CEPC Monthly Meeting

03.11.2019 05:00 PM - 06:30 PM

Purpose	Continuation of Clerkship Phase Review and other items
Presenters	Brower, Richard, Dankovich, Robin, Francis, Maureen, Hogg, Tanis
Note Taker	Dankovich, Robin
Attendees	Beinhoff, Lisa, Brower, Richard, Cervantes, Jorge, Dankovich, Robin, Francis, Mark, Francis, Maureen, Gajendran, Mahesh, Hogg, Tanis, Kassar, Darine, Ogden, Paul, Padilla, Osvaldo, Perry, Cynthia, Pfarr, Curt, Salazar, Ricardo, Saucedo, Dianne, Tonarelli, Silvina, Wojciechowska, Joanna
Absences	Cotera, Maria, De-Lara, Veronica, douglas.weier@ttuhsc.edu, gloria.rodriguez@ttuhsc.edu, maggie.scribner@ttuhsc.edu, Morales, Trinidad, Nino, Diego, shivani.mehta@ttuhsc.edu, Uga, Aghaegbulam H
Guests	brittany.harper@ttuhsc.edu, chandra.ojha@ttuhsc.edu
Location	MEB 1140

Meeting Minute

1. REVIEW PRIOR MEETING MINUTES

Presenter(s): Brower, Richard

Discussion

Dr. Mark Francis moves to approve minutes - Approved - no opposition

3/11/19 Meeting attendee list attached

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2019Mar11_CEPCattendees.pdf

2. SCEC REPORT

2.1. MS1

Discussion

Only one representative - no concerns

2.2. MS2

2.3. MS3

2.4. MS4

3. PHASE REVIEW- CLERKSHIP (INTERNAL MEDICINE AND PSYCHIATRY)



CPEC_ClerkshipPhaseReview_Salazar.pptx

Discussion

Dr. Davis and Dr, Tonarelli Presentation on IM/Psych Block

Presentation Highlights:

Common Clerkship objectives for Block Pair

- Interface between the disciplines
- Basic evaluation and management
- Patient centered care
- Psych presentations of medical illness
- Prep for performance on IM and Psych NBME exams

Examples of Knowledge & Patient Care

- On call psych eval experience & report full evaluation in morning report
- At least 12 assessments or scales (PHQ-9, Beck Depression Inventory, Cognitive evaluations like MOCA or MMT, etc)
- 12 progress notes with assessment and plan
- Main categories of diagnosis
- Six quizzes

Model of Psych Interview & Mental Status

- Booklet with most important points
- Video
- Interview with SP to prepare for the OSCE combined with IM

Interpersonal and Communication Skills Examples

- MS assigned 2 PPT presentations in didactics
- Ongoing evaluation of interpersonal and communication skills with feedback
- OSCE prep with SP
- MS develop patient education and counseling skills during clinical encounters

Professionalism

- Required attendance for all educational activities
- Appropriate use of cell and computer when expected to be attentive
- Op-log & duty hours weekly entry
- Complete all clerkship requirements
- Professional demeanor and conduct throughout clerkship

Systems based practice and practice based learning

- MS demonstrate an appreciation of how the health care has developed to accommodate El Paso cultural diversity
- MS complete 3 health care matrices
- PPT presentation with literature reivew

Interprofessional Collaboration

- MS learns role of each member of IP team
- IPE colloquium: IM, Psych and Pharm
- Student work with all types of roles in the clinical environment (faculty, fellows, residents, nurses, social workers, technicians, and pharmacists)

INTEGRATED EXPERIENCES - IM & PSYCH

- 1/2 weekly didactic session with shared topics
- IPE Colloquium on Delirium in geriatric patient
- Sleep rotation

Other Attributes of Block

• Wellness and Resilience

- o address stress, burnout and resilience 1 hour session
- MBI Burnout self-test Maslack Burnout Inventory
- Strategies to prevent stress and burnout

• Integration Threads

• geriatrics, basic science, ethics, professionalism, EBM, patient safety, Chronic illness care, quality improvements, communication skills, diagnostic imaging

