



QUILLEN COLLEGE of MEDICINE

EAST TENNESSEE STATE UNIVERSITY

The Medical Student Education Committee of the Quillen College of Medicine met on Tuesday, December 17, 2019 in Room C000 of Stanton-Gerber Hall, Building 178.

Attendance

Faculty Members

Ramsey McGowen, PhD, MSEC Chair
Martha Bird, MD
Ivy Click, EdD
Thomas Ecay, PhD
Jon Jones, MD
Paul Monaco, PhD
Jason Moore, MD
Mark Ransom, MD
Mitch Robinson, MD
Anthony Rusinol, PhD
Robert Schoborg, PhD

Student Members

RJ Black, M1
Hunter Bratton, M4

Ex Officio Voting Members

Theresa Lura, MD
Rachel Walden, MLIS

Ex Officio Non-Voting Member

Kenneth Olive, MD, EAD

Guests

Robert Acuff, PhD
Patricia Amadio, MD

Academic Affairs Staff

Lorena Burton, CAP
Mariela McCandless, MPH
Skylar Moore, BSPH
Cathy Peeples, MPH

Meeting Minutes

1. Approve: Minutes from November 19, 2019 Meeting & Announcements

Dr. Moore made a motion to accept the MSEC November 19, 2019 minutes as presented. Dr. Schoborg seconded the motion. MSEC voted to approve the motion with one (1) abstention vote.

The MSEC minutes for November 19, 2019 are shared with MSEC members via OneDrive document storage.

The following announcements were made:

- The next Faculty Book Club is scheduled for January 16, 2020. The subject book will be "Grit" by Angela Duckworth. Books are available for pickup. There will be one more Book Club scheduled for this academic year in May 2020.
- The next faculty development session is tentatively scheduled for January 29, 2020.

Dr. Jean Daniels, COM Assistant Professor for Academic Support and Mary Little, Director and Campus ADA Coordinator, will be presenting “Working with Students with Disabilities”.

- The Faculty Focus Groups for review of the curriculum have been scheduled for Wednesday, January 8, 2020 from 4:30 pm to 5:30 pm and Thursday, January 9, 2020 from 1:00 pm to 2:30 pm. Both sessions will be held in the large auditorium of Stanton Gerber. Please RSVP to Sandy Greene, Academic Affairs for either session.
- Student Focus Groups for review of the curriculum are planned with MSEC student members assisting in the planning. Dr. Ivy Click will facilitate the session(s).
- The M1 and M2 Course Director planning meetings have been scheduled:
 - M1 – January 15, 2020 and April 29, 2020
 - M2 – January 23, 2020 and March 19, 2020

2. Discussion/Follow Up:

Dr. Block’s Comments from November MSEC Meeting

Dr. Olive summarized the points delivered by Dr. Block, College of Medicine Dean, during his visit with MSEC at the November 19th meeting and asked MSEC for reactions or thoughts that members had after reflecting on those comments. Many MSEC members agreed with the points Dr. Block identified. Further discussion focused on the numerous reasons students come to the College of Medicine. It may take additional marketing to draw attention to our strengths and resources and the fact that the College of Medicine is willing to “stretch and grow”.

Additional discussion included:

- Time needs to be built into the next curriculum change(s) to allow changes if needed during implementation. Not enough time was given for implementation with the past curriculum changes.
- Our medical school started forty (40) years ago and in many respects, we have the same courses, just re-sequenced.
- Look closely at sequencing to ensure it is right.
- All courses must experience changes or the buy-in is not across-the-board.
- Identify Primary Care plus Rural Care as our focus and promote.

Curriculum Working Groups Finalization

Dr. McGowen confirmed the three (3) Curriculum Working Groups have been finalized with a Chairperson, both preclerkship and clinical faculty, COM students, and an Academic Affairs support staff person. To facilitate communication across groups, a list of individuals who comprise each working group is shared in the ETSU 365 OneDrive folder (*2019-2020 Working Groups*) along with resources available to each working group member.

