

# MEDICAL EDUCATION COMMITTEE MEETING MINUTES

 Meeting Date:
 April 20<sup>th</sup>, 2022

 Time:
 4:00 – 5:53 p.m.

Meeting Location: Approval:

Zoom

Recorded By:

Amy Rose

# Attendance

Present = X, Absent = 0

Faculty Voting Members							
Ahmed, Nayla (Clinical-Medicine	Х	Boardman, Maureen (Preclinical & Clinical- Family Medicine, Community Preceptor Rep)	x	Chow, Vinca (Clinical-Anesthesiology)	x	Crockett, Sarah (Clinical-Emergency Medicine)	х
Hanissian, Paul (Preclinical & Clinical- Obstetrics and Gynecology)	Х	Hartford, Alan (Clinical-Medicine)	0	Hofley, Marc (Clinical – Pediatrics)	х	Homeier, Barbara (Preclinical- Pediatrics)	X
Matthew, Leah (Clinical-Family Medicine)	х	Myers, Larry (Preclinical- Medical Education)	X	Nelson, Bill (Preclinical - TDI)	х	Robey, R, Brooks (Preclinical & Clinical- Medicine; Faculty Council Rep)	Х
Saunders, James (Clinical-Surgery)	Х	Sorensen, Meredith, Chair (Clinical-Surgery)	Х	Thompson, Rebecca (Clinical – Neurology)	0		

Student Voting Members Year 1							
Fong, Justin	Χ	Gil Diaz, Macri	Χ	Maosulishvili, Tamar	Χ	Thomason, Helen	X
	Year 2						
Carhart, Briggs	X	Fitzsimmons, Emma	0	Thomson, Chris	Χ	Xu, Jane	0
Year 3							
Banerji, Sarah	0	Cheema, Amal	X	Hanley, Meg	Χ	Morris, Linda	Х
		Y	ear 4	4			
Bertalan, Mia	0	Demsas, Falen	X	Minichiello, Joe	Х	Sramek, Michael	0
MD/PhD							
Chidawanyika, Tamutenda	0	Kamal, Yasmin	0	Keim, Abigail	Χ	Reiner, Timothy	X

Non-Voting Members							
Albright, Amanda (Instructional Designer)	X	Borges, Nicole (Chair, Dept. of Medical Education)	0	Chimienti, Sonia Senior Associate Dean for Medical Education	Х	Dick III, John (Clinical - Associate Dean Clinical Curriculum)	Х
Eastman, Terri (Preclinical - Director, Preclinical Curriculum)	X	Eidtson, Bill (Director, Learning Services)	Х	Fountain, Jennifer (Assessment)	Х	Holmes, Alison (Associate Dean, Student Affairs)	Х

Jaeger, Mikki (Registrar)	X	Kerns, Stephanie (Director, Biomedical Libraries)		Lyons, Virginia (Preclinical - Associate Dean Preclinical Curriculum)	X	McAllister, Steve (Director, Educational Technology)	0
Vacant (Director, Assessment & Evaluation)		Mullins, David (Associate Dean, Biomedical Science Integration Chair, Geisel Academy of Master Educators)	х	Pinto-Powell, Roshini (Associate Dean, Admissions)	0	Reid, Brian (Associate Director, Educational Technology)	X
Ricker, Alison (Clinical - Director, Clinical Curriculum)	X	Rose, Amy (Administrative Support, UME Affairs)	х	Vacant (Director, Accreditation & CQI)		Shaker, Susan (Preclinical- Manager)	Х
Vacant (Associate Dean, Diversity, and Inclusion)		Vacant (Associate Dean, Evaluation and Assessment)		Gardner, Stephanie (Administrative Support, UME Affairs)	x		

Student Non-Voting Members Diversity and Inclusion & Community Engagement (DICE)					
Tersio, Isabelle	0	Conn, Stephen	0		
Vice Chairs for Academics – Student Government					
Minichiello, Joe	Χ	Morris, Linda	Х		

Former MEC Student Members – Student Government					
Lindqwister, Alex	X Morgan, Allie	0			
	Guest(s)				
Aleen Cunningham	Nena Mason				
Andrew Crockett					

### Call to Order

#### Meredith Sorensen, MD Chair - Medical Education Committee

Meredith Sorensen, called the meeting to order at 4:02pm.

### **Announcements**

- 1. Dr. Meredith Sorensen provided an update on policies.
  - We are working to review the following about policies: review date & cadence, which subcommittee will be charged with review each policy and the owners of the policies.
     Official and most up to date policies are in the student handbook found on the student affairs website.
  - The NBME policy has been updated to reflect the vote from the March MEC meeting when a student retakes a SHELF exam and passes on the second attempt, the student
    will get the points scored at the minimum passing EPC score for that clerkship (the EPC
    that equates to the 6<sup>th</sup> percentile). This would ensure that students who performed very

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well on retake would not have an unfair advantage, but would also not cap the overall clerkship grade based on the single criterion of the SHELF.

