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Medical Student Education Committee Minutes

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9-18-2018

### 2018 September 18 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

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## Medical Student Education Committee

**Minutes: September 18, 2018**

The Medical Student Education Committee of the Quillen College of Medicine held their regularly scheduled meeting on Tuesday, September 18, 2018 in Classroom C-000 of Stanton-Gerber Hall.

### Attendance

#### Faculty Members

Ramsey McGowen, PhD, Chair  
Russell Brown, PhD  
Thomas Ecay, PhD  
Steven Geraci, MD  
Russell Hayman, PhD  
Dave Johnson, PhD  
Paul Monaco, PhD  
Jason Moore, MD  
Mark Ransom, MD  
Rob Schoborg, PhD  
Amanda Stoltz, MD

#### Student Members

Hunter Bratton, M3  
David Cooper, M4  
Erin Lutz, M2  
Sarah Allen Ray, M1

#### Ex Officio Voting Members

Theresa Lura, MD  
Rachel Walden, MLIS

#### Ex Officio Non-Voting Member

Kenneth Olive, MD, EAD

#### Guests

Robert Acuff, PhD  
Patricia Amadio, MD  
Michelle Duffourc, PhD  
Theo Hagg, MD, PhD  
Steven Irmeger, M3  
Ansley Ricker, M3  
David Taylor, M2

#### Academic Affairs Staff

Lorena Burton  
Mariela McCandless, MPH  
Cathy Peeples, MPH

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Shading denotes or references MSEC Concurrence and/or Action Items

### 1. Approve: Minutes from August Meeting & Announcements

Dr. McGowen called the meeting in session at 3:30 pm with a quorum of voting members. There were no changes identified for the August 21, 2018 minutes.

Dr. Ransom made a motion to accept the August 21, 2018 minutes as presented. Dr. Geraci seconded the motion. MSEC unanimously voted to approve the minutes.

Dr. McGowen made the following announcements and introduction:

- Next month's meeting on October 16<sup>th</sup> will be a Retreat meeting in classroom C003. Lunch will be served beginning at 11:30 am with the Retreat beginning at 12:00 pm.
- The January 2018 MSEC Retreat has been moved to January 8, 2019. All MSEC members have been sent an updated calendar invite with the new date identified.
- There are several inter-related agenda items today with presentations and discussion overlapping in discussion – please keep this in mind as we move through the agenda.
- M1 Student Sarah Allen Ray, was introduced and welcomed. She has been selected by her class as our new MSEC M1 member.

## 2. Discussion: M2 Curricular Issues – Student Representatives

David Taylor, M2 Student Representative and Erin Lutz, M2 MSEC Representative, presented a recently completed student survey asking the M2 class to comment on their curriculum for 2018-2019. Results of the survey included three (3) areas of concern, which were discussed by the student members and MSEC.

- Inadequate integration in current curriculum
  - Inadequate communication between courses and faculty
- Concern that the current schedule promotes cramming and not long-term retention
- March exam schedule

The following proposals were presented for MSEC's consideration:

- Reduce Shelf grade percentage to 10% (Microbiology and Pharmacology currently 20%)
- Have students who just completed the corresponding year provide input on course scheduling each year (especially as it relates to content integration, test scheduling, etc.)
- All second year course directors/faculty, both within the same course and from different courses, meet to compare syllabi and better integrate material
- No new material presented the weekday before an exam (i.e., there should not be any new material on a Friday afternoon before a Monday exam)

Dr. McGowen noted that historically MSEC has received, considered, and implemented, where possible, student input to any planned curriculum changes.

MSEC will continue their discussion in the months ahead, keeping in mind the list of proposals presented today for the M2 curriculum.

*The M2 Curricular Issues Power Point Presentation is shared with MSEC members via a One Drive document storage option.*

## 3. Policy Approval: Revision to M3 Clerkship Exam and Grading Policy - MSEC-0111-3

Cathy Peebles reviewed the revisions requested to the current M3 Clerkship Exam and Grading Policy (MSEC -0111-3). The revised policy was distributed for review prior to the meeting. Originally the policy was written to require a student to obtain an **overall** clerkship grade of at least 70% and score above the 5<sup>th</sup> percentile for the NBME subject exam.

