



**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, August 15, 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	
Jennifer Hall, MD	<u>SUBCOMMITTEE CHAIRS</u>
Paul Monaco, PhD	Michael Kruppa, PhD
Jason Moore, MD	
Antonio Rusiñol, PhD	<u>ACADEMIC AFFAIRS STAFF</u>
Amanda Stoltz, MD	Kortni Dolinger, MS, Staff
	Chelsea Gilbert, MA, Staff
<u>STUDENT MEMBERS</u>	Mariela McCandless, MPH, Staff
Andrew Hicks, M4	Aneida Skeens, MPS, Staff
Michael Jacobs, M2	
Helen Mistler, M3	<u>GUESTS</u>
	Earl Brown, MD
<u>EX OFFICIO VOTING MEMBERS</u>	James Denham, MD
Deidre Pierce, MD	Amy Johnson, EdD
Melissa Robinson, MD	Deidre Johnson, EdD
Robert Schoborg, PhD	Kelly Karpa, PhD
Rachel Walden, MLIS	Ryan Landis, MD
	Robert T. Means, Jr., MD
	Muhammad Elahi, M2
	Trevy Ramos, DO
	Tory Street, EdD
	Doug Thewke, PhD

Meeting Minutes

Dr. Click opened the meeting at 3:34 pm.

Consent Agenda Items:

- CA Item 1 – Approval: July 11 and July 27 MSEC Meeting Minutes
- CA Item 2 – Approval: M4 Electives Offered to M3 Off-Cycle Students
- CA Item 3 – Approval: Evaluation Completion Requirements Policy Update
- CA Item 4 – Report: Selective/Elective Course Review Summary

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

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

Announcements:

- Faculty Development
 - Leo Training
 - Assessments-Quizzes and Exams Part 1 – Friday, August 18, 1:00-2:00 pm
 - In-Class and Communication Tools – Friday, August 25, 1:00-2:00 pm
 - Gradebook and Exams Part 2 – Wednesday, September 6, 1:30-3:30 pm
- Town Hall on Divisive Concepts Legislation – Wednesday, September 6, 12:00 pm, Small Auditorium (no registration)
- Interpreting and Responding to Student Feedback – Wednesday, September 13, 3:00-4:30 pm, Medical Library
- Coming Soon: Medicine for All Communities Faculty Development Series

Action Agenda Items

1. Discussion: Student Concerns Around Step 1 Preparation

Dr. Click stated that after the last MSEC meeting, Helen Mistler, who is the M3 class representative on MSEC, asked if she could speak to MSEC regarding her experience with Step 1 preparation. Dr. Click stated there has been a lot of discussion around Step 1 preparation and around students' feelings and what they know about Step 1.

Helen addressed the MSEC committee stating that after the last MSEC meeting, she was sad to hear that some faculty felt that recent Step 1 experiences could be due to students not fully grasping the importance of the exam or the weight the exam holds for students in their residency application process and the long-term effects it can have on their career. Helen stated she recently took Step 1 and knows first-hand, from both herself and her classmates, the very real effect that the test had on their lives and the cost it presented to their families in order to prepare for something like that. Helen wanted to assure MSEC that the students who have taken Step 1 or are preparing to take it again are working extremely hard and are taking the exam very seriously. Helen also wanted to challenge any presumption that there were students possibly not taking this exam seriously or realizing the full magnitude of Step 1 on their future medical training as she can speak confidently that this has not been her experience or the experience of any classmate she knows. She states it was concerning to her to hear that was thought. Helen stated she believed it was important that MSEC assumes the best in students when speaking about the Step exam process and to be curious to ask students about their experience and what it was like for them to take Step 1 as having conversations about the curriculum and how best to prepare students to take the Step exams while at Quillen. Helen stated she would be happy to share with anyone on MSEC about her experience in preparing for Step 1 and in taking Step 1 after going through two years of the curriculum. Helen stated she feels strongly that her classmates would be more than willing to have those conversations for anyone who would like to hear from students and get a better understanding of what it is like to take Step 1 in the hopes that it could be helpful in having a better understanding of the students' perspective and in helping current and future second-year students who are gearing up to take Step 1.

Dr. Click thanked Helen for her honest and heartfelt comments.

No voting action required.

2. Report: Outcomes Subcommittee Report

Please see the Outcomes Subcommittee Report for additional information.