Clinical Experiences

Psych

- Inpatient: Adult and children psych hospital
- Outpatient: Adult or children clinics, Sleep center, Adult and Child clinical liaison at UMC, intake area of psych hospital, psychopharmacology module

• IM

- Ward Rotations: UMCEP, TM campus, WBAMC, San Angelo (piloting)
- Selective rotations: Primary Care, Gastroenterology, Cardiology, Nephrology, Heme-Onc, Berm, Inpatient Rehab

Longitudinal rotation

• At least 12 weeks 1/2 day per week with same preceptor in Psych - student benefit from continuity of experience and some students publish with preceptor as a result - 3 examples from 2018

Resident & Fellows are MS supervisors

Training: 2 sessions per year to inform group on the role as MS supervisor & provide feedback on their instruction

- Direct supervision: direct instructions and feedback to the learner
- Indirect supervision: giving feedback on Matrix Health Care

Clerkship Block Outcomes

• Student Feedback - Block Evaluations

- Review of IM/ Psych Clerkship student feedback generally positive and illustrates solid student satisfaction
- Block 1 in AY 16-17 and AY 17-18 showed less satisfaction for the shared learning experiences contributing to understanding of clinical medicine - however improved each block. Block 1 of AY 2018-19 was strong with 98% satisfaction

• Challenges

- Continue to offer quality if class size increases
- Provide students with more autonomy while maintaining close supervision
- Increasing inpatient and outpatient rotation sites
- Increase number of faculty
- o Concern on how important longitudinal psych experience without conflict with IM rotation
- Shortage of community faculty concern with teaching without compensation or reward

• QI plan

- Psychotherapy Modules
- Recruit more community faculty for longitudinal rotations in afternoons
- Examine options for inculcation of matrix exercise in team based care
- Faculty development periodic learning sessions
- CEPC Psychiatry-IM Clerkship-updated 3_8_19.pptx
- Dr. Ogden discusses the need to develop relationships with new clinical sites

San Angelo rotation - was the only TTUHSC Service Area site without a TTU connection

- Reached out to San Angelo
 - o large clinic with 275 doctors
 - o unique health experience more rural with multi-specialty group practice
- Currently just testing waters in IM and FM in Spring 2019
 - o 3 in FM and 1 in IM for this pilot
- Angelo State (TTU umbrella) has agreed to house the students (3-6 week experience)
- Goal to get about 10 MS sent at a time down the road

Dr. Padilla: Question about community faculty and how each department develops incentives

- Full-time faculty appointments core faculty no consideration to incentive
- How to get more community faculty involved it does not always have to be monetary, recognition, strengthen affiliation, need improved out-reach
- Each department is always looking for expansion

Dr. Perry raised concerned about annual CQI process given new three year cycle of course review - how will more regular reviews and improvements be made?

- Clerkships will meet annual for syllabus prep
- Dr. Davis was interested in formalizing an annual process as he felt the exercise was quite helpful
- Dr. Davis feels strongly the pairing of IM and Psych into a block is a great match synergy across both specialties and shared patient care needs regularly occur.

Gajendran, Mahesh

Internal Medicine Review (bold items indicate opportunities for growth)

Syllabus Review:

- Block goals Exceptional
- Shared Topics Exceptional
- Shared Activities Acceptable Dr. G was concerned the information was not comprehensive and incomplete
- Contacts -Unacceptable changes not all up-to-date; but this information needs to be updated from Block to Block
- Clerkship Descriptions Acceptable concerns none -this was appropriate
- Clerkship Objectives mapped well
- Integration Threads
 - Dr. Gajendran concerned that there was an gap in information opportunity are all areas needing covering or some of them
 - Dr. Francis reported that it is not required at each block cover all threads but in the end there is good coverage across all clerkship experiences
- Assessment Exceptional
- Student Performance Objectives Exceptional
- Op-log expectations exceptional clearly stated for the students
- mid-clerkship review exceptional
- Calendar of Clerkship events acceptable appropriate
- Clerkship location locations are vague unacceptable requires some updating as appropriate
 - It was noted that students are oriented to look to Scheduler for this information suggestion at least provide information directing students to scheduler - and more general information in the syllabus on where to report & who to contact would be helpful (provided TM example).
- Professionalism expectations exceptional
- Layout unacceptable hard to find specific information; busy and Dr. G had trouble navigating the document
 - Dr. Gejendran commented: What is the purpose of the document? To check the box or is it for practical student use?
 - General notion that if the faculty are challenged to understand and locate info; how does this
 effect the student experience
 - Dr. Francis reminded the CEPC that a few years back this common syllabus template was designed with the input of students and we continue to use this based on student approval.

