



**QUILLEN
COLLEGE of MEDICINE**

EAST TENNESSEE STATE UNIVERSITY

The Medical Student Education Committee (MSEC) of the Quillen College of Medicine met for a Meeting on Tuesday, July 11, 2023 via Zoom.

Attendance

<u>FACULTY MEMBERS</u>	<u>EX OFFICIO NON-VOTING MEMBERS</u>
Ivy Click, EdD, MSEC Chair	Beth Anne Fox, MD, Vice Dean for Academic Affairs
Caroline Abercrombie, MD	Ken Olive, MD, Assoc Dean for Accreditation Compliance
Martha Bird, MD	
Jean Daniels, PhD	<u>SUBCOMMITTEE CHAIRS</u>
Thomas Ecay, PhD	Michael Kruppa, PhD
Russell Hayman, PhD	
Paul Monaco, PhD	<u>ACADEMIC AFFAIRS STAFF</u>
Jason Moore, MD	Kortni Dolinger, MS, Staff
Jerry Mullersman, MD	Mariela McCandless, MPH, Staff
Antonio Rusiñol, PhD	Aneida Skeens, MPS, Staff
Amanda Stoltz, MD	
	<u>GUESTS</u>
<u>STUDENT MEMBERS</u>	Earl Brown, MD
Michael Jacobs, M2	Michelle Duffourc, PhD
	Amy Johnson, EdD
<u>EX OFFICIO VOTING MEMBERS</u>	Deidre Johnson, EdD
Deidre Pierce, MD	Ryan Landis, MD
Melissa Robinson, MD	Robert T. Means, Jr., MD
Robert Schoborg, PhD	Sarah Orick
Rachel Walden, MLIS	Tory Street, EdD
	Doug Thewke, PhD

Meeting Minutes

Dr. Click opened the meeting at 3:30 pm.

Announcements:

- Faculty Development
 - A recording is available for the session on TBL and JiTT
- Working Group for TRAILS Assessment
 - Dr. James Denham
 - Dr. Kelly Karpa
 - Dr. Ken Olive
 - Dr. Rob Schoborg
 - Dr. Doug Thewke
- UWORLD will be extended for 18 months for the M1 and M3 students.
- Welcome Dr. Deidre Johnson!

Consent Agenda Items:

- a. Item 1 – Approval: June 20, 2023 Retreat and Annual Meeting Minutes
- b. Item 2 – Approval: M1/M2 Review Subcommittee Report
 - i. Pharmacology
- c. Item 3 – Approval: Phase Review Recommendations
 - i. Pre-Clerkship Items #1, 2, 3, 5, and 7
 - ii. Clerkship Item #3

A motion was made to adopt and approve all items in the consent agenda as presented. MSEC approved the motion.

The MSEC Consent Agenda Items are shared with MSEC Members via Microsoft Teams document storage.

Action Agenda Items

1. Report: M3 Duty Hours

Kortni presented the M3 Duty Hours report for the 2022-23 AY. Kortni stated this report is presented to MSEC annually for their review to show that students are not working over 80 hours average over 4 weeks with one-week averages being well below the 80 hours. This report pertains to LCME Element 8.8 Monitoring Student Time.

No voting action required.

The presented M3 Duty Hours report document is shared with MSEC Members via Microsoft Teams document storage.

2. Report: M3 Grade Submission Report

Kortni presented the M3 Grade Submission report for the 2022-23 AY. Kortni stated this report is also presented to MSEC on an annual basis. Kortni noted this report pertains to LCME Element 9.8 Fair and Timely Summative Assessment stating that final grades are available within six weeks of the end of the course or clerkship. Kortni stated she tracks this for the M3 clerkships throughout the year and for the 2022-23 AY, we were well within the 42 days with the average number of days at 26 and average number of weeks at 3.7. Kortni stated that they encourage clerkships to submit grades at the 21-day mark. Kortni stated that with the move to the Leo curriculum management system this past year, the final composite process is a lot different and feels with time, these numbers will get even better. Dr. Click commented that even with the change to Leo that the numbers look better than we have seen in the past.

No voting action required.

The presented M3 Grade Submission Report is shared with MSEC Members via Microsoft Teams document storage.