Group 1 – Curriculum Content: Chairperson – Rachel Walden

Group 2 – Sequencing, Integration, Coherence – Dr. Jason Moore

Group 3 – Instructional and Assessment Methods – Dr. Rob Schoborg

The Working Groups Listing is shared with MSEC members via OneDrive document storage.

3. Update: Family Medicine Clerkship: Student EHR Training

Dr. Jason Moore provided a presentation on the Student EHR training (*Allscripts*) being piloted in the Family Medicine Clerkship. It took the Clerkship six (6) months to establish a protocol that worked with the *Allscripts* system. The training launched in August of 2019, and has received positive feedback. The Clerkship students receive training in *Allscripts* and on protocol for documentation during their clerkship orientation. Students in the outpatient clinic document updated medical history, family medical history, social history, medication list(s), and allergies in the provider's note with permission from a supervising resident or attending, being required. The students' findings must be verified by the provider and documented as such in a note. All student documentation must be completed before the end of the workday. The supervising physicians must complete the note within forty-eight (48) hours.

Dr. Olive asked that Dr. Moore deliver the presentation at the January Clerkship Director /Coordinator meeting.

The Student EHR Training PowerPoint is shared with MSEC members via OneDrive document storage.

4. Follow-Up/Discussion/Action: Optional CBSE Score Comparison

Dr. McGowen opened the discussion by summarizing with reference to the action approved at the March 16, 2019 MSEC meeting for delivery of the M2 CBSE in the 2019-2020 academic year. MSEC approved administering an optional CBSE exam in the fall and the second being a required delivery in the spring. MSEC discussion followed regarding whether a similar motion should be made for academic years beginning with 2020-2021 and forward. Dr. Olive presented comparisons of optional fall CBSE scores for 2018 and 2019, as well as the fall and spring CBSE scores with Step 1 scores. MSEC discussed the five (5) hour scheduling of the exam, cost of exam delivery, and stress levels of the students taking the exam. Student members indicated that having the optional exam is beneficial. MSEC noted that there is good data that shows the number of USME style questions a student exposes themselves to prior to an actual USMLE Step exams is beneficial.

Dr. Schoborg made a motion to continue with an M2 optional CBSE in the fall semester, followed by a required M2 CBSE in the spring semester. Dr. Monaco seconded the motion. MSEC voted to approve the motion. The motion can be reviewed in future years for modification as needed.

The comparison of CBSE scores documents are shared with MSEC members via OneDrive document storage.

5. Update: NBME Customized Assessment Services (CAS)

Mariela McCandless announced a webcast, to include a question and answer session, of the NBME's Customized Assessment Services (CAS) has been set for Monday, January 13, 2020 from 3:00 to 4:00 pm. The webcast was scheduled based on an MSEC discussion at the November 19, 2019 meeting, "NBME options to customize exams with the combining of different course content in one exam (integration) - it may be worth discussing with NBME".

Invitations, with an RSVP request, have been sent to course directors and MSEC Working Groups that may be interested in learning more about the NBME customized exam services. The location has yet to be determined.

The presentation of NBME Customized Assessment Services (CAS) is shared with MSEC members via OneDrive document storage.

6. Approve: M3 Clerkship Exam and Grading Policy Revision – M3 Clerkship Exam and Grading Policy – MSEC-0111-3

Cathy Peeples presented revisions to the M3 Clerkship Exam and Grading Policy–MSEC-0111-3:

- The revised policy retains the existing policy that states students will be required to complete repeat Clerkship NBME or Aquifer exams during academic breaks or following conclusion of the M3 year, based on dates determined by Academic Affairs.
- The repeat exam cannot be scheduled during a clerkship.
- The revision adds that failure of a second Clerkship NBME or Aquifer exam before completing a first repeat NBME or Aquifer exam will require withdraw of the student from clerkship training.
- Both exams must be retaken before resuming clerkship training in the following period.
- The missed clerkship will be rescheduled at the beginning of the next academic year with all clerkships to be passed before the student will begin their M4 year/rotations.
- A student's repeated NBME or Aquifer exam must be at or above the 6th percentile or a grade of F will be assigned and the student will be required to repeat the clerkship at the beginning of the next academic year before being permitted to proceed to their M4 year/rotations.

