

**UPSOM Curriculum Committee  
Minutes of the 447th Meeting  
August 16, 2021**

Jason Rosenstock, MD, Chair  
Bill Yates, PhD, Vice-Chair

Business of the Curriculum Committee on August 16, 2021

<b>Motion</b>	<b>Vote Tally</b>	<b>Approved?</b>
Approval of Minutes from the August 2 meeting	13 Yes, 0 No	YES

**Voting Members Present:** A. Brown, MD; A. McCormick, MD, FAAP; A. Doshi; B. O'Donnell, MD; C. Yanta, MD; E. Ufomata, MD, MS; G. Hamad, MD, FACS, FASMBS; H. Hohmann, MD; J. Rosenstock, MD; J. Duehr, MS3; K. Ortiz, MS3; L. Knepper, MD; L. Borghesi, PhD; M. DeFrances, MD, PhD; M. Schmidt, PhD; M. Granovetter, MSTP; O. Torres, MD, MS; R. Schuchert, MD; R. Maier, MD, MA; S. Herrle, MD, MS; S. Truschel, PhD; T. Bui, MD

**Ex-Officio Members Present:** A. Gonzaga, MD, MS; A. Thompson, MD, MHCPM; C. Pettigrew, EdD; C. Lance-Jones, PhD; P. Veldkamp, MD, MS

**Invited Colleagues and Guests:** A. Biller, MD; A. Shoukry, MD; A. Strong; A. Serra, MD, MPH; A. Van Cott; B. Civi; B. Mclvor, MD, FASA; C. Pacella, MD; D. DiNardo, MD, MS; E. Reis, MD, FAAP; F. Modugno, MS, PhD, MPH; G. Perez, MD; G. Cooper, MD, PhD; Greg Null, MA; H. Cheng, MD, MPH, MS; J. Suyama, MD, FACEP; J. Maier, MD, PhD; K. Scott, MS; K. Maietta; M. Elnicki, MD; M. Sergent, MPH; R. Van Deusen, MD, MS; R. Powers, PhD; S. Khan, PhD; S. Gonzalez, MD; S. Templer, DO, FACP, FIDSA; W. Walker, PhD

**All members and guests remotely participated.**

Jason Rosenstock, MD opened the meeting at 4:00pm.

A motion to approve the minutes of the 446th meeting of the Curriculum Committee was brought before the Curriculum Committee. The minutes were APPROVED.

**Standing Committees and Threads**

**CCES:** CCES has reviewed the MS1 Student Report delivered to the Curriculum Committee during a previous meeting, and created action plans to respond to suggestions, especially around lecture delivery, exam reviews, practice questions, and PBLs. CCES also is reviewing AAMC GQ benchmarking data, which will be shared with CCQI, curricular leaders, and others who will work to develop response plans.

**CCQI:** LCME monitoring report was submitted Monday. LCME will review the report in October. GQ data was released in July. CCQI is reviewing the GQ data that runs through the seven domains. Some strong points include 93% satisfaction with the quality of PittMed medical education, 95% confidence in clinical skills required to begin residency, 93% satisfaction with school's work in fostering and nurturing development in medical students as future physicians.

**Social Medicine:** No report this week.

**Content Change Request**

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None.

**Curriculum Reform Update**

Dr. Drain gave the third quarterly update on Curriculum Reform. An overview of the process, timeline, and members was reviewed. Two major components of the curriculum were identified: Foundations (15 months) and Clerkships and Beyond (30 months). Foundations would end in December of the second year. Learning-teaching format will change from heavy didactics to case-based education, with pre-class formative assessments, in-class active small group workshops, and post-class reflection. Longitudinal dedicated educators program are a major change to how the curriculum will be taught. Not all of the curriculum will be taught in-person.