3. Approval: M4 Elective – Pediatric Rheumatology

Kortni presented the proposal for the M4 Pediatric Rheumatology elective. Kortni stated the rotation director will be Dr. Ashley Blaske, who treats both adult and pediatric patients. Kortni stated that students would be split 50/50 seeing pediatric patients and adult patients. The elective is four weeks in duration and will be offered based on her availability and schedule. There will be shared spots so clerkship students will also be able to use this as a subspecialty rotation during that clerkship. There will be one student allowed at a given time. The elective will be 100% ambulatory and will be located in her clinic office.

Dr. Click commented that calling it a pediatric rheumatology elective is a bit of a misnomer. Kortni agreed and said the title would need to be changed since the elective will be both adult and pediatric rheumatology. Dr. Click suggested that the name be changed to Peds/Adult Rheumatology Elective. Dr. Olive commented that the name might be called Med/Peds Rheumatology since this is a commonly accepted specialty abbreviation. Kortni noted that Dr. Blaske was not able to be at the MSEC meeting this afternoon and stated she would be glad to take any questions back to her.

A motion was made to approve the M4 rheumatology elective with the name changed to Med/Peds Rheumatology Elective and seconded. MSEC discussed and approved the motion.

The presented M4 rheumatology elective document is shared with MSEC Members via Microsoft Teams document storage.

4. Approval: M1/M2 Review Subcommittee

Introduction to Clinical Psychiatry

Please see the Introduction to Clinical Psychiatry Annual Review Report for additional data.

Dr. Kruppa presented a review for the Introduction to Clinical Psychiatry Annual course. Dr. Jameson Hirsch is the course director. The reviewers were Dr. Melissa Robinson and William Anderson Millar, M3.

- Goals, Outcomes, and Objectives: **Met expectations.**
- Content, Delivery, and Environment: Student satisfaction with educational methods (84.2%) **met expectations.** It was noted that while this rating has decreased from the 2021-22 AY, the methods will be changed so drastically due to the in-person TRAILS format, that no other specific changes are recommended. The learning environment (100%) and course content integration (86.8%) **exceeded expectations.**
- Assessment, Feedback, and Grading: **Met expectations.** There is no narrative assessment required for this course.
- Educational Outcomes: Grade breakdown **exceeded expectations** with a 100% pass rate. An NBME customized exam was used.
- Student Feedback: Student satisfaction with overall course quality (86.6%) and teaching quality (82.9%) **met expectations.** Course organization (92.1%) **exceeded expectations.** There were no instructors who received a score below 3.0, which **met expectations.**
- Previous Reviews: There were no previous recommendations for this course.

Strengths of the Course

- Student Comments:
 - The reviewers agree with the course director's summary that "Students reported numerous strong elements during their course experience, including organization and variety of learning materials, self-paced learning, breadth and depth of material, online and asynchronous format, and opportunity to engage in an SP diagnostic interview."

Weaknesses of the Course

- Student Comments:
 - The reviewers agree with the Course Director's summary that "Despite many strengths, students identified several areas of the course that could have benefitted from improvement, including use of AMBOSS and NBME-style questions, more lectures and guidance from the instructor, increased use of interactive learning strategies, greater synchrony between course materials and quiz items, and enhanced instruction on and practice for the SP interview experience."
- Comments from Course Director:

- o I do not disagree with the constructive criticism that the students provided. As a largely self-guided, online course, there was less engagement between me, as instructor, and the students. In addition, because this was the final iteration of this legacy course, I did not put forth an extensive amount of effort to revise the course content and delivery methodology. Yet, even with these deficits, course satisfaction levels were acceptable, and I will strive to implement student feedback as I move forward with redesigning this course for implementation within the TRAILS Curriculum.

Recommended Changes to the Course Director: The reviewers note that the course director has already made plans to incorporate student feedback into the new TRAILS curriculum. As noted in the 2022 review, care should be taken to ensure that the content is adapted into the TRAILS curriculum in such a way that it results in improved performance on national standard tests. There had previously been a decrease in the percent of students scoring at or above the national mean, but no comparison can be made for this year because the exam changed from shelf to CAS.

