

Education Council

September 18, 2018 (4:00pm - 5:30pm)

Mayo-B646

Meeting Minutes

Christine Kiel	Michael Wall	Sarah Kemp
Kirby Clark	James Nixon	Scott Slattery
Nacide Ercan-Fang	Claudio Violato	Aubie Shaw
Dimple Patel	Chris Fallert	Chris Wiger
Yoji Shimizu	David Power	Kaz Nelson
David Bernlohr	Maggie Flint	Jen Pearson
Anne Pereira	Nathan Stratton	Michael Kim
Pat Schommer	Katherine Bartz	Nersi Nikakhtar
Heather Thompson Buom	Ali Niesen	David Nascene
Robin Michaels	Janell Lopez	Sarah Jane Brown

Approve August [Minutes](#) (10 minutes) - APPROVED

Discuss Plan for Implementation of [Changes](#) to Ed Council Terms (10 minutes)

- Send out something to members showing the changes and how this will work
- Stagger when different positions may come into being
- Email Brad with questions

I. LCME Update (20 minutes) Ali Niesen for Bob Englander and Joe Oppedisano

Objective: Keep Education Council up to date on state of our current accreditation.

[Materials](#)

- Current phase is working on DCI
 - Currently on target for completing first draft by the end of September
 - Revisions will begin after that (October)
- We have identified the LCME executive committee and are working on forming the subcommittees

- There will be 5 different subcommittees that will answer questions related to different parts of the DCI
- Launch event is November 27
- ISA will go out to students in January
 - 3rd yr medical students have been talking about ISA for 6-12 months. They have solicited other student members.
 - The original email didn't go out to the right listserve for Duluth students, but Bob sent it out again last week.
 - A component that has looked at the Duluth/TC interaction has been added to the ISA
- Historical Info:
 - In 2012, UMMS was cited in 11 areas
 - There are 3 remaining areas we provide the LCME updates (Our most recent status report went to them August 1st, and we expect a response mid-October)
 - Sufficiency of Administrative Staff
 - Survey went out to students and shows significant improvement
 - We will be focusing on
 - Improving the transition from DU to TC campus
 - Providing longitudinal mentoring and advising experience to students from both campuses
 - Fair and Timely Summative Assessment
 - Timely submission of grades (LCME requires grades within 6 weeks from the end of a clerkship. Our policy requires grades within 4 weeks)
 - We have had 2 recent interventions:
 - Early reminder from registrar of when grades are due
 - Letter from Bob when grades reach the 4-week mark
 - From May-September, we have not had any grades submitted beyond the 6-week expectation. We're still getting grades submitted beyond 4 weeks so we would like to make our grade submission process clearer
 - Narrative Assessment
 - Oral eye-eye interpretation, but can be written comments
 - Duluth students indicate a nearly 90% satisfaction rate, but TC is between 70-80%

- We will probably be required to continue monitoring this until our site visit
- We are trying to keep increasing this by the site visit
- This is based on student's recollection of whether or not they received feedback
- LCME is looking for availability and usefulness - courses in which the interaction between students and faculty is reasonable
 - classes with small groups like ECM and FCT are places where they find feedback most useful
- The minimum feedback would be at the midpoint of the pedagogical sequence
- My Progress App seems to have helped us improve

II. Assessment Committee (50 minutes)

Claudio Violato

Objective: Ed Council members will understand the multi-factor work of the Committee on Assessment.

Materials

- This is a year in - looking back from August 2017
 - Where are we, and where are we going?
- Purpose: To oversee all assessment and evaluation done in the MD program
 - We are approaching this in three themes
 - Assessment in Foundational Sciences (student level)
 - Assessment in the Clinical Environment (student level)
 - Program Evaluation (the big picture)
 - We use external data, put it together, and make sense of it so we can give real-time feedback to stakeholders to maintain excellence, improve learning environments
- We have had members come and go. We are now complete with the exception of openings for a representative from the office of curriculum and student representative
- Our job this past year and for the foreseeable future is to move towards CBT computer based testing
 - Our goal is to use that in all courses in preclinical first two years
 - Reasons for moving towards CBT:
 - Being up to date

- When data is handled this way, it's much more efficient and effective
 - We have instant access for our analysis and feedback
 - There are a number of test items and test delivery that we can use to improve the test-taking experience with CBT
 - With CBT we can use things like drag and drop - show an anatomical structure with a question where you have to drag and drop to answer the question
 - You can incorporate hotspots where you can hover over an area and find hot-spots that will help with studying processes and procedures
 - You can have video and audio on the test as well
 - With these more sophisticated methods, we can assess higher levels of cognitive function
- Another thing we are just starting is electronic item banks
 - We can tag items with characteristics of the question, and we can use that to improve and enhance the assessments
 - There are commercial item banks available
 - We may be able to use students to help us write some of these items as well
- SFC/CA Task Force
 - We want to move to criterion-referenced assessment
 - Based on absolute standards instead of based on comparison between peers
 - We want to standardize assessment and grading
 - We have two working groups working on this for preclinical and clinical
 - Process
 - Select the test
 - Administer test
 - Get immediate results
 - Review test with course director and other parties
 - Give suggestions about the items that aren't working and how to improve
 - There can be a problem where the person who is presenting the material and the assessment questions are not aligned. This causes frustration in students.

- Any time you construct a test, you can start with an item bank, but you have to look at it and review/edit it based on what works best for your class.
- An item should never appear on the test that was not vetted and is not connected to one of the course objectives
- This is highlighting the difficulty of having multiple-instructor courses
- Could we do an item-writing workshop where Claudio would get together to create items and teach faculty how to do so?
 - Yes, there are plans to do that
 - Students are a great resource for an item-writing workshop - they have to be vetted
- Best practice in testing is to test
 - What is important
 - What was taught
 - What was learned
- Test shouldn't drive the teaching. The teaching should drive the test.
- Well-written questions will test your knowledge in a way that will help the concept stick with you.
- We are working to come up with an improved grading scale: 4 (Honors/Pass/Satisfactory/Fail)
- Growth curves across EPAs from multiple assessments (see PowerPoint)
 - This should be scale-able across clerkships

Input from Nacide Ercan-Fang (VALUE):

- This is our second year piloting EPAs with students
- Last year, our students did about 50 for the 12 EPAs
- Now we are requiring them to do 75 in order to be eligible for honors
- We have also educated our students and educators better
- We sit down with students and look at EPA performance every month
- We encourage them to do 1 EPA for every half day of clinic
- Students forget because they feel they get enough feedback organically
- Is there a way to incentivize the faculty/preceptors as well to give this feedback?
 - This is a professionalism issue. If it's not documented, it never happened
 - This is also complicated by the fact that these are volunteer faculty

- One issue with the completion on smartphone in clinic is preceptors don't always have time. What about giving them the option to complete the form later in the day when they have more time? Would need to change platform to allow for this.
- We have changed some of the questions and scales to make it a lot more user-friendly.
- Can we get the option to send it in an email?

Next Meeting:
Tuesday, October 16