



**QUILLEN
COLLEGE of MEDICINE**

EAST TENNESSEE STATE UNIVERSITY

The Medical Student Education Committee (MSEC) of the Quillen College of Medicine met for a Special Called Meeting on Thursday, July 27, 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
Joel Danisi, MD	
Thomas Ecay, PhD	<u>SUBCOMMITTEE CHAIRS</u>
Jennifer Hall, PhD	
Russell Hayman, PhD	
Paul Monaco, PhD	<u>ACADEMIC AFFAIRS STAFF</u>
Jason Moore, MD	Mariela McCandless, MPH, Staff
Jerry Mullersman, MD	Aneida Skeens, MPS, Staff
Antonio Rusiñol, PhD	
Amanda Stoltz, MD	
	<u>GUESTS</u>
<u>STUDENT MEMBERS</u>	Leon Dumas, MMED
Michael Jacobs, M2	Amy Johnson, EdD
Helen Mistler, M3	
<u>EX OFFICIO VOTING MEMBERS</u>	
Deidre Pierce, MD	
Melissa Robinson, MD	
Rachel Walden, MLIS	

Special Called Meeting Minutes

1. Discussion / Approval: Assessment Proposal

Dr. Click opened the meeting at 1:08 pm.

Dr. Click stated that this meeting was called specifically to address the Phase Review Subcommittee's recommendation regarding Item 6, assessment of end-of-course exams. At the July 11, 2023 MSEC meeting, the proposal failed to pass and a motion was made to create a working group who would bring back a new proposal regarding changes to assessment and present to MSEC for their review and approval. The working group members included Dr. Robert Schoborg, Dr. Russ Hayman, Dr. Antonio Rusinol, Dr. Melissa Robinson, and Dr. Jean Daniels. Dr. Click noted that Dr. Deidre Johnson also provided input. Dr. Click thanked the group for working so quickly to bring back a proposal to MSEC before students start in the courses in which this assessment change would be affective.

Dr. Click reviewed the original proposal from the Phase Review Subcommittee stating that MSEC should consider a change to which passing the final exam would be required to pass the course or of increasing the weight of the final exam to a higher percent than it is now.

The working group met and after much discussion, they developed a proposal to bring back to MSEC for review and approval.

The below proposal was presented to MSEC:

- All final shelf exams and checkpoints will have a cumulative component – suggest 10%-20%
- Following current Student Success Committee (SSC) policy, students scoring below 70% score on the final exam will be reported to SSC.
 - Students will be required to meet with an academic support counselor and create a learning plan based on their individual exam results.
 - Develop a sliding scale of specific interventions required from students who get <70% 1, 2, >2 end of course shelf exams.
 - Possibly require retake of exam to demonstrate improvement after plan completed.
 - Report and plan have to be done regardless of final course grade.
- Encourage faculty to use more UWorld/Amboss questions for daily quizzes/application/checkpoint questions.
 - Need simple, printed SOPs for log in, search, find and downloading questions on each platform.

Dr. Click reviewed the proposal with committee members. Dr. Fox commented that she would like to see how this will work as the Student Success Committee is to help the student pass the course. She went on to say, if you require this of the final, they will be continuing on in other courses and asked how working on this plan will affect their ability to work on the current course pre-work materials and prepare accordingly. Dr. Fox also asked how this was going to be done simultaneously and not affect the student's ability to perform well in the current course. Dr. Click commented one thing that is not included in the proposal is a timeframe of when the learning plan must be completed, but Dr. Click stated her feeling from the group was that making sure students had actually learned the material was what seemed to be the most important aspect of the proposal. Dr. Fox asked if Dr. Robinson, who was a member of the working group, could maybe answer how would they know that students had learned the material from the learning plan. Dr. Robinson stated she thought this was a consensus and was so much descent about using a hard stop to passing the class at all that when Dr. Daniels recommended this as a potential policy to get the students' attention without being punitive that it was something everyone could agree with and could be passed quickly. Dr. Fox asked what the metric will be to know they have passed and have learned the material.

Dr. Olive noted that although he was not in the working group, it was important that whatever MSEC does, they decide so it can be implemented. Dr. Olive stated he feels the proposal is pretty weak. It is clear that the thing that motivates student behavior more than anything is grades, and he has concern that we have weakened that as an incentive to the point that it is adversely impacting students' ability to prepare for Step 1. Dr. Olive stated if this is what MSEC agrees with going forward it is better than nothing but is weak. Dr. Click stated that another big point of discussion is that the Phase Review Subcommittee's recommendations were based on the legacy curriculum, and we do not know how students who are in the new curriculum will do on Step 1, and there was a lot of discussion on this as well.

A lengthy discussion ensued and MSEC members raised the following concerns:

1. The proposal states possibly require retake of exam instead of requiring retake of the exam.
2. Revision of grade based on updating the test and concern of study time to take the test again if taking time away from their next courses, especially if there is more than one course they are having problems with.
3. Students not taking the NBME exam seriously after having already passed the class.