Recommendations for MSEC: None at this time.

Dr. Olive commented that even though the Introduction to Clinical Psychiatry's CQI Plan was not before the committee at this point in time, given that the course met expectations in every category, we can consider that the CQI Plan met its goals.

Both Dr. Olive and Dr. Click congratulated Dr. Hirsch on taking over a course with significant issues and turning the course around.

A motion was made to accept the M1/M2 Review Subcommittee Introduction to Clinical Psychiatry course report as presented and seconded. MSEC discussed and approved the motion.

The presented Introduction to Clinical Psychiatry course review document is shared with MSEC Members via Microsoft Teams document storage.

5. Follow-up/Approval: Phase Review Subcommittee Recommendations

Please see Dr. Click's PowerPoint presentation slides for additional information.

Dr. Click stated that during the Annual MSEC meeting on June 20, 2023, breakout groups worked on different recommendations proposed by the Phase Review Subcommittee. Most of the recommendations were included on the consent agenda, but after feedback from the breakout groups and discussion with others, two of the recommendations were felt to need additional discussion and approval from MSEC.

Those recommendations are:

- Item 4
 - o Require course directors to review their content in light of USMLE content outlines and recent past performance to ensure that relevant content is covered in their courses
 - o Proposal: Course directors will submit an annual report documenting the following:
 - The date of the meeting of all course faculty where the following tasks are performed:
 - Review USMLE content outline and frequency of items on Step exams
 - Recent student performance
 - Any response to review – content reorganization, content exclusions/inclusions, percent time spent on other areas

- Course directors will document on the annual self-study when the meeting took place or when it is scheduled

Dr. Hayman asked what was meant by the recent student performance bullet. Dr. Olive stated that the intent of the Phase Review Subcommittee was that course directors would look at the last Step 1 report to see how the performance was in the various disciplines. Dr. Click commented that they are not sure course directors are getting the information on Step 1 performance regularly other than the broad overall information. Dr. Click stated they do have further breakdown of the different content areas, disciplines, and organ symptoms. Dr. Olive stated that the issue just discussed is a process improvement point and realized it has not been occurring as course directors should have been receiving feedback on a regular basis about how students did. Some of the information has been presented to large groups but has not consistently been getting back to course directors, and this is an important part of our process for improvement. Dr. Click stated clarification would be made that it is Step 1 student performance and there would be a document to complete.

Dr. Mullersman commented that providing the Step 1 information to the Doctoring course directors and having them evaluate the information and include on the self-study is not an issue. Dr. Mullersman stated the issue might be having a meeting with all the course faculty and discuss what is going on relative to the USMLE content outline. Dr. Click asked if it would help to solve this issue if the proposal were to be changed to say a meeting of key course faculty. Dr. Mullersman stated this would make it more practicable. Dr. Click stated a motion could be made to amend the proposal for Item 4 to read as:

- Key faculty will review the USMLE content outline, including frequency of topics on Step exams, with recent Step exam performance and submit a report with any response.

A motion was made to amend the Item 4 proposal to read as “Key course faculty will review the USMLE content outline, including frequency of topics on Step exams, and recent Step 1 exam performance and submit a report with any response to the review” and seconded. MSEC discussed and approved the motion.

- Item 6
 - Consideration should be given to requiring a minimum performance on the end of a course exams to receive passing grades for the course or to increasing the percent contribution of the end of course exam to the overall grade.
 - Proposal: Students must achieve a minimum passing score on a cumulative final exam.
 - Minimum passing scores on the NBME CAS exams will be calculated at or above 2 standard deviations below the source mean difficulty.
 - Students who fail the final exam and have a cumulative passing score in the course will be allowed to retake the exam once but will maintain their original cumulative numeric course score.
 - Students who fail the repeat exam will receive an “F” and will be referred to Student Promotions Committee.

Dr. Click stated that Item 6 was given to all the breakout groups at the annual meeting as it was felt that feedback would be needed the most on this item. Dr. Click stated that after review of all the breakout group data, the above proposal was at the top and noted that this is very in line with what is done with clerkships. Dr. Click stated this would be looked at more closely in the assessment policy, which is the next item on the agenda.

