

CEPC Meeting

11.07.2016 05:00 PM - 07:00 PM

Purpose:	
Presenters:	Blunk, Dan, Brower, Richard, Cashin, Laura, Cervantes, Jorge, Francis, Mark, Gest, Thomas, Kassar, Darine, Lacy, Naomi, Padilla, Osvaldo, Pfarr, Curt, Uga, Aghaegbulam H
Note Taker:	De Lara, Veronica
Attendees:	De Lara, Veronica, Beinhoff, Lisa, Blunk, Dan, Briones, David , Brower, Richard, Cashin, Laura, Cervantes, Jorge , Dankovich, Robin, Francis, Mark, Francis, Maureen, Fuhrman, Lynn, Gest, Thomas, Goeldner, John, Hogg, Tanis, Horn, Kathryn, Kassar, Darine, Lacy, Naomi, Lopez, Josev, Lyn , Heidi , Martin, Charmaine, Milan, Stacey, Padilla, Osvaldo, Parsa, Michael D , Peden, Lucy A , Perry, Cynthia, Pfarr, Curt, Tenarelli, Silvina , 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, neha.vashishtha@ttuhsc.edu, rima.r.patel@ttuhsc.edu
Location:	MEB 1140

TTUHSC EP Paul L. Foster School of Medicine
5001 El Paso Drive
El Paso, TX, 79905
USA

1. Review of Prior Minutes

Presenter(s): Brower, Richard

General Note

Minutes were approved as written.

2. SCEC rep reports

Presenter(s): Brower, Richard

General Note

MS2 Report - Justin Hartmann:

SCI:

- SCI Final of Spring 2017 - why is it cumulative over the whole 2 years of SCI material? Would help students if there was an emphasis on STEP testable with questions in STEP format. SCI material from Spring 2016 is not high yield for STEP per Dr. Francis.
- SCI Problem sets should be worth more of the grade.
- SCI questions on formatives were too easy and not representative of material tested in SCI midterms or finals.
- SCI - need outside references or monograph to be able to refer to if we need further explanation. Please record lectures.
- 75 cutoff for SCI should be reevaluated. Medical skills is the only subject with a 75 cutoff, but 30% of the grade is attendance, and failure is rare.
- Would help if IRB lecture was in first year.

SPM:

- SPM question distribution not proportionate to lecture hours
- Cumulative Cardio questions should not be on summatives - detract from testing of the actual unit. Suggestion - trial section, akin to USMLE or MCAT to test new questions before they show up on a summative. Add an optional trial section at the end of summatives comprising of 10 new questions for a 1% bonus.
- During the Endocrine unit Dr. Piskurich and Dr. Velasco gave a joint presentation. This presentation is one of the first times the students experience true integration in the curriculum. The model should be expanded upon and included in as many lessons as possible.

Evaluations: Why are we continually assigned evaluations of people we haven't met? Is there a tech problem?

MS3 - Daniel Welder

- No issues to report

MS4 - Laura Palmer

- No issues to report
- Sorry I have missed the last few meetings. I have been on aways/ traveling for interviews. I will be back for the January meeting! Please let me know if there is anything else you need me to do remotely in the mean time!



3. Policy Review

Presenter(s): Brower, Richard

3. 1. Clerkship Director Position Description

Presenter(s): Brower, Richard

Update required based on Formative Feedback Policy

-  Clerkship Administration draft06NOV2016(1).pptx
-  Clerkship Director PD Policy draft06NOV2016.docx

General Note

Will be emailed to CEPC members for voting.

3. 2. Formative Feedback Policy

Presenter(s): Brower, Richard

To be in compliance with LCME 9.7

-  Formative Feedback Policy DRAFT12OCT2016.docx

General Note

Will be emailed to CEPC members for voting.

3. 3. EVU Policy Codified

Presenter(s): Lacy, Naomi

-  EVU System Policy DRAFT v19OCT2016.docx

General Note

Provided for informational purposes only.

