

CEPC Additional Meeting for Pre-clerkship Review


04.30.2018 05:00 PM - 07:00 PM

Purpose	Purpose for supplemental meeting: - Completion of the committee's pre-clerkship phase review - Catch-up on general agenda items
Note Taker	Morales, Trinidad
Attendees	Baatar, Dolgor, Beinhoff, Lisa, Brower, Richard, Cervantes, Jorge, Coteria, Maria, Dankovich, Robin, Francis, Mark, Francis, Maureen, Gajendran, Mahesh, Gest, Thomas, Hogg, Tanis, Morales, Trinidad, Perry, Cynthia, Pettit, Diana, Pfarr, Curt, Saucedo, Dianne, Wojciechowska, Joanna
Absences	Blunk, Dan, Htay, Thwe, Kassir, Darine, Lopez, Josev, Maldonado, Frankj, Martin, Charmaine, Ogden, Paul, Padilla, Osvaldo, Uga, Aghaegbulam H, Woods, Gordon
Guests	kristoffer.gonzalez@ttuhsc.edu, roberto.l.garcia@ttuhsc.edu
Location	MEB 1140

1. REVIEW PRIOR MEETING MINUTES

Brower, Richard

Per request by Dr. Mark Francis, under the SCI Course discussion, the term "SCORE" was changed to "Lessons Learned" (modification processed by Trinidad Morales).

 MX-3070N_20180628_125906.pdf

Decision

Minutes revised and then approved.

Mari Coteria was also present at the meeting (see attached sign-in sheet).

2. SCEC REPORT

Brower, Richard

Only Year 1 SCEC participants attended, and they had nothing to report.

2.1. MS1

Discussion

Year 1 SCEC participants attended, but they had nothing to report.

2.2. MS2

Discussion

No students from this class were present.

2.3. MS3

Discussion

No students from this class were present.

2.4. MS4

Discussion

No students from this class were present.

3. REVIEW OF PROPOSED AY 2018-19 YEAR 3 COURSE MODIFICATIONS (MODERATED BY DR. MAUREEN FRANCIS)

Francis, Maureen

FAMILY MEDICINE – SURGERY BLOCK

- No changes to overall block scheduling/structure.
- New didactic sessions planned:
 - Surgical management of ulcerative colitis and Crohn's disease
 - Ophthalmology
- Family medicine proposes to modify OpLog requirements for the level of student participation for several conditions from "observe" or "assist" to "manage" — considering the levels of participation observed by the clerkship director, this is not expected to be onerous or disruptive.
- Some of the FM longitudinal experiences are no longer offered due to preceptor attrition. The number of longitudinal experiences is still adequate for Block 1, and new experiences are in development. Additional capacity will need to be developed in time for AY2018-19 Block 2.
- Due to faculty staffing challenges, the FM clerkship proposes to reduce the number of Family Medicine clinic assignments (half-days) to 4/week. Per Dr. Brower, this may be unavoidable in the short term, but unacceptable in the long term — and programming this into the syllabus should be avoided. He suggested setting the expectation as a minimum of 4 half-days of clinic per assigned week, with up to 6 half-days assigned. Dr. Francis suggested that longitudinal selective could be expanded, but Dr. Brower expressed concern that, unless objectives and assessments are carefully coordinated, selectives cannot substitute for core curriculum.
- The Provost's Office and the Office of Outreach and Community Engagement are aware of the concerns related to the shortage of Family Medicine faculty/preceptors, and they are working together on this problem.
- Surgery is proposing changes to the structure/scheduling of the "Trauma Nights" experience (the hours for the night shift were adjusted from '6pm to 6am' to '8pm to 8am'; otherwise, there are no substantial changes to the surgery clerkship.

INTERNAL MEDICINE AND PSYCHIATRY BLOCK

- No major modifications are proposed
- The psychiatry mid-clerkship assessment form has been modified to include the "Health Matrix Discussion", and to include feedback on student presentations.

OBSTETRICS & GYNECOLOGY AND PEDIATRICS BLOCK

- The Baby Café, where students previously learned about practical clinical aspects of lactation, has closed. Students are now covering this material through completion of an online module.
- A new session related to the recognition and management of child abuse has been added.
- As with all the blocks and clerkships, Dr. Francis provided a brief overview of the Ob/Gyn clerkship, and Dr. Brower asked why the students are no longer rotating through gyn oncology. Dr. Francis explained that multiple learning environment concerns involving the primary gyn oncology faculty member have resulted in the exclusion of that faculty member from direct participation in UME.
- Based on accumulated experience with the accuracy and relevance of student experiencing documentation in OpLog, the Ob/Gyn clerkship director proposes streamlining of the clerkship's OpLog diagnosis and procedure logging requirements (see presentation for details).
- New selectives are being added to the Pediatrics clerkship (Pediatric Orthopedics, and Pediatric Wards).
- The Pediatrics clerkship director recommends modification of the clerkship's clinical assessment forms to require explanatory comments for any assessment of "honors" in professionalism. In addition, improved alignment of the assessment forms for wards, nursery, and the selective was suggested and described.
- Dr. Wojeichowska expressed concern that the length of the pediatric clerkship clinical assessment forms adversely affects faculty completion of the forms.
- It was noted that Dr. Colon, the Pediatrics assistant clerkship director is currently deployed; however, his responsibilities have been temporarily reassigned.

