

CEPC Monthly Meeting

04.08.2019 05:00 PM - 06:30 PM

Purpose Continue Clerkship Phase Review and review Pre-Clerkship Phase Student Attendance and Participation Policy

Attendees Beinhoff, Lisa, Brower, Richard, Cervantes, Jorge, Cotera, Maria, Dankovich, Robin, De-Lara, Veronica, Francis, Mark, Francis, Maureen, Gajendran, Mahesh, Hogg, Tanis, Janssen, Herb, Kassir, Darine, Lopez, Josev, Maldonado, Frankj, Morales, Trinidad, Nino, Diego, Ogden, Paul, Padilla, Osvaldo, Parsa, Michael D, Perry, Cynthia, Pettit, Diana, Pfarr, Curt, Saucedo, Dianne, Uga, Aghaegbulam H, Wojciechowska, Joanna

Guests brittany.harper@ttuhsc.edu, douglas.weier@ttuhsc.edu, maggie.scribner@ttuhsc.edu, runail.ratnani@ttuhsc.edu

Location MEB 1140

Meeting Minutes

TTUHSC EP Paul L. Foster School of Medicine

5001 El Paso Drive

El Paso, TX, 79905

USA

1. REVIEW PRIOR MEETING MINUTES

Discussion

Dr. Brower asked if any objections to approving March 25th meeting minutes, no objections, meeting minutes were approved.

ACTION: March 25th meeting minutes approved. See attachment.

 CEPC Extra-meeting - Minutes (2).pdf

April 8th CEPC meeting attendees:

CEPC voting members: Drs. Cervantes, (Mark) Francis, Kassar, Niño, Padilla, Perry, Uga, and Wojciechowska


SCEC: Weier, Harper, Scribner, and Ratnani

Ex-officio: Drs. Beinhoff, Brower, (Maureen) Francis, and Janssen.

Guests: Dr. Parsa.

Other: Morales

See attachment for sign-in sheet.

 MX-3070N_20190417_143743.pdf

2. SCEC REPORT

Discussion

Dr. Brower asked SCEC members for any comments/concerns, no one had any comments or concerns.

2.1. MS1

Discussion

Ratnani present, no comment.

2.2. MS2

Discussion

No one from MS2 present.

2.3. MS3

Discussion

Harper and Scribner present, no comments.

2.4. MS4

Discussion

Weier present, no comment.

3. CLERKSHIP REVIEW PHASE (EM AND NEUROLOGY (INTERSESSION UPDATE ADDED))

Discussion

Dr. Brower informed the CEPC that all the presentations from the Clerkship Phase Review will be binded and sent out by Trinidad. This includes all the PowerPoint presentations and also the minutes from meetings that discussed the Clerkship Phase Review.

Dr. Parsa presented for EM first (presentation attached).

The biggest benefit of having EM clerkship in the fourth year is students can use everything they learned in years 1 through 3.

National clerkship curriculum guidelines were published in 2010 on what should be included in an Emergency Medicine clerkship in the United States and this document has not been updated since 2010. EM is based on these national clerkship curriculum guidelines, in addition to institutional learning objectives

Challenges include securing additional clinical sites for students (currently have the Transmountain site; the Las Palmas site has a director who is ready to take students and administrative hurdles are being worked on to allow students into Las Palmas; and Beaumont may also be taking students soon).

Dr. (Mark) Francis pointed out that 3 8-hour days of patient care/week (a minimum of 98 hours over the clerkship) in ED seems thin and questioned if this is by design or due to capacity issues. Dr. Parsa answered that student can get a quality experience in ED, three days/week is not inadequate, if we had more size, we could add another shift for students. However, taking into account other activities as outlined in the presentation, students are busy, it is not a light month for them while in the EM clerkship.

 CEPC clerkship pres 4-19.pptx

Dr. Kassar followed with the Neurology presentation (presentation is attached).

Dr. Kassar mentioned that a challenge in Neurology is not enough faculty members, notably in outpatient services. Also, there is a reliance on nurse practitioners, but this is fine because students can learn from anyone. And students sometimes may not show much enthusiasm in the Neurology clerkship, they may just do the minimum to pass, mostly because the students have residency matched at this point.

 Neurology Clerkship- CEPC 2019.pptx

Dr. Perry led the EM and Neurology review, with assistance from Drs. Pettit, Uga, and Douglas Weier (SCEC representative). (presentation attached)

Before the start of the review, a conversation on the utilization of nurse practitioners in Neurology took place.

Dr. Pettit said during her review that student complaints stated that they wanted to work with someone besides the nurse practitioners and they also saw the same type of patients (Parkinson's diagnoses). Dr. Kassar replied that the nurse practitioner can still teach the students and they have a variety of patients. Also, students will continue to see nurse practitioners if Neurology does not have enough faculty. And not all patients are the same, so there are still opportunities to learn from the nurse practitioners. Dr. Uga said another comment he saw was that the nurse practitioners work in fast-paced clinics and the nurse practitioners do not have enough time for the students. Douglas informed the CEPC he just worked with a nurse practitioner, she is a very good teacher, a very strange schedule, many patients on one day, less on others, there are lots of Parkinson's and epilepsy patients. Breadth is small (low variety of illnesses), but he still got to see many patients in her clinic. Dr. Kassar repeated that any learning is good learning.

