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Medical Student Education Committee Minutes

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11-2-2021

### 2021 November 2 - Medical Student Education Committee Minutes

Medical Student Education Committee, East Tennessee State University

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The Medical Student Education Committee (MSEC) of the Quillen College of Medicine met on Tuesday, November 2, 2021 via Zoom meeting.

### Attendance

<u>Faculty Members</u>	<u>Subcommittee Chairs</u>
Ivy Click, EdD, Chair	James Denham, MD, MBA, FCAP
Caroline Abercrombie, MD	
Martha Bird, MD	<u>Academic Affairs Staff</u>
Thomas Ecay, PhD	Kortni Lindsay, MS, Staff
Jennifer Hall, PhD	Mariela McCandless, MPH, Staff
Russell Hayman, PhD	Aneida Skeens, BSIS, CAP-OM, Staff
Jon Jones, MD	
Paul Monaco, PhD	<u>Guests</u>
Antonio Rusinol, PhD	Susan Austin, MA, BS
	Earl Brown, MD
<u>Student Members</u>	Leon Dumas, MMED
RJ Black, M3	Tom Kwasigroch, PhD
Helen Mistler, M1	Lindsey Henson, MD
	Jerry Mullersman, MD
<u>Ex Officio Voting Members</u>	Diego Rodriguez-Gil, PhD
Deidre Pierce, MD	Karen Schetzina, MD
Robert Schoborg, PhD	Tory Street, AD
Amanda Stoltz, MD	
Rachel Walden, MLIS	

### Meeting Minutes

#### 1. Approve: Minutes from the MSEC October 19, 2021 Retreat Meeting.

Dr. Click opened the meeting at 3:31 p.m. and asked for comments/updates to the October 19, 2021 Retreat meeting minutes, which were distributed with the MSEC meeting reminder.

**A motion was made to accept the October 19, 2021 Retreat minutes and seconded. MSEC approved the motion.**

*The MSEC Retreat minutes for October 19, 2021 are shared with MSEC Members via Microsoft Teams document storage.*

**Announcements:**

- Faculty Development
  - Getting Involved: Steps to National Involvement – November 17, 2021 at 12:15 pm
    - Panel discussion with: Dr. Beth Anne Fox, Dr. Reid Blackwelder, Dr. Michelle Duffourc, Dr. Robert Means, Dr. Ken Olive, and Dr. Diego Rodriguez-Gil
- Book Club Discussion
  - January 12, 2022 at 4:30 pm
    - *Distracted* by James Lang

**2. Report: Outcomes Subcommittee**

*Please see the Outcomes Subcommittee Measures Report for additional information.*

Dr. James Denham presented the Outcomes Subcommittee report from their October 27, 2021 meeting. Dr. Denham noted that nine benchmarks were met. Dr. Denham stated the Personal and Professional Development 1 benchmark was being monitored as it was missed the previous year. Since the benchmark has now been met (92.1%), Dr. Denham stated the Outcomes Subcommittee recommended that it no longer be monitored.

Dr. Denham also noted that Neuroscience and Neurology were identified as not meeting Program Benchmark 2 on the 2021 GQ and the Outcomes Subcommittee recommended that the Phase Review Subcommittee review these areas. Dr. Denham stated that the Phase Review Subcommittee is scheduled to meet in January 2022 and hoped to have follow up information for the next Outcomes Subcommittee meeting in 2022.

Dr. Denham noted that three benchmarks were not met:

- Systems-Based Practice 3
  - Program Directors rated PGY-I residents at 1.79 in having the ability to identify patient safety system failures and contribute to a culture of safety and improvement/error reporting.
  - Outcomes Subcommittee Recommendations/Comments:
    - The Outcomes Subcommittee recommends that MSEC ensure Systems-Based Practice is incorporated in the TRAILS curriculum.
    - The Outcomes Subcommittee would like to monitor this benchmark to see if a trend is established or if this was an outlier year. Follow up will be in one year when data is available for the 2021-22 academic year.
    - The Outcomes Subcommittee recommends that MSEC update this benchmark to match the formatting from the other benchmarks related to the Residency Program Director's Evaluation. This would allow the subcommittee to pull an overall percentage.
- Systems-Based Practice 4
  - PGY-I Residents averaged 2.10, which falls between the ratings of 2 (approaching) and 3 (well prepared) in having the ability to identify patient safety system failures and contribute to a culture of safety and improvement/error reporting.
  - Outcomes Subcommittee Recommendations/Comments:
    - The Outcomes Subcommittee would like to monitor this benchmark to see if a trend is established or if this was an outlier year. Follow up will be in one year when data is available for the 2021-22 academic year.