The revised policy requires students to obtain at least 70% on the **internal clerkship numeric score** (derived from all clerkship activities, excluding the NBME score) and score above the 5<sup>th</sup> percentile for the NBME subject exam. Scores for these two components will be combined together according to the established weight to determine the final clerkship numeric score and corresponding letter grade. The revised policy specifies how grades will be determined when a student does not meet expected performance standards, including the awarding of a letter grade of D and remediation under specific circumstances.

The revised policy will be effective from the start of the 2018-2019 academic year and retain the exemptions previously identified and approved by MSEC.

Dr. Moore made a motion to accept the changes to the *M3 Clerkship Exam and Grading Policy – MSEC -0111-3*, effective with the 2018-2019 academic year. Dr. Ransom seconded the motion. MSEC unanimously voted to accept the motion.

*The revised M3 Clerkship Exam and Grading Policy – MSEC -0111-3 is shared with MSEC members via a One Drive document storage option.*

#### **4. Follow-Up: Institutional Educational Objectives (IEOs) 3.10, 8.2, 8.3, 8.6, 8.7, 8.8**

Dr. McGowen followed up with a progress report on five (5) of the Quillen Institutional Educational Objectives that were previously identified as not being adequately reflected in the curriculum. Course and clerkship directors had been asked to review their course and/or clerkship content and identify if any of the five (5) IEOs were being covered in delivered content, but were omitted from a course or clerkship objective. The following have been identified for each IEO.

**3.10 Practice-Based Learning and Improvement 3.10** – MSEC approved changing the wording for this IEO in April 2018. Course and clerkship directors in the Internal Medicine Clerkship, Family Medicine Clerkship and Genetics identified with linkage to the revised IEO through their course or clerkship objectives.

**8.2 Demonstrate healthy coping mechanisms to respond to stress** – An in-class coping skills training workshop was added to the Doctoring I and II courses. Staff from the ETSU Counseling Center developed the content. The IEO is now linked to seven (7) required courses/clerkships objectives (Doctoring I and II, Cell and Tissue Biology, Physiology, ICP, Pediatric Clerkship, and Keystone).

**8.3 Manage conflict between personal and professional responsibilities** – A Portfolio assignment was developed to address this IEO and continues to do so. This is now documented.

**8.6 Provide leadership skills that enhance team functioning, the learning environment, and/or the health care delivery system** – the Doctoring I and II course objectives are mapped to this IEO.

Additional courses and/or clerkships with linkage to IEO 8.6 are Cell and Tissue Biology, Pharmacology, ICP, Transition to Clinical Clerkships, Junior Clinical Experiences, Community Medicine Clerkship, Family Medicine Clerkship, OB-GYN Clerkship, Surgery Clerkship, RPCT Health Research and Practice, RPCT Clerkship, and Keystone. Interprofessional experiences are approved and will link to this IEO, but are not yet mapped to the IEO.

**8.7 Demonstrate self-confidence that puts patients, families, and members of the health care team at ease** – Family Medicine Clerkship identified a linkage with their OSCE. Doctoring II, Pediatric Clerkship, Surgery Clerkship and Keystone all have linked objectives to this IEO. IPE experiences are approved and will link to this IEO, but are not yet mapped to the IEO.

8.8 Recognize that ambiguity is part of clinical health care and respond by utilizing appropriate resources in dealing with uncertainty – Internal Medicine Clerkship identified that aspects of their rounding on patients can be linked to the IEO. Doctoring I, Biostatistics and Clinical Epidemiology, Physiology, Lifespan Development, Pediatrics Clerkship, Surgery Clerkship, RPCT Health Research and Practice, and Keystone all have linked objectives to this IEO. Family Medicine Clerkship identified possible linkage through Aquifer cases, but this needs to be confirmed by the Clerkship Director.

Dr. Ransom stated that he felt the Quillen Institutional Educational Objectives previously identified as not covered in the curriculum were now sufficiently covered.

Dr. Monaco made a motion that MSEC accept the presented report of coverage for Quillen Institutional Educational Objectives 3.10, 8.2, 8.3, 8.6, 8.7, and 8.8 as reflecting sufficient coverage in the curriculum. Dr. Geraci seconded the motion. MSEC unanimously voted to accept the motion.