Flex weeks were introduced. No required activities will be scheduled during flex weeks. The student can work on scholarly activities, self-care, remediation, vacation, etc. Flex weeks will sit at mid-point and at natural breaks between components. For MS1, Dean's Summer Research Program (DSRP) will be eight weeks plus two weeks of vacation. For those opting out of DSRP, 10 weeks of summer break will be granted.

Step 1 dedicated study time may occur during December of the second year (immediately following Thanksgiving flex week). Step 2CK will last four weeks and will sit after core clerkships, but before ERAS. This may also be a floating flex month.

Blocks will continue and include Doctoring (Introduction to Patient Care; and Patient, Physician, and Society), Keystone Fundamentals, Evidence and Discovery (Evidence-based Medicine Fundamentals and Applied, Investigation and Discovery, DSRP, and Longitudinal Research Project), Organ Systems, and Core Clerkships.

A proposed schedule for Foundations courses was reviewed. Once Step 1 is complete, January would begin with Preclerkship week(s) and then the core clerkships. Once core clerkships are complete, students will take acting internship, a possible longitudinal integrated clerkship, and a variety of electives.

Threads were identified as integral points of critical connections by identifying and developing threads through curricular components. This will include a Thread Guide that will include at least two hours every two weeks to cover threads. Tracks, looked upon like undergraduate minors, will be optional and will link areas of concentration, scholarly project, and other activities. It is recommended that tracks are a highlight of the MSPE letter. Possible tracks may include Primary care, Innovator, Leader, among others.

Learning assessment and program evaluation recommendations include a working group on remediation, learning objective mapping, and progress testing. Pre- and post- evaluation of the curriculum are planned to begin this fall.

The Steering Subcommittee will submit their final planning report to the Curriculum Committee in December 2021.

Members of the committee discussed longitudinal educator logistics.

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**Professional Enrichment Courses (PEC) Review**

Dr. Gonzalez reviewed PECs (formerly known as mini-electives) and its main goal to explore content that is not covered in the core curriculum and is completely voluntary. Since its founding in 2006, over 100 different courses were offered. PECs are open to MS1 and MS2 students only. Traditional and longitudinal PECs were compared.

Course evaluation processes were reviewed. PEC creation processes were reviewed, with emphasis on faculty-driven nature of offerings. For new course offerings, the course director will write up course descriptions, objectives, and summaries of individual sessions.

Pre-Covid-19 challenges include scheduling issues, dueling activities at the same time, self-funding, low enrollment in some courses and waiting lists for others. Demand during 2020-21 skyrocketed to 576 students interested in 44 courses. During Covid, remote opportunities did not work for all courses. Enrollment was reduced to allow for distancing, online scheduling system, and a limit of two/year were some changes and issues made over the last year.

Future plans include adding additional courses to keep up with changing environment of medicine and collaborations with the School of Health Sciences.

**MS2 Class Report**

Medical students Jim Duehr and Kimberly Ortiz reported on the MS2 year. Survey data was shared and covered topics such as studying behaviors, in-person participation, open book exams, and impact of past year's events.

A majority of surveyed MS2s studied for Step 1 for between six and eight weeks. Survey data found Step 1 performance is only marginally influenced by study patterns. When asked about percentage of time spent on-campus during 2020, the majority ranged from 10-20%. Students regretted missing in-person history-taking and physical exam the most. Students were split on preference of in-person Shelf exams. Most students reported using open book exam opportunities. Students were split on the effects of open book exams, with some worries that open book experiences may impact Step 1/Shelf performance and ability to be a good doctor. The vast majority of MS2 students did not recommend open book exams.

MS2 students felt heavily affected due to racial justice, social isolation, family health/safety, and financial anxiety.

A summary was offered and discussion was opened to Members. The medical students were thanked for their data-driven report. The CCES will now take the report to discuss and develop action plans, reporting back to the full committee.

There is no meeting on Labor Day. The next meeting will be held remotely on September 16. Dr. Rosenstock closed the meeting at 5:42pm.

Respectfully submitted by Gregory Null, recording secretary. Approved by Jason Rosenstock, MD.