

Curriculum Evaluation and Management Committee (CEMC) Meeting Minutes
Monday, January 22, 2024 @ 2:00 pm via Zoom

In attendance: Pat Carr, Jane Dunlevy, Megan Denis, Kara Eickman Adrienne Salentiny, Rick Van Eck, Susan Zelewski

Not in attendance: Jon Allen, Sandi Bates, Kurt Borg, Andrea Guthridge, Clint Hosford, Rebecca Maher, Devendra Pant, Erika Johnson, Shannon Yarsbough

Minutes submitted by: Dawne Barwin

Reviewed by: Adrienne Salentiny

Approved by: Clint Hosford and Jon Allen

MSC = motion made, seconded, carried

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
1. Welcome	Meeting called to order at 2:00 p.m. by chair, Adrienne Salentiny	Information
2. Business	a) Minutes from January 8, 2024	MSC to approve 1.8.24. Megan Denis / Pat Carr // carried.
3. UMEC Update	<p>From UMEC 1.10.24 meeting</p> <ul style="list-style-type: none"> • Approved CEMC Minutes: 11.27.23 • UMEC 1.10.24 - Approved: Process beginning with Unit 1 in 2024, every 2 years the existing mapping for Phase 1 Curriculum will be sent to the faculty for review to add or subtract appropriate key words. Was on the Verbal report part of consent agenda at UMEC. 	Information
4. Reporting Changes	<p>Proposed Reporting Changes: JD</p> <ol style="list-style-type: none"> 1. Proposed change to Phase 1 Template/Matrix: reporting passing rates <i>Note: Wording from the similar P2 and P3 change is in the 1.8.24 CEMC minutes.</i> <ul style="list-style-type: none"> • Rick Van Eck asked how do we determine the passing rate for Phase 1? In the past it was determined by calculating the combined passing grades taken from the Medical Science grade and the Clinical Science grade. This is difficult and maybe not necessary. Basically, a student has to pass each component in the Clinical and Medical Sciences, and PCL to pass the Unit. It seems that there aren't situations 	

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	<p>where more students would take and/or pass any one of these 3 components and not others, but still pass the Unit.</p> <ul style="list-style-type: none">• Pat Carr said determining the number used as the denominator for calculating should be consistent through all the grading.• Rick Van Eck stated there are 2 levels of evaluations happening here, in accordance with the DCI and the System White Paper. How do you know you are achieving competency for the Program when looking at assessment data as per the competencies? Is it comprehensive, can we compare from there? Depending on the time when the grades have been entered?• Jane Dunlevy answered that it does not have to do with remediation grading. She feels that denominator is important to use when students take a leave of absence rather than not passing and remediating.• Pat Carr said students must pass all 3 (Their PCL, Medical Science and Clinical Science) and then they pass the Unit. If they fail 1 component, then you fail all 3 and must do remediation.• Jane Dunlevy said she agrees with the above statements, but is not sure the chart on the Phase 1 Report may not be correct now.• Rick Van Eck wants to have a deep dive conversation onto the pass and fails of competencies on the Phase 1 Report. Pat Carr said none of these things show up in a student transcript, only the final grade is on the transcript.• Rick Van Eck said that LCME is asking how do you know your school is achieving the programs objectives, we use the passing data as evidence in the passing rate of Unit 1, 2 or 3, that will answer the LCME question.• Pat Carr explained the question we are answering is: Is the school meeting these for the Phase 1 Course Passing Rate.• Rick Van Eck paraphrased; the assessment data used in Phase 1 that we use to determine whether the objectives in Phase 1 are met will serve as evidence for	<p>MSC to approve the assessment data used in Phase 1 that we use to determine whether the objectives in Phase 1 are met will serve as evidence for whether the competencies they are linked to have been met, these would be the Phase 1 course passing rates. Kara Eickman / Pat Carr // carried.</p>
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	<p>whether the competencies they are linked to have been met, these would be the Phase 1 course passing rates.</p> <p>2. Proposed change to official Horizontal Integration Terms:</p> <ul style="list-style-type: none"> • Rick Van Eck stated these are terms that have to do with the new redesign of curriculum 2.0 and CMS+. When Jane Dunlevy is creating the curriculum, it automatically maps the events in every Phase 1 course automatically. • The proposal contains two lists of terms. One is the terms in CMS+, and one is the terms that CEMC identified in 2021 at the horizontal integration terms. The CMS+ terms are automatically mapped as described by Jane Dunlevy; and can be accessed by a simple command in Leo. The other list of terms is difficult to access in Leo and must each be a separate report, compounded by multiple data points and calendar years. As such, human error is a risk in collecting them. • Discussion on what terms would be mapped together and if the set of terms listed work for Horizontal Integration. The consensus was that the CMS+ terms are significantly more accurate in identifying disciplines in the curriculum in comparison to the other list of terms. We will no longer use the other list; we will use the CMS+ list with the exception of Scientific Foundations of Medicine, which will be removed. 	<p>MSC to adopt the listed terms below as new Horizontal Integration terms: Biomedical Knowledge, Clinical Knowledge, Doctoring Skills, Interprofessional Collaboration, Medicine & Society, Nutrition, Pharmacology & therapeutics, Research Methods. Kara Eickman / Pat Carr // carried.</p>
<p>5. CVL: New words approval process</p>	<p>CVL: New Words Approval Process Updates</p> <ul style="list-style-type: none"> • ACTION ITEM from 12.18.23/1.8.24 meetings Document: UPDATED CEMS Whitepaper reflecting the new process. The new document is located on Blackboard. RVE: Faculty Key Words sent out every 2 years for review. Beginning Unit 1 in 2024. 	<p><u>ACTION ITEM:</u> Update CEMC White Paper reflecting the new process of updating the Key Words list every 2 years by email to faculty by mapping the words, beginning Unit 1 in 2024.</p>

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	<ul style="list-style-type: none"> • ACTION ITEM from 12.18.23/1.8.24 meetings: Faculty keyword email (formerly used email received from Alissa Hancock) Adrienne Salentiny forwarded to Rick Van Eck to update on 1.8.24. Both will edit to bring up to current. Deadline of sending out email to faculty is right after Unit 1 ends in 2024. 	<p>ACTION ITEM: Faculty keyword email, Adrienne Salentiny and Rick Van Eck will edit to bring up to current. Deadline of sending out email to faculty is right after Unit 1 ends in 2024.</p>
6. Status Reports on Standing Items	<p>a) 2023 Reports:</p> <ul style="list-style-type: none"> • Phase 1 Report: <p>b) Badging and Anthology Milestone: RVE</p> <ul style="list-style-type: none"> • Dr’s. Jurivich and Holloway are working on a Geriatrics Badge. They want to make it a mandatory badge. This badge will be coming forward to CEMC to get perspectives on it from committee members and to recommend for UMEC approval. <p>c) Mapping:</p> <ul style="list-style-type: none"> • Mapping to terms and events: • Identifying un-used P1 Objectives <p>d) CVL Word Updates/Changes</p>	Information
7. Adjournment	Adjournment at 3:32pm.	Information
8. Future Agenda Items:		
		<p><i>The next meeting is scheduled February 12, 2024 at 2:00 pm via Zoom.</i></p>