CEPC Monthly Meeting

08.07.2017 05:00 PM - 06:30 PM

Purpose:	
Presenters:	Brower, Richard, Francis, Maureen, Piskurich, Janet, Salazar, Tammy
Note Taker:	Dankovich, Robin, De-Lara, Veronica
Attendees:	De-Lara, Veronica, Beinhoff, Lisa , Blunk, Dan , Brower, Richard, Cashin, Laura , Cervantes, Jorge , Cotera, Maria , Dankovich, Robin, Francis, Mark, Francis, Maureen, Gest, Thomas, Hogg, Tanis, Horn, Kathryn, Kassar, Darine, Lacy, Naomi, Lopez, Josev , Maldonado, Frankj, Padilla, Osvaldo, Perry, Cynthia, Pfarr, Curt, Piskurich, Janet, Salazar, Tammy
Guests:	brittany.harper@ttuhsc.edu, carolina.blotte@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 of Prior Minutes

General Note Minutes approved as written.

2. Student Concerns

brittany.harper@ttuhsc.edu

Brittany mentioned that there is MS2s interested in the FAST program- is it available for MS2s?

- Dr. Pfarr answered that the initial pilot is for MS1s, depending on the feedback it can be offered to MS2s.
- Also, Dr. Hogg encouraged students to reach out to faculty directly with any issues they are having they are all available and few take advantage of the resource they provide

General Note

Another question students had - At what point do students have to pass CBSE to count?

• Dr. Lacy said that it had be passed during PICE course for it to count.

Conclusion

3. SDLRS Monitoring

SDL at CEPC Aug 7 2017v3.pptx

Brower, Richard

Dr. Brower mentioned there is an element that we started including in our Annual Program Evaluation report - Self Directed Learning Readiness Scale.

- PLFSOM curriculum is not based on self directed learning although a requirement of the LCME. This instrument is a means to monitor LCME Self Directed learning across our curriculum. To help us understand better, we are accumulating data over time to track students.
- Dr. Piskurich and Dr. Salazar are our resident experts on the SDLRS who continue to analyze PLFSOM data

Presenter(s): Brower, Richard

Presenter(s): Brower, Richard

Presenter(s): Salazar, Tammy, Piskurich, Janet

Piskurich, Janet

Presentation Highlights:

• Relates to LCME Standard 6.3 (Self-Directed and Life-long Learning) and PGOs 3.1 & 8.5

• SDLRS is a process in which individuals take the initiative (with or without the help of others) in diagnosing their learning needs, formulating learning goals, identifying resources for learning, choosing and implementing learning strategies and evaluating learning outcomes.

- PLFSOM data analysis outcomes to date
 - In comparison with Univ of Saskatchewan SOM our SLDRS scores do not decline as students progress thru medical school
 Both schools are P/F grading and have measure to encourage SDL
- Plans to have SDLRS measures extend into Year 3 & 4
- SDLRS data now a part of the annual evaluation report; also reported to LCME via DCI

Discussion ensued.

See attachment for additional details.

4. CEPC Membership update

Brower, Richard

An announcement was made for Dr. Blunk's last CEPC meeting this month (not present) - formal thank you for his 7 years of service to the CEPC. Office of Med Ed provided a special gift of thanks for his service.

• succeeding Dr. Blunk will be Dr. Gajendran from Transmountain

5. FM Residency Prep Plan update

09_01_FM Departmental Resident Preparation_6_1_17.docx

General Note

OME will distribute a copy with modifications annotated to committee by email for asynchronous voting

6. SITAC Charter Approval

Pre-Approval-SITAC Charter AUG2017.docx

Brower, Richard

Students have been working with Jose Lopez, Associate Director for Academic Technology/Information Technology (group piloted AY 16-17). Jose report that students have brought meaningful and enlightening suggestion to IT. This charter is a means to officially establish committee - Dr. Brower asked CEPC to share names of students across different classes who may be interested.