4. A concern of the Phase Review Subcommittee was that the Step 1 score performance has declined. The committee felt this needs to be addressed.
5. Evaluate adding questions on the cumulative final, otherwise, the material presented in the second half of the course will not be as heavily tested using these types of questions as the material that was presented in the first half of the course had an NBME-type mid-term exam.
6. This is a weak proposal as there are no details and no specifications about what the interventions are going to be. The sliding scale could be subjective if going to be individualized for students. If students are passing the course multiple times, but failing shelf-exams this indicates a pretty significant problem that needs to be addressed. Would like to see more standardized details (e.g., if you do not pass your first exam this is what you need to do, if you do not pass subsequent exams these are the ramifications, etc.) and details in the proposal to know exactly what the students are going to have to do to overcome this.
7. Idea of passing the course but have to go back and show they have improved or pass the exam, what is the ramification the second time? What happens then, do they go back and take a course they have already passed?
8. A way to make the proposal stronger is to increase the percentage the final is worth by taking 5% away from the TBLs and 5% away from the checkpoints and adding 10% to the final. This may help students take it more seriously and might make the proposal firmer. It was noted that this might make courses that have anatomy practical exams included as part of the course grade more challenging to balance the weighing of the grades in those courses.

Dr. Click stated she made edits to the proposal based on MSEC discussion today. Edits included deleting the tiered approach and replaced with having a learning plan and retaking the final exam to demonstrate improvement. Dr. Click asked committee members if they felt comfortable with this proposal or what steps should be taken from here. Dr. Fox asked if the retake exam would be the same exam or a different exam. Dr. Click stated it would be much harder on faculty if a different exam were to be given as they would have to develop another exam. Dr. Fox stated she was asking for clarification. Dr. Fox and Dr. Robinson both noted, from discussions in the working group, that it would be the course directors' choice on whether to give the same exam or a different exam.

Dr. Monaco stated that this proposal is better than not having anything and is a better proposal as it is a little more rigorous than what was first proposed. Dr. Monaco stated that this can always be modified if needed but for right now, it is in the direction we want to be going.

Dr. Click asked MSEC members if there was a motion. Dr. Mullersman made a motion to approve the revised proposal as noted below:

- Assessment Proposal
 - All final shelf exams will have a cumulative component – suggest 20%
 - Following current Student Success Committee (SSC) policy, students scoring below 70% score on the final exam will be reported to SSC.
 - Students will be required to meet with an academic support counselor and create a learning plan based on their individual exam results.
 - Students will be required to retake the exam to demonstrate improvement after plan completed.

A motion was made to approve the revised assessment proposal as presented to MSEC members and seconded. MSEC discussion ensued.

Prior to MSEC voting on the motion, Dr. Fox asked if retaking the exam would change the student's score or if it would only be to demonstrate improvement. Dr. Click stated it would only be to demonstrate improvement and would not change the student's score. Dr. Hayman inquired about the first bullet point in the proposal

where it noted “All final shelf exams will have a cumulative component – suggest 20%” and Dr. Click stated that “shelf” should not be there and could be deleted. Dr. Hayman asked if the final exam was in a short course, would it already be cumulative, and Dr. Click stated it would and that the first bullet could be changed to say “at least 20%” and this would cover the short courses.

Dr. Hall asked what happens if the student does not show improvement. Dr. Rusinol commented that during the working group meeting, Dr. Daniels stated that students will have to demonstrate why they failed and then be reviewed at SSC or the Student Promotions Committee. Dr. Rusinol stated he did not see this in the proposal and noted that if not in the policy, it can make it weak, but these things can be added to a policy and have more detail in the policy. Dr. Hall stated her concern with the current proposal is that of what happens if your initial interventions do not work and what will then happen to the student. Dr. Click stated if “as approved by the academic support counselor and course director” was added to the last bullet regarding students retaking the exam to demonstrate improvement if this would help to clarify the outcome. Dr. Rusinol stated this sounds good and noted that there are policies already in place that require implementation steps and this could be added.

Dr. Abercrombie asked if they could reassess if not passed on the retake with potential referral to the Student Promotions Committee and Dr. Rusinol stated this is what Dr. Daniels had suggested. Dr. Fox stated the Student Promotions Committee policy would then need to be changed as it pertains to failing a course and not an exam.

Dr. Rusinol stated if we were not using the NBME Customized Exams and were using the in-house exams, students would not fail the course because you failed a section exam and noted that it is unfortunate that we cannot have a shelf exam in our first-year courses. Dr. Click stated that using the customized assessment exams are the closest we can get to using the shelf exams as they are vetted questions and do come from a bank of questions that have been used in Step 1 and other exams. Dr. Click stated that as the Phase Review Subcommittee stated, there needs to be higher stakes and noted that the students taking the NBME shelf exams in the past should have been required to pass those exams and feels this is where this is coming from.

