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Medical Student Education Committee Minutes

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2015 September 15 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

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Medical Student Education Committee

MSEC Minutes: September 15, 2015

The Medical Student Education Committee of the Quillen College of Medicine met on Tuesday, September 15, 2015 at 3:30 pm in the Academic Affairs Conference Room of Stanton-Gerber Hall.

Voting Members Present:

Ramsey McGowen, PhD, Chair
Caroline Abercrombie, MD
Reid Blackwelder, MD
Anna Gilbert, MD
Jennifer Hall, MD
Howard Herrell, MD
Dave Johnson, PhD
Paul Monaco, PhD
Jerry Mullersman, MD, PhD
Kenneth Olive, MD
Jessica English M3

Omar McCarty, M2
David Cooper, M1

Ex officio / Non-Voting Members & Others Present:

Theresa Lura, MD, *ex officio*
Robert Acuff, PhD, co-chair M1/M2 review subcommittee
Earl Brown, MD
Cindy Lybrand, MEd
Cathy Peeples, MPH
Lorena Burton, CAP

Shading denotes or references MSEC ACTION ITEMS

Introduction of MSEC Member

Dr. McGowen opened the meeting at 3:30 p.m., with a welcome to our newest MSEC member, David Cooper, M1 representative.

Change to Agenda

Dr. McGowen asked that MSEC accept a change to the agenda, adding consideration of a proposed M4 Ultrasound elective and postponing the New Innovations demo of the curriculum module to the October 2015 Retreat. **MSEC approved and noted the change in agenda.**

1. Approval of Minutes

Minutes of the August 18, 2015 meeting were presented and changes identified for page 3 - *“Discussion among MSEC noted that two of the four faculty teaching **Microbiology** are non-tenure track. They are valued and need **to be** retained.”*

Page eight - *“USMLE has expanded its outline twice in the past five or so years and is now a comprehensive list that would allow COM to look at its curriculum and compare to **nationally referenced data** for tagging.”*

Dr. Herrell moved to accept the minutes with changes noted and Dr. Monaco seconded the motion. The motion unanimously passed.

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2. M1/M2 Review Subcommittee: Three reports were presented by the subcommittee – Rural Programs Case Oriented Learning, Practice of Rural Medicine, and Pathology I & II

A. Dr. Acuff presented the **2013-2014 Rural Program Case Oriented Learning Annual review** under Course Director, Dr. Joseph Florence.

There are no short or long-term recommendations specifically related to course content or delivery. The Subcommittee feels strongly that the entire Rural Track needs reviewed as one unit and cannot be split out by individual courses or clerkship. Dr. Olive concurred, but voiced concern about the timing of the review. With the current program evaluation in progress, faculty and staff available for such a review are limited. Dr. Herrell stated that consideration of changes in the Rural Track, which may come out of a review, need looked at in conjunction with the review of the entire curriculum. Implementation of changes may come later, but must be considered / aligned with implementation of changes that result from the program evaluation process. MSEC discussion included that there are things from the Rural Track that can be applied to the Generalist Track and that differences in the Rural Track and Generalist Track should be acknowledged. The program evaluation would not be complete without including a review of the Rural Track program. Challenges of maintaining, redirecting, and/or aligning Interdisciplinary / Intra-professional relationships and rotations in the College of Medicine need to be considered with any recommendations for change to either the Generalist and/or Rural Track. Dr. Acuff noted that Dr. Joe Florence, Rural Track Program Director, feels that this is the time to review the Rural Track, its vision, mission and measurable objectives.

- **Short Term Recommendations to MSEC – none**
- **Long Term Recommendations to MSEC – none**

Dr. Acuff recommends that MSEC's review of Rural Program Case Oriented Learning and Rural Program Practice of Medicine should be considered together and that action taken on either be combined into one action for both courses. MSEC concurred with this recommendation and asked Dr. Acuff to present the Practice of Medicine Annual Review.

B. Dr. Acuff presented the **2013-2014 Rural Program Practice of Medicine Annual review** under Course Director, Dr. Joseph Florence.

Short Term Recommendations to MSEC –

- Improve sequencing between the Generalist and Rural Track courses
- Increase the curriculum content to include clinical skills (e.g. OSCE, H&P skills, etc.)

Long Term Recommendations to MSEC –.

