

MEDICAL EDUCATION COMMITTEE MEETING MINUTES

Meeting Date: Tuesday, November 19, 2019

Time: 4:00 – 6:00 p.m.

Meeting Location: DHMC – Auditorium F
Approval: January 21, 2020

Recorded By: Jillian Marcus

Attendance

Present = X, Absent = 0

Faculty Voting Members							
Ahmed, Nayla (Clinical-Medicine)	X	Ames, James (Preclinical & Clinical- Orthopedics)	х	Chow, Vinca (Clinical-Anesthesiology)	Х	Crockett, Sarah (Clinical-Emergency Medicine)	X
Hanissian, Paul (Preclinical- SBM Reproduction; Clinical- Obstetrics and Gynecology)	0	Hartford, Alan (Preclinical; Clinical- Medicine)	X	Homeier, Barbara (Preclinical-On Doctoring)	Х	Loo, Eric (Preclinical-Pathology)	0
Myers, Larry (Preclinical, Medical Education)	Х	Nelson, Bill (Preclinical-Psychiatry)	х	Robey, R, Brooks (Preclinical & Clinical-Renal; Faculty Council)	0	Sachs, Marlene (Community Preceptor Education Board)	0
Saunders, James (Clinical-Surgery)	X	Sorensen, Meredith (Clinical-Surgery)	0	Spaller, Mark (Preclinical-Medical Education)	0	Weinstein, Adam (Chair; Preclinical-Renal, On Doc; Clinical- Pediatrics)	Х

Student Voting Members Year 1							
Banerji, Sarah	Χ	Cheema, Amal	Х	Hanley, Meg	Χ	Morris, Linda	Х
Year 2							
Bertalan, Mia	Χ	Demsas, Falen	X	Minichiello, Joe	Χ	Sramek, Michael	X
Year 3							
Bessen, Sarah	0	Del Favero, Natalie	0	Guerra, Sylvia	0	Lindqwister, Alexander	0
Morgan, Alexandra	0	Stanko, Kevin	0				
Year 4							
Bachour, Kinan	X	Berkowitz, Julia	0	Bhushan, Vivian	0	Di Cocco, Bianca	X
Kettering, Alexander	0	Ramos, Joshua	0	Warren, Celestine	0		
MD/PhD							
Chidawanika, Tamutenda	0	Kamal, Yasmin	X	Rees, Christiaan	0	Smolen, Kali	0

Non-Voting Members							
Albright, Amanda (Instructional Designer)	0	Borges, Nicole (Chair, Dept. of Medical Education)	Х	Brown, Lin (Preclinical – SBM Co- Director)	Х	Dick III, John (Clinical - Associate Dean)	0
Eastman, Terri (Preclinical - Director, Preclinical Curriculum)	X	Eidtson, Bill (Director, Learning Services)	0	Fountain, Jennifer (Assessment)	0	Holmes, Alison (Clinical - Associate Dean, Career Advising)	0
Jaeger, Mikki (Registrar)	X	Kerns, Stephanie (Director, Biomedical Libraries)	Х	Lyons, Virginia (Preclinical - Associate Dean)	0	Marcus, Jillian (Administrative Support, UME Affairs)	x
Manning, Hal (Preclinical – SBM Co- Director)	0	McAllister, Steve (Director, Educational Technology)	0	Mishra, Manish (Associate Dean, Student Affairs and Support)	0	Montalbano, Leah (Director, Assessment & Evaluation)	0
Mullins, David (Associate Dean, Biomedical Science Integration)	X	Mullins, David (Chair, Geisel Academy of Master Educators)	х	Ogrinc, Greg (Senior Associate Dean for Medical Education)	0	Pinto-Powell, Roshini (Associate Dean, Admissions)	0
Reid, Brian (Associate Director, Educational Technology)	X	Ricker, Alison (Clinical - Director, Clinical Curriculum)	Х	White, Stephanie (Associate Dean, Diversity and Inclusion)	0	Vacant (Associate Dean, UME Administration)	0

Student Non-Voting Members Diversity and Inclusion & Community Engagement (DICE)						
Conn, Stephen (Preclinical)	X Lewis, Chad (Clinical)	0 Trinh, Katherine (Clinical)	0			
Vice Chairs for Academics – Student Government						
Bachour, Kinan	X Jain, Raina	0				

Guest(s)					
Swenson, Rebecca	Ratliff, Amanda				

Call to Order

Adam Weinstein, MD

Adam Weinstein, Chair, called the meeting to order at 4:02 p.m.

Announcements

Adam Weinstein, MD

Adam welcomed the new 1st year student curriculum representatives: Sarah Banerji, Linda Morris, Amal Cheema, and Meg Hanley. Adam also introduced Dr. Nicole Borges, Chair of the Department of Medical Education.

Approval of Meeting Minutes Adam Weinstein, MD

Approval of October 15, 2019 meeting minutes.

Bill Nelson made a motion to approve the October 15, 2019 MEC meeting minutes. The motion was seconded by Barbara Homeier. The motion passed by a unanimous vote with 3 abstentions.

Student Issues & Feedback

No issues for this meeting.

