

**UPSOM Curriculum Committee
Minutes of the 461st Meeting
May 16, 2022**

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

Business of the Curriculum Committee on May 16, 2022

Motion	Vote Tally	Approved?
Approval of Minutes from the May 2 meeting	16 Yes, 0 No	YES
CONTENT CHANGE: Inclusion of verbal de-escalation content in Psychiatry Clerkship	13 Yes, 0 No	YES
Approval of Adult Outpatient Medicine Clerkship report	15 Yes, 0 No	YES

Voting Members Present: A. Brown, MD; A. McCormick, MD, FAAP; A. Doshi, MD; C. Yanta, MD; E. Ufomata, MD, MS; H. Hohmann, MD; J. Waxman, MD, PhD; J. Rosenstock, MD; J. Perkins, MS4; K. Cargill, MS1; L. Knepper, MD; L. Borghesi, PhD; M. DeFrances, MD, PhD; M. Schmidt, PhD; M. Nanni, MS4; O. Torres, MD; P. Drain, PhD; P. Nelson, MS1; R. Maier, MD, MA; S. Herrle, MD, MS; S. Truschel, PhD; T. Bui, MD; T. Weigel, MS3

Ex-Officio Members Present: A. Gonzaga, MD, MS; C. Pettigrew, EdD; C. Lance-Jones, PhD; P. Veldkamp, MD, MS; R. Buranosky, MD, MPH

Invited Colleagues and Guests: A. James, MD, PhD; A. Clark, MD; A. Strong; A. Kohli, MD; C. Spagnoletti, MD, MS; C. Schott, MD, MS, RDMS, FACEP; E. Cunningham, MD; E. Reis, MD; G. Perez, MD; G. Cooper, MD, PhD; Greg Null, MA; H. Cheng, MD, MPH, MS; J. Maier, PhD, MD; J. Szymusiak, MD, MS; K. Scott, MA; K. Maietta, MPPM; L. Shutter, MD, FNCS, FCCM; M. Norman, PhD; M. Nance, MD; M. McNeil, MD, MPH; M. Sergent, MPH; N. Shenai, MD; R. Van Deusen, MD, MS; R. Powers, PhD; R. Turner, MLIS; S. Khan, PhD; S. Templer, DO, FACP, FIDSA; W. Mars, PhD; W. Walker, PhD

All members and guests remotely participated.

Dr. Rosenstock opened the meeting at 4:00pm.

A motion to approve the minutes of the 460th meeting of the Curriculum Committee was brought before the Curriculum Committee. The minutes were APPROVED.

Standing Subcommittees

CCES: Executive Subcommittee continues to meet weekly. Interviews with prospective clerkship directors and the appointments for Adult Inpatient Medicine, OBGYN, and Psychiatry clerkship leadership were completed. Boot camp alternatives and pilot were discussed. This option is for students who are not entering into residency.

Leave of absence policy change was shared with the Committee. This change affects first and second year students and will prohibit a research year within the preclerkship segment. Step 1 must be taken prior to a research year LOA.

CCQI: A review of the past academic year's CQI work was presented to the Committee. Activities completed by the Subcommittee included investigation and monitoring of trip lines, an After Action Review on the change to the remote curriculum due to COVID rates, clarity of duty hour question on

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clerkship evaluations, preparation for LCME monitoring response, distribution of evaluation data at midyear to Clerkship Subcommittee, continuation of review of curriculum mapping, and the addition of two new student members.

Social Medicine Theme update: Dr. Ufomata updated the Committee on weight bias resources and initiatives. Course directors were asked to review. Use of 'patient first' language, elimination of stigmatizing language, deliberate use of various body types images, links to social determinants of health, and strategies were shared.

Content Change

Dr. Rosenstock presented a content change request from the Psychiatry Clerkship. Clerkship leadership ask for inclusion of verbal de-escalation training. Two OSCE cases will be removed: decision-making capacity case and frustrated patient case. Two cases added will include a focus on de-escalation skills in both inpatient and outpatient settings. This initiative will begin June 2022.

A motion to approve the Psychiatry Clerkship content change was brought before the Curriculum Committee. The content change was APPROVED.

ICRE Faculty Development Resources

Dr. Spagnoletti presented details on the ICRE Med Ed Faculty Development program. Mini courses are offered and faculty are encouraged to take as many as they feel will improve their practice. Six completed mini courses will earn a certificate. Topics include curriculum development, effective mentoring, teaching for retention, among others. Modules are four hours/week for four weeks: two hours are asynchronous activities and two hours of synchronous activities. Mini courses are limited to 12 participants. Testimonials were shared. Enrollment and mini course information is available [here](#).

Clerkship Follow-up

Dr. Shenai reviewed discrepancies in three learning environment incident reports. After a meeting with the Office of Learning Environment one was incorrectly assigned to Psychiatry. The remaining two, involving education at clinical sites and expectations on Navigator page, were resolved.

Adult Outpatient Medicine Clerkship (AOMC) Report

Dr. Kohli presented with work of AOMC over the past year. After introducing the AOMC team, clerkship structure (Outpatient Medicine and Outpatient Psychiatry), didactic series linked to NBME content exam content, hybrid OSCE, and the Adult Outpatient NBME Content Exam were reviewed. Clerkship objectives and their links to Education Program Objectives, course outcome, CCQI data, and grading scheme and distribution were presented. NBME content exam data and OSCE information were shared.

Curriculum innovations from the last year include obesity medicine and the addition of nicotine content. A project to widen medical students' access and view of Electronic Medical Record was reviewed and will expand to other clerkships with time. The clerkship also added a new feedback form to improve student feedback, will now allow students the option of choosing their preceptor, and create space for medical student interviewing during the clerkship. Challenges include preceptor recruitment and retention and grade equity between third and fourth year medical students.

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Discussion included standardized patient logistics and peer teaching experiences.

Dr. Rosenstock thanked Dr. Kohli for his work in the clerkship and announced that he will become the Adult Inpatient Medicine Clerkship director in July.

A motion to approve the AOMC Report was brought before the Curriculum Committee. The report was APPROVED.

MS4 Class Report

Fourth year medical students Michelle Nanni and Jonathan Perkins offered their final student report. Results from a class survey produced the following points. The majority of graduating students felt well-prepared by the School's curriculum to enter residency. Students were satisfied with Acting Internship experiences, and desired more surgical subspecialty options. Boot camp experiences varied, but 73% found them helpful/very helpful. Generally students felt that boot camps could be further shortened. Simulation, ACLS, and workshop-style sessions were found most helpful.

Integrated Life Science courses were found to be unnecessary and students questioned the need for the course. Critical Care Medicine ILS were noted as models for future ILS courses. More ILS offerings were also desired. Covid-19 impact perceptions were reviewed. Students felt that additional online electives were helpful and wished for remote electives in topics including health care systems, cost conscious medical care, financial basics, disability medicine, and others.

Discussion included ILS course choice, new ILS courses on horizon, topics of electives, and boot camp integration. Dr. Rosenstock thanked the fourth year curriculum representatives and wished them well in the future.

Curriculum Reform

Dr. Rosenstock reviewed Curriculum Reform voting process. Curriculum Committee members are reminded to review the Phase 2 Curriculum Reform [documents](#). The vote will be on the entire plan, not individual recommendations. Only members get a vote. Fourth year medical student representatives will also vote early, as their graduation is next week. If members cannot vote on June 6, they are urged to reach out to Michelle Sergent to vote in advance.

The next Curriculum Committee meeting is June 6 at 4pm. Dr. Rosenstock closed the meeting at 5:30pm.

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