MSEC discussion identified that additional language should be added to the M3 Clerkship Exam and Grading policy to limit the total number of retakes an NBME or Aquifer exam can be taken by a student. It was proposed that:

- **Initial failure of more than two (2) NBME or Aquifer exams would require meeting with the SPARC and/or Student Promotions Committees.**

Dr. Olive noted that the policy with revision language will need to be reviewed and approved by the SPARC and Student Promotions Committees.

Dr. Schoborg made a motion to approve the revisions to the M3 Clerkship Exam and Grading Policy – MSEC-0111-3, to include the total number of retakes being approved by the SPARC and/or Student Promotions Committees. Dr. Rusinol seconded the motion. MSEC approved the motion.

Academic Affairs will finalize the changes to the policy and forward to the SPARC and Student Promotions Committee for approval.

The revised M3 Clerkship Exam and Grading Policy-MSEC-0111-3 is shared with MSEC members via OneDrive document.

7. Report/Accept: M1/M2 Review Subcommittee – 2018-2019 Doctoring II

Dr. Acuff presented the review of the course. The Course Director is Patricia Amadio, MD. The course strengths include horizontal integration with basic science courses, vertical integration with clinical clerkships through IGR, clinical teaching rounds, simulation labs, unique workshops and experiences for rural track students, SOAP note writing case presentations, high student ratings of faculty, and that all students passed the course.

Course weakness identified were the variability of teaching rounds and experiences for students, integration of rural track with the generalist track for testable material, navigation of the course's D2L site and variation in grading on H&Ps and exams. The short-term and long-term recommendations to MSEC included:

- Student concern of the subjective grading of H&Ps and written/oral exams. It is suggested that the issue of class rank for this course be revisited.

MSEC discussed at length class rank and invited Dr. Amadio to clarify the Doctoring II course grading components for both the generalist and rural track students that are identified with both numeric and pass/fail grades and contribute to a student's overall reported course numeric grade. Dr. Amadio confirmed that Rural Track is making a great deal of effort to align its content delivery with that delivered in the Generalist Track. Both the Generalist and Rural Track students have the following assessments contributing to class rank.

- Quizzes (8 case quizzes, Rhythm Recognition, didactic session quizzes) (5 points each; total 70 points = 36% of grade)
- Human Sexuality Quiz (25 points = 13% of grade)
- Medical Rules and Regulations/Health Care Systems and Reform Quiz (25 points = 13% of grade)
- Mid-Term Exam (25 points = 13% of grade)
- Oral Final Exam (50 points = 25% of grade)

Written H&Ps must be the student's own work. While the Rural Track H&Ps do not count towards class rank, they do have a numeric point attribution determined by RPCT faculty based on a rubric for each case.

The overall course trends were identified as:

Academic Year	Overall Numerical Evaluation Score
2018-2019	4.00 (Generalist Doc II); 3.13 (Rural Doc II)
2017-2018	4.29 (Generalist POM); 4.00 (Rural POM)
2016-2017	4.72 (Generalist POM); 3.79 (Rural POM)

Dr. McGowen discussed the number of credit hours identified for the Doctoring II course and that without them, the class rank would be composed solely of basic science courses. The Doctoring I class rank spread is very small. Dr. Olive identified that the Doctoring III and IV courses do not contribute to class rank.

Dr. Schoborg proposed that the current class rank for the Doctoring II course continue to be used, but an update on the H&P components for both the Generalist and Rural Track components be brought back to MSEC for discussion.

MSEC accepted the 2018-2029 M1/M2 Review Subcommittee report of Doctoring II.

The M1/M2 Review Subcommittee report for Doctoring II is shared with MSEC members via OneDrive document storage.

8. Report/Accept: Quarterly Outcomes Subcommittee Report

Dr. McGowen presented the Quarterly Outcomes Subcommittee report. There were five (5) benchmarks that were **met and required no action**: **1)** Medical Knowledge 4; **2)** Professionalism 3; **3)** System-Based Practice 3; **4)** Interprofessional Collaboration 1; and **5)** Systems-Based Practice 4.

