# Clinical Education Committee September 1, 2017 Minutes

#### **Introductions** (Dr. Murray)

- Wants to discuss goals and culture of this meeting today
- During the summer, created a small leadership team for the committee
  - o Dr. Nersi Nikakhtar has agreed to serve as Vice Chair
  - Dr. Nacide Ercan-Fang has agreed to serve as a representative to the Education Council

Welcome to new committee members

## Review of June 2, 2017 Minutes - Approved

### **Updates** (Ercan-Fang and Olson)

EC report from 8/15 meeting (Ercan-Fang)

- Formation of a new committee student assessment committee (Claudio Violato and David Jewison) focus is mainly pre-clinical courses
- Recruitment reports for both Duluth and TC campuses
- MSTP program update

## Intersession (Dr. Olson)

- Since January has been building a completely new curricular experience for intersession
- Intersession is 2 weeks during 3rd and 2 weeks in 4th year that are required on campus time for all students
  - o Time for them to be together and add curriculum that had not been there before
- Themes
  - Community
  - Professional identity formation
  - o Skills that students need presenting cases, significant event reflections, asking for and receiving feedback, ultrasound
  - Lanes lunch
  - o Microaggressions and being an ally Office of Equity and Diversity
- Dr. Howard asked if the curriculum will stay the same from year to year
  - o Dr. Olson responded that the themes will likely be the same from year to year, but some of the activities may change
- Kevin O'Donnell said that from a student perspective it's been going very well
  - o People have really enjoyed catching up with classmates
- Dr. Jewison said it was a good opportunity for faculty to share stories and not be in a clinical setting with students
  - o Asked if there was any musculoskeletal ultrasound
    - Dr. Olson said that would hopefully be included in the 4th year
    - Would like to differentiate the ultrasound for 4th year by specialty interest
- Dr. Pereira clarified that the course is called Becoming a Doctor
- Dr. Murray asked Dr. Olson to bring back helpful tips for clerkships from this
  - o Dr. Olson said for feedback, there is a lot of fear around grading
    - Needs to be transparent on grading

 Worried about asking for specific feedback on things that students have a weakness

#### Discussion

- Organizational Conventions (see questions on the agenda)
  - o Dr. Howard said one thing that would be helpful would be to send Dr. Murray questions that come up in clerkships
  - o Dr. Murray explained the process by which the agenda is made
    - Brooke, Dr. Pereira and Dr. Murray met to talk about goals for the meeting and set the agenda (ideally 2 weeks prior, set agenda, send agenda 1 week prior)
    - Meeting after this meeting to debrief and plan for the next meeting
  - Or. Olson asked if there could be a time at the beginning of all meetings that at least one clerkship can do a clerkship update
    - Dr. Murray would like to compare and contrast this with the student perspectives on each clerkship presents
  - o Dr. Howard said that engagement may be helped by having coffee
  - o Dr. Young agreed with Dr. Olson that having a clerkship update at the beginning of each meeting would be helpful
    - Dr. Murray would like it to be more like a case conference where folks share what is on their mind for their clerkships
  - Or. Nikakhtar said that folks have more engagement if they own items on the agenda maybe group planning of agenda?
  - o Brinsley shared that she would like the name tags to be 2 sided so that folks in the back row can see who is sitting at the table
  - o Dr. Howard asked for a reminder of the mission of the committee
    - Dr. Murray explained that CEC is charged with overseeing the whole clinical curriculum and report to the education council
    - Also responsible for annual review of clerkships
    - Dr. Howard would like to have some mapping to better understand what everyone else is teaching
      - Dr. Pereira explained that this mapping has already happened in BlackBag, but that this group is the right group to discuss this data
    - Dr. Olson explained that there is a lot of overlap, some that is intentional and some that is not, but should be taught the same way
    - Nicole Cairns said this would be a good opportunity to include 4th year students as they have gone through the required curriculum
    - Dr. Young explained that when they were setting up HeLIX, they found that there is a disconnect between the clerkship directors focus and the things that students are taking away from it
  - o Dr. Hobday said it would be helpful if there would be a mission of the year that structures the time
  - o Dr. Murray would like to have all of the materials on a database where people can see those
    - Would like to have a place where people could comment and discuss on there

- Deb Egger-Smith said this would be helpful because it is challenging to find all of this information from past meetings
- Brooke Nesbitt explained that many times previously the reason that things weren't sent out electronically is because we were getting them either the night before or the day of, so with a changed timeline, it will be easier
- Brooke asked for feedback on where to house this
  - Google sites can be accessed from the VA
  - CEC public website as an option
- o Review of minutes Dr. Murray would like the review to be solicited online and far in advance of the meeting
- Establishing Committee Participation and Governance
  - Or. Murray explained that effective and consistent participation would be ideal and that a substitute should be sent in place if the director is unable to be there. What is the expectation of each other?
    - Dr. Nelson agreed that either being present or having a substitute present at each meeting, also acknowledging that it is a 7am meeting at a tough place to get to
    - Dr. Nikakhtar is in favor of revisiting the start time
      - Dr. Pereira explained that there was a request by the ambulatory physicians to start earlier so that they could get to clinic/OR earlier
      - Brooke Nesbitt explained that the support staff getting here at 6:15 is challenging
      - Dr. Hutto said that it's important that the leadership in the departments explain to others that this meeting is a priority
    - Dr. Murray would like the leadership committee to work with departments to have more latitude for faculty to be there, but either way there would need to be a substitute sent if they are gone
      - Would be ideal if that substitute were the same person each time
  - o Dr. Murray would like to find better ways to engage student representatives
    - Nicole Cairns would like a standing agenda item to be student concerns
    - Dr. van den Hoogenhof asked if it would be helpful to meet with students prior to solicit feedback
    - Dr. Murray would like to include students in agenda production and in each agenda item
  - o Dr. Murray explained that we will table a discussion on whether we are a governing committee of advisory committee
    - She is waiting for feedback on this and will discuss it with the committee soon
  - o Dr. Rosenberg encouraged the committee to take ownership of the curriculum in terms of quality improvement etc.
- Annual Clerkship Review (see handout)
  - o Dr. Murray explained that the areas of interest (included in the handout) could be covered over a series of meetings throughout the course of the year. Asked if these are the correct topics for CEC to address?

- Dr. Nelson said that the topic to add would be resiliency and reduce burnout
- Dr. Nixon would add the focus on the clinical learning environment
- Dr. Howard would add that with the change to 4 weeks for pediatrics, they have lost key curriculum topics and skills for students
- Dr. Hutto agreed and seconded that
- Dr. Murray said that the way to look at that would be to more deliberately design the 4th year
- Dr. Pereira would add that there might be opportunities to add some of this into years 1 and 2 as well.
  - Dr. Murray said that would address issues that prospective students have about going here have less clinical experience in year 1/2
- Dr. Pereira would add that another issue to talk about would be how to build clinical capacity