

**UPSOM Curriculum Committee
Minutes of the 513th Meeting
February 17, 2025**

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

Business of the Curriculum Committee on February 17, 2025

Motion	Vote Tally	Approved?
Approval of Meeting Minutes from 2/03	10 Yes, 0 No	YES
Approval of KF Content Change Request: Adding a New Objective	11 Yes, 0 No	YES
Approval of OB/GYN Clerkship Expansion (e-vote)	16 Yes, 1 No	YES

Voting Members Present: A. Yarkony, MS2; A. McCormick, MD, FAAP; A. Slingerland, MS3; B. Yates, PhD; C. Yanta, MD; E. Egbert, MS1; J. Waxman, MD, PhD; J. Rosenstock, MD; M. DeFrances, MD, PhD; M. Schmidt, PhD; N. Chen, MSTP; N. Agarwal, MD; O. Torres, MD, MS; P. Drain, PhD; R. Schuchert, MD; S. Truschel, PhD; U. Gaffney, MS1; V. Agarwal, MD

Ex-Officio Non-Voting Members: A. Gonzaga, MD, MS; C. Pettigrew, EdD; L. Borghesi, PhD; R. Buranosky, MD, MPH

Invited Colleagues and Guests: A. Brown, MD; A. Shoukry, MD; A. Serra, MD, MPH; A. Young, MLIS; C. Pacella, MD; C. Newman; E. Lovallo, MD; J. Beckel, PhD; K. Maietta, MPPM; M. Elnicki, MD; M. Sergeant, MPH, MSL; M. Wargo; N. Agrawal, MS4; P. Workman, MD; R. Van Deusen, MD, MS; R. Powers, PhD; R. Peterson, MD; T. Bui, MD

All members participated virtually

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

Curriculum Committee members voted to APPROVE meeting minutes from 2/03.

CCES Subcommittee Update

CCES continues to meet weekly. The OB/GYN clerkship expansion plan was approved via an e-vote (16-1), extending the rotation from four to six weeks with clinical and assessment changes. This is timely, as the new clerkship phase begins next Monday. Additionally, final reports from the ILS and ALCE working groups have been received and are under review, with recommendations expected to be shared in April. These updates aim to enhance the Bridges phase.

To help the Curriculum Committee appreciate how it relates to the Offices of Medical Education, the Vice Dean for Education, and Accreditation and CQI, we reviewed overlaps, authority, and accountability.

**Content Change Request: Keystone
Fundamentals**

Dr. Martin Schmidt identified that pharmacology content in the Keystone Fundamentals course was not reflected in its course learning objectives. To address this, he proposed adding a learning objective: "Describe the molecular action of drugs and factors affecting their absorption, distribution, metabolism, and excretion." This aligns the objectives with existing course material, improving clarity for students. Dr. Beckel supported the change, and Dr. Borghesi confirmed the CDC's approval.

Curriculum Committee voted to APPROVE the KF content change request.

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Assessment Schedule Change

Dr. Lisa Borghesi provided an update on adjustments to the MS2 fall exam schedule to alleviate student stress. Previously, students faced a triple summative exam (Psychiatry, Oncology, and PPS3) followed by progress testing the next day. To improve this, Psych and PPS3 will now be paired with a two-week gap before the standalone Oncology summative, allowing more recovery time before progress testing. The new schedule ensures students are better prepared and reduces burnout. Faculty and students support the change, which does not require a vote but aims to enhance student well-being and assessment accuracy.

Clerkship Assessment Form:
Updating Items/Anchors

The key updates in the student assessment form focus on clarity, consistency, and alignment with a criterion-based approach:

1. **Structural Improvements:** The form was revised to clearly align with competency-based evaluation, ensuring that expectations for students are explicit. Competencies such as professionalism and interpersonal communication were previously grouped but are now distinctly separated for clarity.
2. **AAMC Alignment:** Initially, the form was held pending potential adoption of Entrustable Professional Activities (EPAs) by the AAMC. Instead, the AAMC recommended using competency domains, which were integrated into the revised form, aligning with existing frameworks in medical education.
3. **Competency Breakdown:** Evaluations now include clear milestone progressions (e.g., unacceptable to outstanding) with a structured approach to grading. Components such as medical knowledge, patient care, professionalism, and self-improvement have been explicitly defined with observable behaviors.
4. **Standardization Across Clerkships:** The updated form ensures uniformity across different clerkships, facilitating transparent grading and student feedback. This consistency allows faculty to use the same assessment criteria regardless of the duration of their interaction with a student.
5. **Feedback and Transparency:** The form now differentiates between formative and summative feedback, ensuring students receive constructive guidance without faculty fearing the direct impact on final grades. Additionally, forms will be immediately visible to students upon submission.
6. **Simplified Rating Scale:** While a novice-to-expert scale was considered, it was deemed too complex for faculty unfamiliar with the new system. Instead, the traditional “unacceptable-acceptable” format remains for now to maintain continuity.
7. **Assessment Impact:** The form itself does not alter the weight of workplace-based assessments in overall grading (e.g., if a clerkship weighted these at 60%, it remains the same). However, the method of assessment is now expected to be more valid, transparent, and equitable.

Overall, the changes aim to improve assessment accuracy, make feedback more actionable, and create a fairer evaluation system for medical students.

Colloquium Follow-Up: Artificial
Intelligence

The committee discussed the recent Curriculum Colloquium on artificial intelligence in medical education, particularly how students are utilizing AI tools for learning. Many are interested in exploring this further as policies and procedures become clearer.

The next meeting is on Monday, March 3rd at 4PM. Dr. Rosenstock closed the meeting at 4:54PM.

Respectfully submitted by Michelle Sergent, recording secretary.