There were three (3) benchmarks that **contained mixed data, but were identified as essentially met**: **1)** Interpersonal and Communication Skills 3; **2)** System-Based Practice I; and **3)** Patient Care 4. Because the Program Directors rated 76% of graduates as “well prepared” on identifying patient safety system failures and contributing to a culture of safety and improvement/error reporting, the subcommittee discussed where “patient safety” is taught in the curriculum and whether a content report to identify potential gaps was needed; but it was identified that MSEC is scheduled to receive an updated Thread report on Patient Safety from the Curriculum Integration Subcommittee in the near future and this will identify the “patient safety” content in the curriculum.

There were two (2) benchmarks that were **not met**: **1)** Program Benchmark 3: 90% of graduates will be rated as “fulfilling” Residency Program Director’s Evaluation of PGY-1s. The Program Directors rated 88% of graduates as well prepared with a mean of 2.90/3.00; **2)** Practice-Based Learning and Improvement 1: 90% of graduates will be rated at “meets expectations” or above on the Residency Program Directors’ Assessment of PGY-1s for Practice-Based Learning and Improvement. The Program Directors rated 85% of graduates as “well prepared” with a mean of 2.80/3.00. Interpretation of the ratings was complicated because the descriptors describing the numeric scales had been changed from prior years and from the terms used in the benchmarks.

The Outcomes Subcommittee recommended that the Program Director’s Survey continue to use a 3-point scale, but the wording of the scale needs to return to **Exceeded, Met, and Below Expectations**. The System-Based Practice 3 and System-Based Practice 4 benchmark wording would need to be changed to reflect changes made in the scale.

MSEC accepted the Outcomes Subcommittee quarterly report as presented.

The Quarterly Outcomes Subcommittee report is shared with MSEC members via OneDrive document storage.

9. Approve: M4 Selective/Elective: OB/GYN – Maternal Fetal Medicine

Cathy Peeples introduced a new M4 OB/GYN Selective/Elective to be directed by Dr. Donald Willis. The rotation is designed for the M4 student who plans to make OB/GYN his/her specialty. Both ambulatory and inpatient sites will be utilized during the rotation.

The specific Entrustable Professional Activities (EPAs) to be accomplished during the rotation were identified with both the educational and assessment methods being employed. The hours of the rotation are 7:00 am to 5:00 pm or fifty (50) hours per week.

Dr. Rusinol made a motion to approve the OB/GYN M4 Selective/Elective. Dr. Schoborg seconded the motion. MSEC voted to approve the Selective/Elective.

The M4 OB/GYN Selective/Elective: Maternal Fetal Medicine is shared with MSEC members via OneDrive document storage.

10. Review/Approve: Curriculum Content Report: Pathophysiology in the Curriculum

Dr. Olive presented a content report on Pathophysiology material presented across all four years of the curriculum as requested from MSEC following a content report on basic science content delivered in the clinical years. Dr. Jones asked about including additional content presented during in the Surgery Clerkship didactic sessions. Dr. Olive noted that the Surgery clerkship didactic session PowerPoints and handouts were not readily available nor is the curriculum mapping of the clerkship sessions completed to allow identification of Pathophysiology content.

MSEC approved the Curriculum Content report for Pathophysiology in the curriculum, noting clerkship curriculum content material for pathophysiology could be increased with access to didactic session content.

Dr. Olive followed up with an email on December 18, 2019 to Clerkship Coordinators with a copy to the Clerkship Directors.

December 18, 2018

To: Clerkship Coordinators

Yesterday at MSEC during the presentation of a curriculum content report, one clerkship faculty member asked why content from one of his presentations was not included in the report.

As you know, the clerkships are not yet fully mapped in New Innovations. When doing a curriculum content report, in addition to the curriculum mapping part of New Innovations, I review handouts and presentations in the course material section of New Innovations. If your material is not posted there, then it is not captured. Please ensure that all handouts and PowerPoints are posted in the course materials section of New Innovations.

Thanks.

Ken Olive

The Curriculum Content Report: Pathophysiology in the Curriculum is shared with MSEC members via OneDrive document storage.