IM Comparability

- Exceptional: Alternate experiences, duty hours, clerkship grade, if more than one site
- Acceptable: Mid-clerkship feedback a delay of small group, NBME scores meet national average
- Unacceptable NONE



CPEC_ClerkshipPhaseReview_Salazar.pptx

Salazar, Ricardo

Psych Review (bold items indicate opportunities for growth)

QI project for Medical students - there is room for improvement; our students could participate in improving how things are delivered and get them involved with small projects.

Syllabus Review

- Contacts acceptable needs update
- Clerkship Descriptions Exceptional
- Clerkship Objectives Exceptional
- Integration Threads Appropriate
- Assessment Exceptional
- Student Performance Objectives Exceptional
- Op-log expectations Exceptional requirements clearly stated
- mid-clerkship review Exceptional
- Calendar of Clerkship events Exceptional
- Clerkship location Exceptional
- Professionalism expectations Exceptional
- Layout unacceptable hard to find specific information; Can find a friendly format or a program or app to assist in creating and provide ease of updating information

Psych Comparability

- Exceptional: Alternate experiences, Clerkship Grade, Timely completion of final grades & Mid-clerkship feedback
- Acceptable: Duty hours, NBME scores

Padilla, Osvaldo

Student Evaluation and Learning Environment Review

INTERNAL MEDICINE REVIEW

- Level of responsibility Procedures
 - Strength students have taken stronger roll in taking responsibility for procedures
 - Possible suggestions
 - Is this comparable to other medical schools
 - Share information on the types of procedures students are responsible for
- Diagnoses 4 of the top 10 remain the same across sites
 - Strength MS gets same diagnostic materials across sites
 - Weakness patient financial status is different between institutions, and may give students a homogeneous experience
- Duty Hours Violations NONE
- Site Specific Student Satisfaction
 - Strength Student appear pretty much satisfied across sites
 - Weakness note skewed number of participants from site to site; thus some variability at WBAMC exists, which is most likely preceptor driven.
- Comparison of Grades

- Strengths remained stable throughout sites, 1/3 of student receiving honors
- Weakness: there is grade variability at different sites may not be statistically significant (small sample size)

PSYCHIATRY REVIEW

- Level of responsibility Procedures
 - Strength reasonable #s of procedures
 - Weakness Variability of procedures being performed across sites
- Diagnoses
 - Strength Similar diagnosis of main psychiatric disorders across sites
 - Weakness Differences less common however important diagnoses exist across sites
- Duty Hours Violations NONE
- Site Specific Student Satisfaction
 - Strength Student satisfied across sites
 - Weakness consider lower satisfaction for patient managements opportunities however still is 85% satisfaction
- Comparison of Grades
 - Strengths High pass rate of NBME and for all students final clerkship grades
 - Weakness: Discussion on why 50% of students receiving honors -

Discussion

High rate of Honors in Psych:

- Do residency directors get reports on how many honors in a block in MSPE yes they do; question, does that weaken student competitiveness? YES
- Despite trying to make it too challenging to honor in psych, but students are rising to the occasion. recent adjustment to raise NBME pass cut score but final grade also incorporates competencies grades where students must also honor to earn distinction.
- Brittany comments Psych provides more learning materials and the self exam prep book is concise. This is inconsistent in other clerkships in the resources and support provided. Overall excellent support in preparing for NBME exam.
- Room for improvement (Ojha) with faculty completion of student assessment the most inconsistent portion of the final grade
 - Suggests that we need to train our faculty (faculty development) and our residents for improved assessment consistency;
 - IM planning a luncheon to discuss this as a group more regularly.