Modifications to charter include:

- SITAC members will be limited to no more than 12 students.
- Change sentence: Service on SITAC is dependent on the maintenance of academic standing, as collaboratively determined by the Academic Standing Policy.

Conclusion

Reviewed and approved by CEPC with modifications listed above.

7. Block 3 and Aggregate Block Performance Report

Presenter(s): Brower, Richard

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Presenter(s): Francis, Maureen

Clerkship comparability Block 3 and AY 2016 2017 Site specific.pptx

See attachment for full details.

Francis, Maureen

Dr. Francis presented Block 3 and AY 2016-17 aggregate clerkship comparability report.

Important to note that report has now grown past original intent to address site comparability (LCME 8.7) - now report similar information across all clerkships.

- OP Log entries
- Top 10 diagnoses
- NBME scores
- Clerkship grades
- Student satisfaction data (new AY 2016-17)
- New process to look at narrative feedback for AY 2017-18

Report Highlights:

- IM Clerkship (Sites: UMC, WBAMC & Prov)
 - · OP Log: Generally WBAMC more active with entries
 - Level of Responsibility Diagnosis: encounters listed as "observe" continue to decrease across the academic year.
 - Level of Responsibility Procedures: More students feel that they are observing procedures at UMC.
 - Diagnoses
 - Block 3 6 of the top 10 diagnoses are the same at all sites.
 - AY 16-17 7 of the top 10 diagnoses are the same when entire 6w of IM wards is reviewed.
 - Duty Hours
 - Hours at Providence lower in both block 2 and 3 compared to prior blocks and other sites. Dr Cashin spoke with lead
 faculty at Providence after Block 2 (during Block 3)
 - Student Satisfaction
 - overall seemed to improve across the academic year with less Strongly disagree and disagree.
 - Mid-clerkship completion 100%
 - NBME AY 16-17 Average 71 (AY 15-16: 72)
 - Honors
 - AY 16-17 23% overall compared to AY 15-16 35%
 - 100% of those eligible received honors AY 16-17
- Surgery Clerkship (Sites:WBAMC & UMC)
 - OP Log: similar across sites (AY 16-17: UMC average 80; WBAMC average 85)
 - Level of Responsibility Diagnosis: % managed increases across blocks
 - Level of Responsibility Procedures: % observed decreases across blocks
 - Required procedures: Requirement for Foley decreased in Surgery for AY 2017-2018 and shifted to OB/GYN
 4 students required simulation as alternative for Foley placement
 - Diagnoses similar patient mix
 - Duty Hours:
 - AY 16-17: 44 overall compared to 54 AY 15-16
 - Student Satisfaction
 - some noted dissatisfaction n small 1-2 students per site
 - Mid-clerkship completion 100%
 - NMBE AY 16-17 average 73 (up from 72 in AY 15-16)
 - Honors:
 - AY 16-17 32% overall compared to AY 15-16 33%
 - 100% of those eligible received honors AY 16-17
- Psych Clerkship (EPPC Peak and EPBH no longer actively taking students)
 - OP Log: 30 required AY 16-17 average 41
 - Level of Responsibility Diagnosis: Managed higher in Block 2 & 3; observed declines across blocks
 - Level of Responsibility Procedures: Performed increases across blocks, assisted declines
 - · Diagnoses: consistent across blocks
 - Duty Hours
 - AY 16-17 average 37 (38 AY 15-16)
 - Student Satisfaction
 - High, means range from 4.8-5.5 (6 pt scale)
 - Mid-clerkship completion 100%
 - NBME AY 16-17 Average: 81
 - Honors
 - AY 16-17 48% overall compared to AY 15-16 29%
 - 100% of those eligible received honors AY 16-17
- Peds Clerkship