 MS3 Clerkship Update.pptx

Decision


- The CEPC reviewed and discussed the proposed changes to the Year 3 clerkship blocks and their syllabi, and ultimately approved the changes as described.
- Dr. Brower will include the following concerns in the CEPC's next regular report to the Faculty Council:
 - Family Medicine clerkship clinic assignment capacity challenges
 - Learning environment challenges involving the Ob/Gyn clerkship (specifically the gyn oncology experience)

4. SPM COURSE — FOLLOW-UP FROM THE MARCH MEETING (MODERATED BY DRS. HOGG, PETTIT, AND BAATAR):

Hogg, Tanis

- The purpose of this agenda item is the review of outcomes related to CQI initiatives initiated with AY2017-18, and to follow-up on additional issues raised at the March meeting during the committee's initial review of the SPM course and suggested modifications for AY2018-19.
- Effects of grading changes for AY2017-18.
 - The change from a normative curve system, to a criterion-based system with a pass point of 65%, was associated with no substantial change in mean class performance. Dr. Beinhoff pointed-out an inversion error in Dr. Hogg's data table (see presentation), and this will be corrected.
- Overall, the results of the SPM Course grading system change have been positive — with fewer students demonstrating borderline performance. In addition, changes in policy appear to have had a beneficial effect on the unfortunate

phenomena of students “triaging” the SCI exams.

 Review of Major CQI-Based Changes to SPM - CEPC 4-30-18.pptx

Decision

(relevant to Dr. Hogg's presentation) The committee approved continuation of the modified grading policies for SPM, and for the number of unit or course failures resulting in referral to the Grading and Promotions Committee.

(relevant to Dr. Baatar, Hogg, and Pettit's presentation) The committee recommended continuation of the weekly formative quizzes as a highly encouraged, but optional, activity. Note that a change to the administration of formative quizzes using the Firecracker platform is under consideration.

(relevant to Dr. Pettit's presentation) The CEPC approved the pilot plan for the AY2018-19 END unit as described.

Baatar, Dolgor

Concerns related to the weekly formative assessments:

- With AY2017-18 the formative quizzes were changed to asynchronous, within a limited window, and accessed via student computers. Overall, this was well-received by the students; however, they would prefer a longer window — a suggestion that was not endorsed by the CEPC because of its potential interference with the weekly learning/instructional cycle.
- Student participation in the weekly formative quizzes was intended to be required, with non-participation resulting in the issuance of an “event card” indicating a professionalism concern related to non-participation. However, due to the unreliability of the tracking system, the issuance of event cards was abandoned, rendering participation in the formatives essentially optional. In addition, even while the event card system was in place, many students were simply logging-in then logging-out —gaming the system to simply get a look at the questions and/or circumvent the issuance of an event card. This substantially interfered with the faculty's ability to assess student preparation. An extended discussion ensued, including discussion of potential ways to encourage meaningful student participation. Counting quiz performance towards the unit grade (or awarding bonus points) was dismissed as the quizzes are intended to be formative. The event card system was deemed ineffective. Other options were considered excessively burdensome and/or unreliable.

Pettit, Diana

AY2017-18 modifications in anatomy instruction:

- Overall, the new emphasis on prosecution and learning-station based anatomy instruction has been positive, with improved student feedback, and improved performance by the lower quartile.
- Proposal for modification of the SPM Course END unit for AY2018-19.
- Student session attendance and feedback related to the current END unit has been poor. The SPM II Course Director proposes a pilot project involving re-design of the END unit, emphasizing a ‘flipped’ approach — with all lectures converted to online asynchronous learning materials, followed by mid-week required and assessed interactive problem solving sessions (otherwise maintaining the instructional plan for each week, including the placement/sequencing of SCI, Medical Skills, Colloquium, and Worked Case Examples). The assessments in the interactive problem solving sessions would contribute to the unit grade (with each session contributing up to 2 points towards the final unit grade — depending on the final number of these sessions, they could contribute a total of up to 12 points). An extended discussion ensued. Issues included concern about the feasibility of the session assessments, student concerns/anxiety related to the proposed changes, effect on the clinical scheme presentation components, formatting for the asynchronous learning materials.

5. REVIEW OF THE PRE-CLERKSHIP PHASE PROGRAM EVALUATION PLAN/COMPONENTS (DR. HOGG AND MARI COTERA):

Discussion

Deferred due to lack of time (*PDF attached*). As an alternative, Dr. Hogg and Mari Cotera will create a voice-over video presentation on this topic which will be distributed to the committee members via an email link (*see attachment*). An opportunity for questions and discussion will be provided at a subsequent meeting.



Overview of student course evaluation system for the pre-clerkship phase (video).pdf
Preclekship Evaluation Plan.pdf

6. SUMMARY OF THE CEPC SUMMER MEETING PLAN AND CURRICULUM RETREATS (DR. BROWER)

Brower, Richard

(*see attachment*)

- No regular CEPC meetings in June or July.
- Watch for emails and Outlook invitations related to multiple curriculum retreat events, starting with a special presentation and workshop, provided by an external consultant, regarding longitudinal integrated clerkships.



CEPC Summer Schedule 2018.pptx

7. ROUNDTABLE

Discussion

No additional comments.

8. ADJOURN

Discussion

Meeting adjourned at 6:50pm.