

CEPC Monthly Meeting

06.10.2019 05:00 PM - 06:30 PM

Attendees Beinhoff, Lisa, Brower, Richard, Cervantes, Jorge, Coteria, Maria, Dankovich, Robin, De-Lara, Veronica, Francis, Mark, Francis, Maureen, Gajendran, Mahesh, Hogg, Tanis, Janssen, Herb, Lopez, Josev, Maldonado, Frankj, Martin, Charmaine, Ogden, Paul, Padilla, Osvaldo, Perry, Cynthia, Saucedo, Dianne, Uga, Aghaegbulam H

Location MEB 1140

1. REVIEW OF THE PREVIOUS MEETING MINUTES

Discussion

Minutes will be sent out via email for approval.

- Quorum was not met.
 - 2 members left before meeting adjourned.

2. SCEC REP REPORTS

Discussion

No students present.

3. CLERKSHIP PHASE REVIEW WRAP-UP, CONCLUSIONS, AND ACTION ITEMS

Presenter(s): Francis, Maureen

Discussion

Binder was created of all presentations, completed rubrics by reviewers, and CEPC minutes/recordings related to the Clerkship Phase review.

Policies approved related to the clerkships:

- Clerkship Administration policy
- Clerkship Director-Assistant Clerkship Director Position Descriptions
- EVU policy
- Common Clerkship Policies

Planned Improvements

Update syllabi for 2019-2020

- Include information noted as missing in the syllabi or on CANVAS

Clerkship Directors

- Working with faculty in their departments to create shared mental model for assessment
- Monitor grade distribution
- Continue to monitor timeliness of mid-clerkship and final grades and enact punishment if no response
- Consider creating orientation videos for each of the 4th year selectives for use if the clerkship director is not available
- Update the plans for Residents as Teachers in each clerkship
- Continual review cycle for didactics

Recruit & provide faculty development

- Continue recruiting sites/community faculty if class size expansion is to stay on targeted timeline

Standardize OSCE expectations across MS 3 blocks

- Enhance the focus on diagnostic reasoning
- Create separate scores for CIS and ICE with requirement to pass both

Intersession

- Sessions with low satisfaction scores revamped before iteration in January 2019 with better results

Critical care selectives

- Replace current videos with SCCM modules

Learning environment

- Plan for visiting professor to hold Grand Rounds for all and workshop for OB/GYN
- Report back to CEPC regularly on learning environment
- Continue to monitor and highlight the importance of the learning environment through dashboard reports and end of block evaluations

Feedback to Year 1 & 2

- Practice with oral case presentations
- Learn how to write different types of notes, e.g OB and Gyn note
- Should more ultrasound be taught?



CEPC Clerkship Phase Review final session 6-10-2019.pptx

3.1. COMMENTS ON APPROVAL OF THE YEAR 4 REQUIRED CLERKSHIP SYLLABI

Discussion

No significant changes other than noted during the clerkship phase review. An email will be sent out for approval, due to quorum not being met.

4. DISCUSSION OF THE PRE-CLERKSHIP PHASE COMPONENTS OF THE PLFSOM CURRICULUM V2.0 10-POINT PLAN

Presenter(s): Francis, Maureen



PLFSOM UME v2.0 10-point plan CEPC 13MAY2019.pdf

Discussion

1. Retention of the highly integrated clinical presentation-based model and associated instructional week/cycle
2. Conversion of the Worked Case Example Sessions from small group discussions to Team Based Learning sessions
3. Conversion of the Clinical Scheme Presentations into professionally produced asynchronous learning modules
4. Integration of the Firecracker platform, and development of consistent standards for session-based and weekly formative self-assessments, to expand "assessment for learning" and promote Step 1 success
5. Transition of the SPM course assessment plan from a few critical unit exams to a system of scored coursework, more frequent mid-term exams, and a cumulative end-of-term final
6. Development of augmented academic performance programs to promote on-time academic progression and to facilitate the success of students requiring additional time to complete the pre-clerkship phase
7. Shortening of the "Standard Path" pre-clerkship phase to three terms (coupled with shift in the clerkship and USMLE Step exam timelines)
8. An earlier and expanded 18-month clerkship phase (concluding with a flexible 25-week testing, remediation, early elective, and scholarship block)
9. Transition to a longitudinal integrated clerkship (LIC) model
10. Retention of a highly modular and flexible fourth year focused on success in the transition to residency

4.1. ASSOCIATED CURRICULUM CALENDAR CHANGES FOR PLFSOM UME V2.0

Hogg, Tanis

The Plan is divided into Pre-Clerkship elements & Clerkship elements.