- 2. Mikki Jaeger provided an update on some policy revisions
  - Academic Scholar Year (ASY) Policy there is an appendix with guidance for students taking an ASY for academic enrichment
  - Leave of Absence (LOA) Policy there is an appendix with guidance for students taking a LOA for an additional degree.
  - Preclinical Split Year Policy (Phase 1 Year 1) This has been updated to bring back a split year one with the new curriculum. A split year divides the 1 years of curriculum evenly over 2 years. The registrar office is working on figuring how to do a split year for Phase 1 – Year 2.

### Approval of Meeting Minutes

#### Meredith Sorensen, MD

Approval of March 2022 meeting minutes. Maureen and Barb

Maureen Boardman made a motion to approve the March 2022 MEC meeting minutes. The motion was seconded by Barb Homeier. The motion passed by a unanimous vote.

### Student Issues & Feedback

No student issues were brought to the meeting.

### Consent Agenda

Nothing on the consent agenda for this meeting.

### **New Business**

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### 1. Foundations Course Review - Dr. Larry Myers, Dr. Virginia Lyons

Recommendation	Course Leader Action Plan
Continue to work on how the histology and pathology LC's are taught in the course. This work has been hindered by the lack of a permanent leader for the histology LC.	Although we will not have a new permanent CTO LC leader for the coming year, the interim CTO leader has kindly offered to revise these sessions to make them more applications based with lab exercises, rather than heavily content based. Pathology LC has
Material provided for the histology and anatomy LC's was perceived as content-heavy. Revise if possible or clarify expectations to students regarding what they are responsible for.	opted to take some of their content out of Foundations and put it in later courses.
Clarify expectations for sessions with guest lecturers	Will continue to work with faculty that make only a single (or perhaps two) appearance to make sure that the way their content is presented is more consistent with the rest of the course, and the expectations of what is the key content in these sessions.
Provide opportunities for conversations about how TBL groups are functioning, for example midway through the course. Consider enhancing existing team-building session, e.g., having groups establish ground rules.	Bill Eidtson and I currently have a 'how to work in teams, and how to do TBL' on first day of class. We will try to fit a second session into our truncated schedule, about two weeks into our course, to reflect on how the teams are working, what improvements can be made, and strategies to achieve these improvements.

- There was a question about adding increased anatomy exposure.
- Increased anatomy exposure in the Foundations course was addressed at the last review by adding an additional session.
- Need to add more anatomy in the organ systems courses, not for foundations.

Bill Nelson made a motion to accept the course leader action plan as presented, Seconded by Chris Thomson. The motion was passed with one abstaining.

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### 2. CV & Resp. Exam Retakes – Dr. Sonia Chimienti

- Background Significantly lower than usual performance in M1 class, Resp & CV. There
  may have been some confusion about passing standard for the courses, based on prior
  decisions & communications
- GAOC has **endorsed** the proposal to approve a waiver of the "mulligan" rule for these 2 courses for AY 2021-2022 only (i.e., a grade of incomplete in CV and Resp will not count towards the total of incompletes needed to trigger recording a failure on the transcript).
- Request to MEC
  - Incompletes obtained in the CV and Resp courses do NOT count towards the "Mulligan rule" for students that scored between 65% and 2 SD from the mean on the final exam.
  - Students will still need to remediate to meet the passing standard
- Concerns
  - Student mastery of material and readiness to move forward
  - The possible miscommunication on what the passing standard would be, based on posted materials, conversations, past decisions
  - O How do we proceed in a way that supports our students, helps them to move forward, to mitigate stress and facilitate learning, while upholding policies and academic standards?
- Stepwise Proposal
  - Maintain the decision of the course directors to utilize the higher passing standard
  - Remove CV and Resp from the "mulligan rule" for students that scored at or above 2 SD from the mean on the final exam; this permits students to learn and make-up the material, without high stakes
  - Revise the grading policy to be clear and consistently applied across Phase 1
  - Do a deep dive to understand the complex and likely multifactorial causes that impacted student performance (Dr. David Mullins)

#### Discussion

- There was some discussion on the previous review of the grading policy
  - One member of the subcommittee that reviewed the policy mentioned that the real mistake is the language in the policy – CAN – curious if there was an error in updating policy because there was discussion around the language.
  - It was recognized that at an MEC meeting (July 2021) there was discussion around changing the word to CAN to allow flexibility of course instructors to make the decision on passing as 65% or 2 SD below mean.
  - The M1 reps mention that they did not have this context from the previous review. They felt if they had the context of CAN they would have communicated the policy differently to the other M1 students.
- There was discussion about communication issues
  - Students expressed frustration about the communication of the grading policy.
  - The policy is posted on every Canvas site, however an error in the preclinical FAQ document led to confusion about grading