- Visit the implication of decreased intraprofessional interaction by other academic programs at ETSU (reference letter from Wilsie Bishop of April 8, 2015)
- Compare the curriculum content, including clinical skills in both the Rural Track and Generalist Track to the benefit of both tracks
- Review the entire Rural Track together as opposed to looking at individual pieces of the program

A motion was made by Dr. Herrell to not accept the short-term recommendations and rather form an ad hoc committee with course directors from both the Rural Track and Generalist Track to look at the Rural Track as a whole to include the short- and long-

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term recommendations with a report back to MSEC. Dr. Blackwelder seconded the motion. The motion unanimously passed. Dr. Olive added that administratively, a plan for review be brought back to the MSEC October Retreat for discussion.

C. Dr. Acuff presented the **2014-2015 Pathology I & II Annual review** under Course Director, Dr. Earl Brown

Dr. Acuff reported that there are many changes, under the direction of Dr. Brown, occurring in the course. Dr. Brown will be presenting at the Pathology Grand Rounds one week from Thursday (September 24) on *The Flipped Classroom* and invites MSEC to attend. Dr. Brown added that there are articles that need reviewed before attending.

- **Short Term Recommendations to MSEC – none**
- **Long Term Recommendations to MSEC - none**

MSEC accepted the report as presented.

3. M3/M4 Review Subcommittee: Two reports were presented by the subcommittee – Keystone course and Psychiatry Clerkship

A. Dr. Mullersman presented the **2014-2015 Keystone course Annual review** under course director Dr. Theresa Lura.

Dr. Mullersman stated that Dr. Lura continues to do an excellent job of organizing this course every year. There are a lot of moving pieces to plan and manage. Dr. Lura's report is a model for how to complete a Self-Study. Each year Dr. Lura analyzes every piece of the course to see how she can make it better. MSEC had no further discussion regarding the Subcommittee's review report.

- **Short Term Recommendations to MSEC – none**
- **Long Term Recommendations to MSEC - none**

MSEC accepted the report as presented.

B. Dr. Mullersman presented the **2014-2015 Psychiatry Clerkship Annual review** under Clerkship Director, Dr. Rushiraj Laiwala (Dr. Merry Miller and Dr. Traci Carroll are the 2015-2016 clerkship directors).

It was noted by Dr. Mullersman that while the report is covering the 2014-2015 academic year, the Subcommittee also reviewed some materials of the 2015-2016 academic year under the new clerkship directors so they knew what is being done now in conjunction with what was identified by the previous clerkship director. Student concerns expressed in evaluations during 2014-2015 revolved around a small number of key issues, which are being addressed by the new clerkship directors.

- **Short Term Recommendations to MSEC –**
 - Continued monitoring of the status of the recently restored child Psychiatry component of this clerkship (reinstated in AY 2015 – 2016).

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- Addition of an item to the student evaluation survey that will assess the degree to which students are engaged as active learners during each sub-rotation of this clerkship.
- Continued monitoring of the status of the recently augmented outpatient component of this clerkship.
- MSEC initiate an effort to fully understand the desires of QCOM students concerning training in psychotherapy, given the demonstrated effectiveness of psychotherapeutic treatment modalities and the continuing requests by many QCOM students that their training in this subject area be expanded.

The students reported lack of exposure to certain fields within psychiatry, including addiction psychiatry, forensic psychiatry, and the role of psychotherapy within the practice of psychiatry. It should be noted that didactics were provided regarding substance use disorders and the VA and Woodridge rotations include a hospitalized patient population where treatment of substance disorders would be observed. Recent implementation of outpatient experiences includes the opportunity for students to observe psychotherapy sessions with ETSU psychologists in addition to observing group therapy sessions at Woodridge Hospital.

- **Long Term Recommendations to MSEC-**

- MSEC formulate whatever steps are deemed necessary and appropriate to modify the QCOM curriculum and/or to augment it through inter-professional education activities or combined degree programs in order to provide for learning opportunities that can meet the varied needs of QCOM students with respect to the topic area of psychotherapy.

MSEC questioned whether students were aware of the amount of time needed to be fully educated and trained in psychotherapy or psychoanalysis and whether they understand the full realm of what it means for a patient to be recommended for psychotherapy or psychoanalysis treatment. MSEC wondered if this was a nomenclature issue where students are saying psychotherapy or psychoanalysis training, but meaning something else. A snapshot survey from the current fourth year students who have been through Psychiatry would provide meaningful information to help the Clerkship and MSEC understand better what is being requested.