4. Clerkship Review Team Presentation

Presenter(s): Brower, Richard

4. 1. Internal Medicine - Psychiatry -Emergency Medicine

Presenter(s): Padilla, Osvaldo, Gest, Thomas, Kassar, Darine

General Note

Internal Medicine and Psychiatry

- Demonstrate patient centered care in the co-management of medical and psychiatric conditions.
- Prepared to do well on both the Internal Medicine and Psychiatry NBME shelf-exams.
- Most activities have assigned readings in book or notes
- Lectures
- Students maintain learning portfolios to document progression towards learning objectives
- Required to have 30 entries in op-log
- Meet with medical librarian
- Required to have 14 H&P
- Professionalism requirement/evaluated

- Multiple objectives, lacking organization – need to be consolidated (more in IM than Psych)
- Evaluation form provides assessment on learning objectives
- Psych requires PPT presentation and quizzes
- Mid-clerkship eval and End of clerkship eval
- Remediation includes assigned readings and/or return in 4th year for 2 weeks
- Remediation of observed H&P deficiencies

Emergency Medicine

- Assigned readings & lectures
- Training with simulators
- Minimum 30 op-log entries
- Pre-hospital experiences
- Procedure checklist
- Clinical evals at end of shift
- No show = fail
- Mid-clerkship eval & meeting if needed
- Mid-clerkship review of op-log, task trainer, simulation cases, H&P, shift evals

See attachments for details. Discussion ensued.

 CEPC IM_Psych_Em_review v3.pptx

4. 3. Surgery - Family Medicine-Neurology

Presenter(s): Blunk, Dan, Francis, Mark, Cervantes, Jorge

General Note

Family Medicine and Surgery

- The learning objectives were clearly identified.
- Student assessment of the block
- The student evaluation for “Overall I learned useful knowledge and/or skills” (average for 2015-16 year)
 - Family Medicine – 4.4
 - Surgery – 4.3
- Clerkship content is fulfilling the course goals/objectives. The concern may be that the students are not that familiar.
- The student assessment plans defined in the syllabus
- Mid – clerkship assessment completion rate is 100% for year 2015-16
- Clerkship Directors would be able to identify any substantial deficiencies
- Clerkship have remediation mechanisms in place
- Graduate questionnaire for mid-term assessments for 2016
 - Family Medicine – 100% (>90th percentile nationally)
 - Surgery - 98.4% (>90th percentile nationally)

Primary Strengths Clerkships

- Well delineated learning objectives and goals
- Have outstanding student ratings for “Overall, I learned useful knowledge or skills”
- The clerkship content is fulfilling the course goals and objectives
- Have outstanding records for having mid-term assessments
- The student assessment plans are clearly defined in the syllabus
- The final assessment for the students performance are done in a timely manner
- Have ample safeguards to identify any substantial deficiencies

- Have good plans in place to remediate any deficiencies
- The graduate questionnaire for quality of the Family Medicine clerkship was greater than the national average

Primary Weakness Clerkships

- Faculty levels below critical mass
- The student ratings of the learning objectives for the block may be influenced by the student's perception of the integration efforts
- The graduate questionnaire for the quality of the surgery clerkship experience was below the national average

Neurology

- Students believed that the clerkship was well organized and clearly identified
- Clerkship content is fulfilling the course goals/objectives. The concern may be that the students are not that familiar.
- Student assessment plan for Neurology is clearly defined in the syllabus
- Mid – clerkship assessment completion rate is 97% for year 2015-16
- Neurology has a very high completion record with mid-term assessments, they would be able to identify any substantial deficiencies
- Neurology has a remediation mechanism in place
- Graduate Questionnaire for mid-term assessments for 2016 - 91% (approximately at 50% percentile nationally)

Strengths:

- The learning objectives are clearly listed in the syllabus
- The student ratings for "Overall, I learned useful knowledge or skills"
- The clerkship content seems to be fulfilling the course goals/objectives as stated in the syllabus
- The student assessment plan is clearly defined in the syllabus
- The mid-clerkship completion rate was 97%
- There are sufficient mechanisms in place for remediation
- There appear to be ample safeguards in place to avoid having a student pass the clerkship with substantial deficiencies

Discussion followed.

- 📎 Family Medicine and Surgery Clerkships Evaluations 10-24-16.pptx
- 📎 Neuro Clerkships Evaluation revise 11-1-16 DIB.pptx

5. Open Forum

6. Adjourn

General Note

Meeting adjourn at 6:57pm.

Parked Items P

4. 2. OB/Gyn-Pediatrics-Critical Care + Sub-I