- OP Log: 29 required AY 16-17 average 85 (98 in 15-16)
 - Level of Responsibility Diagnosis: managed increases across blocks; observed declines
 - Level of Responsibility Procedures: Performed increases across blocks, assisted declines
- Diagnoses; some variability across blocks but AY 16-17 overall mix similar to AY 15-16
- Duty Hours:
 - AY 16-17 average 29 same as AY 15-16
- Student Satisfaction
 - Means range from 4.6-5.2 on 6 pt scale
- Mid-clerkship completion -100
- NBME AY 16-17 Average: 76
- Honors
 - AY 16-17 31% overall compared to AY 15-16 40%
 - 90% of those eligible received honors AY 16-17
- OB/Gyn Clerkship
 - OP Log:41 required, AY 16-17 average 80
 - Level of Responsibility Diagnosis: Managed leveled between blocks 2 & 3; Assisted peaked in Block 3
 - Level of Responsibility Procedures: Observed declined across blocks, assisted remained between 45-55% across all blocks and performed leveled in Block 2 & 3
 - Diagnoses: some mix across blocks, overall AY 16-17 mix similar to AY 15-16
 - Duty Hours
 - AY 16-17 average 36 compared to 34 in AY 15-16
 - Student Satisfaction
 - 4.3-5.6 on 6 point scale lower responses associated mostly with feedback one with duty hours, however no violations
 reported
 - Mid-clerkship completion 97% (unexpected illness, CD rescheduled)
 - NBME AY 2016-17 average: 76
 - Honors
 - AY 16-17 40% overall compared to AY 15-16 40%
 - 100% of those eligible received honors AY 16-17

• Family Medicine Clerkship

- OP Log: 20 req (2 of each) AY 16-17 average 75
 - Alternative required (Design a case, assigned reading, quiz)
 - B1: 6/26 students, B2: 6/30, B3 none
 - Level of Responsibility Diagnosis: manage increased and assisted and observed declined
 - Level of Responsibility Procedures: performed increased across blocks, assisted and observed declined
- Diagnoses; stable across blocks and AY
- Duty Hours
 - AY 16-17 average 28 compared to 26 in AY 15-16
- Student Satisfaction
 - Ranges from 5.1 to 5.8 (6 pt scale)
- Mid-clerkship completion 100%
- NBME AY 16-17 Average: 75 (up from 72 in AY 15-6)
- Honors
 - AY 16-17 46% overall compared to AY 15-16 39%
 - 100% of those eligible received honors AY 16-17

Conclusion

•No major comparability issues

•Areas that need attention and tracking

•Duty hours at Providence for IM lower than other sites

•Rates of use of alternate experiences

•25% suggested as a threshold by Year 3 & 4 Committee necessitating a comment/explanation

•No duty hour violations in reporting system for AY 2016-2017

•Occasional perception of lack of compliance by few students noted on end of block evaluations

•Issue surfaced in Block 3 with new faculty member which has been addressed

Mid-clerkship completion for Year 3 Clerkships

excellent overall

Reinforce expectation for alternate plans in the event of emergencies

•Final grade completion – 100% done in timely manner

•Continue to improve processes for transfer of grades to Banner

8. New Pediatrics Sub-I Director : Dr. Fatima Gutierrez

General Note

Presenter(s): Francis, Maureen

Dr. Lisa Ayoub Rodrigues is passing Pediatrics Sub-I director to Dr. Fatima Gutierrez.

• Dr. Gutierrez has been at TTUHSC since 2012 as an Assistant Professor and has been involved with resident education in the past. She

is a Pediatric Hospitalist. Dr. Gutierrez went to the University of New Mexico School of Medicine in Albuquerque, where she also did her residency.

9. CEPC consideration for future Q-Stream educational program usage

General Note

Dr. Brower will send information via email to committee.

10. Roundtable

General Note

Follow up on Curriculum as a Whole

Dr. Brower announced that Dr. Pfarr, Dr. Mark Francis and Dr. Dudrey will lead the charge as the Subcommittee to follow up on the issues and recommendations that were presented from our recent curriculum as a whole review.

Coming soon - They will follow-up on items of action and present them back to CEPC.

11. Adjourn

Presenter(s): Brower, Richard

General Note Meeting adjourned at 6:45pm. Presenter(s): Brower, Richard

Presenter(s): Brower, Richard