Dr. Herrell made a motion that Dr. Mullersman draft a survey questionnaire, to be reviewed by Dr. McGowen, and administratively managed in an electronic format, to current M4 students asking about their comments requesting additional psychotherapy and psychoanalysis training during their Psychiatry Clerkship rotation. Dr. Monaco seconded the motion. The motion unanimously passed.

MSEC accepted the report as presented.

4. Curriculum Integration Subcommittee: Nutrition Thread Report

Dr. Abercrombie presented the Nutrition Thread Report for the Curriculum Integration Subcommittee. A number of nutrition content standard objectives were mapped to the COM Institutional Educational Objectives, each associated with Knowledge, Skills, and Assessment (KSA). Dr. Abercrombie briefly reviewed each of the short-term (essential/desired) recommendations for current courses and clerkships and identified where the Institutional Educational Objectives are mapped. Some of the recommendations include inter-professional

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activities or community outreach sessions to include health assessments, Farmers' Markets, community shopping trips, and farm-to-market tours.

Dr. Olive is working on a summary of the Thread Report recommendations for MSEC and will present to the course and clerkship directors. The Nutrition Thread recommendations will be added to this summary. While nothing in the Nutrition Thread report appears daunting to implement / add, the scope and sum of recommendations from all Thread reports could be overwhelming to some of the course or clerkship directors who have quite a number of recommendations identified for their course(s) or clerkship. We need to be careful about suggesting more implementations while not identifying removal of some tasks already in existence / use. Dr. Herrell suggested the recommendations be presented in informal lunch meetings with the course and clerkship directors to allow them to decide what they can / cannot implement. All Thread Reports have been mindful of not adding content hours.

Dr. Herrell made a motion that MSEC accept the report with the notation that the recommendations are not required implementation for Course and Clerkship Directors, but rather suggestions. Dr. Blackwelder seconded the motion. The motion unanimously passed.

Both Dr. Olive and Dr. McGowen commented that a lot of thought has gone into all of the Thread Reports and they are very much appreciated.

5. Curriculum Reflection Surveys

Dr. McGowen presented a summary of the Student Reflection of Curriculum evaluations recently completed.

- The 4th year students were asked to comment on their 3rd year clerkships just completed and how prepared they were for the 3rd year curriculum based on the first two years curriculum. A rating of 3.88 out of 5.00 was received.
- The 3rd year students were asked to comment on their 2nd year courses just completed and how prepared they were for the 2nd year curriculum based on the first year curriculum. A rating of 3.69 out of 5.00 was received.
- The 2nd year students were asked to comment on their 1st year courses just completed. A rating of 3.60 out of 5.00 was received. There were only 20 responses received from the 2nd year students – a small number received compared to that received from the other classes.

Dr. McGowen reviewed the common themes found in all of the evaluations. Each of the evaluation summaries and the overall summary are available in the Program Evaluation Working Group folder on the shared T drive.

6. Information conveyed to Faculty Advisory Council

Dr. Olive updated MSEC on the MSEC action from the August 18, 2015 meeting.

“A motion to have MSEC communicate to the Faculty Advisory Council (FAC) the concern for employment of non-tenure track faculty in core courses and the impact it can have on the stability of the curriculum.” Dr. Olive conveyed MSEC's concern of having one-year contracts for non-tenure track faculty to the Faculty Advisory Council who agreed this was a concern. Dr. Means, COM Dean, agreed to investigate and based on preliminary investigation has

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determined it may be possible to extend the one-year contacts out to two-year rolling contacts. MSEC consensus was that this would be an improvement.

7. LCME Standards 6.6, 6.7 & 6.8 Review

Dr. Olive presented review of LCME Standards 6.6, 6.7 and 6.8, outlining the requirement of each standard, the support data, and narrative responses previously reported to LCME. He invited MSEC to share / update the information with him, via e-mail and in course and clerkship syllabus, for inclusion in our next LCME response that will need to be prepared.

- **6.6 Service-Learning**

The faculty of a medical school ensure that the medical education program provides sufficient opportunities for, encourages, and supports medical student participation in service-learning and community service activities.

- **6.7 Academic Environments**

The faculty of a medical school ensure that medical students have opportunities to learn in academic environments that permit interaction with students enrolled in other health professions, graduate and professional degree programs, and in clinical environments that provide opportunities for interaction with physicians in graduate medical education programs and in continuing medical education programs.

- **6.8 Education Program Duration**

A medical education program includes at least 130 weeks of instruction.