Dr. Padilla asked the reviewers and the CEPC in general if from the LCME perspective, is there a limit to the amount of exposure to nurse practitioners? Dr. Brower said this would be an issue if this was the predominant outpatient experience in the core clerkships, but that students need to work with mid-level practitioners -- practicing under faculty supervision -- and that those clinical experiences are entirely valid. Dr. Uga followed up by asking about the LCME perspective on nurse practitioners evaluating students, to which Dr. Brower said there is not a clearly defined formula, but acquisition of core skills/competencies should be facilitated by faculty. The nurse practitioners are sometimes seen as faculty associates, not all are faculty associates. LCME wants exposure to nurses, nurse practitioners, residents, medical professionals from all levels, but assessment from faculty members. Dr. (Maureen) Francis said faculty are involved in the core clerkships and Neurology is grateful to have nurse practitioners, they rely on them and other professionals (e.g., midwives) and without their involvement, the Neurology clerkship would be in bad shape. Dr. Brower reminded the CEPC that the faculty designed this clerkship, it was done with their feedback.

Dr. (Maureen) Francis said interprofessional collaboration is required from LCME, such as learning from other healthcare providers, so this is satisfied by the involvement of nurse practitioners. Dr. Brower said there is a mix of ways that the LCME would look at this issue, there is not a specific standard that addresses the percentage of time spent with mid-levels versus physicians. We look at summative assessments designed by faculty.

Dr. Perry reviewed the EM syllabus, and said overview it was good, the syllabus was concise, perhaps adding page numbers may help students navigate the syllabus.

Dr. Pettit began the review of Neurology and said the integration topics were not all easily identified. Dr. (Maureen) Francis said people are misinterpreting integration threads, these are things that stream across all rotations, not integration from one discipline to another.

Dr. Pettit said it is also not clear who is going to do the mid-clerkship review. Douglas said attaching the quick guide to the syllabus may assist with many issues. Dr. (Maureen) Francis said the quick guide is not part of the syllabus, however, it has other resources for students.

Dr. Uga performed the comparability report review and said NBME national average data is missing for EM and Neurology. Dr. (Maureen) Francis said these data are available via the dashboards and this is shared with faculty and coordinators.

Douglas covered the student feedback. Both blocks had outstanding student feedback. Some negative comments, a small minority out of the total students. One comment for EM was that the ride outs were too long. Also, there is an attending in Transmountain that was identified as a problem in student feedback. In Neurology, student feedback is not given back in time before the next assignment is due. Also, students desired more diversity in the nurse practitioners and faculty. Students want less shadowing, they want to be more involved. There was also confusion on when the students should show up to meet with residents to perform rounds. The overall attending teaching environment was positive.

Dr. (Maureen) Francis gave a quick update on the intersession. This is the second year of the intersession, this is

the update on the intersession. All objectives are mapped to PGOs. (see attachment)

Dr. Brower announced that clerkship phase review was now done (with the exception of review of any changes to the Common Clerkship Policies -- which will likely be managed asynchronously by e-mail). Next academic year we will do the curriculum as a whole, instead of looking at courses or years or phases, we are supposed to look see if we our Educational Program Goals and Objectives are sufficient and if our 4 year program builds on itself and if it meets the program goals and objectives and if the sequencing of courses makes sense.

 CEPC Clerkship Evaluation_EM Neuro.pptx

 CEPC clerkship phase review 2019.pptx

4. POLICY VOTING (PRE-CLERKSHIP PHASE STUDENT ATTENDANCE AND PARTICIPATION POLICY)

Description

Pre-Clerkship Phase Student Attendance and Participation Policy electronic voting results:


Approve as is: 8 votes

Approve offline but recommend discussion at an upcoming CEPC meeting: 1

Defer a decision pending discussion at an upcoming CEPC meeting: 1

Voting members: Cervantes, Francis, Gajendran, Kassir, Niño, Padilla, Perry, Pfarr, Uga, and Wojciechowska.

See attached copy of the policy.

 Pre-Clerkship Phase Student Attendance and Participation Policy v28MAR2019CLEAN.docx

Discussion

Dr. Brower spoke about the Pre-Clerkship Phase Student Attendance and Participation Policy that was approved via asynchronous voting. He informed the CEPC that it is likely the pre-clerkship will be trimmed to three terms. (see attachments of the e-mail and approved policy).

Ratnani (SCEC rep) said the policy seems vague on the time to report planned absences. Dr. Brower said Student Affairs can make decisions on planned absences, to which Dr. Janssen agreed, he can meet with the students. Dr. (Maureen) Francis talked about a student who had a planned absence, but it was not reported until the day of the absence and was excused. She said this is a professionalism issue. Dr. Brower agreed that these absences could be excused but there could be professionalism issues.

Dr. Niño said excessive absenteeism needs to be defined, to which Dr. Brower said it is defined in other parts of the document. Tardiness is also defined, but not a specific number that equates with excessive tardiness. It could be a professionalism issue if the student has excessive tardiness. Dr. (Mark) Francis asked if there should be a policy on tardiness, to which Dr. Janssen said his office could intervene at any time. Dr. Beinhoff said there are also parking issues on campus and that could contribute to tardiness.

Dr. Brower said he would add to the document and send it around to the GPC and other stakeholders.

 Memo Style.pdf

 Pre-Clerkship Phase Student Attendance and Participation Policy v8APR2019AS_APPROVED.pdf

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See attached copy of the policy.

Note: Modifications to the policy were drafted and then circulated for approval by e-mail on 4/9/2019. The policy was approved as documented in a follow-up e-mail circulated 4/15/2019 (see attached).

5. ROUNDTABLE

Discussion

No other items were discussed.

6. ADJOURN

Discussion

Meeting adjourned at 7:10pm.