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Medical Student Education Committee Minutes

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2012 July 24 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

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EAST TENNESSEE STATE UNIVERSITY QUILLEN COLLEGE OF MEDICINE

Medical Student Education Committee Minutes July 24, 2012

The Medical Student Education Committee of the Quillen College of Medicine met on Tuesday, July 24, 2012 at 4:15 p.m. in the Academic Affairs Conference Room, Stanton-Gerber Hall.

Voting Members Present:

Ken Olive, MD Caroline Abercrombie, MD Reid Blackwelder, MD Dave Johnson, PhD Ramsey McGowen, PhD Paul Monaco, PhD Jamie Reagan, M4 Ex officio / Non-Voting & Others Present:

Howard Herrell, MD Cindy Lybrand, MEd Cathy Peeples, MPH Lisa Myers, BA

Dr. Olive announced that Dr. Howard Herrell, who has demonstrated exceptional interest and commitment to our students and institution, has accepted his invitation to be a voting member of MSEC. He is filling the position previously held by Dr. Dawn Tuell.

1. Approval of Minutes

The minutes from the 7-10-12 meeting were approved as distributed.

2. Topics

a. M1 Fall 2012 Self-Directed Learning Block

The M1 schedule designates Tuesday afternoons for students' self-directed study, including independent work related to assignments for the Profession of Medicine course. Profession of Medicine, which had a 2½ day "intersession" during the first week of classes, will not have additional lectures (in this time slot) Fall semester.

b. [ED-46] A medical education program must collect and use a variety of outcome data, including national norms of accomplishment, to demonstrate the extent to which its educational objectives are being met.

Finalized plan to evaluate and document accomplishment of curriculum objectives, as amended and approved by MSEC on 7-10-12, was presented to the committee. *There were no further changes.*

- **c. [ED-13]** The curriculum of a medical education program must cover all organ systems, and include the important aspects of preventive, acute, chronic, continuing, rehabilitative and end-of-life care.
 - **[ED-33]** "Mapping" There must be integrated institutional responsibility in a medical education program for the overall design, management and evaluation of a coherent and coordinated curriculum.

Diseases & Conditions as an Organizing Curricular Concept

Under consideration is use of diseases and conditions as part of a new system for coordinating and integrating curricular content, as well as for monitoring content to identify unplanned redundancies and omissions.

Committee reviewed lists of diseases, conditions and clinical presentations from other schools / sources.

MSEC discussion regarded:

- Potential Quillen-developed list representing areas of emphasis to link across courses, semesters and years, but not precluding other diseases being taught
- Framework to connect and build on content and experiences that already exist across the curriculum, including M1 COL & Communications cases and the Cadaver Case Presentations, also M2 Integrated Grand Rounds (cadaver case topics are going to be expanded in M2 Pathology)
- Ideas for new methods of integration and cooperation in both directions between science and clinical faculty; possible pilot cases written by Quillen clinicians
- Importance of continually increasing focus on clinical relevance and opportunities requiring critical thinking; stressing *differential* diagnosis
- Keeping students' attention; integrated approach being beneficial for student learning and mapping process
- Dr. Johnson's plan to videotape his biochemistry lectures so they can be viewed, along with notes, outside of class and to spend class time using clicker questions and cases to reinforce learning and generate discussion; class time is expected to be cut by half or more
- Continued attention to documenting existent, plus developing threads / cross-cutting themes in the curriculum

ACTION:

- 1) On a motion by Dr. McGowen and seconded by Dr. Blackwelder, MSEC approved using a list of diseases/conditions/presentations as an organizing curricular concept.
- 2) Academic Affairs staff and MSEC members will continue development of a disease list and committee review and discussion will resume at the August 7 meeting.
- 3) List approved by MSEC will be presented to course directors as part of the next level of curricular mapping = documenting session information.
- 4) Session data and feedback regarding the list will return to Academic Affairs staff and MSEC.

d. [ED-33]; [ED-1] – The faculty of an institution that offers a medical education program must define the objectives of its program. The objectives must serve as guides for establishing curriculum content and provide the basis for evaluating the effectiveness of the program.

Curricular Report: M1-4 Institutional Milestones Mapped by Course – Cindy Lybrand & Cathy Peeples

Members reviewed the report spreadsheet which indicates the milestone objectives addressed in each course as submitted by directors. Most of the data is from M 1-3; senior selective and elective information is forthcoming.

ACTION:

- 1) In regard to milestones not cited as being covered, MSEC will follow up to determine whether these instances represent omissions in the curriculum &/or the need to modify the milestones.
- 2) For the next level of mapping, MSEC will request from course directors their content plus multiple other categories of information (e.g., diseases, keywords, assessment) for each class session and how it corresponds to the objectives they have cited domain, milestone and course.
- 3) Faculty development is being planned in regard to session level data collection.

OTHER ACTIONS:

Faculty development is also being planned regarding new assessment techniques, including student self-assessment; topic will be further addressed at an upcoming MSEC meeting.

Process of course/curriculum review will get underway with posting the new policy, appointment of M1/2 & M3/4 subcommittee members and request for course directors to prepare for their end-of-course (annual) reviews.

e. Brief Reminder of LCME Timeline

- 1. Quillen Action Plan submitted to LCME by August 15, 2012
- 2. LCME review of and determinations regarding our plan at their meeting in October
- 3. LCME letter to Dr. Bagnell outlining the content required for a self-study related to our plan, which at this point can be modified
- 4. LCME site visit in summer of 2013 to determine our progress and whether newly established systems are functioning

3. Recent documents / topics {Linked or on file in Academic Affairs – contact myers@etsu.edu}

[ED-46] Outcomes Final Document

[ED-13, ED-33] Examples (again): Lists of Diseases / Conditions

[ED-33, ED-1] Curricular Report: M1-4 Institutional Milestone Objectives Mapped by Course

4. Announcements

Reminder: LCME / curriculum related documents are available in the Curriculum Database folder on the Quillen shared (T:) drive.

The next MSEC meeting will be on August 7, 2012.

5. Adjournment

The meeting adjourned at 5:22 p.m. in advance of the Class of 2016 Family Welcome Picnic.