8. Program Evaluation Working Groups

Dr. McGowen provided a finalized group listing of the program evaluation working group members. The working groups have been meeting and will be presenting preliminary reports of their work to MSEC during the October Retreat.

9. New Innovations Student Evaluations – M1/M2 Courses and Instructors

Lorena Burton provided samples of questionnaires for the M1/M2 Evaluation of Course and Faculty for use with the implementation of New Innovations software. M1/M2 course directors will receive requests to prepare supplemental questionnaires from a menu of questions plus up to five course-specific questions.

The decision to use New Innovations was based on the total number of evaluations managed by Academic Affairs and a need to streamline the process. MSEC discussion included concern for student anonymity, the number of evaluation questionnaires a student receives and modifications needed for alternative instructional formats such as small groups. Omar McCarty stated that at first M2 students in the Immunology course were apprehensive of the number of separate evaluation requests they received, but found benefit in completing each, rather than one long questionnaire. MSEC members are invited to share all questions regarding a particular course with Lorena so each may be reviewed and addressed. The process is going to require some initial setup and adjustments and this Fall semester will be the implementation phase with a review on going over this academic year.

10. Ultrasound Elective

Dr. Abercrombie reviewed a proposal for a 2-week Ultrasound Elective for M4s. Recently, the COM purchased four, GE Ultrasound machines that are being made available to all four years

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of students. Dr. Abercrombie and others have been attending training courses on how to teach and integrate Ultrasound across a curriculum. This elective is the first phase of a four-year elective that will prepare those students who are not going to be in the M1 rollout of the four-year program. It has been added to the first year's Anatomy Lab, adopting national models for instruction.

MSEC discussed benefits and limitations of adopting the elective as a part of the curriculum. David Cooper, MS1, commented that the M1 class is excited about receiving the exposure to Ultrasound in the Anatomy Lab and learning more about how it is used.

A motion was made by Dr. Monaco to approve the Ultrasound Elective for M4s. Dr. Herrell seconded the motion. MSEC voted unanimously to accept the motion.

11. Standing Agenda Item: Subcommittee, Standing Agenda Item: Subcommittee, Working Groups & Technology Updates

Dr. McGowen asked for updates from MSEC that needed to be made at this time. There was none from the floor. Dr. McGowen reminded MSEC that the October meeting is a Retreat, and there will be preliminary reports from the Program Evaluation Working Groups.

Adjournment

The meeting adjourned at 5:45 p.m.

MSEC Meeting Documents

Item 1: T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 1 - MSEC August 18 2015 Meeting Minutes 20150826_Aproved MSEC 20150915.pdf

Item 2: T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 2 - 2013-2014 Rural Case Oriented Learning Comprehensive Review Report.pdf

T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 2 - 2013-2014 Rural Practice of Medicine Comprehensive Review Report.pdf

T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 2 - 2014-2015 Pathology 1 & 2 Annual Review Report.pdf

Item 3: T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 3 - Keystone Course Annual Review Approved 20150909.pdf

T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 3 - Psychiatry Clerkship Annual Review Approved 20150910.pdf

Item 4: T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 4 - Curriculum Integration Subcommittee Curricular Thread Report - Nutrition - Final.pdf

Item 5: T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 5 - Curriculum Reflection Survey Key Points Summary.docx

Item 7: T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 7 - LCME Elements PowerPoint 6.6-6.7-6.8.docx.ppt

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Item 8: T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 8 - Memberships for Program Evaluation Working Groups_Updated_20150911.pdf

Item 10: T:\Academic Affairs\MSEC ARCHIVE\MSEC Mtg TDocs_July-Dec15\9-15-15\Item 10 - Ultrasound Elective Form 8-27-15.docx

Upcoming MSEC Meetings

Tuesday, October 20, 2015 – MSEC Retreat – 11:30 AM (lunch) / Meeting begins at 12 Noon to 5:00 PM

Tuesday, November 3, 2015 – 3:30-6:00 PM

Tuesday, December 15, 2015 – 3:30-6:00 PM

Tuesday, January 19, 2015 – MSEC Retreat – 11:30 AM to 5:00 PM

Tuesday, February 16, 2016 – 3:30-6:00 PM

Tuesday, March 15, 2016 – 3:30-6:00 PM

Tuesday, April 19, 2016 – 3:30-6:00 PM

Tuesday, May 17, 2016 – 3:30-6:00 PM

Tuesday, June 14, 2016 – MSEC Retreat & Annual Meeting – 11:30 AM – 6:00 PM