Dr. Denham presented the Outcomes Subcommittee report from their August 2, 2023 meeting. Dr. Denham noted that 33 benchmarks were reviewed and 30 of those were met. Dr. Denham stated the benchmarks not met were:

1. Personal and Professional Development 1: 85% of students who utilize Student Mental Health Services will report being at least satisfied with services and care provided, as reflected by M4 retrospective responses.
 - a. There were 58.8% of students who reported being at least satisfied.
 - b. There were 23.5% of students who reported “neutral” responses.
 - c. There were 34/56 students who responded that they accessed mental health services provided by the college as a student. Of those 34 students, 6 were very dissatisfied, 8 responded neutral, 10 were satisfied, and 10 were very satisfied with services and care provided.
 - d. Outcomes Subcommittee Recommendations
 - i. Recommends that an update is provided regarding the recruitment of a new mental health provider.
 - ii. Recommends that an email is sent out biannually to students regarding options for mental health services.
2. Personal and Professional Development 2: At least 90% of students will report being at least adequately prepared to recognize and address personal stressors during medical school.
 - a. There were 89% of students who reported being at least adequately prepared to recognize and address personal stressors during medical school.
 - b. Outcomes Subcommittee Recommendations
 - i. With the benchmark only 1% away from meeting the mark, it is recommended to monitor this benchmark as it has improved from last year.
 - ii. The Outcomes Subcommittee did suggest adding this question to the M2 retrospective survey so we can measure this with another group of students.
3. Personal and Professional Development 3: At least 90% of students will report being at least adequately prepared to recognize and address academic challenges during medical school.
 - a. There were 89% of students who reported being at least adequately prepared to recognize and address academic challenges during medical school.
 - b. Outcomes Subcommittee Recommendations
 - i. A second academic counselor has been hired, which should help this benchmark in the future. With the benchmark only 1% away from meeting the mark, it is recommended to monitor this benchmark.

Dr. Pierce made the following comments regarding the benchmarks not being met:

1. Personal and Professional Development 1
 - a. A mental health provider is being recruited, but they have not been able to find one who is licensed.
 - b. There is a wellness website for medical students under the Office of Student Affairs website (<https://www.etsu.edu/com/sa/wellness/>). Students are reminded of this quarterly. The website has a list of mental health services that are available any time, including services in this area and throughout the state.
 - c. The current counselor keeps several hours a week available for assessments or to direct people into her service or somewhere else while we are in the process of recruiting. Dr. Daniels is doing this as well.
2. Personal and Professional Development 2 and 3

- a. A wellness day is done for medical students that recognizes how to address suicidality and what to do, how to recognize stress in yourself, and how to improve QCOM.
- b. If there are other suggestions people have to improve that, please let her know.
- c. Dr. Pierce agreed that there has been change this past year in mental health services that did affect some things, but they have also done things to address those as well.

Dr. Click thanked Dr. Pierce for her comments and reminded MSEC members that the respondents for this data were M4 students who graduated in 2023 and were affected the most by the changes.

Dr. Robinson commented that a lot of our students do not have health insurance and accessing mental health support off campus may be difficult for them. Dr. Robinson asked if there had been any thought to QCOM supporting the off-campus access. Dr. Pierce stated that the Tennessee Medical Foundation has a free service where they help you assess and then have a sliding scale that includes medical students. This is on the wellness website as well. Dr. Pierce noted that Dr. Daniels has worked out a very low sliding scale with some community counselors that she refers students to as this is a major issue. Dr. Pierce stated they are trying to provide as much service as they can. Dr. Pierce stated they have also done surveys and have insurance people who are trying to shop around for a low-cost insurance for both the medical students and pharmacy students as they have the same issue.

Dr. Stoltz commented that she is continuing to work with Dr. Moore and the Department of Family Medicine for students to access services at the Johnson City Family Medicine Clinic for those needing a physician or needing a prescription.

A motion was made that we are meeting all of our Institutional Educational Objectives in all areas other than Personal and Professional Development and seconded. MSEC discussed and approved the motion.

The presented Outcomes Subcommittee Report is shared with MSEC Members via Microsoft Teams document storage.

Dr. Click stated as a point of business, that Dr. Trevy Ramos requested to be placed at the beginning of the agenda and therefore, agenda Item 5, Approval: CQI Plan – Surgery Clerkship, will be moved to Item 3 followed by the discussion on attendance policies.