New Business

- 1. Phase 2 & 3: Clinical Diversity Policy- Alison Ricker, MPS & John Dick, MD
 - i. Adam summarized the policy and pointed out that the clerkships provide students with the opportunity to work with different populations. He mentioned that the one update to the policy was the table with the clinical sites for clerkships.
 - ii. Discussion
 - a. A member asked if this policy was accepted at other sites, and it was answered that this is more of a policy to ensure enrollment is such that a student works with different populations (not just Upper Valley patients) and does not do all of the clerkship experiences at Dartmouth Hitchcock unless they are in one of the exceptions group (e.g. parent of young child).
 - b. One member asked how students are supported when they travel to places like California for their clerkships. Alison Ricker answered that they offer a stipend to students that go to clerkships at sites such as CPMC & CHOC. In addition to that, housing is provided at all sites that are not within a certain distance from Lebanon.
 - c. A member asked whether the policy was needed because the school cannot support all these students at DHMC. The answer was that while it is true there is not sufficient capacity at DHMC to have a class of 90+ students get their clinical experiences exclusively at DHMC, the policy and the school values students working with diverse populations and different populations. This policy ensures this while as an added benefit, addresses a limitation of DHMC.
 - d. One member raised a question on how students' abilities to work with different populations is assessed. This policy only serves to ensure there are experiences with different populations and not that students develop skills. The answer lies more at a clerkship level and within each clerkship there are objectives that concern competences that relate to working with different populations and map to communication skills, personal and professional and leadership development, professionalism, and population health. The objectives are shared with the sites and the faculty then ensure these objectives are accomplished and assessed.
 - e. This policy is tracked by the Clinical Education Office.
 - f. One member asked about the word choice with "distinctly different" and changing it to "distinctly diverse." There was a discussion about this, and the committee ultimately felt that "different" was the intended term.

James Saunders made a motion to approve the UME-CURR.CE-0008 Clinical Diversity Policy. The motion was seconded by Alan Hartford. The motion passed by unanimous vote with 1 abstention.

- 2. Phase 2: Inpatient Medicine Clerkship Amanda Ratliff, MD, Rebecca Swenson, MD
 - & L. Campbell Levy, MD
 - Rebecca and Amanda summarized the powerpoint that they had prepared and explained and presented their action plans based on the recommendations portion of the powerpoint.
 - ii. Discussion
 - a. A few essential skills and conditions were added. Many of these relate to skills and conditions covered in other clerkships, and the plan was to deliberately reinforce these in an inpatient medicine population.
 - b. One member asked where the students are exposed to the essential skills of interpreting an ABG if not in internal medicine. One member answered that students are required to do a sub-internship but if they are on a general inpatient unit then they still might not be exposed. One member mentioned that this does touch upon the issue whether students get adequate acute illness and critical care exposure and that this has been raised as a concern. There has been an effort in creating or discussing the creation of a required or selective: you do either time in critical care or within the emergency department where there is a lot of ABG's and other essential critical and acute care skills.
 - c. One member asked for a further explanation within the patient safety write up that is required for the clerkship. Rebecca answered that it helps students to complete a write up on safety and reflect on a culture of safety and patient safety.
 - d. One member commented on the write-ups on the system EPIC, and that the students do not have access to transfer their notes to a word document and then the students have to retype them. This is an issue that impacts all clerkships that use write-ups.
 - e. One member asked how they assure consistency of grading across all attendings. It was answered that it is hard, and they are trying to do more workshops. Site comparability assessments each year also help to track this.

James Ames made a motion to approve MEDI301 Inpatient Medicine Clerkship (Phase #2). The motion was seconded by Nayla. The MEC notes to revisit the topic of finding a place to require ABG interpretation skill. The motion passed by a unanimous vote.

- 3. Phase 1: Rheumatology and Orthopedics Lin Brown, MD & James Ames, MD
 - i. Lin and James summarized the Rheumatology and Orthopedics powerpoint.
 - ii. Discussion
 - a. There was a discussion on a specific objective and it was about having three objectives, or one objective that would have the same preface. The objectives in question were, "Apply knowledge of anatomy, histology, rehabilitation and imaging modalities to evaluate pathologic conditions of the axial skeleton. Apply knowledge of anatomy, histology, rehabilitation and imaging modalities to evaluate pathologic conditions of the appendicular skeleton. Apply knowledge of anatomy, histology, rehabilitation and imaging modalities to evaluate common pediatric orthopedic conditions." Students gave their perspectives and it was decided there would be three objectives as opposed to one
 - b. One member asked if there was any integration about the societal cost for the application of treatment for osteoarthritis and any discussion on how policies have shifted based upon sham surgeries. It was answered that sham is mentioned and touched upon, but with regards to cases they are trying to find what year this is appropriate to discuss in; whether it is preclinical education or clinical education.
 - c. One member brought up neuro bedside CBL sessions and asked if they could do something similar for this course. A member explained how the neuro bedside CBL sessions work and James answered that they have talked about doing this with the hands-on session but there are challenges within this course.

Falen Demsas made a motion to approve MDFD262 Rheumatology and Orthopedics (Phase #1). The motion was seconded by Sarah Banerji. The motion passed by a unanimous vote with abstentions.

Adjournment

Adam Weinstein, MD

Adam Weinstein, Chair, adjourned the meeting at 5:08 P.M.

Ongoing Business

- Evaluation Oversight Committee
- LCME Oversight Committee
- Enrichment Electives
- ABG Interpretation

Future Meetings

MEC meetings are the 3rd Tuesday of each month from 4:00 - 6:00 p.m.

- January 21, 2020
- February 18, 2020
- March 17, 2020
- April 21, 2020
- May 19, 2020
- June 16, 2020