

**UPSOM CURRICULUM COMMITTEE
MEETING MINUTES
MAY 6, 2019**

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

Members present: Vikas Argawal, MD, Aaron Brown, MD, Thuy Bui, MD, Marie DeFrances, MD, PhD, Donald DeFranco, PhD, Ankur Doshi, MD, Joan Harvey, MD, Scott Herrle, MD, MS, Heather Hohmann, MD, Cynthia Lance-Jones, PhD, John Mahoney, MD, Melissa McNeil, MD, Brigid O'Donnell, MD, Jonathan Parkins, MS1, Beth Piraino, MD, Martin Schmidt, PhD, Eloho Ufomata, MD, Jake Waxman, MD, PhD, Claire Yanta, MD

Invited Colleagues: John Maier, MD, PhD, Robert Powers, PhD, Lisa Borghesi, PhD, Reed Van Deusen, MD, Stephanie Gonzalez, MD, Erica Zyznewsky, MD, Steve Truschel, MD, John Fowler, MD, Alaina James, MD, Evelyn Reis, MD, Vaishali Schuchert, MD, Beth Piraino, MD, Tom Painter, MD, Mike Elnicki, MD, Joe Yanta, MD

Next meeting: Monday, June 3, 2019; 4:00--5:30

Jason Rosenstock, MD, UPSOM Curriculum Committee Chair convened the meeting at 4:00 PM. This was the 401st meeting of the Standing Curriculum Committee since its first meeting on November 26, 1991.

NEW BUSINESS – MS1-2 SCHEDULE UPDATE

Drs. Lance-Jones and Van Deusen presented a new schedule change proposal for the Committee to consider and vote. This proposal would create a change in the weekly schedule of the Patient Care Block courses. The schedule proposes the MS1 IPE (Intro to Physical Exam) small groups and the MS2, APE (Advanced Physical Examination) and CE (Clinical Experiences) course sessions be moved from Friday mornings to Tuesday mornings. This switches the MS1 and MS2s' independent learning day from Tuesdays to Fridays.

The Curriculum Committee voted and agreed unanimously to the schedule change.

NEW BUSINESS – SPECIALTY CARE CLERKSHIP REPORT

Dr. Stephanie Gonzalez presented an update on the SCC. The Specialty Care Clerkship is a four week clerkship designed to provide students the opportunity to see patients in specialty-care settings at various locations. Students rotate for one week each through the specialties of Adult Emergency Medicine, Pediatric Emergency Medicine, Otolaryngology and Ophthalmology. They work with both residents and faculty in patient encounters and also have a mix of structured didactics, workshops, VpSim cases and OR time. Grading and evaluation includes a final exam (20%), clinical performance (60%), professionalism (10%) and the learning log (10%). The clerkship is graded as Honors, High Pass, Pass, Low Pass, or Fail.

Dr. Gonzalez noted the clerkship's strong points are in independent patient assessments and plan development, procedural experience, providing a variety of clinical conditions, strong clinical preceptors and a respectful learning environment. Areas for improvement/challenges included student concerns that they didn't like having a new clinical site and team each week. They also didn't care for split days with didactics in the morning and an EM shift in the evening and also shadowing. A smaller percentage of students reported that they didn't feel their performance was assessed against the learning objectives or that faculty members provided them with sufficient feedback on their performance.

Recent changes to the clerkship are that didactics are still expected but no longer mandatory. The group will also incorporate and place more emphasis on integration of basic science into lecture material and to focus on development of a dedicated teaching shift in the Adult Emergency Medicine specialty. The

SCC's new and planned projects are revisions, additions and updates to the VpSim cases, increase Mercy Hospital placement for Adult Emergency Medicine, create online content for all of the didactic sessions and appoint new co-directors for Adult and Pediatric Emergency Medicine.

NEW BUSINESS – MS3 CLASS REPORT

The third year Curriculum Committee student representatives (Sandesh Raj, Theresa Reno, Jane Kwon and Almut McDermott) presented an outline covering the MS3 clerkship experience, learning environment, grading/feedback, personal day/absence policy, MS4 scheduling, and readiness for residency applications. The findings are as follows:

- Students are generally satisfied with their 3rd year clerkship experience. Positive learning environment includes having an active role in patient care (less shadowing), open feedback, and being respected on the wards.
- Promote student learning and grading transparency by allowing students to see their clinical evaluations and comments via MedHub.
- To ensure the quality of the feedback to faculties, evaluations should be through MedHub and required for students.
- To make 4th year scheduling easier, move Bootcamp to Period 12.5 to allow for more flexibilities and opportunities to take more clinical electives in the second half of their MS4 year and revisiting ILS course for better placement. Many students feel prepared and have faculty support for the residency application process.
- Provide better communication/clarification on personal (flex) days – revisit the limitation on the use of personal days (half-days, blackout dates).

The student representatives listed and thanked specific faculty and residents who enabled them to have a very positive MS3 experience.

ANNOUNCEMENTS

Due to graduation, the May 20, 2019 meeting is cancelled.

The meeting adjourned at 5:30 p.m. All reports presented were received for filing.

Respectfully submitted by,

Betsy Nero, Recording Secretary

Approved by:

Jason Rosenstock, MD, Chair Curriculum Committee