11. Portfolio Status

Dr. Olive reviewed the Institutional Education Objectives (IEOs): 1.10; 3.4; 4.4; 5.2; 6.5; 6.6; 7.5 and 8.3 where the assessment method is a Portfolio submission no later than the end of the M4 year (graduation requirement). Students are given the Portfolio assignments (with submission examples) in the M3 year.

Drs. Olive and McGowen are the primary reviewers of all submissions, providing feedback to the students on the submissions. Periodic reminders are sent to the students throughout the M3 and M4 year. Many of the Portfolio submissions are deeply reflective of the students' experiences and indicate that our students are accomplishing these IEOs and receiving a rich depth of clinical experiences.

MSEC members were sent examples of student portfolio submissions following the meeting.

The Portfolio presentation and sample submissions are shared with MSEC members via OneDrive document storage.

12. Report: AAMC Annual Meeting

Dr. Olive presented content sessions he attended at the recent Learn Serve Lead 2019 AAMC Annual Meeting held in Phoenix, Arizona. The sessions included: Physician Work Force; EPA Core Pilot; LCME data; InCus (USMLE Scoring and Public comment). In addition, MSEC members who had also attended the AAMC annual meeting described the meetings they attended and impressions they had from attending.

The AAMC Annual Meeting presentation is shared with MSEC members via OneDrive document storage.

13. Update: New Innovations Sessions

Lorena Burton updated MSEC on a meeting held on December 3, 2019, with the M1/M2 Review Subcommittee student representatives to address the New Innovations evaluation/assessment software. The meeting was a good exchange of information, identifying some limitations within the software. Suggestions were made for better communication of evaluation needs by administration and faculty at the beginning of each academic year and again at the end of a course. Students were encouraged to review the received evaluations carefully and complete within the specified time period. Students were pleased to see that the evaluations now contained a photo (as available) of the faculty being evaluated.

The New Innovations presentation is shared with MSEC members via OneDrive document storage.

Dr. McGowen closed the meeting with a thank you to everyone for the help she has received over the years as the MSEC Chair. Dr. Olive thanked Dr. McGowen for her service to MSEC and stated that she will be missed. The MSEC meeting adjourned at 5:51 p.m.

MSEC Meeting Documents

MSEC Members have access to the meeting documents identified above through the shared OneDrive document storage option made available with their ETSU Email account and login.

If you are unable to access the One Drive link or have not set up your OneDrive contact: Matthew Carroll, Instructional Design and Technology Manager at: carrollmo@etsu.edu. Telephone contact is: 423-439-2407.

MSEC Meeting Dates 2019-2020: * NOT the 3rd Tuesday of the month

January 14, 2020 – 3:30 – 4:30 pm* - C003

January 14, 2020 MSEC WG Sessions – 4:30 – 6:00 pm – C000, C001, C003 & AA Conf. Rm

February 18, 2020 – 3:30 - 6:00 pm – C000

March 17, 2020 – 3:30 - 6:00 pm – C000

April 21, 2020 - 3:30 - 6:00 pm – C000

May 19, 2020 **Retreat** - 11:30 am – 5:00 pm – C003

June 16, 2020 – 1:30-3:00 pm – C003 – **Annual Meeting** 3:30-5:00 pm – Lg. Auditorium

MSEC Meeting Dates 2020-2021: * NOT the 3rd Tuesday of the month

July 21, 2020 – 3:30-6:00 pm

August 18 – 3:30-6:00 pm

September 15 – 3:30-6:00 pm

October 20 – **Retreat** – 11:30 am-5:00 pm

November 10 – 3:30-6:00 pm*

December 15 – 3:30-6:00 pm

January 19, 2021 **Retreat** – 11:30 am-6:00 pm

February 16 – 3:30-6:00 pm

March 16 – 3:30-6:00 pm

April 20 – 3:30-6:00 pm

May 18 – 3:30-6:00 pm

June 15– **Retreat** - 11:30 am-3:00 pm

June 15 - **Annual Meeting** - 3:30-5:00 pm