

Meeting Date: June 21st 2023
Time: 4:00 – 6:00 p.m.
Meeting Location: Zoom
Approval: August 16, 2023
Recorded By: Amy Rose

Attendance

Present = X, Absent = 0

Faculty Voting Members

Chamberlin, Mary (Clinical - Medicine)	X	Boardman, Maureen (Preclinical & Clinical- Family Medicine, Community Preceptor Rep)	0	Pellegrini, Vin (Department of Orthopaedics)	X	Crockett, Sarah (Clinical-Emergency Medicine)	X
Hanissian, Paul (Preclinical & Clinical- Obstetrics and Gynecology)	X	Hartford, Alan (Clinical-Medicine)	X	Hofley, Marc (Clinical – Pediatrics)	X	Homeier, Barbara (Preclinical- Pediatrics)	X
Matthew, Leah (Clinical-Family Medicine)	X	Myers, Larry (Preclinical- Medical Education)	X	Black, Candice (Department of Pathology and Laboratory Medicine)	X	Guthiknoda, Kiran (Department of Anesthesiology)	
Saunders, James (Clinical-Surgery)	X	Sorensen, Meredith, Chair (Clinical-Surgery)	X	Thompson, Rebecca (Clinical – Neurology)	0		

Student Voting Members

Year 1

TBD		TBD		TBD		TBD	
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Year 2

Hernandez, Eli	X	Li, Kevin	X	Pfaff, Mairead	X	Plona, Kelsey	X
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Year 3

Fong, Justin	0	Gil Diaz, Macri	X	Maosulishvili, Tamar	X	Thomason, Helen	0
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Year 4

Carhart, Briggs	0	Fitzsimmons, Emma	X	Thomson, Chris	0	Xu, Jane	0
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MD/PhD

Emiliani, Francisco	0	Zipkin, Ronnie	0	Marshall, Abigail	X	Reiner, Timothy	X
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Non-Voting Members

Albright, Amanda (Instructional Designer)	X	Borges, Nicole (Chair, Dept. of Medical Education)	0	Chimienti, Sonia Senior Associate Dean for Medical Education	X	Dick III, John (Clinical - Associate Dean Clinical Curriculum)	0
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Eastman, Terri (Preclinical - Director, Preclinical Curriculum)	X	Eidtson, Bill (Director, Learning Services)	X	Fountain, Jennifer (Assessment)	X	Holmes, Alison (Associate Dean, Student Affairs)	X
Jaeger, Mikki (Registrar)	0	Kerns, Stephanie (Associate Dean, Health Sciences & Biomedical Libraries)	X	Lyons, Virginia (Preclinical - Associate Dean Preclinical Curriculum)	X	McAllister, Steve (Director, Educational Technology)	
Barbour, Nancy (Director, Assessment & Evaluation)	X	Mullins, David (Associate Dean, Biomedical Science Integration Chair, Geisel Academy of Master Educators)		Pinto-Powell, Roshini (Associate Dean, Admissions)	X	Reid, Brian (Associate Director, Educational Technology)	
Ricker, Alison (Clinical - Director, Clinical Curriculum)	X	Rose, Amy (Administrative Support, UME Affairs)	X	Cameron, Justine (Director, Accreditation & CQI)	0	Shaker, Susan (Preclinical- Manager)	X
McBride, Lisa (Associate Dean, Diversity, and Inclusion)	X	Weissburg, Paul (Associate Dean, Evaluation and Assessment)	X	Levy, Campbell Phase 3 Director	X		

**Student Non-Voting Members
Diversity and Inclusion & Community Engagement (DICE)**

Vice Chairs for Academics – Student Government							
Cheema, Amal	X	Gil Diaz, Macri	X				

Former MEC Student Members – Student Government

Guest(s)							
Thomas Thesen		Alex Rich					

Call to Order

Meredith Sorensen, MD Chair – Medical Education Committee

Meredith Sorensen, called the meeting to order at 4:05 pm.

Announcements

Meredith Sorensen, MD

- Faculty Members terming out** – A big thank you to Dr. James Saunders, Dr. Larry Myers, Dr. Sarah Crockett and Dr. Paul Hanissian for your service to the MEC!

2. **Faculty Applicants** – Faculty council will be voting during their July meeting and the new voting faculty members will join for the August MEC meeting.
3. **July MEC Meeting has been canceled.**
4. **Pathways Update** – More conversations with scholars groups, will be ready for a vote in August.

Approval of Meeting Minutes

Meredith Sorensen, MD

Approval of May 2023 meeting minutes.

