

CEPC Monthly Meeting

04.10.2017 05:00 PM - 06:30 PM

Purpose:	
Presenters:	Brower, Richard, Cashin, Laura, Francis, Maureen, Gest, Thomas, Hogg, Tanis, Htay, Thwe, Salazar, Ricardo, Uga, Aghaegbulam H
Note Taker:	De-Lara, Veronica
Attendees:	De-Lara, Veronica, Beinhoff, Lisa, Blunk, Dan, Brower, Richard, Cashin, Laura, Cervantes, Jorge, Dankovich, Robin , Francis, Mark, Francis, Maureen, Gest, Thomas, Hogg, Tanis, Horn, Kathryn , Htay, Thwe, Janssen, Herb , Kassar, Darine , Lacy, Naomi, Lopez, Josev, Maldonado, Frankj, Padilla, Osvaldo, Perry, Cynthia, Pfarr, Curt, Piskurich, Janet , Salazar, Ricardo, Uga, Aghaegbulam H
Guests:	brittany.harper@ttuhsc.edu, carolina.blotte@ttuhsc.edu, claire.zeorlin@ttuhsc.edu, daniel.welder@ttuhsc.edu, david.e.morris@ttuhsc.edu, douglas.weier@ttuhsc.edu, hilda.alarcon@ttuhsc.edu, justin.hartmann@ttuhsc.edu, laura.palmer@ttuhsc.edu, rima.r.patel@ttuhsc.edu
Location:	MEB 1140

1. Review Prior Meeting Minutes

Presenter(s): Brower, Richard

General Note

Minutes approved as written with a minor modification:

Item 6-Professionalism- Change Conclusion to Suggestion (General Note)

2. SCEC Rep Report

Presenter(s): Brower, Richard

General Note

MS1- No concerns

MS2- No concerns

MS3- None in attendance

MS4- None in attendance

3. Curriculum-as-a-whole review: Program Goal 4 (interpersonal and communication skills)

Presenter(s): Brower, Richard, Gest, Thomas, Cashin, Laura, Uga, Aghaegbulam H, Salazar, Ricardo

Element 8.3

 Interpersonal Communication Skills PGO's FINAL.pptx

General Note

4.1 Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds.

4.2 Communicate effectively with colleagues and other health care professionals.

4.3 Communicate with sensitivity, honesty, compassion and empathy.

4.4 Maintain comprehensive and timely medical record.

Does the educational program adequately assess each goal and its objectives?

Yes; 4.4 Maintain comprehensive and timely medical record – is addressed only 9 times within educational program, but medical record is not a large component of years 1 and 2.

Would it be possible for a student to graduate from PLFSOM with deficiencies in any of the goal/competency domains?

- No; with certain explanatory notes below

- In years 1-2, it is difficult to tell whether proficiency is guaranteed

- Medical Skills:

- If a student has any identified skill deficiencies, they could be recognized with the weekly formative assessments early in each of the units as

well review done with SPERRSA and Open Lab

- The other place skill deficiencies could be identified would be with the OSCE at the end of each unit (every 4-6 weeks)
- In the clerkship years, students are assigned mandatory mid-clerkship evaluations
- If each of these goal/ competency domains are covered and reviewed during this session, deficiencies should be identified and remediation plans in place making it difficult to pass the clerkship with such deficiencies

Would the school know if a student were deficient in any of the goal/competency domains and, if so, how?

- Yes; In Pre-clinical – must pass MedSkills
- During clerkship phase “needs improvements” given during final clerkship assessments are tracked by Dr Horn.
- PGO’s 4.1-4.4 are addressed under the “interpersonal and communication skills” competency
- CD’s are encouraging their faculty to give more “needs improvements” and give criteria for such

For each program goal and/or objective, how, and up to what point, is a student able to demonstrate remediation for deficiencies?

- Pre-clinical – remediate Med Skills
- Clerkship years: Perhaps this needs to be included in one more table?
- objective linked to PGO linked to assessment linked to remediation plan
- Ex: In the IM clerkship the history and physical examination is linked to PGO 4.1 and 4.3 it is assessed with a grade percentage correct students with a grade <70% must repeat the skill by the end of the clerkship until their grade is >= 70%
- This could be represented with a table

Identify and prioritize programmatic weaknesses for each assigned objective, and for each assigned overarching goal. Provide recommendations for improvement and tracking of identified weaknesses (think CQI...plan-do-study-act cycles)

- PGO 4.3 and 4.4 are less represented (15 and 9 times respectively) compared to the remaining PGO’s being represented 23-25 times
- Consider areas for increased inclusion of these PGO’s
- Students in years 3 and 4 should be able to get experience with electronic medical records
- Link PGO’s to objectives in year 4 similar to year 3
- To best answer questions regarding assessment and remediation we recommend a table similar to previous slide to easily demonstrate our process
- Determine whether or not we feel tracking of “needs improvements” is enough to detect students who are not competent in interpersonal communication skills in years 3-4

Review updated attachment for additional details.

 Interpersonal Communication Skills PGO's FINAL.pptx

4. Medical Skills Course proposed grading policy change (element 8.1)

Presenter(s): Htay, Thwe

Htay, Thwe

Proposal was requested by CEPC during Medical skills course review (12/5/2016)

"Would it be possible for a student to pass the course with substantial deficiencies in any of the course's content domains or major components?"