3. Approval: CQI Plan – Surgery Clerkship

Please see the Surgery Clerkship CQI Plan document for additional information.

Dr. Click stated that the M3/M4 Review Subcommittee recommended that a CQI Plan be submitted by Dr. Ramos for the Surgery Clerkship due to below expectations ratings in educational event objectives supporting the clerkship objectives, student satisfaction with resources at each site, and NBME performance.

Problem Areas:

1. Rated as below expectations in educational event objectives support clerkship objectives.
2. Rated as below expectations in resources at each site support an effective learning environment.
3. Rated as below expectations on NBME performance (both national mean and below 5th percentile).

Improvement Plan:

1. Goal 1 – The Surgery Clerkship will have written, measurable objectives for all sessions, and they will be appropriately linked to course objectives by the end of the 2023-24 AY, March 1, 2024.

- a. Didactic schedule is provided in Leo and on paper. Sessions are not listed objectives and are not listed with a link to course objectives.
 - b. Dr. Ivy Click and Dr. Amy Johnson will assist in ensuring we have objectives for all sessions. Aneida Skeens will assist in mapping.
 - c. Dr. Ramos will attempt to complete within the year.
2. Goal 2 – At least 50% of students scored at or above national mean on NBME or other nationally normed exam.
- a. Interventions made starting 2023-24
 - i. Required weekly screen shot of proof of completion of UWorld 25 questions to Brenda Holt
 - ii. Required weekly quiz for completion with discussion with attending on topic from ACS modules
 - iii. Addition of additional NBME practice shelf
 - iv. Students at high risk of failing are asked to meet with Dr. Jean Daniels
 - v. Failure to comply results in a professionalism form.
3. Goal 3 – Fewer than 10% of students scored at or below the 5th percentile on NBME or other nationally normed exam.
- a. Interventions made starting 2023-24
 - i. Required weekly screen shot of proof of completion of UWorld 25 questions to Brenda Holt
 - ii. Required weekly quiz for completion with discussion with attending on topic from ACS modules
 - iii. Addition of additional NBME practice shelf
 - iv. Students at high risk of failing are asked to meet with Dr. Jean Daniels
 - v. Failure to comply results in a professionalism form
4. Revisited Goal 4 – Improve student satisfaction with their learning environment to a score of 85%.
- a. Resources at each site support an effective learning environment
 - i. I've mentioned this as a problem that existed about early 2021 and would be made worse with the increase in student number. This is not a problem that can be fixed at the level of the dept of surgery but instead at the level of the college of medicine. Nevertheless, our department continues the search for excellent attendings/rotation experiences. The concern has been relayed to our previous surgical chair Dr. Browder and to our current surgical chair Dr. Feltis. We have been moving students around to temporarily palliate the problem from period to period. We have more students on rotation than attendings to satisfy students.
 - b. Interventions for 2023-24 AY
 - i. Beginning August 14, 2023, two to three students will be assigned to Holston Valley Medical Center per rotation
 - ii. Addition of Wound Care as an opportunity at the VAMC for students
 - iii. Student expectations while on clerkship: Presentation given by resident and uploaded to Leo.

Dr. Stoltz noted that Noah Rutherford, an M4 student, is holding NBME review sessions for students on each surgery clerkship rotation prior to them taking the shelf exam. Dr. Stoltz stated the last session was well attended and a lot of material was reviewed. Dr. Stoltz asked Dr. Ramos if she was aware of this and Dr. Ramos replied she was not aware of the sessions taking place.

A motion was made to approve the presented Surgery Clerkship CQI Plan and seconded. MSEC discussed and approved the motion.

The presented Surgery Clerkship CQI Plan document is shared with MSEC Members via Microsoft Teams document storage.

4. Discussion: Attendance Policies

Muhammad Elahi, M2 Class President gave a slide presentation regarding an attendance policy proposal. Muhammad stated that his co-sponsor for this proposal is Dr. Melissa Robinson. Muhammed noted that the proposal was achieved through faculty and student collaboration.