- We would eliminate dedicated exam weeks at the end of each unit. Moving to biweekly exams and having a dedicated mid term exam week & finals week.
 - Early frequent Summative Assessments
 - Will allow us to catch struggling students earlier
- The planned model proposes:
 - Switch between Gastrointestinal System and Musculoskeletal & Intergumentary Systems
 - EOY would include Endo system tight to Renal System
 - Comprehensive EOY exam would be moved to end of May or first week of June
 - Summer Break would be a month before going into the Second year.
 - Second Yr would begin with Repro System
 - 2 or 3 weeks of dedicated time for ACLS, TSGR & finals

Discussion

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Pre-clerkship curriculum committee currently developing proposals for points 1-7, to be presented to CEPC at forthcoming meeting for detailed review and feedback.

4.2. CLERKSHIP PHASE COMPONENTS

Francis, Maureen

Point 8

An earlier and expanded 18 month clerkship phase concluding with a flexible 24 week testing, remediation, early elective, and scholarship block.

Proposal for the flexible block:

- USMLE Step 1 - moving to Spring of 3rd Yr
 - Suggest required by March 31
- USMLE Step 2 CK & CS
 - May also take during this time period, suggest required by October 31 of 4th year
- SARP/additional research experiences
- Early elective time

Dr. Odgen proposed moving Step 2 to September 30th, because it would interfere with residency interviews.

Advantages

- No “off-cycle” students
- Opportunity for enhanced basic science integration in clinical years
 - Help students connect basic science to patient care
- Possibly more time for research
- Time for early electives for exploration of career choices
- Possible increase in Step 1 scores
 - Step 1 increasingly clinically focused with longer and more complicated vignette style questions

Dr. Odgen mentioned adding another year of school/debt to the student as a potential downside regarding the delay of Step 1 a year.

Point 9

Transition to a longitudinal integrated clerkship (LIC) model

- Traditional clerkship
- Separate clerkships in core disciplines

- Problems
 - Medical practice has changed
 - attending physician assignments on service becoming shorter and more intense
 - ambulatory schedules that change frequently based on other commitments
- Students typically rotate through the block clerkships in random order
 - No intentional sequencing
 - Students and faculty may not know where a student stands and how to help them progress to the next level

Preliminary LIC Overview

- First LIC would begin with Orientation/ Procedures
 - IM/Psych/Neuro Inpatient & Ambulatory Blocks
 - FM Longitudinal (15 sessions)
 - EM Longitudinal (40hrs minimum)
 - Psych Longitudinal (12 visits)
 - 2 week testing period
- Second LIC would begin with Orientation/Shared activities
 - Surgery/Peds/OBGYN Inpatient & Ambulatory Blocks
 - FM Longitudinal (15 sessions)
 - EM Longitudinal (40hrs minimum)
 - Mother/Baby Longitudinal
 - White space would be scheduled (TBD)

Advantages


- More satisfied with their experience
- More patient-centered
- More substantive relationships with faculty & patients
- Greater responsibility for patient care
- More independent in physician-like roles
- As well or better on clinical skills
- As well or better on exam performance

Point 10

Retention of a highly modular and flexible 4th year focused on success in the transition to residency

Retain flexibility

- 30 weeks of required course work
 - Sub I – 4 weeks
 - Critical Care – 4 weeks
 - Bootcamp – 2 weeks
 - Electives – 20 weeks (maybe 16?)
 - Flexible for interviews and vacation – 14 weeks (maybe 18?)
 - EM and Neuro moved to LIC

 curriculum revision plans CEPC 6-10-19.pptx

5. ROUNDTABLE

6. ADJOURN

Discussion

Meeting adjourned at 6:25pm.