- Students with substantial deficiencies can potentially pass the course due to attendance points 30/100 in OSCE summative exams.
- Currently, attendance at Medical Skills Course activities is expected (through incentives provided as 30% points for attendance).
- With proposed change of significant reduction in attendance points, we request attendance at Medical Skills Course activities to be required.

Proposed Summative Assessment and Grading:

- 100%= 90% Total OSCE grades and 10% Attendance grades
- Total OSCE grades 90%= 20% OSCE Physical Exam Skill Evaluation and 70% OSCE Standardized Patient Encounters
- Attendance 10%= 5% weekly quizzes and 5% Submission of Patient encounter log (OP log)
- Any unexcused absences or unexcused partial attendance will be reported as unprofessional behavior.
- Unprofessional behavior may result in a FAIL grade for the unit regardless of examination scores

 Medical Skills Grading Change Proposal april 2017-2.pptx

Conclusion

Proposal was approved by CEPC committee.

5. Review and approval of departmental 'GME prep for UME' plans (element 9.1)

Prep of Residents and Non Faculty

General Note

The idea of these plans is to talk about how the departments prepare their residents to participate in teaching

Conclusion

Approved by CEPC committee with minor modifications.

6. UPDATED and FINAL Independent Student Analysis (ISA)

Presenter(s): Brower, Richard

Announcement

 2016 LCME ISAMarchFinal_v2107APR04.pdf

General Note

Will be emailed to CEPC members.

7. Proposed Pre-Clerkship Changes

Presenter(s): Hogg, Tanis

General Note

 Presentation to CEPC - 4-10-17.pptx

Hogg, Tanis

Dr. Hogg presented the following proposal for weekly formative testing:

- Deliver weekly formative assessments via ExamSoft asynchronously
- Students will receive hyperlink to take assessment on their preferred device (compliant laptop or PC/Mac)
- Formative testing window will be open for 48-72 hours
- Students will have opportunity to review answers/explanations as is currently established.

End-of-unit summative and NBME-based testing on student laptops proposal:

- Roll-out student laptop-based summative and NBME-based testing with incoming class of 2021
- Tests will be administered in secured testing environments (e.g. proctored examinations in MEB 1100/1200)
- Students required to bring laptop meeting minimum technical specifications required by ExamSoft/NBME

Proposal for revising pre-clerkship semester term lengths starting AY 2017-18

Issue:

- Ed.gov student loan requirements:
 - a) Semesters must be ≥ 15 weeks in duration
 - b) Adjacent semesters must be of similar duration ($\Delta \leq 2$ weeks)

Proposal:

Modify Spring and Fall semesters to comply with Ed.gov student aid requirements

See attachment for details.

Conclusion


Proposals were approved by CEPC committee.

Course directors have met to work on Syllabus- drafted and planned. Template will be provided by mid May for review.

8. Clerkship Comparability Report for Block 2

Presenter(s): Francis, Maureen

General Note

 Clerkship comparability Block 2 AY 2016 2017 Site specific 4-6-17.pptx
 MS4 Clerkship comparability Fall AY 2016 2017.pptx

Structure and Process

- Data to be collected
 - Op log entries
 - Top 10 diagnoses
 - NBME scores
 - Clerkship grade
 - Student satisfaction data- added AY 2016-2017
 - Developing a process to look at narrative feedback for AY 2017-2018
- Review
 - End of each block at CEPC
 - End of academic year in aggregate at CEPC
- Determinations
 - CEPC will transmit recommendations to Year 3 & 4 Committee for implementation
 - At annual review of clerkships
 - At monthly meetings of year 3 & 4 Committee
 - Ad hoc as needed with individual Clerkship Directors

See attachments for additional details

9. Interessions Update

Presenter(s): Francis, Maureen

Francis, Maureen

There will be 2 one-week interessions in the third year - one following Block 2 and one following Block 3. The entire class will participate in the activities. Content will integrate the experiences in the clinical rotations during Year 3 with concepts from the Year 1&2 coursework.

First week- January 8-12, 2018

Second week- May 7-11, 2018

Both will be consider one course for 2 credits. Students will pass through participation and by passing end of year OSCE and Procedure workshop.

Overall Objectives:

- Explore clinical overlap across specialties of medicine
- Apply basic science principles/concepts in the clinical context
- Document clinical encounters in the electronic medical record
- Demonstrate the ability to write appropriate prescriptions and inpatient orders in low to moderate complexity cases
- Demonstrate competency in the general procedures of a physician - IV line placement, venipuncture, NG tube placement, bladder catheterization (male and female), and airway management
- Analyze and solve system-level problems using quality improvement and patient safety principles and tools
- Understand new and emerging basic science concepts and how these discoveries may impact health care in the future
- Apply knowledge of biostatistics and epidemiology in diagnostic and therapeutic decision-making
- Identify social determinants of health in clinical cases and reflect on how this affected patient care
- Demonstrate the ability to obtain proper informed consent, including special situations such as children and patients who do not speak English
- Demonstrate professionalism and adherence to ethical principles in all activities

10. Adjourn

Presenter(s): Brower, Richard

General Note

Meeting adjourned at 7:01pm.

Tasks Summary

Task	Due Date	Owner	Project	Completion	Priority
Email Final LCME Independent Student Analysis to CEPC	04.22.2017	Dankovich, Robin		100%	*****