Barbara Homeier made a motion to approve the May 2023 MEC meeting minutes. The motion was seconded by Marc Hofley. The motion passed by a unanimous vote.

Student Issues & Feedback

- No Student Issues & Feedback

Consent Agenda

1. **Geisel Grading Policy** (Phase 1 - Grade Cut-offs)
 - Recommendations approved by GAOC
 - Cut-off at 70%, reach out to eval. and assessment team if want lower cut-off 30 days before course begins.
 - Only lowering of a cut-off
 - Concerns about a cut-off can be raised by ADAQA, Assoc. Dean of Preclin Ed., Dir. Of Eval & Asst or 5% or more of students fail the course.

Vin Pellegrini made a motion to accept revisions as outlines. Seconded by Barbara Homeier. The motion was passed by a unanimous vote.

Subcommittee Updates

1. GAOC - Preclinical Assessment Attendance Policy Revisions – Dr. Paul Weissburg

Revisions:

- Wording change to reflect current practice – Students do not forfeit the amount of time they were late to the original exam.
- Wording change to reflect current practice - Students do not need illnesses verified by a health care provider.
- Contrary to what it originally stated in the policy, students who arrive late to a Phase 2 or Phase 3 exam will not have their final grade modified as a result.

Discussion:

- The discussion focused on bullet point 3
 - Include wording about professionalism around arriving late to an exam (more of a patterned behavior)
 - Does not affect the score on the exam (rather than grade)
 - No negative consequence – does not **directly** affect your grade, but could indirectly affect in terms of professionalism
- Will follow up with revisions and an electronic vote so the policy is in place prior to the start of the Phase 1

New Business

1. DRO Course Review – Dr. Virginia Lyons

Course Leader Action Plan	
Derm	Course leader will explore opportunities to include content on burns, potentially in the "skin week" of the I3 course, and will help facilitate the transition of this action item to the appropriate course leader.
	The spacing of dermatology content across the block will be improved to avoid presenting significant amounts of material just prior to an exam.
Rheumatology	Course leaders will review existing objectives and significantly consolidate them to make them more manageable and readily mapped.
	Course leaders will work to revise structure of Lupus content to allow increased focus on the patient experience during panel discussions.
	Course leaders will investigate ways to increase student engagement during case-based rheumatology to focus on in class clinical problem solving.
	Course leaders will review rheumatology exams to ensure that exam questions are based clearly on content delivered in class.
	Replace Course Objectives replace #15-25: -Apply knowledge of immunology, pathophysiology, pharmacology, imaging modalities, and histology to evaluate and understand the clinical presentation and management of rheumatologic musculoskeletal conditions and autoimmune/systemic rheumatologic disease in both pediatric and adult patients. (CC.02, CC.04, MS.5, MS.6, MS.7, PH.2, EIM.)
Ortho/Anatomy	Additional case-based anatomy learning sessions will be added to the course to help students apply the material they learn in the anatomy lab
	Course will explore opportunities to transition lecture-based orthopedic sessions into case-based formats (e.g., pediatric, foot/ankle sessions)
	Replace Course Objectives replace #26-31 -Apply knowledge of anatomy, pathophysiology, imaging modalities, rehabilitation and histology to evaluate and understand management of orthopedic musculoskeletal conditions in both pediatric and adult patients. (CC.04, CC.05, MS.2, MS.3, MS.5).

Paul Hanissian made a motion to accept the course leader action plan as presented. Seconded by Marc Hofley. The motion was passed by a unanimous vote.