Dr. Ecay asked if any consideration had been given to or any discussion had of when the retake exam should occur. Dr. Click stated that she has proposed in the policy that it be at the discretion of the course director and the Department of Medical Education. Dr. Click stated that the policy may state that the student would continue to the next course and not have to wait to take the exam first and realistically, the best time for them to retake the test would be at the end of the semester. Dr. Fox commented that it should be very similar to what we do with the clerkships and that is retaking exams over break or the student can choose to either do at the next break or at the end of the semester. Kortni commented that for clerkships, a retake session is offered to M3 students the Monday before the holiday break. If it is not possible to retake at that time, it would be during the spring break or at the end of the academic year.

Dr. Rusinol noted that the proposal states two (2) standard deviations below the source mean difficulty and asked how would you calculate the standard deviation of the source difficulty. Dr. Click stated that the standard deviation isn't provided with the source mean difficulty and cannot be calculated because of the nature of the customized exam. You could use the standard deviation from the class mean as a compromise to calculate the passing score from the source mean difficulty. Dr. Rusinol asked if the class mean could be used and stated that when you are using the source mean, it is very arbitrary because course directors are selecting the questions and it depends very much on their level of difficulty when they pick the questions what they will get in that calculation and is very concerned about that. Dr. Mullersman commented that using two (2) standard deviations below the class mean to calculate the passing score would mean that some students would always fail. Dr. Olive commented that when the Phase Review Subcommittee recommended we do something along these lines, they did not recommend they do this specifically. Dr. Olive noted there were two concerns, one being anecdotally, they were hearing from the course directors about students saying they are not studying for the final because they cannot fail the course based on their performance and second, combining that with us not doing well on Step 1 for the last two years. Dr. Olive noted that we now have a new curriculum, but rather than wait another year and see what happens, the subcommittee felt there were things that could be done to try and elevate student performance to improve the probability of succeeding on Step 1. Dr. Olive also noted that he would not put the times for when you can take the makeup exams in policy because the course directors and the Office of Academic Affairs need the flexibility to think about what makes sense in a given situation. Dr. Olive stated you do not want students studying for a remediation exam when they are taking another course and then not be successful in that other course.

A lengthy discussion ensued regarding what the passing score should be and how it would be determined. Dr. Hayman made a motion that a student must achieve a minimum passing score on the final exam in order to pass the course and if they do not pass, they will be allowed one retake of the final exam. Following a second to the motion, MSEC discussed the issue further. Dr. Stoltz called the question and MSEC voted on the motion.

A motion was made that the student must achieve a minimum passing score on the final exam in order to pass the course and if the student does not pass, they would have one retake and seconded. MSEC discussed the motion and the motion did not pass.

The presented Phase Review Subcommittee recommendations document is shared with MSEC Members via Microsoft Teams document storage.

Upon failure of the motion to pass, Dr. Click asked if Dr. Hayman and other volunteers would be willing to come back with a proposal. Dr. Click stated there has been a lot of discussion that included changing the percentage of the exams and the rigor of the daily questions and grade inflation. Dr. Click stated she would like for people to contact her and let her know if they would like to volunteer to be on a working group who will come back with a proposal to address this recommendation. Dr. Fox asked about the feasibility of having a proposal back and approved by the time students begin class in a week and Dr. Click stated it would be very difficult to do so. Dr. Click stated that course directors could make certain decisions around

the percentage of the exams, but we could not make a policy change in time. Dr. Monaco stated that something could be done with the weight of the final exam and asked if this should be consistent from course to course. Dr. Click stated it should be depending on the length of the course but does not believe we would have that in time for a policy. Dr. Rusinol stated that the M1 students are not ready to work with NBME questions at the level of Step 1 as this is the first time they will be seeing the material and questions and this is something to keep in mind. Dr. Rusinol stated he did not think the same rules should be applied to all courses. Dr. Ecay asked since this item will not be approved today, could the item be approved in a month and then be applied to other courses throughout the year or would we have to wait an entire year. Dr. Fox stated that it would be more detrimental to the students to change an assessment model in the middle of the year and Dr. Click concurred. Dr. Click stated if there were changes to the percentage of the exams those could be considered. Dr. Click said we could potentially consider something for the next semester. Dr. Monaco commented we are still almost a month away from when the Foundations of Medical Knowledge course begins and felt that the working group could potentially recommend that the final exam be weighted at a higher level and would be consistent across all the courses. Dr. Monaco stated that individual faculty could try and make their in-class daily questions more rigorous or less rigorous but does not feel this is as critical as saying the weight of the in-class material is going to be a certain percent (less than it is now) and the weight of the final exam is going to be a certain percent (more than it is now). Dr. Click stated she agreed and that a special MSEC meeting could be called to address just this issue if enough people could attend.