Muhammad stated the current attendance policy only gives two (2) flex days per semester for the pre-clerkship phase of the curriculum with flex days not being granted to add to any official school vacations or holidays, during major exams or assessment weeks, and for sessions that are not feasible to recreate such as clinical simulation, IPE, IGR, etc. Muhammad stated that students are to request approval at least one week in advance and if a student would like to unexpectedly request a flex day, they are to submit the request immediately and email the relevant course directors and Mariela McCandless to ask to be considered for a delayed approval. Muhammad also noted that the current sick day policy states that students with three (3) or more consecutive days of unanticipated absences due to illness or injury must provide documentation of medical care and then, the policy notes that documentation may be required for any absence. Muhammed stated that there is some ambiguity with this as well.

Muhammad stated the rationale for change includes:

- Condensed 1.5 years pre-clinical curriculum coupled with Step 1 preparation.
- Increased likelihood of student mental health fatigue and duress, per Dr. Daniels and Ms. Emmerich.
- Mandatory attendance and flipped classroom necessitate that each student comes to class with enough preparation and mastery to contribute to group activities and application questions.
- Students who come to class and were not able to prepare for class materials with sufficient proficiency for whichever reason are vulnerable to falling behind even more during class and are unable to properly participate in group activities.
- Present policy requires flex day requests to be submitted one week in advance.
- Present sick day policy states that documentation may be required even for single-day absence, thus discouraging honesty about a “mental health day,” “catch-up day” or other wellness activity. The typical workplace makes no such demand on documentation for single-day absences.

Muhammad proposed the following changes to the attendance policy:

- Addition of wellness flex days (WellFlex) to the attendance policy so that students who are at risk of falling behind or are feeling overwhelmed by the course pace have breathing space to catch up and constructively contribute to their TBL groups.
- No more than one (1) WellFlex day per month, unused days will not be carried over to subsequent months. Present flex days (two per semester) continue as is.
- Course director and Ms. McCandless need to be notified at least 12 hours before start of class regarding usage of the WellFlex day.
- WellFlex days will not be approved and will count as unexcused absences when the sessions are missed are not feasible to recreate such as: clinical simulation, IPE, IGR, communication skills sessions, physical diagnosis sessions, procedure workshops, or other activities defined by the course director(s). Approval can only happen if the student is able to coordinate attending with a different group with ahead of time with course director.
- Implementation
 - Policy goes into effect immediately
 - Two-week adjustment period for faculty and students to get acclimated to policy changes.
 - Students can start using WellFlex days from September onwards.
 - Students will submit the same electronic form that is used for flex day requests.

- Current grading and makeup work policy for excused absences will apply to WellFlex days.
- Class leadership will coordinate with course directors and IQ director to monitor for large fluctuations in attendance and will work with faculty accordingly to bring necessary updates to policy.

Dr. Robinson and other MSEC members applauded Muhammad and the student leadership team for the collegial and professional process displayed in this collaboration.

MSEC discussed the proposed changes and raised the following concerns:

- Abuse of a student or group of students missing TBL sessions by requesting use of flex or WellFlex days.
- Potential that someone could take seven (7) days off a semester with having two (2) flex days per semester and one (1) WellFlex day per month for five months.
- If a student is taking the maximum number of days, there may be something going on with the student and we need to be proactive to help them, but this could represent privacy issues.
- Have a mechanism to prevent 20 or 30 students taking the same day.

Muhammad commented that the policy has guardrails to prevent abuse but every policy may need improvement and stated that if there are any issues that need to be brought up to let him and the rest of the class leadership know and they would definitely help to make the policy better. Muhammad feels this proposal is a good first step.

Dr. Monaco called the question and MSEC members were asked to vote on the policy proposal.

A motion was made to accept the attendance policy proposal as presented with the caveat that the final policy, in written form, will be emailed to MSEC members for approval and seconded. MSEC discussed and approved the motion.

The presented attendance policy proposal document is shared with MSEC Members via Microsoft Teams document storage.

5. Approval: LCME CQI Report - Element 8.3 Curriculum Design and Content Monitoring

Please see Dr. Olive's slide presentation for LCME CQI Review – Element 8.3 for additional information.

Dr. Olive informed MSEC members that a newly approved committee called the Accreditation CQI Committee had recently been created. Dr. Olive stated there has been CQI reports on reviews of the LCME standards and elements for a few years now and that largely, they have been going to the Administrative Council for review, and the reaction has been “they look fine.” Dr. Olive stated he has not been convinced they have received thoughtful analysis when reviewed. Dr. Olive stated he felt there needed to be a group who would look more carefully at the standards and elements and think about their intent.