*The IEO presentation details are shared with MSEC members via a One Drive document storage option.*

### **5. Report: Outcomes Subcommittee Quarterly Report**

Dr. McGowen presented the Outcomes Quarterly report identifying there were **six (6) benchmarks met** for 2017-2018:

- Benchmark 1
- Benchmark 7
- Personal and Professional Development 2
- Practice Based Learning and Improvement 2
- Professionalism 1
- Professionalism 2.

Two (2) of these benchmarks (Benchmark 1 and Personal and Professional Development 2) need to be reworded, reflecting a change in the data sources scale to a five (5) point scale.

There were **five (5) benchmarks partially met** for 2017-2018:

- Benchmark 2: all courses met the measure except Neuroscience which had a dissatisfaction rating of more than 20%.
- Medical Knowledge 1: all courses met the measure except Cell & Tissue, in which 91.67% of students achieved a passing average before the NBME exam.
- Medical Knowledge 2: all courses met the measure except Biochemistry in which less than 50% of students scored at or above the national mean on NBME subject exams.
- Medical Knowledge 5: all courses met the measure except Biochemistry and Neuroscience, which had less than 10% at or below the 10<sup>th</sup> percentile.
- Patient Care 1: All courses met the measure except Cell and Tissue which had 8.33% of students who failed to achieve a passing average before the NBME exam.

Discussion of the five (5) benchmarks partly met identified situational explanations for the findings rather than curriculum concerns. The courses not meeting the benchmarks would continue to be monitored through regular processes.

There was **one (1) benchmark not met** for 2017-2018:

- Personal and Professional Development I: Ninety percent (90%) of students will report being at least satisfied with Student Mental Health Services. Eighty-eight percent (88%) of students reported being satisfied or very satisfied.

MSEC discussion included noting that the national average is 73.3%; that Quillen students continue to report satisfaction much higher than the national average; that this was a small difference from the benchmark and most likely reflected a class dependent fluctuation. MSEC determined that this benchmark should continue to be monitored through regular processes.

The subcommittee recommended two revised benchmarks on changes in data sources:

- **Interprofessional Collaboration 3:** replace old benchmark (*75% of graduates will report the nature of the learning experience(s) with other health professions students: as active engagement with patients*) with a new one based on M3 student evaluation of clerkship **Students will rate clerkships as 3.5/5 on the student evaluation of clerkships:**  
*"This experience allowed me to improve my collaboration as a member of an Interprofessional Health Care Team providing coordinated services to patients."*
- **Professionalism 4:** replace old benchmark (95% of students will be rated of "between fair and good" or above on the M3 clerkship assessment question addressing Professionalism) with a new benchmark based on new student M3M4 assessment form:  
*"Students will be rated on average 2.5 or above on the Engagement and Professionalism item of the M3 and M4 student assessment as "meets all expectations."*

The subcommittee reported it is continuing to develop new benchmarks to replace previous benchmarks that are no longer available because of changes to the M3 and M4 assessment forms.

In October 2018, MSEC will have a follow-up discussion of a prior Outcomes agenda item:

- Benchmark 6 – In order to address primary care needs of the public, QCOM will obtain PGY1 residency positions in Family Medicine, Internal Medicine, Pediatrics and OB/GYN above the annually reported national match rates for each specialty.

At this time MSEC could consider making the continuing monitoring measure from the Missions Management Tool about primary care into a formal benchmark.

MSEC discussion included how benchmark percentages are set and what triggers a review and discussion of a benchmark that is not met.

MSEC voted to accept the Outcomes Quarterly report as delivered with Dr. Monaco and Dr. Lura abstaining from vote.

*The Outcomes Quarterly report is shared with MSEC members via a One Drive document storage option.*

## **6. Report: M1M2 Review Subcommittee Annual Reviews – 2017-2018**

Dr. Acuff presented the annual review of the **M1 Human Genetics course**, directed by Dr. Paul Monaco. Dr. Acuff asked MSEC to take note of the overall student evaluation of the course (3.69) for 2017-2018 in comparison to the prior two (2) years (4.61 and 4.39).

Also, the two student failures of the course for 2017-2018, that had not happened in the prior two (2) years. The course director believes this was because of the course's placement, which has been changed for the 2018-2019 academic year. The course director said it was rare to have students fail the course.