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- Students scoring at or above 2 SD of the mean didn't feel like they were struggling even if their score was under 70% due to messaging from faculty. If they knew under 65% was struggling, students might have reached out for academic support.
- There were many sources/ways for students to be confused about what standard actually is
- 2 SD below the mean is a random number doesn't have bearing on mastery or proficiency of student learning. Being in the 5<sup>th</sup> percentile is not where students should be comfortable and should be seeking additional academic advising.
- M1 reps wanted to inform the MEC that M1 students did not think setting 65% or 70% as passing was too high of a standard.
- Both faculty and students discussed the impact of Covid on these 2 courses. The
  Omicron surge caused the school to switch to a virtual environment for 3 weeks
  which could have impacted student learning.
- This situation has shed light on the fact that this policy needs revision with clear language. The revisions need to be clearly communicated to students and updated in all websites/platforms students would access the policy.
  - There is concern about issues down the road if we do not revised policy soon
  - It was mentioned that it is not good practice to revise a policy mid-year that would directly impact students.
- There was discussion about the remediation plan
  - The students want to know remediation plan as soon as possible.
  - Students will need to remediate over the summer; some students feel like this is a punishment and want the group that is determining remediation plan to be mindful of this.
  - While it might be seen a punishment to retake exam, faculty want to make sure the students know the materials so they can apply the concepts in a clinical setting.
  - o Dr. Lyons has met or offered to meet with every student this has affected and has gone over the remediation process with them.
  - Dr. Chimienti mentioned that there is a policy for remediation that Geisel is currently following. There is a group charged to create the remediation plan.
  - Students want a clear pathway for remediation, with the processes students can pursue to gain mastery of material.
- Students suggested doing a root cause analysis.
  - Students suggested examining the exam to make sure we are not missing the complete picture. They want to be sure that we are holding the test to a high standard.
  - Students also suggested reviewing the teaching to see how it is actually happening in the classroom
  - Dr. Crockett informed the MEC that the GAOC asked about the validity of exam and determined the exam was valid - there were only minor changes to the exam and poor performing questions were thrown out.
  - Students suggested reviewing the process for flagging questions
  - Dr. Lyons also mentioned that student exam grades are reviewed before and after questions have been flagged and removed to ensure that grades do not decrease.

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Leah Matthew made a motion to accept the GAOC endorse waiver as presented, Seconded by Briggs Carhart. The motion was passed with two abstaining.

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#### **Program Objective Full Collection Review** – Dr. Meredith Sorensen

- Subcommittee met and reviewed the 8 competencies. Each competency has their own objectives, amount of objectives within each competency varies. The MEC has reviewed 7 of the 8 competencies in isolation and called for a more holistic review process.
- Competencies are important -
  - Moving towards a competency-based assessment system there needs to be solid objectives in place
  - These are the words being applied to how we develop future physicians and
  - Everything is mapped to these objectives.
- Subcommittee was tasked with reviewing the reviews. They considered the following for existing competencies
  - Competency domains are clear and cover the full breadth of UME
  - Program objectives align with the Physician Competency Reference Set (PCRS)
  - Duplication of program objectives
  - Gaps in program objectives
  - o All POs are written in the form of visible behaviors (action verbs)
  - All POs can be assessed
  - o All POs can and should be met while at Geisel
- Proposal
  - Adopt the PCRS
    - To Do Find out from AAMC if there are planned updates
  - Add a 9<sup>th</sup> Gesiel-specific competency
    - Social and Societal Responsibilities in Healthcare
      - Include concepts from Population Health
      - Sustainability
      - Race and Health Equity
      - One Health concept
      - Collaboration with TDI
- Next Steps
  - o MEC approval to move in this direction
  - Solidify 9<sup>th</sup> competency (Geisel-specific)
  - Will require extensive remapping (but already have to map local competencies to PCRS for submission to AAMC curriculum inventory
    - 1+ year-long process
    - Opportunity for faculty development
    - Opportunity for reducing overmapping, etc.

#### Discussion

- There was support to move forward with the competency review subcommittee proposal.
- The AAMC just went through strategic planning, it is important to note that one of their
  education goals is that over the next 5 years, US Med schools move towards uniform
  adoption of set of foundational competencies for undergrad medical education. They do
  not have it yet. We need to be mindful of the PCRS and which objectives students
  should be proficient at in UME versus residency.

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Linda Morris made a motion to accept the proposal as presented, Seconded by Chris Thomson. The motion was passed with one abstaining.

# **Ongoing Business**

- MEC Restructure Subcommittee
- Phase 2 Review
- Timing of Step 1 (Class of 2025)

## **Future Meetings**

MEC meetings are the 3<sup>rd</sup> Wednesday of each month from 4:00 – 5:30 p.m.

- o May 18<sup>th</sup> 2022
- June 15<sup>th</sup>, 2022
   July 20<sup>th</sup>, 2022

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