2. MLS Course Review – Dr. Virginia Lyons, Dr. Bill Eidtson & Dr. Thomas Thesen

Course Leader Action Plan
The co-course leader that was remote in AY22-23 has been replaced by Dr. Thomas Thesen, so we do not plan to use zoom for course sessions in the future. We believe this will be a better learning experience for the students.
We plan to include content about learning sciences early in the course to help students to form an understanding of evidence-based learning and teaching approaches. We also plan to cover how case-based learning, team-based learning, and problem-based learning, techniques used in the Geisel curriculum, promote collaboration, critical thinking and a deeper understanding of medical knowledge.
We plan to integrate the Anki bootcamp into the course and develop cards customized to course content. We also hope to enlist course leaders in our efforts to vet the cards and support efforts for spaced repetition.
We also added a learning objective to help students understand the impact of brain and mental health on learning outcomes and to develop strategies to promote self-care, stress management, and optimal brain health for effective learning.
Remove cumulative exams from the course whose effectiveness is unclear and replace with the CBSE that students found to be very useful to prepare for Step I.
Revised MLS Course Objectives
<ol style="list-style-type: none"> 1. Demonstrate an understanding of evidence-based learning and teaching techniques and their application in medical education (PPLD.1) 2. Utilize learning technologies, such as online platforms, flashcard programs, and mobile apps to enhance and support medical learning (PPLD.1) 3. Recognize the effectiveness of active learning techniques, such as case-based learning, team-based learning, and problem-based learning, in promoting collaboration, critical thinking and deep understanding of medical knowledge (PPLD.1) 4. Compare and contrast the standardized examinations that a medical student and resident physician will encounter, including USMLE, NBME, and board certification exams. (PPLD.1) 5. Design and evaluate USMLE-style questions and personalized assessment strategies to monitor progress, identify knowledge gaps, and develop effective study plans for success on standardized exams in medical education (PPLD.1) 6. Recognize the impact of brain and mental health on learning outcomes and develop strategies to promote self-care, stress management, and optimal brain health for effective learning. 7. Describe and apply the scientific method and the basic scientific and ethical principles of clinical and translational research (MS1)

Mary Chamberlain made a motion to accept the course leader action plan as presented. Seconded by Leah Matthew. The motion was passed by a unanimous vote.

3. **Preclinical/Phase 1 Attendance Policy** – Dr. David Mullins, M1 MEC Reps – Kelsey, Eli, Mairead, Kevin

Dr. David Mullins reviewed the changes made to the policy based on the feedback from the May MEC meeting. Revisions include -

- **Clinical Encounters (Required)**- Coaching Sessions were added
- **Small Group Sessions (Required)** - Anatomy Labs were added
- **Large Group Interactive Sessions (Attendance MAY be required)**
 - Wording change – BEST achieved through active learning
 - Added Case-Based Learning (CBL Sessions)
 - Added Laboratory sessions (Such as Pathology)
 - Attendance MAY be required – Course Directors submit a brief description (rather than attestation) that session objectives are being achieved through an interactive pedagogy and can't be achieved through asynchronous viewing. Otherwise, will default to non-required status)
- **Large Group Teaching Session (Attendance NOT required)**

- Does not become an interactive session simply by including a few question answer periods or an in-class polling activity, or maybe even a pre or post session quiz the interactive sessions are things that are truly interactive.
- **Labeling of required sessions** – 3 months in advance of curricular block
- **Planned Absences** – Notification of absence, students will be granted up to 2 planned absences of up to 2 consecutive days each per curricular block, not to exceed 15 total absences across Phase 1.
- **Religious Holidays** – Added section, do not count towards their limit of planned absences.
- **Unplanned Absence** – students submit a notification of absence as soon as possible, if not accounted with notification of absence within 24 hours, the absence will default to unexcused.
- **Unexcused Absence** – a student misses a required session without completing a notification of absence within 24 hours of session. Student with a pattern (outlined in policy) of multiple excused absences will meet with a trusted mentor (Coach, On-Doc, etc.) to identify and discuss barriers and receive support.
- **Tardiness** – statement of learning environment expectation, no tracking or remediation.

Discussion:

- All large group session will be recorded, unless there is a patient in the session.
- Any faculty member can designate their session as required, not just course director.
 - For example, pathology teacher could complete the checklist to say their session is interactive, making it required
- Remediation – On-doctoring – can't always replicate, may not be an appropriate remediation activity, want students to be fully aware of what can and can't be replaced.
- Clarification around Pattern of Absences – refers to a block? Longitudinal course? P&P is very a specific case and these metrics (3 or more required sessions from a single course at any time during a block) are challenging to apply.
- Curricular vs. Attendance – at what point do absences get to the threshold of missing too much to achieve the learning objectives.
- 15 excused absences include conferences, weddings, etc.
- Outreach to students will be handled by Student Affairs (more of a wellness check) and not the preclinical office.
- **Modifications to presented policy** -
 - Page 3 – under large group discussion, change **cannot** to **doesn't** adequately
 - Page 3 – under labeling of required courses – change to start of the course (for longitudinal or mid-block courses), rather than the start of curricular block.
 - Page 2 – large group teaching sessions – change to with few exceptions these sessions will be recorded and posted for student viewing.

Candice Black made a motion to accept the Attendance Policy with the modifications outlined above. Seconded by James Saunders. The motion was passed with 1 abstaining.

Ongoing Business

- Policy working group
- MEC Bylaws/Charge working group
- Phase 2 Review
- Phase 3 Review
- LCC Review

Future Meetings

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

- August 16th 2023
- September 20th, 2023
- October 18, 2023