**Short Term Recommendation(s):** MSEC is asked to look into the value of Tegrity recordings helping or hindering student learning, as a number of students do not attend class.

- Dr. Monaco stated that he does not use Tegrity to record his lectures, but rather uses Podcasts on YouTube that are made available to students. The clinical presentations by outside guests are not recorded and are required attendance for the students. He stated that making lectures accessible outside of the dedicated classroom time block provides an avenue for students to not attend class.

**Long Term Recommendation(s):** There is no NBME subject exam for Genetics, but it is covered in the Biochemistry NBME subject exam. Consequently, efforts should be made to integrate Genetics with Cellular and Molecular Medicine (Biochemistry).

- MSEC discussed what was meant by integrating the courses – combined as one course or integrate/align course material delivery. Dr. Johnson stated that he felt that the combining of courses would be the ideal integration. Dr. Monaco noted that the Genetics course follows a nationally identified course curriculum guide (i.e., Medical School Core Curriculum in Genetics published by the Association of Professors of Human and Medical Genetics). Cellular and Molecular Medicine uses a similar type of curriculum guide for its curriculum. In addition, Genetics has two (2) out of town, paid lecturers, to assist with content coverage in the Genetics course. Integrating as one course would require substantial thought and planning to define content that needed to be modified, added, and/or removed for both courses.

The subcommittee made recommendations to the course director to review the Institutional Educational Objectives for the course to ensure they are related to what is being taught in lecture and Team Based Learning (TBL). It was also noted that small groups and TBL are not identified in the course syllabus, though TBL is identified as an instruction method associated with the course objectives.

MSEC accepted the Genetics course annual review by the M1/M2 Review Subcommittee with a commitment to follow-up with discussion at a later date on both the short-term and long-term recommendations. Dr. Olive stated he will email both course directors for the Genetics and Cellular and Molecular Medicine courses, asking them to consider integration of course material for the upcoming 2018-2019 courses.

Dr. Acuff presented the annual review of the **M2 Medical Pharmacology course**, directed by Dr. Michelle Duffourc. Dr. Acuff noted students performed above average on the NBME subject exam and Step 1 related content with 77.5% of students scoring at or above the NBME national mean this year. Students are very positive concerning the course director's lectures and praise her for her enthusiasm and quality of instruction.

The overall student evaluation of the course was 4.03/5.00.



**Short Term Recommendation(s):** Student evaluations of this course and others continue to include unprofessional comments and have a tone of personal attack of professors. The subcommittee recommends the formation of a student committee to review student comments and screen out unprofessional ones so they are more constructive. The student committee would provide a summary that would shorten and focus recommendations.

- MSEC discussion included which individuals should be part of the committee (administration, faculty, and students), the extra work for students on the committee, added time for completion of the evaluation process before the course director receives the comments and completes the course self-study, and the added time before the M1/M2 Review Subcommittee receives the self-study.

Dr. Geraci made a motion to accept the short-term recommendation by forming a committee of class officers to review student comments and edit as needed to provide a summary of comments that is more constructive and professional. A set process, to include committee members and time-frame would need to be identified before the process is begun. Dr. Schoborg seconded the motion. MSEC unanimously voted to accept the motion.

**Long Term Recommendation(s):** Dr. Duffourc presently teaches 41% of the course and has faculty nearing retirement age. The subcommittee recommends that the Department of Biomedical Sciences hire additional faculty trained to teach medical pharmacology.

- MSEC discussion noted that faculty recruitment in the Department of Biomedical Sciences is active and that prior letters have been sent to Dr. Hagg, Chair of Biomedical Sciences. When the discussion came up in the August meeting about faculty nearing retirement age, the decision was to allow the issue to filter up through the LCME Self-Study process. MSEC now feels that recognizing a need for additional faculty needs to be acted on.

MSEC accepted the long-term recommendation by having Academic Affairs Administration draft a letter to Dr. Hagg, Chair of Biomedical Sciences, with a copy to Dr. Block, Interim Dean, Quillen College of Medicine, asking that the present recruitment process for faculty identify individuals with whose primary mission is to teach versus targeting individuals with research grants. The recruitment package should include like salary levels with offered tenure track. In addition, MSEC supported the idea of training and recruiting internal candidates through the Biomedical Sciences graduate (or other internal) program.