Dr. Click stated in order to move on to the other agenda items that need to be discussed today, we will ask that the working group come back with a recommendation during a special called MSEC meeting in order to approve the recommendation prior to the Foundations of Medical Knowledge course beginning.

A motion was made to form a working group to propose changes to the Pre-Clerkship Assessment Policy and bring back to MSEC within the next two weeks and seconded. MSEC discussed and approved the motion.

6. Updates: Policies

TRAILS Pre-Clerkship Attendance Policy

Dr. Click presented the TRAILS Pre-Clerkship Attendance policy for MSEC's review and approval of updates made to the sections of Make-up of Missed Activities/Assignments and Consequences of Policy Violations to clarify expectations of completing missed work due to an approved absence or approved unanticipated absence. Dr. Click stated that these clarifications would also be made in course syllabi. Dr. Click stated this was discussed at the TRAILS retreat, and this was the recommendation that rose to the top from feedback presented to her. MSEC discussed the policy updates and felt that changing the word "all" to "individual" in the first sentence under Makeup of Missed Activities/Assignments caused confusion and suggested that it be changed. After discussion, MSEC members felt striking the word "individual" from the sentence would be less confusing.

A motion was made to accept the TRAILS Pre-Clerkship Attendance policy updates as amended and seconded. MSEC discussed and approved the motion.

The presented Phase Review Subcommittee document is shared with MSEC Members via Microsoft Teams document storage.

Pre-Clerkship Assessment Policy

Dr. Click noted that the Pre-Clerkship Assessment Policy will be brought back to MSEC with the recommendation from the working group and was removed from today’s agenda.

7. Report: Resident Readiness Survey

Dr. Click presented the Resident Readiness Survey for MSEC’s review. Dr. Click stated that every year, we survey the graduates who have just completed their first year of residency and along with that, the AAMC surveys the residency program directors of these same graduates. Dr. Click stated we use the same questions on our internal survey as the AAMC uses on their survey to the program directors. Dr. Click stated the presented survey results is a comparison of the resident responses and the program director responses for each question. Dr. Click stated that the program directors were very complimentary of our graduates, and the residents rated themselves very similarly. Dr. Click stated that we have been concerned with the question regarding preparation to treat patients of different backgrounds that frequently comes up in the GQ. Dr. Click noted that 100% of the program directors rated our graduates as meeting or exceeding expectations in this area. Dr. Click also noted that 96% of the program directors rated our graduates as having met or exceeded the overall performance expectations.

No voting action required.

The presented Resident Readiness Survey report document is shared with MSEC Members via Microsoft Teams document storage.

The MSEC meeting adjourned at 5:38 p.m.

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. Telephone contact is: 423-439-6233.

MSEC Meeting Dates 2023-2024: (Zoom meetings unless noted)

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| July 11, 2023 – 3:30 – 6:00 pm | January 16, 2024 – 3:30-6:00 pm |
| July 28 – 1:00 – 2:00 pm (special called) | February 20 – Retreat – 11:30 am-5:00 pm (in-person) |
| August 15 – 3:30-6:00 pm | March 19 – 3:30-6:00 pm |
| September 19 – 3:30-6:00 pm | April 16 – 3:30-6:00 pm |
| October 17 – Retreat – 11:30 am-5:00 pm (in-person) | May 21 – 3:30-6:00 pm |
| November 14 – 3:30-6:00 pm | June 18 - Retreat – 11:30 am-3:00 pm (in-person) |
| December 12 – 3:30-6:00 pm | June 18 - Annual Meeting – 3:30-5:00 pm (in-person) |