- The Outcomes Subcommittee also recommends this benchmark be updated to pull a percentage.
- Personal and Professional Development 2
  - 87.8% of students reported “agree” or “strongly agree” to being prepared to recognize and address personal stressors and/or academic challenges during medical school.
  - Outcomes Subcommittee Recommendations/Comments:
    - The Outcomes Subcommittee recommends to monitor this benchmark as it has stayed consistent over the last two years. They would like to see if learning communities might help increase this measure next year. The subcommittee recommends follow up in one year when the next set of data is available.
    - The Outcomes Subcommittee also recommends MSEC explore options on how to hire an additional academic counselor or identify further support staff to help students recognize and address stressors.
    - The Outcomes Subcommittee recommends that MSEC look at creating two questions from the elements currently in this benchmark:
      - Question 1: 90% of students will report at least “agree” to being prepared to recognize and address personal stressors during medical school.
      - Question 2: 90% of students will report at least “agree” to being prepared to recognize and address academic challenges during medical school.

Dr. Click noted that if the Systems-Based Practice 3 and 4 benchmarks had been using the percentage rating instead of the current rating system, that the benchmarks would have met expectations.

Dr. Jones asked where patient safety was specifically addressed in the curriculum. MSEC members deliberated on this and discussed areas where it was covered. Dr. Click commented that following up with CIS would be one way to identify where and how this content is being addressed. Dr. Click noted that reviewing the recommendations CIS made in their last report and how they could be modified as we move forward with the TRAILS curriculum would be an important thing to do. After much discussion, Dr. Click stated she would follow up with Dr. Abercrombie and CIS specifically on this issue.

MSEC recommended that the Office of Student Affairs explore options of hiring additional academic counselors. Dr. Deidre Pierce, who is the Associate Dean for Student Affairs, noted that they are currently working on hiring another academic counselor. Dr. Click asked that Dr. Pierce update MSEC on the status of a new academic counselor at a future meeting.

**A motion was made to accept the Outcomes Subcommittee report and all recommendations as presented and seconded. MSEC discussed and approved the motion.**

*The presented Outcomes Subcommittee Report document is shared with MSEC Members via Microsoft Teams document storage.*

### 3. Discussion: Curriculum Transformation

*Please see the Doctoring I presentation slides and Word documents for additional information.*

#### Doctoring I

Dr. Mullersman presented a progress report on the development of the Doctoring course for the first semester. Dr. Mullersman noted that the name of the first course will be Doctoring TRAILS: Walk One with the second and third courses in the series being Tour Two and Trek Tres respectively.

Dr. Mullersman reviewed the current Doctoring I content and noted some challenges of transitioning this content into the TRAILS curriculum.

- Reduced calendar time
  - Doctoring I (two semesters)
  - Doctoring TRAILS: Walk One (only one semester)
- Much reduced weekly class time
  - Thursday afternoon (four hours) for clinical skills
  - Every third Friday morning (two hours) for SPECTRM

Dr. Mullersman presented a typical weekly schedule for the pre-clerkship phase noting there would be 20-24 hours of scheduled contact time per week and afternoon time for Learning Communities every four to six weeks. Dr. Mullersman noted that the two interprofessional course activities, Communication Skills and Interprofessional Experience, will remain in the TRAILS curriculum. Dr. Mullersman stated they are working on addressing how Physical Exam Skills will be distributed amongst the sessions of Communication Skills and Interprofessional Experience and working to align with the Anatomy being covered during the new Foundations of Medical Knowledge course. Dr. Mullersman noted that for SPECTRM, there would be some time in Walk One where these can be covered. Dr. Mullersman commented on some content that would be moved or changed in the TRAILS curriculum. Dr. Mullersman stated that Case-Based Learning would be moving to the basic science course and would not be part of Doctoring. In the fall semester, Clinical Preceptorships will be very limited, if at all. Integrated Grand Rounds (IGR) will need some changes as there will not be consistent opportunities for the M1 and M2 students to participate in IGR and noted that IGR may have to occur outside of the normal schedule. Dr. Mullersman noted that Career Exploration will be moving to Learning Communities.

