

**SMHS Dean's Quality Improvement Panel (DQIP) Meeting
May 15, 2024, 1:00-3:00 PM (Zoom)**

Attending: Ken Ruit, Sheila Bosh, Judy Solberg, Pat Carr, John Shabb, Rick Van Eck, Jim Porter, Lindsey Martens (Class of 25), Namil Choi, Daniel Henry, Holly Brown-Borg, Kate Tomczik (Class of 26), Susan Zelewski

Absent: Victoria Haynes, Josh Wynne

AGENDA ITEM	SUMMARY	ACTION/FOLLOW-UP
Call Meeting to Order	Meeting was called to order by Dr. Kenneth Ruit, Committee Chair.	
Review of Minutes	Review of March 28, 2024 minutes. Minutes posted to Blackboard.	Minutes approved.
Welcome New DQIP Student Rep	Welcome to Kate Tomczik. Kate is a member of the class of 2026. She joins Lindsey Martens who will remain on the committee until she graduates in the Spring of 2025. Many thanks to Dakota Snustad and Madison Burgard who have served as student reps for the past year and have now graduated.	
2024 AAMC Medical School Graduation Questionnaire (GQ) update 2023 AAMC Matriculating Student Questionnaire (MSQ) update	68.2 % have completed. Survey will remain open until June 9. Opens in June for new students.	

Post ISA2 Student Review Committees and Student Survey Update	<p>Kate Tomczik and Lindsey Martens met with the former student DQIP reps for a “transition of power” meeting. They have since sent out information to all students inviting them to participate in the ISA/ASES working groups. New students will be welcomed at a meeting next week.</p>	<p>Add to next Agenda.</p>
DEI Standing Agenda Item	<p>Dr. Carr announced that they’re discussing a name change for the DEI curriculum committee. This will be brought to UMEC for approval. Dr. Porter informed the committee that Dr. Haynes presented at ACHIEVE as part of the diversity seminar series. She will continue to do so for the foreseeable future.</p>	<p>Add to next Agenda.</p>
Annual Student Engagement Survey (ASES) and LCME Status Report	<p>Reviewed the data from the ASES Survey.</p> <p>Survey was open Jan 11-Feb 12, 2024.</p> <p>Response rate</p> <p>Class of 2024 91% (58/64)</p> <p>Class of 2025 97% (64/66)</p> <p>Class of 2026 92% (65/71)</p> <p>Class of 2027 96% (73/76)</p> <p>Total 94% (260/277)</p> <p>Overall student dissatisfaction/disagreement at 20% or above</p> <p>Adequacy of study space at hospitals/clinical sites: 22%</p> <p>Adequacy of relaxation space at hospitals/clinical sites: 20%</p> <p>Access to research opportunities: 20%</p> <p>Adequacy of unscheduled time for self-directed learning in the pre-clerkship phase: 20%</p> <p>Student workload in the pre-clerkship phase: 20%</p> <p>Utility of the pre-clerkship phase as preparation for required clerkships: 22%</p> <p>Medical school responsiveness to feedback on courses: 23%</p> <p>Quality of the educational experience in the surgery clerkship (fair/poor): 36%</p> <p>Accessibility of call rooms when overnight in-house call is required on a rotation: 20%</p> <p>Time spent preparing PCL presentations is adequate: 29%</p>	<p>Add to next Agenda.</p>

	<p>Lecturers provide practice questions as part of their lectures: 31%</p> <p>25% of students who reported they received counseling for academic difficulty found it inadequate</p> <p>Assessments in Phase 1 matched the course learning objectives: 20%</p> <p>Biochemistry preparation for clinical experiences (fair/poor): 47%</p> <p>Immunology preparation for clinical experiences (fair/poor): 28%</p> <p>Overall student dissatisfaction/disagreement at 15-19% or above</p> <p>Support for participation in research: 16%</p> <p>Access to service learning/community service opportunities: 18%</p> <p>Quality of the pre-clerkship phase: 18%</p> <p>Coordination/integration of content in the pre-clerkship phase: 17%</p> <p>Clinical Skills Performance Review (CSPR) Patient Note Documentation Activity: 17%</p> <p>The exam question challenge process is clear: 18%</p> <p>ACHIEVE session contributes to my learning in "Financial Literacy": 15%</p> <p>There is appropriate information and guidance regarding residency applications: 17%</p> <p>Communication from UND SMHS to medical students regarding responses to student feedback includes sufficient explanation and reasoning 16%</p> <p>Comments/Discussion:</p> <p>Access to service learning/community service opportunities 18% overall. Noted we need to keep this on our radar. Perhaps a faculty champion would be beneficial. Also previously discussed in EASRC the possibility of a service-learning badge.</p> <p>Quality of your educational experience in each of the following clerkships. Dr. Zelewski suggested breaking this down by campus. Also suggested grouping poor/fair responses together.</p> <p>Noted that 25% of student who received counseling for academic difficulty found it inadequate. This will be shared with those involved in academic counseling.</p> <p>Accessibility of call rooms when overnight in-house call is required on a rotation: 20%. Dr. Zelewski commented that she has already addressed the issues with TRACS at Fargo Sanford.</p>	
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	<p>Time spent preparing PCL presentations is adequate: 29%. Suggested breaking these out by class.</p> <p>Lecturers provide practice questions as part of their lectures: 31%. Suggest breaking out by class</p> <p>The ASES Data Report with redacted comments and the ASES Summary Report will be emailed to the Campus Deans, P1C Chair, P2P3C Chair, UMEC Chair, CEMC Chair and to Dr. Porter as the Associate Dean of Student Affairs and Admissions.</p> <p>Lindsey will send the data to the Post-ISA student working groups to determine how best to disperse to the entire student body. Discussed presenting the data in a way that shows 3 pts (original ISA, ISA2 and current ASES). OMA will work with Lindsey and Kate on completing this.</p>	<p>OMA email documents.</p> <p>OMA arrange meeting .</p>
<p>Announcements/Next Meeting</p>	<p>Next Meeting August 21, 2024</p>	

Submitted by Sheila Bosh, RN, Accreditation Manager
 Approved by Dr. Kenneth Ruit, Committee Chair