Following the discussion, Dr. Click stated there had been a motion and a second for the revised proposal and that language could be added to the proposal stating if a student fails more than one exam or is not able to demonstrate improvement they would be referred to the Student Promotions Committee. Dr. Click commented that this would change the language in the Student Promotions Committee policy as noted by Dr. Fox earlier and stated that the student would need to have an incomplete (“I”) or other grade issued for the class. Dr. Hall asked if there was a reason why they could not have an incomplete or temporary (“T”) grade issued in the class until they demonstrate they have at least improved but not necessarily passed over the 70%. This may stimulate them to study and show improvement and then when they retake the exam, they will get their pass grade satisfactory to the academic support counselor and course director. Dr. Click stated the grade of “I” indicates that a student in a course or clerkship, because of a reason beyond the student’s control, is not able to complete the course or clerkship requirement in the allotted time. Dr. Click stated a “T” grade indicates that a student has been determined as deficient in a portion of a course or clerkship and remediation of some portion, but not the majority, is appropriate for the determination of the final grade. Dr. Click stated that the “T” grade is a deficient grade and any student accruing two or more deficient grades will be placed on academic probation. Dr. Monaco asked if the “T” grade remains on the transcript after the student has passed the course. Dr. Olive stated that it will show a “P*” on the transcript indicating that remediation had to be done to receive the passing grade. Dr. Monaco stated that adding students would receive a “T” grade on the proposal would give it more strength. Dr. Mullersman stated that as a former residency program director, if a student has been on academic probation, this is the kind of thing program directors look for in the dean’s letter and is a serious mark against the applicant and feels we should think carefully about doing this. If this mechanism is used, it could have significant ramifications for their attractiveness to residency programs. Dr. Click asked how the grade is reflected for clerkship students who fail an exam in the clerkships the first time. Dr. Moore stated that students receive an “I” until they complete a retake of the exam. Dr. Olive asked if they then receive a “P” or a “P*” and Dr. Click stated that the student would receive a “P” for pass.

After this discussion, Dr. Click revised the proposal again to include the language of students receiving an “I” grade to the bullet point pertaining to being required to retake the exam to demonstrate improvement. Dr. Hall stated she feels adding that students will receive an “I” will prompt students to do as well as they can to improve and if they cannot improve, they may need more help with the material. Dr. Mullersman feels this mechanism takes us back to where we were on the previous proposal and stated he could not approve this as amended currently for the same reason he could no longer approve the previous proposal. Dr. Rusinol stated if we decreased the daily grade percentages and were more stringent with the questions, this might solve the issue.

Dr. Click pointed out that there was still a motion and second on the table for the revised proposal that is being discussed. Dr. Monaco stated we do not need to lose sight of why we wanted to do something as there is concern that there would be a reasonably large number of students that would not do well on Step 1 and seems if we are going to vote on the proposal that it is addressing that concern and feels it is addressing that concern.

Dr. Rusinol called the question. Dr. Mullersman noted that amendments have been added since he made his original motion to the previous revised proposal and stated no one had made a motion to accept the added amendments to the proposal. Dr. Click stated the only amendment added to the proposal was the language regarding students will receive an incomplete grade. Dr. Ecay stated Dr. Mullersman could withdraw his original motion. Dr. Click stated Dr. Mullersman could do that and noted that he previously stated he could no longer support that proposal or the committee could vote on the amendments one by one with the original motion standing. **Dr. Mullersman withdrew his previous motion.**

The previous motion to approve the revised assessment policy as presented to MSEC members was withdrawn.

Dr. Ecay made a motion to approve the newly amended proposal as noted below.

- Assessment Proposal
 - All final exams will have a cumulative component – at least 20%
 - Following current Student Success Committee (SSC) policy, students scoring below 70% score on the final exam will be reported to SSC.
 - Students will be required to meet with an academic support counselor and create a learning plan based on their individual exam results.
 - Students will receive an incomplete grade and be required to retake the exam to demonstrate improvement after plan completed as approved by the academic support counselor and course director.

Dr. Click stated if there was no further discussion she would call the question and for MSEC members to vote on the motion.

A motion was made to approve the newly amended proposal and seconded. MSEC discussed and approved the motion.

The presented newly amended proposal document is shared with MSEC Members via Microsoft Teams document storage.

Dr. Click stated this language will need to be included in the Pre-Clerkship Assessment policy and the SSC policy will need to be reviewed as well.

The MSEC meeting adjourned at 2:35 p.m.

MSEC Meeting Documents

MSEC Members have access to the meeting documents identified above through the shared Microsoft Teams

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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)

July 11, **2023** – 3:30 – 6:00 pm
July 27 – 1:00 – 2:00 pm (special called)
August 15 – 3:30-6:00 pm
September 19 – 3:30-6:00 pm
October 17 – **Retreat** – 11:30 am-5:00 pm (**in-person**)
November 14 – 3:30-6:00 pm
December 12 – 3:30-6:00 pm

January 16, **2024** – 3:30-6:00 pm
February 20 – **Retreat** – 11:30 am-5:00 pm (**in-person**)
March 19 – 3:30-6:00 pm
April 16 – 3:30-6:00 pm
May 21 – 3:30-6:00 pm
June 18 - **Retreat** – 11:30 am-3:00 pm (**in-person**)
June 18 - **Annual Meeting** – 3:30-5:00 pm (**in-person**)