Decision

- Clerkship Honors % something to circle back on per Dr. Brower across all clerkships (LCME 8.7)
 - Dr. Francis reported this was recently reviewed by Year 3/4 and decided to keep NBME threshold the same for the coming year. Reminder - all students spend 3 weeks at UMC and the other 3 weeks vary across sites variability of students.
- All clerkships need to revisit how residents are trained and how frequently. Clerkship director should be prepared for follow-up requests to detail annual training plans (LCME 9.1)

4. RESULTS OF THE GPAS ASYNCHRONOUS VOTING

Presenter(s): Brower, Richard

Description

The PLFSOM policy on grading, promotion, and academic standing (GPAS) was discussed during the February 18th, 2019 special CEPC meeting. Dr. Brower modified the GPAS and sent it out to the voting CEPC members in

late February.

ACTION: As of 3/9/19, Drs. Cervantes, Francis, Gajendran, Nino, Padilla, Perry, Pfarr, Uga and Wojciechowska voted in favor of the policy, none against.

Discussion

Announcement - Approved - all members who voted were in favor

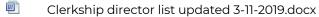
5. CLERKSHIP DIRECTORSHIP UPDATES

Presenter(s): Francis, Maureen

Discussion

More revisions on the way, need to replace Kronfol (Surgery) and Ipson (NICU - which may be Sambalingam)

- Current changes include:
 - Year 3:
 - FM Agathe Franck (asst CD for FM)
 - Year 4:
 - Shirley Hinshaw (OB/GYN Sub I)
 - Charishma Boppana (Bootcamp Co-director)



Decision

Trinidad will provide asynchronous updates to the CEPC with associated CVs to review new Clerkship leadership.

6. ELIMINATION OF THE PICE COURSE FOR AY2019-20

Presenter(s): Dankovich, Robin, Hogg, Tanis



CreditHourCalcWorksheetAY2019_20.pdf



Doctor of Medicine Degree ProgramAY2019-20.docx

Hogg, Tanis

Misinterpretation of Federal Financial Aid (Title IV) guidelines dictated new term start and stop dates created a series of challenges

- 2015 CEPC approved expansion of Y4 for earlier opportunity for students to explore electives
- Pre-clerkship curriculum re-organized to accommodate Y4 changes resulted in much shorted MS2 spring term
- PICE was created to house related integrated curricular elements
- December 2015 TTUHSC Financial Aid Concern standard terms was 14-17 weeks and overall minimum of 30 weeks per AY calendar adjustments made
- April 2017 TTUHSC New Financial Aid interpretation for AY 2017-18- semesters must be ≥15 weeks and adjacent semesters within 2 weeks of length from one another.
 - Spring and Fall semesters modified to comply with Ed.gov student aid requirements (Title IV Standard Term regulations)
- 2018 TTUHSCEP Financial Aid Director with new interpretation for Title IV regulations for non-standard term
 - The length of the first term in an AY must be equal to or longer than the second semester for

disbursement purposes.

Steps to be taken:

- Eliminate 2 week spring extension for MSI spring semester
- Restore original structure and length of MS2 fall (reconstitute Repro unit as a whole)
- Eliminate PICE course
 - Move important elements to new parent course
 - ACLS to Medical Skills IV
 - SDL plan to Masters' Colloquium
 - TSGR and CBSE to SPM IV



Dankovich, Robin

The changes to start and stop dates of term and the adjustment of where curricular activities occurred required a review of course contact hours. As a result of this review there is a net gain of 1 credit hour to the MD degree program. The attached degree plan indicates the adjustments based on semester modifications and the elimination of PICE 7001 from the degree program.

The Texas Higher Education Coordinating Board requires changes in total credit hours in a degree program must be reported once the faculty review and approve the overall degree plan.

Decision

The CEPC approves the elimination of PICE 7001 from Year 2 of the curriculum effective AY 2019-2020. The CEPC approves the updated degree plan for PLFSOM MD program - resulting in a total of 157 credit hours (over previous requirement of 156 credit hours) effective for cohorts entering from AY 2018-2019 and beyond.

7. ROUNDTABLE

8. ADJOURN

Discussion

Adjourned 6:50pm