#### **No voting action required.**

*The Doctoring I PowerPoint and Word presentation documents are shared with MSEC Members via Microsoft Teams document storage.*

#### LCME Notification on New Curriculum

*Please see the LCME Major Curriculum Modification Notification PowerPoint presentation slides for additional information.*

Dr. Click gave an update on the notification that is being submitted to LCME regarding the new curriculum. The Major Curriculum Modification Notification form will be submitted to LCME by December 1, 2021. Dr. Click stated there are only four questions on the form:

1. Summarize the structure of the proposed curriculum modification, including the expected goals and how they will be evaluated. (Include a curriculum schematic as attachment)
2. Summarize the methods of instruction and assessment and the expected learning outcomes for revised curriculum.
3. Complete the following table with the planned student enrollment for each of the first four years the proposed curriculum will be in effect:
4. Summarize any specific/additional resources that will be needed for the change, including faculty, IT, educational space, clinical resources, and funding. Summarize the availability of such resources to support the change.

Dr. Click noted all the work that has been done, to this point, has allowed her to take the proposed curriculum changes and complete the LCME form. Dr. Click stated she laid out the structure so it responds to the corresponding goals. Dr. Click noted the proposed curriculum changes in the report were those discussed and approved by MSEC to this point.

**No voting action required.**

*The presentation slides for the LCME Major Curriculum Modification Notification document is shared with MSEC Members via Microsoft Teams document storage.*

#### **4. Report: LCME Status Report**

*Please see the LCME Status Report II PowerPoint presentation slides for additional data.*

Dr. Click presented a report on the LCME Status Report II due to LCME by December 1, 2021. Dr. Click noted that the status report we submitted to LCME in November 2020 resulted in several Elements still being found as satisfactory with a need for monitoring and thus, another status report was required by LCME. These Elements include:

1. Element 7.1 Biomedical, Behavioral, Social Sciences
2. Element 8.1 Curricular Management
3. Element 8.3 Curricular Design, Review, Revision/Content Monitoring
4. Element 8.4 Evaluation of Educational Program Outcomes
5. Element 9.8 Fair and Timely Summative Assessment

Dr. Click reviewed the data that will be submitted to LCME and noted that the M1 student dissatisfaction ratings were under 15% for general course organization, quality of teaching, and overall course quality for the 2020-21 academic year. Dr. Click commented that the M2 student dissatisfaction for general course organization, quality of teaching, and overall course quality for the 2020-21 academic year did show Clinical Neuroscience and Introduction to Clinical Psychiatry over 15% rating (25.0 and 33.3 respectively) but noted Clinical Neuroscience especially has made great improvement from previous years.

LCME requested data for the 2021-22 academic year, but there is minimal data available currently and this will be noted in the report.

**No voting action required.**

*The presentation slides for the LCME Status Report II document is shared with MSEC Members via Microsoft Teams document storage.*

The MSEC meeting adjourned at 5:01 p.m.

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### **MSEC Meeting Documents**

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

**If you are unable to access Microsoft Teams MSEC Team please contact: Aneida Skeens at: [skeensal@etsu.edu](mailto:skeensal@etsu.edu). Telephone contact is: 423-439-6233.**

### **MSEC Meeting Dates 2021-2022: (Zoom meetings unless noted)**

July 20, 2021 – 3:30 – 6:00 pm

August 17 – 3:30-6:00 pm

September 21 – 3:30-6:00 pm

October 19 – Retreat – 12:00 pm-5:00 pm

November 2 – 3:30 – 5:00 pm\*

November 16 – 3:30-6:00 pm

December 14 – 3:30-6:00 pm\*

January 18, 2022 Retreat – 11:30 am-5:00 pm (In-person meeting)

February 15 – 3:30-6:00 pm

March 15 – 3:30-6:00 pm

April 19 – 3:30-6:00 pm

May 17 – 3:30-6:00 pm

June 21 - Retreat -11:30 am-3:00 pm (In-person meeting)

June 21 - Annual Meeting - 3:30-5:00 pm (In-person meeting)