*Both annual reviews are shared with MSEC members via a One Drive document storage option.*

## **7. Follow-Up/Discussion: Quiz Attendance Policy – Student Representatives**

Ansley Ricker, M3, David Taylor, M2, and Steven Irmeger, M3, presented information and responded to MSEC discussion regarding a student survey sent to the M1 and M2 students about Quillen's attendance policy. The presentation followed a similar presentation made at the M1/M2 Course Director Meeting on May 23, 2018. It was at this meeting that a follow-up discussion with MSEC was recommended.

- MSEC discussion included: differences in the M1 year where the flipped classroom approach is used more versus the M2 year, where there is more emphasis on in-class time; establishing a consistent attendance policy across the board for all courses and clerkships;



requirement for attendance when clinical faculty are presenting, faculty engagement; faculty motivation to use technology resources when student attendance is low for a course; student use of laptops and course time to study for another course when present for another course; national trend of using technology to address adult learning expectations; teaching what is necessary versus what is preferred; and outcomes wanted.

The chief concerns identified by the student representatives were:

- The attendance policy be reviewed by MSEC and potentially revised to ensure it is clearly stated, represents the current attendance expectations by the majority of courses, and is well disseminated to student tour-guides and interviewers so that they can adequately represent and inform prospective students.
- Quantitative assessment of students in the preclinical years allows students adequate time to review and master material prior to assessment.
- Students knowing in advance the dates and times they will be quantitatively assessed (and over what material they would be assessed).

MSEC thanked the student representatives for bringing their concerns forward to MSEC, but concluded that the chief concerns will take some time for MSEC to review and cannot be resolved today.

*The Power Point presentation delivered by student representatives is shared with MSEC members via a One Drive document storage option.*

#### **8. Discussion: Course/Clerkship Evaluations Narrative Comments**

Dr. Olive referenced Agenda Item #6 and MSEC discussion/recommendation for a student committee to review student evaluations of courses and faculty. In the past several months, there has been discussion about the student comments of course and faculty that have been less than professional. Discussion with student representatives has led to a proposal for a student committee to review and strike received student comments that are considered non-professional and student comments from a course and/or faculty evaluation before it is sent to the course director and/or faculty.

Dr. Olive will follow-up with formalizing a process that allows the forming of a committee of class officers and OSR representatives to review student comments and edit as needed in an effort to provide a summary of comments back to the course director and faculty that is more constructive and professional.

#### **9. Review: Content Report- End of Life Care – Tabled to October 16, 2018**

The meeting adjourned at 6:10 p.m.

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### **MSEC Meeting Documents**

MSEC Members have access to the meeting documents identified above through a shared One Drive document storage option made available with their ETSU Email account and login.

Quick access to the files can be made by clicking on: [https://etsu365-my.sharepoint.com/personal/mckinley\\_etsu\\_edu/\\_layouts/15/onedrive.aspx?id=%2Fpersonal%2Fmckinley%5Fetsu%5Fedu%2FDocuments%2FMSEC%20Meeting%20Documents](https://etsu365-my.sharepoint.com/personal/mckinley_etsu_edu/_layouts/15/onedrive.aspx?id=%2Fpersonal%2Fmckinley%5Fetsu%5Fedu%2FDocuments%2FMSEC%20Meeting%20Documents)

If you are unable to access the One Drive link or have not set up your One Drive contact:

Matthew Carroll, Instructional Design  
and Technology Manager  
[CARROLL@etsu.edu](mailto:CARROLL@etsu.edu) / 423-439-2407

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### **MSEC Meeting Dates 2018-2019: \* NOT 3rd Tuesday – Locations to be determined**

October 16 – Retreat – 11:30 am-5:00 pm – C003

November 13 – 3:30-6:00 pm\*

December 11 – 3:30-6:00 pm\*

January 8, 2019 – Retreat – 11:30 am-5:00 pm

February 19 – 3:30-6:00 pm

March 19 – 3:30-6:00 pm

April 16 – 3:30-6:00 pm

May 21 – 3:30-6:00 pm

June 11– Retreat 11:30 am-3:30 pm\*

June 11 - Annual Meeting - 3:30-5:00 pm\*

**MSEC Meeting Dates for 2019-2020 are being finalized.**