their students.

Students with accommodations have the opportunity in some courses to debrief with the Course Director, or to come to the Course Manager to review their test & write their challenges for submission to the Course Director.

Nikki forwarded her proposal to Dr Katz, which was then distributed by email to the SFC. Whatever changes may be made to debrief procedure, the Secure Exam Policy must be followed.

Can course schedules appear earlier on BlackBag?

Students want to know their schedules earlier, particularly POCC and lab schedules, in order to plan non-school events. It was noted that the public BlackBag calendar is available at all times through the MedEd website. It reflects in real-time what has been entered into BlackBag. The difficulty with early posting of POCC schedules is that they are often not set with clinics until right before the semester starts, due to capacity determinations.

Also on the MedEd website is the "Level 0" (high-level by week) calendar. All small groups, including labs are required per Med School policy. Student council is addressing this issue of schedules as well.

Annual Course Review

Human Health & Disease – Rheum, Derm, Opth, Otol, Ortho (HHD5)
See attached presentation slides and full ACR for detail.

Dr Anne Minenko shared a condensed version of her full ACR. She also shared issues & ideas that may apply to other HHD courses. HHD5 was offered in 2015 for the first time in this form, without neurology and psychiatry, which are now in their own course (HHD3).

Positive feedback for the HHD resequencing and restructuring was received from students.

Working well:

Four highlights were shared

- All-star instructors
- Clinical skills workshops
- Course ‘front loading’ so that there was time for study and Step 1 prep during the last week
- Top-notch Course Management support by Serena and student employee Gabe

Areas of concern:

Two areas were highlighted under the heading of ‘better communication’.

Take-Aways: Three items were gleaned by Dr Minenko from her course for other Course Directors to consider.

Details were covered of how Public Health/Interprofessional topics were covered during the Trauma sessions of HHD5.

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Dr Minenko emphasized the teaching the “3 R’s” in Medical Education: Responsibility, Resilience, and Resolve. These “3 R’s” are advocated in an article by Dianne Eley and Helen Stallman. Dr Eley will be presenting at a MEDS session on June 22.

Comments:

Dr Katz suggests that all Course Directors work with their Course Manager to prepare & publish a histogram of all exam scores. This will give students a realistic picture of where their performance aligns with the rest of the class.

Dr Kim reported that there is a plan in process to roll out reflections throughout all MS1 & MS2 courses.

Discussion

Proposed B.S to M.D. Program

See attached Joint Admissions Scholars Program Proposal for details.

Dimple Patel, Associate Dean for Admissions, presented a proposed B.S. to M.D. program. She is currently working with undergraduate admissions and the CBS & CLA colleges to create and implement this program. It would allow 10 in-state students from broadly diverse backgrounds to complete the B.S. & M.D. degrees in seven years. The B.S. would be earned after the student’s 1st year of medical school. Intrusive counseling would be necessary to keep students on track & focused.

The Admissions office is researching other national programs like this, and consulting with other University departments to address the details of the program, and challenges that have been raised.

Ms Patel is looking for feedback from SFC and other Medical School committees. Currently, there are 52 programs nationwide, and benchmarking with these programs is happening.

Comments:

- There may be many promising students in high school who don't know what being a doctor means. Will there be an effort to reach out to those students.
- Mentoring would be very important, as medicine may also appeal to non-science students.
- Admissions is aware of The Ladder at Broadway Family Medicine as a way to identify students.
- Tuition: The 1st three years would be undergraduate tuition. Med School tuition would begin in year 4 of the track. However, there is an opt-out plan if students decide to drop the program.
- There would not be room for flexibility (study abroad, etc). The University wants undergrads to finish the baccalaureate degree in 4 years-no exception.
- The required MCAT score is not set at this time. Student GPA would be 3.7 average, which is the same as the current Med School average for incoming classes.
- There have not been conversations with SNMA students yet. But this will happen.
- There used to be a program that recognized promising sophomores/juniors for possible med students, but that has been discontinued. This track would replace that.

Ed Council has given preliminary approval for this program.

Narrative Feedback Assessments

As chair of the Ed Steering Committee, James Nixon reported that as a result of the last LCME site visit, which noted a dearth of narrative assessment given to students, the Medical Education office has been devising a way to get more feedback to students. Also, by giving more & better feedback to students, they have the opportunity to improve non-academic skills (communication, participation, etc).

The Physicians Competency Reference Set were adopted by the Med School (and presented to the SFC at an earlier meeting). Drs Nixon, Johns, and Pereira have identified areas that could be easily commented on in small groups by a facilitator, and communicated to students.

A facilitator should have a minimum number of interactions with a student in order to give meaningful feedback: 4 contact sessions at a minimum. While no specific format has been developed yet, ideally the narrative feedback would be entered in an electronic form, with the student picture for easy identification; include space for written comments; as well as giving "scores" for competencies.

Dr Kempainen is willing to pilot this in his HHD1 course. The results would then roll-out to other HHD courses. Since students don't like surprises, they would most likely have the competency categories before the course starts. Facilitators would also have the competencies in order to look for them as the semester progresses.

Comments:

- Would this satisfy the LCME? It would be a step in the right direction, and even limited comments would move us forward on satisfying the standards.
- FCT does narrative feedback in a different format (Qualtrics survey). A rubric is given to facilitators before the request for feedback is sent to them.
- This format for feedback would show a developmental path for students, and it's linked to competencies before years 3 & 4.

Future Agenda Items

Suggestions from Course Directors for future SFC meeting topics:

- Professionalism: definition, enforcement, longitudinal integration
- Student disability services and accommodations
- ExamSoft & BlackBag assessments
- ILT feedback
- Copyrights & resources (focused on what we *can* do)
- Course administrator co-directors (not the dyad)
- Future joint meeting of CEC and SFC on longitudinal integration of basic science and clinical medicine
- More Blackbag search examples
- SFC web site for action item storage
- Survey students about type of practice questions/formative
- Human Behavior course
- Preparation of histograms for total course points and final exams

The meeting was adjourned at 8:48am.

The next meeting is **August 14, 2015**, from 7:30-9:00am in room **Mayo B-646**.

Respectfully submitted,
Brian Woods