The Accreditation CQI Committee met for the first time in July. The committee consists of one Dean's Office representative (Dr. Linville), one Academic Affairs representative (Aneida Skeens), one Student Affairs representative (Dr. Pierce), Dr. Olive, and Dr. Kelly Karpa in her capacity as Associate Dean. Dr. Olive stated at their first meeting, they reviewed Element 8.3 and the committee felt MSEC should review their findings to make sure they agreed with the determination.

Dr. Olive reviewed the intent of Element 8.3 and presented data the Accreditation CQI Committed reviewed at their meeting in July, which consisted of:

- Findings from the LCME Survey Visit in October 2019 (unsatisfactory)
- Findings from the November 2020 Status Report (satisfactory with monitoring)
- Findings from the November 2021 Status Report (satisfactory with monitoring)

Dr. Olive stated the findings came from student dissatisfaction. Although the student satisfaction ratings improved from the survey visit in 2019, student dissatisfaction reported on the status reports in November 2020 and November 2021 were still high enough that there was concern and still had work to do in this regard.

Dr. Olive reviewed the Curriculum Review Policy and noted the Year 4 Comprehensive Review of Curriculum as a Whole was reset to account for the new curriculum and will be in 2024-25.

Dr. Olive reviewed student survey results from the first year of the M1 TRAILS curriculum completed during the 2022-23 AY, the Retrospective Survey given to students at the end of the year looking at the year as a whole, and the pre-clerkship phase student satisfaction results.

- All courses from the first year of the M1 TRAILS curriculum performed well with the exception of the Doctoring TRAILS 1 and a CQI Plan has been approved for that.
- The results from the Retrospective Survey were in the 85%-90% range with the exception of general organization within courses in the first year of the curriculum, which was rated as 80.3%.
- There has been improvement on student satisfaction with the pre-clerkship phase of the curriculum. M1 student satisfaction went from 25% dissatisfied in April 2020 to 14.1% dissatisfied in May 2023. Likewise, M2 student satisfaction went from 36% dissatisfied in April 2020 to 13.9% dissatisfied in March 2023. Overall, student satisfaction with the first two years of the curriculum has gradually increased from 2.72/4.0 in April 2019 to 3.4/4.0 in March 2023.

Dr. Olive reviewed the concerns expressed by the Phase Review Committee at the June 2023 MSEC meeting and noted that several recommendations are under review by MSEC.

Dr. Olive also reviewed the gaps and redundancies presented to MSEC in the fall of 2022, an analysis by Dr. Karpa of how students are doing on checkpoint exams by discipline areas, and the results of the faculty impressions on where topics are being covered in the curriculum as discussed at the June 2023 TRAILS Retreat meeting.

Dr. Olive stated that in reviewing all this data, the Accreditation CQI Committee assessed that we would still be in the satisfactory with monitoring category because of multiple curriculum changes and TRAILS not being fully implemented. Dr. Olive stated that the Accreditation CQI Committee wanted to see if MSEC agreed with this determination.

Dr. Click thanked Dr. Olive for the report and stated it was good to see all the data we have been collecting in one place and how we have improved over time.

A motion was made agreeing with the Accreditation CQI Committee's determination that we are still in the satisfactory with monitoring category and seconded. MSEC discussed and approved the motion.

6. Follow-Up/Approval: Phase Review Recommendations

Dr. Click stated that these are the two final Phase Review Subcommittee's recommendations to MSEC. Dr. Click stated that all the recommendations from the pre-clerkship phase have been discussed and approved. These two recommendations are from the clinical phase review.

The original recommendations from the Phase Review Subcommittee were:

1. Require teaching faculty to review NBME subject exam for their discipline annually.
2. Require clerkship directors to develop a curriculum for each clerkship to cover relevant concepts from NBME subject exams and USMLE content outline.

Dr. Click stated that at the June 2023 annual meeting, the breakout groups discussed the recommendations and came back with the following proposals:

1. Require clerkship directors and key clerkship faculty to review NBME subject exam for their specialty at least every three years.
2. Require clerkship directors to review clerkship curriculum annually to determine if changes should be made based on NBME subject exam performance and USMLE Step 2 performance. Report changes to curriculum to Academic Affairs annually.

Dr. Olive commented that these proposals would speak to the concerns the Phase Review Subcommittee had.

A motion was made to accept both proposals as presented and seconded. MSEC discussed and approved the motion.

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

The MSEC meeting adjourned at 5:07 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)

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**)